**Billing Specialist**

**PRINCIPAL DUTIES AND RESPONSIBILITIES:**

• Maintains patient demographic information and data collection systems.

• Verify insurance eligibility for therapy and day treatment health insurances for upcoming appointments by utilizing online websites or by contacting the carriers directly via phone

• Review patient deductibles, coinsurance and/or copays and enter into the billing system

• Coordinate with the front desk staff and call center regarding scheduling errors. Coordinates with RN regarding prior authorizations for therapy.

• Assist front end staff and call center staff in understanding carrier websites and verification of

eligibility.

• Enter insurance referrals as needed.

• Participates in development of organization procedures and update of forms and manuals.

• Answers questions from patients, clerical staff and insurance companies

• Submits medical claims daily through a variety of electronic clearing houses, manage accounts receivable tracking, and manage patient accounts and billing.

* Processes RA’s
* Bills Secondary Insurances
* Collects co-pays, deductibles, and private pay
* Submit weekly reports to designated administration staff

• Performs miscellaneous job-related duties as assigned.

• Maintains strictest confidentiality; adheres to all HIPAA guidelines/regulations.

• Assists in development and communication of SOP for key areas to improve accuracy and

understanding of processes.

**QUALIFICATIONS & SKILLS:**

• Minimum of 1 year of relevant experience and/or training, or equivalent combination of

education and experience.

• Strong knowledge of administrative and clerical procedures.

• Proficient in computers and relevant software applications and practice management

technology.

• Possession of strong problem solving skills and sound judgment.

• Ability to collaborate across departments and build effective relationships with internal and

external customers to achieve goals.

• Knowledge of customer service principles and practices.

• Ability to achieve team goals while demonstrating organizational values and utilizing resources

responsibly.

• Ability to be proactive and take initiative.

• Exhibit a high level of quality through attention to detail and monitoring of work.

• Possession of strong organizational skills.

• Excellent verbal and written communication, as well as exceptional interpersonal

communication skills

**PREFERRED EXPERIENCE:**

• Prior Insurance Verification experience in a medical office. Experience with DeTaso billing system a plus.

• Customer service.

**SUPERVISION EXERCISED**: • This position has no supervisory responsibilities.

**WORK ENVIRONMENT & PHYSICAL DEMANDS**:

• Work is performed in an office setting.

•Physical demands of position: sitting, standing, walking, typing, phone communication, face to

face conversation.

**GENERAL SIGN OFF:** The employee is expected to adhere to all company policies. This job

description is not designed to cover or contain a comprehensive listing of activities, duties or

responsibilities that are required of the employee.