

JOB DESCRIPTION	
Approved by: <i>T. Ekstrom</i>	Initial Approval/Revised Date: 8/15/2014

CLERICAL - BUSINESS OFFICE

POSITION: A/R Claims Specialist

RESPONSIBLE TO: Director of the Business Office

JOB SUMMARY: Account follow up on unpaid rejections and unpaid insurance claims using Explanation of Benefits forms and reports, and maintains relationships with specified payers. This position will handle claims for commercial, state, and federal payers.

EDUCATIONAL REQUIREMENTS:

- High School Diploma/GED or equivalent experience
- College education or trade school preferred

QUALIFICATIONS AND EXPERIENCE

- Minimum eighteen months experience working in a physician group practice billing department
- Computer literate, with keyboard skills-working knowledge of practice management software
- Knowledge of third party payer reimbursement guidelines
- Experience establishing relationships with insurance companies
- Experience with CPT and ICD-9 coding is required, orthopedic specialty preferred
- Experience in a project-oriented position preferred
- Pleasant speaking voice and demeanor
- Neat, professional appearance
- Strong written and verbal communication skills

RESPONSIBILITIES INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING:

- Ensures all paper/electronic claims are submitted with 0% error-verifies completeness of paper/electronic insurance claim information before mailing
- Transmits all appropriate electronic claims; corrects claims that hit the "front end edit," then retransmits
- Transmits collection letters to outside mailing house processing
- Prints and mails itemized statements to those patients who request them, or transmit claims to outside mailing house for processing
- Notifies Billing Lead/Accounts Receivable Lead immediately when insurance payments do not match contractual agreement

- Processes requests for refunds, and submits to Billing Lead/Accounts Receivable Lead for approval
- Watches for rejection patterns by payer and procedure, and develops a plan as to how they can be remedied
- Works closely with the Billing Lead/Accounts Receivable Lead to solve receivable problems that begin in the clinic (i.e., incorrect demographic information, lack of attention when in-putting insurance information)
- Verifies & inputs surgical coding from physicians following CPT-4 & CPT-9 guidelines
- Notifies physicians of any surgical codes not received in a timely fashion
- Processes denials and all insurance correspondence to ensure that claims are paid
- Follows up with insurance companies to ensure that claims are paid
- Conducts detailed review of Explanation of Benefit forms from commercial and managed care payers
- Follows collection protocol utilizing collection module in computer on delinquent accounts report, beginning at 45 days, to contact payers regarding unpaid insurance claims
- Responds to written and telephone inquiries from insurance companies
- Manages relationships with personnel from assigned carrier
- Responds to patient questions about insurance-related reimbursement, as needed
- Inputs data into scanning system weekly
- Meets with Billing Lead/Accounts Receivable Lead regularly to discuss and solve reimbursement and insurance follow up problems
- Attends regular staff meetings as requested
- Maintains strict confidentiality
- Attends continuing education sessions as requested
- Availability to work in the office setting Monday-Friday.
- Performs any additional duties as assigned by the Supervisor or Manager

PHYSICAL DEMANDS:

While performing the duties of this job, the employee is regularly required to sit. The employee is occasionally required to stand, walk, reach with hands and arms, stoop, and bend; and may require lifting of paper weighing up to 20 pounds. The position requires manual dexterity to operate computer keyboard, calculator, telephone, and other office equipment as necessary. Position requires continuous viewing and typing on computers and use of the telephone. Vision and hearing must be within normal range.

MENTAL / EMOTIONAL DEMANDS:

Mental activities necessary for this position include concentration, organization, multi-tasking, problem solving, stress control, dependability, and both verbal and written communication skills. This position involves frequent contact with staff and patients. Work may be stressful and busy at times. Contact may involve dealing with angry or upset people. Interaction with others is constant and interruptive. Position requires maintaining a high degree of confidentiality.

WORK ENVIRONMENT:

Work is performed in an office setting, well-lighted and ventilated, with adequate space.

This description is intended to provide only basic guidelines for meeting job requirements. Responsibilities, knowledge, skills, abilities, and working conditions may change as needs evolve.