

Job Title: Billing Specialist II

Department: KWC Finance

Reports to: Billing Supervisor

FLSA Status: Non- Exempt, Full Time

**Salary Grade:** \$21.69 - \$30.37

**Location:** Coos Bay/North Bend (remote work in Oregon will be considered)

This position is a covered position as defined in the Coquille Indian Tribe Chapter 185 Child Protection Ordinance. Candidate must pass a pre-employment drug screen and Criminal and Character Background Check.

#### **SUMMARY OF MAJOR FUNCTIONS**

Under the direct supervision of the Billing Supervisor, this position will provide clerical and administrative services to ensure timely and accurate account management, patient assistance, and support of the Ko-Kwel Wellness Center (KWC) Billing Office.

### **ESSENTIAL DUTIES AND RESPONSIBILITIES**

- 1. Enroll new KWC patients for service. Includes verification of tribal affiliation for AI/AN, eligibility for tribal services and assists uninsured with Oregon Health Plan applications.
- 2. Verify patient insurance to include coverage, deductibles, and cost shares. Enters information into electronic system.
- 3. Assist with updating insurance company benefits (deductibles, copays, accumulators, pre-authorizations) and ensures current in system.
- 4. Assist with provider credentialing with major insurance payers.
- 5. Ensure that the appropriate ICD-10, CPT, HCPSC, CDT coding conventions have been used and applied in the billing record that corresponds to the documentation referenced in the chart note, for services provided by all health service types within KWC.
- 6. Process insurance claims to include private insurance, Medicare, Medicaid, and secondary insurance.
- 7. Post and process patient and insurance payments and prepare daily deposits.
- 8. Verify paid claims for accuracy:
  - a. Verify insurance companies are paying appropriate (contract) rates.
  - b. Verify the correct balance after payment is transferred to the appropriate payer.
  - c. Review all denied claims for rebill and appeal.
- 9. Function as Outstation Eligibility Worker for Department of Medical Assistance Programs (D.M.A.P.) through Oregon Health Authority (OHA/DHS).
  - a. Process Oregon Health Plan (OHP) applications; assists the client with the application and obtains the required documentation; assures the application is complete and conducts any needed interviews to gather necessary data for the application process.
  - b. Monitor's status of applications and contacts clients for renewals.
  - c. Keep up to date with OHP policy and process changes. May be required to attend regular Community Partner meetings and other OHP meetings.
- 10. Create and maintain Accounts Receivable reports:
  - a. Conduct timely review on all unpaid claims after 30 days.
  - b. Track for potential payer or clearinghouse issues such as payment delays and lost claims.
  - c. Responsible for monitoring and maintaining assigned accounts.

- 11. Review all accounts with patient balances, prepare and process monthly statements including establishing and maintaining payment plans for unpaid accounts. Includes setting up auto-pay accounts on Credit Card system. Prepare and process monthly statements. Take appropriate collection action for overdue accounts, including past due notices, phone calls to patients, pre-collection letters, transfer of debt to collection agency, and terminating patients from KWC.
- 12. Handle incoming calls as well as walk in inquiries.
- 13. Provide security for both physical and computer records for confidentiality.
- 14. May serve as Notary Public.
- 15. May provide relief support for Medical Receptionist and Medical Records Technician, as needed and as appropriate if working remotely, to include the following duties:
  - a) Operate the electronic health record to make appointments.
  - b) Operation of multi-line phone system and routing calls to appropriate individuals and/or departments.
  - c) Communicate with patients, and route messages to appropriate staff.
  - d) Receive, greet, and direct visitors.
  - e) Scan and file medical records.
  - f) Coordinate refills.
  - g) Coordinate all aspects of the outside referral process for insurance plans.
  - h) Coordinate and facilitate the processing of authorized medical records information requests.
  - i) Process all incoming correspondence, lab reports, x-rays, dictation and outside.

The above statements reflect the general duties considered necessary to describe the principal functions of the job as identified and shall not be considered as a detailed description of all work requirements that may be inherent in the job. This position may involve transporting Native Americans and Non-Native patients and clients in the Health Center vehicles, employee-owned vehicles, and rental vehicles to and from a variety of Health Center functions and activities.

## **PHYSICAL REQUIREMENTS**

Requires the ability to communicate orally, repetitive movement of the wrists, hands and/or fingers, often requires walking, standing, sitting for extended periods of time, raising, or lowering objects, stooping and occasionally requires lifting up-to 25 pounds. Will often be required to travel by automobile, commercial or private carrier. Local travel is frequently required, statewide and national travel is occasionally required. The individual must perform the essential duties and responsibilities with or without reasonable accommodation efficiently and accurately without causing a significant safety threat to self or others.

# REQUIRED KNOWLEDGE, SKILLS, AND ABILITIES

Individuals must possess the following knowledge, skills and abilities or be able to explain and demonstrate that they can perform the essential functions of the job, with or without reasonable accommodation, using some other combination of skills and abilities.

- 1. Excellent oral and written communication skills. Ability to consistently convey a pleasant and helpful attitude by using excellent interpersonal and communication skills to control sometimes stressful and emotional situations.
- 2. Ability to operate an electronic health records system and/or electronic patient management system.
- 3. Ability to foster an inclusive workplace where diversity and individual differences are valued and leveraged to achieve the vision and mission of the Coquille Indian Tribe.
- 4. Possess awareness and sensitivity of Indian traditions, customs, and socioeconomic needs and ability to work effectively with diverse cultures.

- 5. Knowledge of regulations on the confidentiality of medical records (HIPAA).
- 6. Knowledge of medical terminology.
- 7. Knowledge of the procedures, rules, operations, sequence of steps, documentation requirements, time requirements, functions, and workflow to process medical records, to review records for accuracy and completeness, and to keep track of processing deadlines.
- 8. Ability to maintain professionalism, confidentiality, and objectivity under constant pressure and crisis situations. A breach of confidentiality or fraud is grounds for immediate dismissal.
- 9. Ability to make decisions independently in accordance with established policy and procedures.
- 10. Be computer literate. Exhibit a level of computer literacy sufficient to use software such as word processing, spreadsheets, and databases to produce correspondence, documents, and reports.
- 11. Ability to work with mathematical concepts such as basic arithmetic.
- 12. Ability to work cooperatively with other departments to accomplish assigned tasks; ability to develop good working relationships with other departments in the organization.
- 13. Ability to organize and maintain computerized and non-computerized filing and retrieval systems.

### **QUALIFICATIONS**

- A. High school graduate or GED required.
- B. Three years' experience in a medical or dental billing, required.
- C. Three years' experience with Electronic Medical or Dental Records and Electronic Patient Management systems, required.
- D. Knowledge of medical terminology, required.
- E. Medical Billing Coursework.
- F. Knowledge of ICD9 and ICD 10 Coding required.
- G. Current and valid Oregon driver's license in good standing is required with no insurability restrictions from the Tribe's insurance carrier.
- H. Required to accept the responsibility of a mandatory reporter of abuse and neglect of infants and children, people who are elderly or dependent, individuals with mental illness or development disabilities or residents of nursing homes and other health care facilities. This includes reporting any evidence of physical injury, neglect, sexual or emotional abuse or financial exploitation.
- I. First Aid/BLS certification required or ability to obtain within 90 days of employment.