

Marion County Board of County Commissioners

POSITION DESCRIPTION



To perform this job successfully, an individual must be able to perform the essential job functions satisfactorily. Reasonable accommodations may be made to enable individuals with disabilities to perform the primary job functions herein described. Since every duty associated with this position may not be described herein, employees may be required to perform duties not specifically spelled out in the job description, but which may be reasonably considered to be incidental in the performing of their duties just as though they were actually written out in this job description.

MEDICAL BILLING SPECIALIST

Department: Fire Rescue
Pay Grade: 105 / 106 / 107 / 108 / 109
FLSA Status: Non-Exempt
Job Class: 5050
Risk Code: 8810

JOB SUMMARY

Responsible for providing customer service to members of the general public in matters related to ambulance billing questions and complaints.

ESSENTIAL JOB FUNCTIONS

- Answers phones and requests for service, resolves patient inquiries, and forwards other calls to appropriate members.
- Communicates with patients, hospitals, flight agencies, and staff as necessary to clarify or gather additional information to facilitate the claim process.
- Provides information to supervisor based on observed trends with various payers and makes recommendations to improve processes for quicker payment.
- Reviews and verifies claims received after medical necessity has been determined in order to verify claims for accuracy prior to billing.
- Updates database with information regarding calls, classifies calls by type, and follows up to document additional information received. Issues additional forms, form letters, authorizations, and other items in response to customer issues.
- Processes returned mail and determines the patient's status through various computer applications.
- Validates insurance eligibility by various internet programs and determines and assigns payer responsibility for claims via hospital data lookup.
- Performs data entry of pertinent billing information into the billing system in order to facilitate the claims workflow.
- Recommends and implements processes and priorities for follow-up and focus on collections, post payments received.
- Contacts patients to determine causes of delinquencies and to resolve past due accounts, denials, and payment disputes in order to expedite collections.

- Follows up on open accounts to expedite collection, repeat requests for documentation, insurance information and/or payment.
- Reviews correspondence included with payments, sort, annotate related accounts, files necessary paperwork, and processes incoming insurance correspondence.
- Generates claims, attaches required documentation including medical records, logs to patient accounts, and issues hard copy billing to primary and secondary insurance companies.
- Re-verifies eligibility of payers as necessary to determine proper status of claims. Sorts denials, annotates related accounts, identifies credit balances, researches payments made, and determines if refund is due and post to patient's accounts.
- Mails contract billing statements to designated facilities including hospitals, prisons, or other similar facilities responsible for paying bills. Prepares and mails bills and follows up to expedite payment.
- Oversees tracking non-signatures of PCS forms. Generates and mails letters requesting signatures and document all attempts into billing program.
- Interprets documentation and medical terminology to verify diagnosis coding and makes adjustments as required. Determines defined payer requirements to facilitate claim acceptance and assign appropriate charge codes, and modifiers required.
- Assists with any departmental activities are required to maintain workflow.
- Provides excellent customer service to members of the general public and other County employees. Personal contact occurs with other employees of the unit, employees of other departments in the County, citizens, and customers of the department. Service is provided in person or by phone contact.
- Implements the organization's guiding principles and core values.
- Performs other related job duties as assigned.

SUPERVISION

This position has no supervisory responsibility.

QUALIFICATIONS

	MBS I	MBS II	MBS III	MBS IV	MBS V
Education	HS/GED Required	HS/GED Required	HS/GED Required	HS/GED Required with Associate's Degree preferred	HS/GED Required with Bachelor's Degree preferred
Training Courses Required	N/A	HIPAA; Medical Terminology; Basic Listening Skills and two (2) Customer Service Classes offered through Vector Solutions	MBS II courses plus: 12 CEUs (continuing education units*); Problem Solving; Communication and Customer Service class offered through Vector Solutions	MBS III courses plus: 18 CEUs (continuing education units*); Effective Team Member; Time Management class offered through Vector Solutions	MBS IV courses plus: 24 CEUs (continuing education units*); Diversity class offered through Vector Solutions
Experience	1 year Medical Billing	1 year as MBS I	3 years as MBS II	3 years as MBS III	3 years as MBS IV
Certifications	0	5	20	40	65
Pay Grade	105	106	107	108	109

KNOWLEDGE, SKILLS AND ABILITIES

- Ability to read, analyze, and interpret general business periodicals, professional journals, technical procedures, or governmental regulations.
- Ability to write reports, business correspondence, and procedure manuals.
- Ability to effectively present information and respond to questions from groups of managers, clients, customers, and the general public.
- Ability to respond to common inquires or complaints from customers, regulatory agencies, or members of the business community.
- Ability to calculate figures and amounts to such as discounts, interest, commissions, proportions, percentages, area, circumference, and volume.
- Ability to apply concepts of basic algebra and geometry.
- Ability to apply concepts such as fractions, percentages, ratios, and proportions to practical situations.
- Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardized exists.
- Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.
- Ability to interpret complex and detailed technical data.
- Ability to potentially participate in development of policy, programs, plans, or procedures.

- Ability to study manual work processes to determine most effective methods as essential tasks.
- Knowledge of government organization and administration and of the legal basis of government.
- Knowledge of the principles, practices, methodologies, and techniques of effective billing practices to maximize revenue collection.
- Knowledge of standard software packages including appropriate billing software.
- Knowledge of research techniques, methods, and practices.
- Knowledge of compliance and HIPAA requirements.
- Knowledge of Medicare/Medicaid Ambulance guidelines for appropriate claims processing.
- Ability to review patient care reports for proper medical codes.
- Ability to conduct manual and electronic research and analyze/interpret findings for reports.
- Ability to remain calm in stressful situations.
- Ability to deal courteously and tactfully with members of the public and coworkers.
- Ability to take a teamwork approach to the job by cooperating with others, offering to help others when needed, and considering larger organization or team goals rather than individual concerns. Include the ability to build a constructive team spirit where team members are committed to the goals and objectives of the team.

PHYSICAL DEMANDS

The work is sedentary work which requires exerting up to 50 pounds of force occasionally and/or negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects, including the human body. While performing the duties of this job, the employee will occasionally be required to stand, walk, sit, use hands to finger, handle or feel, reach with hands and arms, climb or balance, stoop, kneel crouch, or crawl, talk or hear.

WORK ENVIRONMENT

Work is performed primarily in an indoor environment with limited exposure to adverse environmental conditions.

Marion County has the right to revise this job description at any time. This description does not represent in any way a contract of employment.

Employee Signature

Date

Supervisor (or HR) Signature

Date

E.O.E. Marion County does not discriminate on the basis of race, color, national origin, sex, religion, age, disability or military service in employment or the provision of services.