

Risk Adjustment Coder – Full Time

Date: 10/13/2026

Location: Everett

Western Washington Medical Group (WWMG) is looking for health care innovators who want to make a difference. The Risk Adjustment Coder will support our healthcare providers as part of WWMG's effort to improve the quality, experience, and value of care.

Job Summary

The Risk Adjustment Coder serves as a clinical documentation and coding resource for WWMG providers and practices, with a primary focus on provider education, clinical documentation improvement (CDI), and auditing and oversight of external coding and risk adjustment vendors. The role audits medical records for diagnosis accuracy, clear documentation, and compliant Hierarchical Condition Category (HCC) capture according to ICD-10 CM coding guidelines and CMS-HCC risk adjustment model regulations.

This position will also coordinate and collaborate with operational and clinical leadership to identify documentation gaps and trends, deliver targeted provider education, and implement workflow and process improvements so that each patient's complete clinical picture and risk burden are accurately documented. The role also serves as WWMG's internal point of contact for coding and risk adjustment vendors, auditing vendor work for accuracy and compliance and monitoring performance against contracted expectations.

Responsibilities

- Develop and deliver coding and documentation education to providers, practices, and clinical staff. This includes new provider onboarding, creating tip sheets, job aids, and other learning materials.
- Communicate with and educate providers when documentation is inadequate, ambiguous, or otherwise unclear for medical coding purposes, using compliant, non-leading provider query practices.
- Lead clinical documentation improvement (CDI) initiatives, including identifying provider and clinic-level trends, building targeted education plans, and measuring improvement over time.
- Translate audit findings into actionable, individualized feedback for providers and practices, with emphasis on diagnosis specificity, MEAT supported documentation, and accurate capture of chronic conditions.
- Review/audit medical records for completion, accuracy, and compliance with applicable CMS Risk Adjustment coding guidelines and regulations, including retrospective audits of provider documentation and submitted diagnoses to support RADV readiness.
- Serve as the primary internal liaison for external coding, CDI, and risk adjustment vendors; coordinate onboarding, workflows, data exchange, and issue resolution.
- Audit vendor coding and chart review output on a routine sample basis to validate accuracy and compliance; track and report vendor performance against contract

expectations and escalate concerns to leadership.

- Participate effectively in cross-functional quality and population health team meetings to promote quality across all projects.
- As needed, identify, compile and code patient data, using ICD-10 CM standard classification.
- Provide recommendations and expertise to cultivate and develop the Risk Adjustment and CDI programs, including audit plans, education curricula, and vendor oversight processes.
- Comply with official coding guidelines, confidentiality regulations, and security of systems.
- Remain current on coding guidelines and risk adjustment reimbursement requirements, and communicate relevant updates to providers and leadership.
- Additional duties as assigned.

Required Qualifications

- High School Diploma or equivalent, required.
- Current CRC certification through AAPC, required.
- Clinical background, such as a medical assistant, preferred.
- Two years' previous experience in ICD-10/Risk Adjustment, preferred.
- Experience delivering provider education or clinical documentation improvement in an ambulatory setting, preferred.
- Experience conducting coding audits and/or managing vendor relationships, preferred.
- Clinical or nursing background, preferred.
- Must be able to provide proof of legal authorization to work in the United States.

Required Skills

- Commitment to improving the experience and delivery of care for patients.
- Confident presenter and educator, able to engage providers.
- Working knowledge of Epic and Microsoft Excel/PowerPoint for audit tracking, reporting, and education materials, preferred
- Strong written and oral communication, interpersonal skills, and cultural competency.
- Ability to work both independently and collaboratively in a team environment.
- Strong critical thinking, problem solving, organizational skills, and attention to detail.
- Demonstrates flexibility and effective management of multiple demands concurrently with ease.
- Possess a *growth mindset*: the willingness to be coached and to develop skills to increase effectiveness, collaboration, and produce results.
- High level of discretion, integrity, and adherence to HIPAA standards.

Why Work Here?

You give your all, and so do we. We are committed to providing an excellent workplace experience and a wonderful employee experience. We offer:

- Competitive Pay
- Unsurpassed growth opportunities
- Medical, Dental, Vision Insurance
- AD&D, LTD and Basic Life are provided for all employees
- 401(k) plan
- Two weeks of vacation time accrued per year

- 9 Paid Holidays per year
- Sick time accrued per Washington State law
- Flexible schedules
- A family friendly and people focused workplace
- The opportunity to work for the best healthcare company in Washington

Schedule: Full time day schedule, Monday – Friday. No evenings or weekends. Job is onsite at our Administration office in Everett.

Salary Range: \$26.00 - \$30.00 per hour, depending on experience, skill set, and education.

To Apply: please send cover letter and resume to: Lgomez@wwmedgroup.com and droberts@wwmedgroup.com.

Western Washington Medical Group is an Equal Opportunity Employer. We celebrate diversity and inclusion and welcome applications from qualified candidates, regardless of race, color, religion, sex including sexual orientation and gender identity, national origin, disability, protected veteran status or any other characteristic protected by applicable federal, state or local law.

Who are we? Western Washington Medical Group (WWMG) is proud to be a growing, independent provider organization who is on the front lines to improve health care for patients and the communities we live in. The providers who founded WWMG in the early 1990's shared the belief that local, independent providers are best qualified to give their communities the best possible care. And because decisions are not made by distant corporate systems, that means our

providers and patients are free to make the best informed choices together. The result is personalized, state-of-the-art care, with a work culture that's collaborative, supportive, caring, and fun. Learn more at <http://www.wwmedgroup.com/>