



Community Health Centers of Greater Dayton

Billing Specialist

The billing specialist is responsible for billing and collection of insurance and self pay accounts receivable, reconciliation of payments received with amounts posted to the billing system, completes credentialing documents, and works with involved parties to resolve identified billing problems or issues.

Principal Duties and Responsibilities:

- Review patient accounts for accuracy, make adjustments as needed, and send monthly statements to patients.
- Post payments received and reconcile system postings to lockbox total.
- Record NSF checks returned by bank and notify patient of adjusted balance due.
- Review credit balance report and prepare refund check requests for overpayments.
- Receive, respond and document all incoming account inquiries, both telephone and correspondence, related to billing issues.
- Completes charge entry on a daily basis and tracks open encounters.
- Reviews encounter forms for errors and provide education as appropriate to minimize error reoccurrence and support maximum reimbursement.
- Review overall outstanding A/R to identify problems with various insurances; prepare A/R updates and reports for management on a monthly basis.
- Review EOB's for reasons not paid, and distribute this information as necessary to initiate transaction posting or collection of corrected patient information.
- Perform all routine and special follow-up on all assigned accounts using telephone and correspondence to affect collection of patient account balances.
- Negotiate payment terms and establish agreed-upon payment plans for overdue account balances; monitor payment compliance with terms of established plans.
- Evaluate uncollectible accounts and make recommendations concerning account write-offs and/or placement with an outside collection agency.
- Complete process for removing account balances based on the approval granted.
- Document activities on accounts, including corrections, collection activities, etc.
- Initiate account adjustments to correct account balances and/or comply with contractual and sliding fee scale requirements.
- Provide billing education and materials to staff on an as-needed basis.
- Assist with provider credentialing efforts.
- Responsible for other duties as assigned.

Qualifications

1. High School diploma or equivalent certificate.
2. 2-5 years of medical billing experience.
3. Proficient in CPT and ICD-9 coding, familiar with Medicare and Medicaid guidelines.
4. Proficient with computers and Windows based software programs.
5. May have to travel between centers.

To apply, please send your resume, cover letter and salary requirements to: sherylf@chcgd.org, or fax to (937) 586-9736. CHCGD is an equal opportunity employer and embraces a diverse workforce. Please visit our website at www.communityhealthdayton.org.