UTAH COUNTY JOB DESCRIPTION

CLASS TITLE:	MEDICAL BILLING COORDINATOR
CLASS CODE:	6610
FLSA STATUS:	NON-EXEMPT
SUPERVISORY LEVEL:	NONE
EFFECTIVE DATE:	01/12/2015 (REVISED 06/14/2008 VERSION)
DEPARTMENT:	HEALTH - NURSING

JOB SUMMARY

Under general supervision of Bureau Director-Nursing, performs medical billing and adjudication work for Nursing Division of the Health Department. Performs quality assurance activities, leads, trains and makes presentations to staff.

ESSENTIAL FUNCTIONS

Monitors, coordinates, orients and trains billing department along with new and existing support staff to assist with accuracy and billing.

Functions as project manager for implementation and maintenance of the new EMR System.

Develops training of staff in all aspects of reimbursement which includes: client registration, cashiering, billing and collections. Performs retraining in areas needing remediation along with documenting staff progress for their yearly evaluation

Coordinates and orients new employees, providing ongoing training to all staff in Immunizations, Welcome Baby Program, Baby Your Baby and the Wellness Clinic.

Schedules the office staff for coverage of the day-to-day immunization clinic operation as well as the satellite and school-based clinics.

Receives and reconciles payments from insurance companies, private agencies, Medicaid, Medicare, vouchers and individuals against billing reports.

Compiles and reviews invoices and monthly billing statements; monitors Medicare, Medicaid, and insurance billing error reports to ensure accuracy and to identify system flaws or training areas.

Conducts research to correct payment denials or errors; prepares denied claims for re-billing as appropriate.

Follows up on past due accounts; makes special billing and payment arrangements with clients and companies; identifies accounts and prepares files to turn over to collection.

Updates account, vendor, and customer records through computer input.

Generates periodic monthly, quarterly, or annual reports for management review and submission to county, state and federal agencies as required by various statutes, regulations or funding requirements.

Responds to financial and account questions from companies, clients or county employees; conducts research for office projects, billing/accounting as needed.

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Serves as liaison with Medicare, Medicaid, and insurance representatives to insure billing processes are working correctly; furnishes providers with updated fee schedules.

Establishes and maintains various files and record systems; distributes and organizes incoming and outgoing correspondence and files.

KNOWLEDGE, SKILLS, AND ABILITIES

Knowledge of: County Regulations and Services and Center for Medicare/Medicaid Services (CMS).

Insurance regulations, policies and practices.

Contract terminology and requirements.

Bookkeeping and filing procedures.

Skill in: Operating a 10-key, calculator, and various computer systems and applications.

Ability to: Lead, train and make presentations.

Establish and maintain effective working relationships.

Communicate effectively verbally and in writing.

Exercise independent judgement in researching and solving problems.

Conduct fiscal research and promptly respond to clients' questions.

Train others in billing and other processes.

Ability to deal with angry patrons with tact and diplomacy.

PHYSICAL DEMANDS

Typically: sits at a desk or table.

Regularly: walks, stands, stoops; works for sustained periods of time maintaining concentrated attention to detail.

Occasionally: lifts or otherwise moves objects weighing up to 30 pounds; drives a motor vehicle.

Accommodation may be made for some of these physical demands for otherwise qualified individuals who require and request such accommodation.

WORKING CONDITIONS

Work is performed in an office or other environmentally controlled room. Work exposes incumbent to noise of crying children. Work exposes incumbent to stress associated with regular deadlines and to angry, agitated or difficult clients.

EDUCATION AND EXPERIENCE

Associate's degree in accounting or a related field and two (2) years of medical coding and billing work experience. Equivalent combinations of education and experience may also be considered.

LICENSING, CERTIFICATION, AND OTHER REQUIREMENTS

Selected applicants may be subject to a background check.

Selected applicants must pass a typing test at or above the rate of 40 WPM net.

Applicant must possess a current driver's license and obtain a valid State of Utah driver's license within 60 days of employment.

This description lists the major duties and requirements of the job and is not all-inclusive. Incumbent(s) may be expected to perform job-related duties other than those contained in this document and may be required to have specific job-related knowledge and skills.