

FEATHER RIVER TRIBAL HELTH

POSITION DESCRIPTION

JOB TITLE:	Billing Supervisor		
Grade:	10/11 - DOE		
Reports to:	Fiscal Director	Department:	Fiscal
Classification:	Non-Exempt	Supervises:	Billing Staff

POSITION SUMMARY:

The Medical Billing Supervisor is responsible for the successful performance of the Accounts Receivable program at FRTH including but not limited to the following disciplines: Medical (including specialty services offered by contracted providers to FRTH); Behavioral Health, and Dental. This position coordinates coding and billing flow internally with other departments, as well as externally with all 3rd party payers. The ideal candidate is self-driven and flexible, willing to learn and able to adjust to changing rules and regulations. This is a hands-on position not just a supervisory position only. Supervisor is expected to actively review, approve and submit claims, post payments and adjustments, process appeals, manage the accounts receivable, and prepare reports under the direction of the Fiscal Director.

ESSENTIAL FUNCTIONS:

1. Supervises billing staff.
2. Supports implementation of code set updates (annual and ICD-10-CM).
3. Prepares monthly reports as directed by the Fiscal Director.
4. Researches and responds to patient inquiries regarding billing issues both by telephone and in writing.
5. Researches and responds to all billing inquiries regarding billing issues and problems.
6. Stays current and knowledgeable in applying billing and coding regulations for a Federally Qualified Healthcare Center, commercial HMO, PPO, Medi-Cal FQHC, and managed care, Medicare FQHC, and managed care for fee for service.
7. Processes medical, dental, and behavioral health billing to Medicare, Medi-Cal, Medicaid programs, patients, and 3rd party reimbursement claims.
8. Balances daily batches, prepares and distributes reports, prepares revenue reports and statistics.
9. Coordinates coding to billing processes to ensure timely filing.
10. Supports processing of electronic payments (835).
11. Processes patient statements, keys data, posts transactions, and verifies accuracy of data for reports.
12. Monitors patient and insurer balances for prompt payment.
13. Monitors aging to meet program collection goals as set by the Fiscal Director.
14. Reviews denials for appeal and training requirements.
15. Follows up on submitted claims, monitors unpaid claims, initiates tracers; reprocesses claims as necessary following industry and payer guidelines.
16. Audits, enters, and reviews data elements related to Indian Health Service requirements which may or may not be reimbursement related.
17. Works with clinical care teams for reimbursement system procedures.
18. Maintains and retains supporting documentation for files and records.
19. Plans and organizes ongoing training program for billers.
20. Supports compliance programs by actively participating in documentation audits.
21. Ensures strict confidentiality of health and financial records.
22. Works with a high degree of monitoring by supervisor, compliance auditors and management.
23. May receive and receipt patient payments and 3rd party reimbursements.
24. Posts and reconciles payments to patient accounts.

ADDITIONAL RESPONSIBILITIES:

1. Serves on the QI Committee.
2. Supports achievement of Meaningful use of EHR system.
3. May assist in preparing documents and responses for legal inquiries, litigation, and court appearances.
4. Assists in training and maintaining reference materials for front and back office staff as related to reimbursement system.
5. Performs a variety of general clerical duties, including telephone, mail distribution, and other business functions.
6. Under the direction of the Fiscal Director, participates in development of organization procedures and updates of forms and manuals.

KNOWLEDGE, SKILLS AND ABILITIES:

1. Ability to read and interpret policies and procedures from a variety of sources.
2. Knowledge or ability to learn FQHC billing process as well as Medi-Cal and Medi-Cal managed care required.
3. Ability to work in a paper and electronic health information environment and be able to support electronic claims and occasional paper claims.
4. Knowledge of electronic health records system required.
5. Ability to be an effective supervisor.
6. Ability to communicate well verbally and in written communication internally with staff and externally with patients, vendors, and outside agencies.
7. Knowledge of computers and programs in order to generate reports using MSWord and MSEXcel products.
8. Knowledge of HIPAA privacy and security requirements required.
9. Ability to work in a detailed, organized manner.
10. Demonstrate awareness, sensitivity, and appreciation of Indian culture, traditions, customs, and socio-economic needs.
11. Ability to record information accurately and timely.
12. Ability to operate computer terminal, 10-key adding machine, and fax machine.
13. Ability to learn new technology and programs, as necessary.
14. Ability to work independently with minimal supervision.

EDUCATION AND EXPERIENCE:

For Grade 11 must meet Grade 10 requirements and have:

- a. 5 years' experience in clinic billing & coding
- b. AAPC CPC Certificate

Grade 10 requirements include:

1. At least three (3) years group practice/clinic billing and collections experience, including but not limited to eligibility, commercial HMO, PPO, EPO, Medi-Cal, Medicare, auto insurance, and CHDP.
2. At least three (3) years' experience in electronic data environment.
3. At least three (3) years' coding experience.
4. Experience working with Indian Health Service environment preferred.
5. High school diploma or GED equivalent required. College education/training may be substituted for 1 year of experience.
6. Minimum of two (2) years' experience supervising billing staff.

PHYSICAL REQUIREMENTS:

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 disability to perform the essential functions.

While performing the duties of this job, the employee is regularly required to use hands to finger, handle or feel; reach with hands and arms, stoop; and talk and hear within normal range. The employee is frequently required to stand, walk, or sit. The employee must regularly be able to lift and/or move up to 10 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision,

peripheral vision, depth perception, and ability to adjust focus. This position is physically and emotionally challenging. There is a high degree of stress. Ability to deal with time constraints and emotional stress are also essential functions of this job.

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 regularly exposed to odors and airborne particles. The noise level in the work environment is usually moderate.

Reasonable accommodations will be given to qualified disabled applicants pursuant to Section 501 of the Rehabilitation Act of 1973, 29 U.S. Code 791, Title 29, and the Americans with Disabilities Act (ADA).

Reviewed Job Description:

Employee Printed Name: _____

Employee: _____

Date: _____

Supervisor: _____

Date: _____

Executive Director: _____

Date: _____
