

**CONFEDERATED SALISH AND KOOTENAI TRIBES
OF THE FLATHEAD NATION
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******V A C A N C Y A N N O U N C E M E N T******

TITLE: Certified Coder Apprentice
LOCATION: Tribal Health Department – Stationed in Mission or Arlee
SALARY: \$16.75 - \$19.25 per hour
CLOSING DATE: Monday, March 16, 2026 at 5:30 p.m. (MST)

Certified Coder Apprentice

Under close supervision, provides support and services for the HIMs coding staff. The Certified Coder Apprentice (CPC-A) incumbent will interpret, analyze, and assign diagnostic and procedural codes. The coding function provides the primary source for data and information used in health care, promotes continuity of medical care, and ensures compliance with third party reimbursement policies, regulations and accreditation guidelines, by staying current with official coding guidelines and regulations. CPC-A will undergo stringent weekly coding audits during the probationary period, followed by monthly audits for a total of one (1) year from start date, unless audits do not meet quality standards as described below.

CSKT Tribal Health Coder Audit Quality Standards:

- Must meet diagnostic code assignment accuracy of 90% within first six (6) months of hire.
- Must maintain monthly diagnostic code assignment accuracy of 95% thereafter.
- Must meet CPT/HCPCS Level II, and CDT coding accuracy of 90% within first six (6) months of hire.
- Must maintain monthly meet CPT/HCPCS Level II, and CDT coding accuracy of 95% thereafter.

*The following duties are intended to provide a representative summary of the major duties and responsibilities and **ARE NOT** intended to serve as a comprehensive list of all duties performed by all employees in this classification. Incumbent(s) may not be required to perform all duties listed and may be required to perform additional, position-specific duties.*

REPRESENTATIVE DUTIES

Demonstrates competence using standard operating office equipment, electronic computer information systems, and the EHR to meet daily department and employee performance goals. Must be able to meet and maintain productivity, quality, and accuracy standards within six months of hire.

Uses critical thinking skills to assist with prioritization, organization, and execution of daily activities in accordance with department guidelines.

Maintains the confidentiality of patient records.

Performs quantitative analysis by reviewing records to assure the presence of all component parts such as patient and record identification, signatures and dates where required, and the presence of all reports which appear to be indicated by the treatment rendered and charges applied by medical provider.

Performs qualitative analysis by evaluating the record for documentation consistency and adequacy. Ensures that the final diagnosis accurately reflects the care and treatment rendered. Reviews the records for compliance with established third party reimbursement agencies and special screening criteria.

Makes the final determination that medico-legal requirements of the record are complete, accurate, and reflects sufficient data to justify the diagnosis and warrant treatment and end results.

Identifies inconsistencies, discrepancies and/or trends within the medical record and discusses with the appropriate medical, nursing, or healthcare providers, and recommends appropriate modifications to include medical necessity under the National Correct Coding Initiative.

Assigns and sequences a variety of codes including but not limited to ICD/CPT/HCPCS codes based on the medical record analysis. Assures the final diagnoses and operative procedures as documented by the provider are valid and complete. When multiple diagnoses and procedures are listed, assures the procedure is related to the proper diagnosis, and applies appropriate modifiers for multiple procedures.

Analyzes and abstracts information from the medical record to identify secondary complications and co-morbid conditions to assure appropriate assignment under Ambulatory Patient Classification (APC) systems, and other alternate resources.

Analyzes provider documentation to assure the appropriate Evaluation & Management (E&M) levels are assigned using the correct CPT/HCPCS code.

Maintains record confidentiality in accordance with the Privacy Act of 1974, Alcohol and Drug Abuse Patient Records, Freedom of Information Act, Health Insurance Portability and Accountability Act (HIPAA), and other pertinent federal regulations.

Performs other duties as assigned or required.

- *Request a copy of position description for full details.*

MINIMUM RECRUITING QUALIFICATIONS AS REFLECTED ON TRIBAL EMPLOYMENT APPLICATION:

- High School Diploma or GED equivalent
- Certification from an accredited Professional Coding Institution (AHIMA or AAPC); CPC-A at a minimum.
- Six (6) months clinical or medical office experience.
- Must possess a valid driver's license.

SUBMIT:

1. Completed Tribal employment application.
2. Copy of academic transcripts, certifications, licensure, etc.
3. Copy of driver's license.
4. Proof of enrollment from a federally recognized Tribe if not from CSKT.
5. If claiming veteran's preference, a copy of the DD214 must be submitted.

SUBMIT ALL OF THE ABOVE TO: Personnel Office, PO Box 278, Pablo MT 59855, Telephone (406) 675-2700 Ext. 1040, or personnel@cskt.org

FAILURE TO SUBMIT ALL OF THE ABOVE INFORMATION WILL RESULT IN DISQUALIFICATION DURING THE SCREENING PROCESS

FOR MORE INFORMATION: Contact Lisa Hawley at THD (406) 876-1385