

# JOB DESCRIPTION

Position: Patient Account Services Representative

Department: Billing

Reports to: Patient Account Services Supervisor FLSA Status: Non-Exempt Position/Non-Supervisory

Grade/Score: Grade: 7

#### **GENERAL PURPOSE:**

Patient Account Services Representative is responsible for the revenue cycle management of a claim for all payer sources. This includes the retrieving, billing and collections for Medicare, Medi-Cal, Managed Care, Private Insurances, CHDP, Family Planning, EWC, Private Pay, and Sliding Fee patients.

#### MAIN RESPONSIBILITIES AND DUTIES:

- 1) Retrieves claims from the PM system that the providers have completed and are ready to bill.
- 2) Approves claims for billing of all Medi-Cal, Managed Care, Medicare, CHDP, Family Planning, EWC, private insurances, Sliding Fee and Secondary claims.
- 3) Checks the patient's eligibility prior to approving the claim.
- 4) Reviews all manuals, updates and reference guides to ensure that all proper guidelines are followed for each payer source.
- 5) Once claim is approved, corrects any errors that occur.
- 6) Enters hospital charges into the system. Accesses the hospital system to ensure correct insurance is being billed.
- 7) Ensures that all hospital charge slips bear the proper CPT and ICD10 codes.
- 8) Monitors all system reports to ensure timely filing requirements.
- 9) Verifies correct PPS rate is received from Medicare and Medi-Cal. Verifies correct payment is received for all other insurance types.
- 10) Follows procedures as outlined by the Manager to ensure correct claims processing for each payer source.
- 11) Meets productivity goals established by Manager.
- 12) Resolves complex billing issues. Informs Supervisor/Manager of any system problems or payer problems that prevent you from collecting the amount due for claims.
- 13) Prints all necessary billing forms.
- 14) Updates CPT codes and ICD10 codes on claims as appropriate.
- 15) Posts all insurance payments. This will include manually inputting checks as well as processing electronic payments.
- 16) Monitors private pay accounts. Follows established procedures. After final attempt to collect, adjust as bad debt.
- 17) Posts all private pay payments received via the mail or from walk in patients.

- 18) Follows up on Explanation of Benefits (EOB's) and Remittance Advice (RAD's) from insurance companies where either no payment or only partial payment is received.
- 19) Works insurance changes to financial classes sent to you by clinic staff. Updates and bills all accounts as necessary.
- 20) Opens mail, distribute as appropriate, prepares log sheet of checks and prepares daily deposit.
- 21) Assists Patient Accounts Manager with new procedures for special programs
- 22) Answers patient informational requests (both in person and on the telephone).
- 23) Collection activity to include write up of adjustment form.
- 24) Establishes payment plans with patients
- 25) Other duties as assigned by supervisor

#### **QUALITIES & CHARACTERISTICS**

- 1) Maintains a professional relationship and positive attitude with co-workers, the public, patients and all Ampla Health
- 2) Maintains the highest professional ethics and is honest in dealing with people; is a model for all employees through his/her actions
- 3) Strives to learn more and is receptive to learning different ways of doing things
- 4) Displays enthusiasm toward the work and the missions of Ampla Health

## PROFESSIONAL KNOWLEDGE, SKILLS & ABLITIES

- 1) Must have high school diploma or equivalent
- 2) Ability to use Microsoft Word for basic correspondence
- 3) Ability to type a minimum of 40 WPM
- Minimum of two years prior insurance billing experience, with knowledge of CPT Codes and ICD 10 Codes
- 5) Knowledge of hospital and dental billing
- 6) Knowledge of primary health care concepts
- 7) Ability to adapt to specific environment and duties

### **COMMUNICATIONS SKILLS**

- 1) Must have neat and legible handwriting
- 2) Must be able to interact with patients courteously and calmly
- 3) Ability to communicate well with the public

#### **WORKING CONDITIONS AND PHYSICAL REQUIREMENTS**

Works will with patients in a generally comfortable environment office. Employees must possess the following physical requirements:

- Must be able to hear and communicate with clients and staff on telephone and those who are served "in person", and speak clearly in order to communicate information to clients and staff
- 2) Must be able to lift up to 40 pounds and push up to 100 pound (on wheel)
- 3) Must have vision which is adequate to read memo's, computer screen, registration forms and other clinic documents
- 4) Must have high manual dexterity

<ul><li>5) Able to reach above shoulder level to work, must be able to bend, squat and stand, stoop, crouch, reach, kneel, twist/turn</li><li>6) May be exposed to contagious/infectious diseases</li></ul>	
EMPLOYEE NAME(PRINT)	EMPLOYEE SIGNATU
DATE	