



Job Description

Medical Billing and Collections Specialist

Positions Available: One

Professional Type: Billing and Accounting Associate – Medical Billing and Collections Specialist

Position Type: Full-time, hourly (\$12) with possibility of quarterly bonus.

Compensation: Hourly compensation (overtime must be approved) with full-time benefits.

Clinic Location: New Iberia, until administrative space accommodates Billing and Accounting

Directly Reports To: Billing and Accounting Department Director

Position Duration: Ongoing so long as work is satisfactory, performance evaluations are at least adequate, and professional contributions to the workplace are beneficial.

Time Commitment

- Will complete work within approximately 40 hours per week
- Will work generally Monday-Friday 8AM-5PM in the office, with a one-hour lunch break.
- Short and reasonable absences are allowed during the workday, but at least 40 hours must be worked every week unless PTO is taken.
- Should expect to commit whatever time is necessary for high quality completion of responsibilities, projects, and tasks.
- The employee is to be project-driven and goal-oriented with their time commitments.
- At least once a week, a 60 or 90-minute department meeting during working hours with Department, Department Director, other corporate administrators, or direct supervisor.
- May be required to be available holidays and weekends, as needed to complete projects and job responsibilities. This will be scheduled in advance, with as much notice as the situation allows.

Administrative Responsibilities *(not an exhaustive list)*

- Prepares and submits clean claims to third party payers either electronically or by paper. Collaborates with patients, third party payers and other billing associates to resolve billing inconsistencies and errors.

- Processes and submits insurance refund request for assigned payer, as necessary. Processes medical bills by sending them to patients and/ or third party payers as necessary.
- Follows up on delinquent payments and resubmits billing as necessary. Handles patient inquiries and answers questions from clerical staff and insurance companies.
- Identifies and resolves claim denials.
- Rebills adjusted and/ or corrected claims to third party payers.
- Processes appeals online or via paper submission and submits to the appropriate third party payer.
- Prepares and runs appropriate reports to identify and resolve outstanding claims and claim denials.
- Posts appropriate adjustments, payments and transfers responsibility and/or refunds the third party payer, as necessary.
- Identify trends, and carrier issues relating to billing and reimbursements. Monitors and follows up on large insurance projects with bayou health plan. Assures coding is compliant and up to date.
- Verifies and corrects patients insurance carrier, as needed.
- Trains new hires as needed.
- Converts and analyzes RHC claims as necessary and resubmits to the appropriate third party payer. (Medicaid Bayou Health Plans)
- Assist, educate, and advise patients with their billing questions, as needed.
- Daily, maintains strictest confidentiality; adheres to all HIPAA guidelines/regulations.
- As needed, will welcome and help Billing/ Accounting team warmly and effectively orient new Billing/ Accounting associates.
- *Responsibilities are subject to adjustment based on department growth and needs. Major adjustments will require a change to this Job Description.*

Position Competencies *(not an exhaustive list)*

- Growing communicator
- Can discern and develop professional talent for direct reports
- Effective and patient leader to direct reports.
- Strong work ethic
- Assumes with gladness leadership pressure and responsibilities
- Strong time management skills
- Purposeful collaborator with department directors, corporate leadership, and providers
- Highly organized and orderly in workflow
- Can make timely, objective, and defensible decisions
- Not easily frustrated to repeat directions or offer assistance
- Can teach and communicate to colleagues
- Can explain and offer assistance with a joyful attitude
- Knowledgeable about the healthcare industry and company specifics
- Can work with all PGoA-wide employees with humility and strength
- Reports, documentation, and paperwork is completed and submitted in a timely and professional manner.
- Contributes to the staff as a thoughtful and enjoyable team member

- Meets with Supervisor and other administration as required
- Greets patients and colleagues warmly and provides “empathy with excellence” for the entirety of the workday.
- Practices quality care and maintains high standards of professional policies, procedures, and practice.
- Conducts speech and behavior with professional decorum and maturity.
- Seeks help and is teachable when problems arise.
- Abides by PGoA’s best practices regarding professional dress and uniforms.
- Contributes to the ongoing health of the clinic, staff team, and non-clinic personnel, including other PGoA employees.
- Is a central team player in not just identifying problems but joyfully and effectively solving problems.
- Is charitable and compassionate in demeanor and emotional reflexes, especially when working with colleagues and administration.

Dress Code

- Please see the best practices document regarding professional dress and uniforms.

Time Off

- Abides by corporate policies and procedures regarding PTO (Paid Time Off) and UTO (Unpaid Time Off).

Professional Evaluations

- Will have a bi-annual evaluation with the HR Director, to receive professional evaluation on professional competencies, position competencies, and areas of ongoing development.

Additional Considerations

- None at this time.