

Job Title: Medical Billing Specialist
Department: Billing
Reports To: Medical Billing Manager
Salary Level: \$37,232.00 - \$50,440.00 DOE
FLSA Status: Non-Exempt
Approved By: Revenue Cycle Manager
Approved Date: August 30, 2022



GENERAL SUMMARY OF DUTIES:

The Medical Billing Specialist acts as a bridge between health care providers, patients, and insurance companies and is responsible for handling and transferring patient information, submission of claims to insurance companies and also ensures that the payments for medical services are received in a timely manner including rebilling or corrected billing of accounts previously submitted. It is also responsible for maintaining confidentiality of patient information and following up with insurance providers for delays and nonpayment.

ESSENTIAL FUNCTIONS:

1. Reviews the Brief Claims Listing (BRRP) report daily to identify claims ready for billing.
2. Ensures that all patient information is accurate and complete and request any missing patient information.
3. Prepares and submits claims to third party payers, intermediaries and responsible parties according to established KMC policy and procedures.
4. Reviews and follows-up on delinquent patient account records via telephone and correspondence according to KMC policy and procedures.
5. Performs error correction for all rejected/suspended claims previously submitted to third party payers, intermediaries, and patients.
6. Prepares and processes mail log of all payments received.
7. Posts insurance and patient payment to appropriate account in RPMS. Ensures all payments received are matched to appropriate balance on encounters.
8. Prepares and sends patient statements monthly.
9. Addresses inquiries in a courteous manner regarding patient accounts, statements, insurance billing, etc.
10. Reviews and submits monthly reports on rejected/denied claims including reason(s).
11. Maintains knowledge by reading all third-party newsletters and updated circulated by management. Attends all continuing education opportunities made available.
12. Maintains regular and recurring contact with employees of the clinic, local/state agencies, third party payers and Medicare and Medicaid fiscal intermediaries. Assists with claims submission and resolution of problems pertaining to billing of claims in order to resolve issues for any returned claims for services rendered to Indian Beneficiaries and Non-Beneficiaries alike.
13. Adheres to all HIPAA guidelines/regulations.
14. Identifies and helps resolve patient billing complaints.
15. Maintains files accurately and efficiently.
16. Attends staff meetings and other meetings as assigned.

SUPERVISORY RESPONSIBILITIES:

This job has no supervisory responsibilities.

QUALIFICATIONS:

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

EDUCATION:

- High school diploma or equivalent General Educational Development (GED) certificate required.

EXPERIENCE:

- One (1) year of medical office setting experience required.
- Two (2) years of medical billing experience preferred.
- Knowledge of ICD-10-CM and CPT/HCPCS coding terms preferred.
- Knowledge of third party claims submission processes preferred.

CERTIFICATES, LICENSES, REGISTRATIONS:

- Current CPR Certificate or be able to obtain one within six (6) months of employment.
- Valid California Driver's License
- Current typing certificate at a minimum 40 words per minute (wpm).
- Current 10-key typing certificate at a minimum 6,000 keystrokes per hour (kpm).

JOB SPECIFIC SKILLS & ABILITIES:

- Must have the ability to enter a minimum of 80 claims per eight (8) hour day.
- Must be able to operate computers, calculators, copiers, printers, fax machines, and telephones.
- Effective verbal and written communication skills, as well as, interpersonal skills.
- Must possess sufficient manual dexterity to perform the essential responsibilities.
- Demonstrates initiative to provide quality of services and improve efficiency.
- Maintains positive working relations with co-workers.
- Good time management skills.
- Must be able to follow instructions and work independently.
- Must have the ability to deal professionally and courteously, and efficiently with peers.
- Must have the ability to understand and interpret policies and regulations.
- Must have the ability to examine documents for accuracy and completeness.

CONFIDENTIALITY:

Employee must be aware of and adhere to K'ima:w Medical Center's Confidentiality Policy and deal appropriately with patient confidentiality at all times.

CONDITIONS OF EMPLOYMENT:

Employee is subject to baseline and random drug testing per the Hoopa Tribal Drug & Alcohol Fit for Duty Policy. Employee will serve a 90-day introductory period. Employee is subject to introductory and semiannual performance evaluations. Preference will be given to qualified Indian applicants pursuant to the Tribe's TERO Ordinance.

PHYSICAL DEMANDS:

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to sit; use hands to finger, handle, or feel; and reach with hands and arms. The employee frequently is required to stand, walk, and talk or hear. The employee is occasionally required to stoop, kneel, crouch, or crawl. The employee must occasionally lift and/or move up to 25 pounds. Specific vision abilities required by this job include close vision, color vision, and ability to adjust focus.

WORK ENVIRONMENT:

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is occasionally exposed to outside weather conditions. The noise level in the work environment is usually moderate.

ANNUAL TRAINING REQUIREMENTS:

At a minimum Employee is required to be certified for the following training:

- 1) KMC Annual Orientation
- 2) Health Stream
- 3) CPR every two years.

Employee Signature

Date

Supervisor Signature

Date

Chief Human Resource Officer

Date