

Position Summary: (A brief statement that describes the scope and purpose of the position.)

Responsible for the overall accuracy, processing and billing of patient accounts for a specific payor mix which includes billing to the payor, processing additional charges/credits, reviewing and resolving credit balances, updating logs with contractals and remitting payments, follow-up with payors to expedite payments and receiving and responding to telephone and walk-in inquiries. Responsible for checking out patients as they leave the clinic, ensuring that all charges and payment information is complete and accurate. Communicates and enforces billing and payment policies of clinic.

Physical Requirements: (During a typical work shift, does this job involve the following?)

F = Frequently (more than 65% of day) **O = Occasionally** (33% to 64%) **S = Seldom** (less than 33%)

Check Appropriate Boxes	Yes	No	F	O	S
Sitting	X			X	
Standing	X			X	
Walking	X		X		
Kneeling		X			
Seeing	X		X		
Hearing	X		X		
Crouching/Stooping	X			X	
Squatting	X			X	
Crawling		X			
Twisting Upper Body		X			
Climbing Hand-Over-Hand		X			
Object manipulation, i.e. grasp, pinch, twist, turn, reach	X		X		
Manual dexterity, i.e. typing, writing, filing	X		X		
Lifting 0 -10 pounds	X			X	
Lifting 10 - 50 pounds	X			X	
Lifting over 50 pounds		X			

—

Communication Requirements: (Must be able to read & write using the English language via the following methods):

(X)Written (X)Verbal (X)Telephone (X)Fax (X)Computer

Mental Requirements:

Must be able to function in a busy environment with shifting and evolving priorities; handle pressure due to multiple tasks and interruptions; remain calm and cooperative during emergency or crisis situations; utilize critical thinking skills continuously; communicate effectively with various levels of people; maintain a positive attitude; and demonstrate empathy for others.

Work Environment:

The clinic reserves the right to make changes in work schedules by requiring overtime, declaring reduced staffing days, or “calling off” employees based on patient volume and the overall needs of the clinic.

EMPLOYEE PERFORMANCE APPRAISAL

I. SKILLS COMPETENCY

EE NAME:	DEPT.:	POSITION:
----------	--------	-----------

No.	SKILLS / DUTIES	Always Exceeds	Generally Exceeds	Meets Expectations	Needs Improvement	Unsatisfactory
1.	<p>Bills electronically or hard copy for respective payor mix by end of business daily.</p> <ul style="list-style-type: none"> • Checks bills for errors and makes necessary corrections on all bills, including crediting/debiting late charges. • Verifies all claims numbers, charges, contract and group numbers prior to transmission of bills, whether hard copy or electronically, to ensure accuracy of billing. • Submits insurance claims either through electronic or hard copy billing. • Demonstrates skill to assemble and maintain filing appropriately for efficient disposal and retrieval of files. • Records all transactions or adjustment forms with appropriate codes while billing. 					
2.	<p>Posts payments no later than the next day after billing.</p> <ul style="list-style-type: none"> • Posts expected reimbursement or payments to cost payor log accurately according to agreements in contracts with appropriate payor. • Accurately posts the contractual adjustments and moves balance to patient portion when appropriate. • Maintains daily deposit log at the end of each business day. 					
3.	<p>Reviews and maintains reports as required by the supervisor.</p> <ul style="list-style-type: none"> • Reviews all reports assigned on a daily basis as mandated by the report. • Makes proper corrections and edits reports accurately. • Files all report documents for possible retrieval and review at a later time. 					

No.	SKILLS / DUTIES	Always Exceeds	Generally Exceeds	Meets Expectations	Needs Improvement	Unsatisfactory
4.	<p>Receives and responds to telephone inquiries, regarding patients' accounts and other informational calls, within three (3) rings.</p> <ul style="list-style-type: none"> • Ensures that telephones are answered promptly and courteously by third ring. • Uses tactfulness and respect when talking to any caller and promotes to the public a clear understanding of clinic policy regarding collections of patient accounts. • Explains dates and amounts of insurance and patient payments at time of call. • Ensures that callers placed on hold be retrieved within two (2) minutes. If correct information is not found within that time, requests name and number to return call immediately upon. • Transfers calls to appropriate person or department and informs said person or department immediately and accurately of call transferred. 					
5.	<p>Ensures that all superbills have correct charge information, CPT and ICD-9 coding.</p> <ol style="list-style-type: none"> a. Reviews CPT coding noted on superbill to ensure that the coding reflects the services provided, according to the AMA CPT manual and/or appropriate Medicare/HMO/PPO guidelines. b. Reviews ICD-9 coding noted on superbill to ensure that proper diagnosis coding is used based on physician's determination and current ICD-9 manual. c. Reviews fees/charges to ensure that they are consistent with clinic's fee schedule. d. Reviews all charges to ensure that they are consistent with the Correct Coding Initiative. 					
6.	<p>Inputs charges and payments into computer system daily.</p> <ol style="list-style-type: none"> a. Inputs clinic charges on the same day that services are rendered. b. All batches are to be ready for processing by noon the next business day. c. Posts all payments daily, ensuring cash, checks, and credit card balances are accurate. 					
7.	<p>Maintains and balances cash and checks received at cashier's window.</p> <ol style="list-style-type: none"> a. Maintains a neat, orderly, and secure cash drawer. b. Balances cash, checks and VISA payments to the appropriate computer printouts. c. Ensures that all payment transactions are accounted for, researching superbills and computer system to locate inconsistencies. 					

8.	Assists in answering incoming phone calls, taking messages and scheduling when appropriate. a. Acts as back-up to clinic receptionist. b. Takes appropriate action from phone calls, i.e., schedules patients, takes messages, etc. c. Answers phone calls professionally and courteously.					
9.	Follows any other job-related instructions and performs any other job-related duties as requested by supervisor.					
TOTAL NUMBER OF CHECKMARKS EA. COLUMN: (Skills Competency Section) TOTAL NO. OF CHECKMARKS : _____						