

LINN COUNTY CLASSIFICATION

TITLE: HEALTH SERVICES MEDICAL BILLING SPECIALIST

NUMBER: 706

APPROVAL ORDER NUMBER: 2018-375

PAY RANGE: 08

DATE: DECEMBER 4, 2018

CATEGORY: SEIU

GENERAL STATEMENT OF DUTIES/JOB OBJECTIVES: Performs clerical work of a complex nature for patient accounts in the billing software, which includes assisting with charge posting, payment posting, working denials, applying applicable adjustments and following all billing guidelines for correct billing activities.

SUPERVISION RECEIVED: Works under the supervision of the Unified Billing Manager and/or Unified Billing Lead. Work is reviewed for effectiveness and adherence to prescribed standards.

SUPERVISION EXERCISED: Supervision of employees is not a responsibility of positions in this classification but an incumbent will assist in training new team members.

ESSENTIAL FUNCTIONS: A person employed in this classification must possess the capability to perform the following duties to be considered for and remain in this position. The duties are essential functions requiring the critical skills and expertise needed to meet job objectives. Additional specific details of these essential functions may be provided by the specific office or department job announcement, if applicable.

1. Input all charges related to services provided by the Health Department and post all payments, by line-item, received for services into the billing system including co-payments, insurance payments in accordance with established processes with a strong emphasis on accuracy to ensure efficiency in processing and receipt of payments and maximum revenue collection.
2. Follow-up on all returned claims, correspondence, denials, account reconciliations and re-bills to achieve maximum reimbursement, in a timely manner, with an emphasis on patient satisfaction. Monitor reimbursements from managed care networks and insurance carriers to ensure reimbursements are consistent with contract rates.
3. Follow-up on all outstanding patient account balances at 45-120 plus days from the date of service in accordance with practice protocol and an emphasis on maximizing patient satisfaction and practice profitability using the A/R aged reports. Process refunds to insurance companies or patient in accordance with practice protocol.
4. Provide cross-coverage with other Unified Billing team members. Learn the multiple Health Services programs, Alcohol and Drug, Mental Health and Public Health.
5. Maintain an organized, efficient and professional work environment. Adhere to all practices and policies relating to OSHA, HIPAA, Medicare and Medicaid Compliance.
6. Develop and maintain effective, harmonious and reasonable work relationships with others.
7. Maintain regular and predictable work attendance.

OTHER FUNCTIONS: This classification covers the most significant essential functions performed by an employee in this position but it does not include other occasional work, which may be similar to, related to, or a logical assignment of this position. Any one position in this classification may be assigned some, or all of the duties listed under essential functions or that arise as other functions. The balance of the various duties, responsibilities and/or assignments of this position may change from time to time based upon management's decisions on how to best allocate resources. Any shift, emphasis or rebalancing does not constitute a change in the essential functions of the job classification.

RECRUITING REQUIREMENTS: (Additional specific details may be provided by the specific office or department job announcement, if applicable).

KNOWLEDGE, SKILL AND ABILITY: Knowledge of the principles and practices of delivery of community-based health services including: Quality assessment/improvement in a community based healthcare setting; Knowledge of state and federal privacy laws, consent for treatment and release of information. Clinical treatment strategies and planning. Ability to interpret and educate staff and assure compliance with Oregon Revised Statutes, Oregon Administrative Rules, related Federal regulations (42 CFR, etc.) and department policies. Ability to develop supportive, collaborative relationships with allied service providers and agencies. Strong working knowledge of CPT, ICD-10, HCPCS, modifiers, coding and documentation guidelines.

EXPERIENCE, EDUCATION AND TRAINING: Graduation from high school supplemented by two years of experience in healthcare billing or certification in healthcare billing/coding or combination of education experience, which demonstrates the ability to perform the work, described. Any satisfactory equivalent combination of experience, education and training, which demonstrates the ability to perform the work described, may be acceptable.

NECESSARY SPECIAL QUALIFICATIONS: Possession of a valid motor vehicle operator's license and an acceptable driving record at the time of appointment may be a condition of employment. Successfully pass a criminal background check. Staff may be expected to play an active role in the event of an emergency, which may include changes in the scope of position responsibilities and working hours.

PHYSICAL DEMANDS AND WORK ENVIRONMENTAL: Work is generally performed indoors in an office environment. Work requires the ability to sit and move about; see, talk and hear; use hands to finger, handle or operate objects or controls; including use of a computer keyboard; reach with hands and arms. The work requires the ability to lift or move up to thirty (30) pounds.