

ALTA CARE GROUP

Job Duties & Requisite Work Skills

T.O. Position Number: _____ **Worker**

F.T.E.: _____ **Name:** _____

Division: Behavioral Healthcare **Credentials:** _____ **FSLA** **Overtime**

Position Series/Service Area: Line/Management Support **Exempt:** [] Yes [X] No **Working Title:** Billing Specialist

Position Category: Management Specialist **Effective Date:** _____

JD Effective Date: 12/1/06; r-11/22/16

Administrative Supervisor: _____ **Date:** _____

Worker Signature: _____ **Date:** _____

GENERAL RESPONSIBILITIES

Provide assistance to the office of the CEO, CFO or Clinical Director through the provision of highly skilled, complex or technical services that are not of a clerical assistant or associates nature alone. Such jobs involve highly independent decision making, such as may be involved in the organization of tasks necessary to completing a Board or Grant work project, analysis and interpretation of technical rules or standards, and systems analysis. Perform billing and charge entry functions for the center in accordance with Alta's policies and procedures.

SPECIFIC ESSENTIAL FUNCTIONS OF THE JOB

# Code	Major Area	Letter	AZ	Specific
199		% Allocation		
		Responsibilities		
1		Billing	A	Prepares, posts, verifies, and records client payments and transactions related to accounts receivable. Reviews bank statements daily to identify what needs posted against the clients record. Check commercial websites to see what needs posted per the bank statement. Check cash receipts and reconciliation daily. Type, reconcile and verify monthly

client billings and insurance forms;

- B Perform all functions necessary (e.g., gets client signatures on forms, makes phone calls to get information from either client or insurance company, etc.). Ensures that Insurance information is accurate and clients include all information required for Medicaid and Insurance reimbursement.
- C Prepare charges and creates invoices for client and Insurance companies according to company practices; submits invoices to clients, and insurance.
- D Drafts correspondence for standard past-due accounts and collections, identifies delinquent accounts by reviewing files and the general ledger, and contacts delinquent accountholders to request payment.
- E Creates reports regarding the current status of customer accounts as requested.
- F Researches customer discrepancies and past-due amounts.
- G Prepare and verify Medicaid billing roster; assist in reconciliations to Medicaid. Post Medicaid 835's. Verifies correct Medicaid coding to ensure prompt payment. Attend meetings or workshops designed to update Medicaid billing procedures.
- H Inputs correct billing information and transmits electronically to the Medicaid carrier.
- I Authorizes or adjust rejected claims to correct errors. Applies adjustments to individual accounts. Follow-up includes making telephone inquiries, resubmitting rejected or denied claims, and verifying correct payments/adjustments.
- J Prepares weekly and monthly reports of Medicaid billing for the CFO.
- K Relays changes of information to appropriate staff.
- L Receive precertification's for clients and monitor as needed. Keep abreast of client insurance info, use of Insurance portals when available, contact clients and update

as needed. Ensure that the clinician assigned to the client is on that client's plan.

M Follows up with clients on past due amounts and establishes payment plans.

N Responsible for operating computer software to produce electronic billing which includes processing of data information and generating reports. Works directly with software provider, consultants, and in-house IT technical staff to correct problems to improve and sustain electronic billing system.

O Performs other related duties as assigned.

2 Accounting A Is responsible for the posting of various types of accounting transactions to ledgers, journals, or cash books, make necessary mathematical computations for posting and maintenance of records, makes financial statements. Keep budget accounts and auxiliary records, prepares audits and special accounting reports.

B Assist the CFO in preparation of budget and of summary and special reports concerning fiscal, budgetary matters.

4 Clerical A Perform general and technical clerical tasks related to office work (i.e., Distributions, sends out mail; does copy work; prepare reports; reliable computer skills Microsoft/Excel; typing skills, etc.). Type reports, memorandums, and correspondence from written material and dictation, and perform other duties as assigned by the CFO.

5 M.I.S. A Verifies computer system accuracy in M.I.S. Billing. Responsible for creating valid procedures and service codes, trouble shoots problems encountered by current staff. Works directly with the software providers in carrying out these duties.

6 Training A Attend, as instructed, professional job skill enhancement training experiences. Attends training to keep abreast of

MINIMUM QUALIFICATIONS

- 1 H.S. Diploma and prior experience with insurance billing procedures.

PREFERRED QUALIFICATIONS

- 1 Prior work in mental health/medical health related field.
- 2 Prior experience with HCFA 1500 billing and knowledgeable of governmental, managed care and commercial payer regulations.
- 3 Experience with CPT codes and ICD-10 diagnosis codes.
- 4 Trade School Certificate or Associates degree plus minimum of three years' experience.