

Fairbanks Billing Services, LLC.

Job Description

Job Title:	Biller Level 1
Occupational Code:	43-3021
Employee Status:	Regular Full Time
Employment Status:	At Will
Date Revised:	May 30, 2007
Reviewed By:	Katie Best, Manager

Job Summary:

Under direct supervision from Billing Coordinator, is expected to perform assigned duties accurately and with minimum supervision. The main responsibilities of this position are to process all printed claims along with needed documentation in a timely manner (1 to 2 days). Call on Outstanding Claims in aging bracket 31 to 60 days for all Clients. It is this positions responsibility to make sure that the first time the claim is sent to insurance that it was received and being processed, if it is not on file, re-file the claim, if information is needed request it. This position is not in the rotation to take patient phone calls, but provides backup if phones are busy. This position works closely with all staff within FBS.

Goal of this position is to get comfortable with the Misys Tiger system; learn how to use ScanFiles; learn what type of documentation goes with claims; become comfortable calling insurance companies for claim status and to gain the knowledge to become Biller Level 2.

Education Requirement:

- High School diploma required
- College education or trade school preferred

Qualifications and Experience:

- Computer literate, with keyboard skills
- Understanding of Explanation of Benefits Forms, claim forms and the insurance billing process
- Knowledge of third party payer reimbursement guidelines
- Working knowledge of managed care, commercial insurance, Medicare, Medicaid and Worker's Compensation
- Basic knowledge of CPT and ICD-9-CM coding
- The ability to discuss financial responsibilities and establishing payment plans when necessary
- Pleasant speaking voice and demeanor
- Strong written and verbal communication skills
- Basic knowledge of HIPAA guidelines

Job Responsibilities:

This position can overlap with Biller Level 2 or 3 depending on staffing and/or Billers abilities

- Deals with diverse group of external callers and visitors as well as internal contacts at all levels of the organization
- Processes all printed claims for mailing within 1 to 2 days
- Makes sure all printed claims that need attachments are mailed with attachments, ensures that continued claims are sent together and not separate
- Uses the Aged Outstanding Claims report to follow up with all third party insurance carriers on unpaid claims aged 31-60 days
- Utilizes Aged Accounts Receivable report for claims aged 31-60 days to identify accounts that may have been missed on the Aged Outstanding Claims report to ensure they are in processing for payment as well
- Learns and maintains working knowledge of insurance follow-up protocols
- Corrects billing errors and resubmits claims and/or generates letters to patients when needed
- Resubmit insurance claims when needed either electronically or by paper
- Establishes payment plan with patients when necessary
- Provide back up to Office Assistant in regards to helping register patients when needed
- Corrects patient insurance information and order if and when needed
- Works closely with Report Analysts Clerk, with claims not being on file through FastServices for missing and/or needed information by insurance carriers
- Prints and Reviews all Error Reports for all Clients, completing corrections weekly
- Any updates or Broadcasts that are received through FastServices need to be given to the Office Manager
- Corrects Problem Claims as noted in the Error Reports and resubmits for payment, always noting on patient account under FastNotes what was done to correct the error
- Watching for repeated Errors during claim submission, so that pattern can be found and solutions can be implemented to eliminate potential problems
- Makes necessary adjustment to patients accounts ie: write-off finance charges
- Respond to written and telephone inquiries from patients or clients
- Helps with Office Assistant with Patient Registration when needed
- Covers Reception desk when needed
- Performs other duties as assigned by Management

Employee Responsibilities: (are to include but not limited to the following:)

- Demonstrates good judgment
- Maintains the strictest confidentiality of all information received at FBS
- Plans and utilizes time wisely
- Reports to work on time each day, after lunch break, and not leaving early
- Always provides proper notification and advance notice of absence, attendance and reliability are a must
- Conducts one's self in a professional manner

- Ability to work closely in a team to keep things moving smoothly
- Behavior should be positive towards supervisor(s), co-workers, patients, and clients at all times and reflect a favorable outlook on FBS.
- Attend regular staff meetings
- Attend continuing education classes
- Commercial appearances from time to time

Physical Demands:

Work may require sitting for long periods of time, and also stooping, bending and stretching for files and supplies. Employee will occasionally be asked to lift files or paper weighting up to 30 pounds. Position requires manual dexterity sufficient to operate a keyboard, computer, telephone, copier, fax, and other office equipment as necessary. Employee must have normal range of hearing and eyesight to record, prepare, and communicate appropriately. Position also requires viewing computer screens and typing for long periods of time, and working in an environment which can be very stressful.

Working Conditions:

Professional office environment. Possible evening or weekend work.