

Berks Counseling Center – Job Description

Position Title:	BILLING CLAIMS SPECIALIST	Classification:	N9
Department:	BILLING	FLSA Status:	NON-EXEMPT
Accountability:	LEAD BILLING SPECIALIST	Status:	FULL-TIME
Primary Location:	BCC	Creation/Revision Date:	MAR 2016/OCT 2019

General Summary

Perform regular risk analysis on rejected claims. Process claims to the insurance carriers in the appropriate format. Work side by side with billing staff on urgent tasks. Submit appeals process when needed on disagreements with decisions made by the insurance carrier in regards to payment. Assist with any additional department functionalities, as needed.

Minimum Qualifications

High School Diploma and three (3) years billing experience in the health care industry required. Billing Certification preferred. Excellent data entry and communication skills required. Must have knowledge of CPT, HCPCS, ICD 10, DSM V, Microsoft Office applications and have the capacity to learn any electronic system.

To perform this position successfully, an individual must be able to perform each essential function satisfactorily. The requirements are representative of the knowledge, skill and or ability required. Reasonable accommodations may be made.

Knowledge, Skills, and Abilities

- Demonstrate critical thinking, creativity, problem solving and decision-making skills.
 - Must possess excellent time management and organizational skills.
 - Must possess excellent verbal and written communication skills.
 - Knowledge of insurance plans, CPT, HCPCS, ICD-10, DSM V and ABN.
 - Knowledge of federal, state, local and intermediary specific billing requirements.
 - Skill in telephone and email etiquette and telephone systems.
 - Skill in using Microsoft Office and the ability to learn new software program that support project efforts.
 - Skill in active listening.
 - Knowledge of EHR as well as PM systems.
 - Knowledge of claims, appeal and complaints process for insurance payers.
 - Knowledge of Medical/Behavioral Health billing.
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Essential Job Functions

1. Excellent interpersonal skills required to communicate with direct staff and funding sources.
2. Working knowledge of federal, state, local and intermediary specific billing requirements to ensure appropriate authorizations are completed and/or notifies appropriate person of missing or incomplete billing requirements and follows up in a timely manner.
3. Responsible for reviewing and batching/processing of all completed/approved claims on a daily basis.
4. Print batches to enter data within the appropriate web portal and/or create claim in the correct format via HCFA/UB04.
5. Process all batches by printing/uploading by end of business day on a daily basis utilizing our Electronic Health System.
6. Utilize electronic health system to acquire all A/R data in order to properly priorities aging.
7. Acquire knowledge to properly use the electronic health system to create, monitor and report all information that may be a barrier to submitting a clean claim to all insurance carriers.

8. Report all barriers to billing lead on a weekly basis to ensure claims are submitted in a timely manner.
9. Process all rejected claims to proper insurance carriers with corrected information to ensure payment, when needed.
10. Submit Appeal with supported documentation to insurance carrier, when needed.
11. Work in collaboration with billing staff to assure accuracy and timeliness of claims reimbursement.
12. Mail out patient statements and perform follow up by communicating with patients to acquire payment, when needed.
13. Meet with Lead Billing Specialist once a month with all questions/concerns regarding responsibilities.
14. Maintain a positive relationship with claims department representatives.
15. Ability to verify benefits and eligibility of status by utilizing web portal access, and acquiring authorization when needed.
16. Perform all other related duties and responsibilities, as assigned.

Physical Requirements

- SEEING: Must be able to see well enough to read reports and use computer.
- HEARING: Must be able to hear well enough to communicate to clients, vendors and coworkers.
- MOBILITY: Must have mobility to move about the agency.
- LIFTING/PULLING/PUSHING: Must be able to lift up to 10 pounds.
- OTHER: Must be able to write, type and use technology.

Note: The statements herein are intended to describe the general nature and level of work being performed, but are not to be seen as a complete list of responsibilities, duties, and skills required of personnel so classified. Also, they do not establish a contract for employment and are subject to change at the discretion of Berks Counseling Center. Berks Counseling Center is an equal opportunity employer.

BILLING CLAIMS SPECIALIST – Signature / Date

LEAD BILLING SPECIALIST – Signature / Date

PRINTED NAME

PRINTED NAME