## JOB DESCRIPTION

| POSITION TITLE: | Medical Billing and Collections Specialist |
| LOCATION: | HOPE Clinic - Main |
| REPORTS TO: | Billing and Credentialing Coordinator |
| EDUCATION: | High School Diploma equivalent required, Associate Degree preferred, Certified Medical Coding a plus! |
| WORK EXPERIENCE: | 2-4 year experience with medical billing/collections preferred |
| SALARY RANGE: | $14 - $18/ hour |
| FLSA STATUS: | Hourly, non-exempt |
| POSITION TYPE: | Full-time |
| LANGUAGE: | Bilingual preferred |

HOPE Clinic is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including but not limited to disability, race, creed, color, age, sex, religion, political or other opinion, national or social origin, etc.

## JOB SUMMARY:
The medical billing and collection specialist is responsible for ensuring accurate billing, timely submission of electronic and/or paper claims, monitoring claim status, researching rejections and denials, documenting related account activities, posting adjustments and collections of Medicare, Medicaid, Medicaid Managed Care, and commercial insurance payers. The medical billing and collection specialist must possess critical thinking skills and understanding of Medicare, Medicaid eligibility requirements as well as commercial insurance payer payment methods to correctly record contractual adjustments base on payer contracts or government regulations. In addition, the medical billing and collection specialist must demonstrate proficiency with billing system to ensure all functionality is utilized for the utmost efficient processing of claims.

## MAJOR DUTIES & RESPONSIBILITIES:
- Responsible for charge and payment entry within Electronic Health Record. Coordinates and clarifies with providers, when necessary, on information that seems incomplete or is lacking for proper account/claim adjudication;
- Responsible for correcting, completing, and processing claims for all payer codes;
- Analyze and interpret that claims are accurately sent to insurance companies;
- Perform follow up with Medicare, Medicaid, Medicaid Managed Care, and Commercial insurance companies on unpaid insurance accounts identified through aging reports;
- Process appeals online or via paper submission;
- Assist in reconciling deposit and patient collections;
- Assist with billing audit related information;
- Process refund requests;
• Attend provider meetings/ workshops when needed;
• Communicate with billing and credentialing coordinator to identify and resolve audit review issues;
• Process billing calls and questions from patients and third party carriers;
• Answer/respond to correspondence related to patient accounts. Is available to answer billing and changes related inquiries by patients, staffs, Managed Care Organization, etc.;
• Communicate daily with internal and external customers via phone calls and written communications;
• Identify trends, and carrier issues relating to billing and reimbursements. Report findings to Team Lead and/or Supervisor;
• Research, record findings, and communicates effectively with Manager to achieve optimum performance;
• Pursue and participate in education to remain current with changes in the Healthcare industry;
• Maintain patient confidence and protects medical office operations by keeping patient information confidential;
• Contribute to team effort by accomplishing related results as needed;
• Promote effective working relations and work effectively as part of a team to facilitate the department’s ability to meet its goals and objectives;
• Demonstrate respect and regard for the dignity of all patients, families, visitors, and fellow employees to insure a professional, responsible and courteous environment;
• Attend on-site/off-site community engagement activities and on-site/off-site clinic events as needed;
• Perform other duties as assigned to support HOPE Clinic’s Mission, Vision, and Values.

QUALIFICATION REQUIREMENTS:
• Minimum of two years of related experience in a business, medical or technical environment;
• Previous experience in a medical office setting and/or experience with an Electronic Medical Record a plus, eClinical Works experience preferred;
• Customer service driven;
• Understanding of medical terminology and insurance laws/guidelines;
• Excellent organization and time management skills along with excellent oral and written communication skills;
• Strong team player;
• Ability to learn quickly, build and maintain long term relationships and work with minimal supervision;
• Strong written and verbal communication skills; strong analytical, organizational and time management skills required.

TRAVEL REQUIREMENTS:
• Ability to travel to satellite sites and/or off-site locations for events or training as needed;
• Proof of liability and property damage insurance on vehicle used is required.
EDUCATION and/or EXPERIENCE:
High School Diploma equivalent required, Associate Degree preferred. Certified Biller and Coder strongly preferred.

LANGUAGE SKILLS:
Ability to read, analyze, and interpret general health and social services guidelines, technical procedures or governmental regulations. Ability to write reports, health correspondence and procedure manuals. Ability to effectively present information and respond to questions from groups or patients, center staff, and the general public.

MATHEMATICAL SKILLS:
Ability to add, subtract, multiply and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent.

REASONING ABILITY:
Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instruction furnished in written, oral, diagram, or schedule form.

OTHER SKILLS and ABILITIES:
- Bilingual (Vietnamese, Chinese, Arabic and/or Spanish with English) is preferred.
- Above average skills in language ability as well as public speaking and writing.
- Must have good transportation and a valid Texas Driver’s license.

LEADERSHIP RESPONSIBILITIES:
No supervisory or direct people management responsibilities. May provide occasional work guidance, technical advice, and training staff.

WORK COMPLEXITY/INDEPENDENT JUDGEMENT:
Work tasks are often straightforward, routine, structured and guided by established policies and procedures. Little, if any, independent judgment is required, outside of making basic choice in the selection and application of established methods. The job received frequent, ongoing supervision.

PROBLEM SOLVING:
Decisions are made on routine matters affecting few individuals and usually within the confines of the job's own department. Specific job activities and results are typically reviewed closely. There are limited requirements for developing new ideas or changes in methods, procedures or services.

COMMUNICATION/INTERACTIONS:
Information sharing - gives and receives information such as options, technical direction, instructions and reporting results. Interactions are mostly with customers, own supervisor and coworkers in own and other departments.
IMPACT OF DECISIONS:
Follow rules and procedures. Decisions can have minimal or no impact to HOPE Clinic. Errors can be readily detected, usually by the employee, and, if made, would result in minor expense for correction.

CUSTOMER RELATIONSHIPS:
Follow through with customer inquiries, requests and complaints. Forward difficult and non-routine inquiries or requests to appropriate level for resolution.

AMERICANS WITH DISABILITIES SPECIFICATION:
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 stand, sit, talk, hear, stoop, kneel, and use hands and fingers to operate a computer and telephone keyboard reach;
• Specific vision abilities required by this job include close vision requirements due to computer work; Ability to uphold the stress of assisting patients of diverse backgrounds;
• Regular, predictable attendance is required;
• Must have the ability to lift up to 50 lbs

WORKING/ENVIRONMENTAL CONDITIONS:
Work is normally performed in a typical health clinic work environment which may or may not subject the employee to hazardous or unpleasant elements, noise, crowds, confined/restricted but fire hazard approved desk spaces/rooms and varying temperatures at the clinic. There may be occasional off-site/outdoor assignments with exposure to heat/cold, wet/humid, dry/arid airs or temperatures.

HOPE Clinic is a smoke-free and drug-free workplace in compliance with federal guidelines.

_____________________________________________  ______________________________
Signature                                                 Date

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Full Name - Printed