



JOB DESCRIPTION

JOB TITLE:	Medical Billing Manager
EXEMPT:	Yes
REPORTS TO:	Practice Administrator

JOB SUMMARY: The Medical Billing Manager is a full-time position responsible for overseeing the billing coding staff and making day-to-day decisions; responsible for understanding and coding all procedures within regulatory mandates; assists with following up on insurance claims, and submit appeals as needed. This position is responsible for directing and coordinating the overall functions of the billing and coding office to ensure maximization of cash flow while improving patient, physician, and other customer relations. The Medical Billing Manager position requires the ability to produce and present detailed billing activity reports.

ESSENTIAL DUTIES AND RESPONSIBILITIES include the following as well as other duties and responsibilities that may be assigned:

- Oversees the operations of the billing department, encompassing medical coding, charge entry, claims submissions, payment posting, accounts receivable follow-up, and reimbursement management
- Serves as the practice expert and go to person for all coding and billing processes
- Plans and directs patient insurance documentation, workload coding, billing and collections, and data processing to ensure accurate billing and efficient account collection
- Analyze billing and claims for accuracy and completeness; submit claims to proper insurance entities and follow up on any issues
- Follow up on claims using various systems, i.e. practice management and clearinghouse
- Maintains contacts with other departments to obtain and analyze additional patient information to document and process billings
- Prepares and analyzes accounts receivable reports, and weekly and monthly financial reports in concert with the Practice Administrator and Business Manager. Collects and compiles accurate statistical reports
- Audits current procedures to monitor and improve efficiency of billing and collections operations
- Ensures that the activities of the billing operations are conducted in a manner that is consistent with overall department protocol, and are in compliance with Federal, State, and payer regulations, guidelines, and requirements
- Participates in the development and implementation of operating policies and procedures
- Reviews and interprets operational data to assess need for procedural revisions and enhancements; participates in the design and implementation of specific systems to enhance revenue and operating efficiency
- Analyzes trends impacting charges, coding, collection, and accounts receivable and take appropriate action to realign staff and revise policies and procedures
- Keep up to date with carrier rule changes and distribute the information within the practice
- Performs physician credentialing actions

- Understands and remains updated with current coding and billing regulations and compliance requirements
- Maintains library of information/tools related to documentation guidelines and coding
- Supervises billing office personnel, which includes work allocation, training, and being available for staff needs; motivates employees to achieve peak productivity and performance
- Provides, oversees, and/or coordinates the provision of training for new and existing billing staff on applicable operating policies, protocols, systems and procedures, standards, and techniques
- Coordinates team member time off in a manner that does not negatively impact necessary daily functions.
- Other duties as assigned by the Practice Administrator

GENERAL RESPONSIBILITIES:

- Performs all duties and responsibilities in an efficient, team-oriented manner.
- Accountable for being knowledgeable and understanding of all aspects of the billing and coding staff duties to include:
 - Entering patient demographics and insurance information
 - Verifying patient eligibility and benefits for upfront collection on unmet deductibles and co-insurance
 - Responsible for reviewing operative reports within three business days of procedure/surgery
 - Enter charges accurately according to insurance payors/contracts
 - Submitting clean claims by attaching necessary documentation for payment
 - Follow-up on electronic claims and paper claims
 - Posting insurance payments to patient accounts
 - Submit all secondary claims when necessary
 - Refund money owed to patient or insurances
- Accountable for reviewing daily schedules for estimates, authorizations and 3rd party billing.
- Conducts self in a manner that reflects a positive representation of the company, and encourages others to do the same.
- Observes strict patient confidentiality in dealing with patients.

QUALIFICATION REQUIREMENTS:

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. Requirements listed below are representative of the knowledge, skill and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

EDUCATION and/or EXPERIENCE:

- Associates degree, preferably in business administration or related field; Bachelor degree preferred
- Medical coding certification
- Minimum of three years medical insurance/healthcare billing and collections experience in a medical practice or health system, with a deep understanding of medical billing rules and regulations
- Two years supervisory or management experience preferred
- A combination of education and experience will be considered

LANGUAGE SKILLS:

- Ability to read, analyze, and interpret general business periodicals, professional journals, accounting procedures on both cash and accrual basis and governmental regulations. Ability to write reports, business correspondence and procedures. Ability to effectively present information and respond to questions from government entities, employees, managers, physicians and the general public
- Ability to communicate effectively in writing, over the telephone, and in person with physicians, patients, insurers, colleagues and staff

MATHEMATICAL SKILLS:

- Knowledge of business management and basic accounting principles to direct the billing and coding office
- Ability to work with generally accepted accounting procedures, balance sheets, profit/loss statements, and mathematical concepts such as probability and statistical inference. Ability to apply concepts such as fractions, percentages, ratios and proportions to practical situations

REASONING ABILITY:

- Ability to apply common sense understanding to carry out detailed but uninvolved written or oral instructions. Ability to deal with problems involving a few concrete variables in standardized situations
- Ability to recognize, evaluate, solve problems, and correct errors, and to develop processes that eliminate redundancy
- Ability to work under minimum supervision and demonstrate strong initiative

OTHER SKILLS AND ABILITIES:

- Must be detail oriented, conscientious and able to follow through
- Ability to supervise and train employees, to include organizing, prioritizing and scheduling work assignments to meet practice timelines
- Ability to deal in an organized manner with problems involving multiple variables within the scope of the position
- Ability to make independent decisions when circumstances warrant; make prompt and accurate judgments regarding AR, billing and other office duties
- Ability to conceptualize work flow, develop plans, and implement appropriate actions
- Skill in establishing and maintaining effective working relationships with other employees, patients, organizations, and the public
- Skill in developing, implementing, and administering work processes
- Tolerant of frequent interruptions and distractions from patients, physicians and staff
- Proficient in Microsoft Office, including Outlook, Word, and Excel

PHYSICAL DEMANDS: physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- While performing the duties of this job, the employee is regularly required to talk or hear. Employee is regularly required to sit for extended periods of time.
- Employee is regularly required to use hands and fingers for typing and filing. The employee is frequently required to reach with hands and arms and occasionally required to stand, walk, stoop, kneel, crouch or crawl.
- Employee may lift up to 25 pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision, depth perception, and the ability to adjust focus

WORK ENVIRONMENT: work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- While performing the duties of this job, the employee sometimes works near moving mechanical parts and is occasionally exposed to the risk of electric shock
- Noise level in the work environment is moderate

Signature of Approval

Practice Administrator
Monterey Spine & Joint

ACKNOWLEDGEMENT & RECEIPT

I acknowledge that I have received, read, and sought clarification of any questions I have about the content of this job description.

Employee Signature

Date

Updated 9/11/17