

Medical Coding and Billing

Mentor, OH

Summary

Axelix Health Consulting, Inc. (AHCI), is a private medical specialty practice based in Mentor, OH serving Lake, Geauga, and Ashtabula counties. AHCI was incorporated in 2010 and has experienced exponential growth. The practice consists of two healthcare providers; one physician and a nurse practitioner. AHCI is a full electronic medical practice. The healthcare providers see patients in various hospital systems, nursing homes, and two wound care centers.

The open position is a full-time Medical Coding and Billing position that entails the following; Extensive knowledge of ICD 10 diagnosis codes, CPT codes, use of electronic medical record, computer proficiency, ability to interpret and code a physicians consult note, interpersonal skills etc. Coding and billing; inpatient professional claims, outpatient facility, nursing homes and wound care claims.

The practice offers comprehensive compensation based on education, knowledge, experience and skill set. Benefits offered includes; medical, dental and vision insurance, paid personal time off, paid holidays, annual bonuses based on performance and other factors, pay increase based on performance and other factors, professional development reimbursement just to name a few.

Responsibilities

- Enter accurate patient demographic data into the EMR system
- Verify patient insurance eligibility; Medicare, Medicaid, commercial insurances, VA, BWC etc
- Create patient claim from scratch using the EMR system
- Review physicians consult or progress note; extract the appropriate ICD10 codes using the correct coding sequence, and code patients claim with the appropriate ICD10 codes
- Apply the correct CPT code to patient claim using the EMR system
- Communicate effectively with physician or nurse practitioner regarding documentation requirements and/or ICD10 and CPT codes clarification
- Review claim for coding edits, ensure patients demographic and insurance claim is accurate prior to submitting a clean claim to the clearinghouse
- Generate C9's for BWC claims as needed, follow BWC procedure for claim submission
- Veterans Administration claim creation and submission
- Research claim denials and rejections, resubmit corrected claim to payer
- Appeal rejected claims as required by the payer
- Work insurance aging report; follow-up with payers on outstanding, appealed and or corrected claims of which payment is yet to be received

- Understand insurance products and billing requirements to effectively resolve claim denials and rejections.
- Ability to communicate with hospital (Utilization Review Department, Medical Records etc), Nursing Homes, Wound Care Centers regarding patient or claim inquiry i.e prior authorizations, medical records etc
- Ability to navigate various payer online portals to obtain necessary information; verify patient eligibility, claim status, claim correction, appeals etc.
- Post manual insurance and patients payment as needed
- Answer patient questions regarding statements received, account inquiry etc. (deductibles, coinsurance, co-payments etc.)
- Perform and assist with other physician front office responsibility as needed; i.e, answering phones, scheduling patient appointment etc
- Maintain HIPPA policy at all times

Skillset Requirement / Qualifications

- ICD10 (A must)
- CPT Codes (A must)
- Medical coding and billing experience (minimum of 1-2yrs experience)
- Electronic Medical Record preferred (I.e Eclinicalworks, Epic, Cerner, Soarian etc)
- Professionalism
- Strong work ethic
- Computer proficiency (A Must)
- Ability to multitask
- Ability to work independently
- Great personality
- Critical thinker
- Problem Solving
- Excellent team player
- Attention to detail
- Responsible and Reliable
- Organized

Educational Requirement

- Minimum of a High school diploma or equivalent required
- Associate Degree in Medical Coding/Billing or equivalent field (*preferred*)
- Certificate in Coding (*preferred*)
- Certificate in Billing or equivalent (*preferred*)

Experience Requirement

- Minimum two years of coding experience
- Minimum two years of billing experience

DO NOT apply if you do not meet the requirements stated above; education, training, knowledge and experience in medical coding and medical billing. Northeast Ohio candidates ONLY.

Job Type: Full-time

Salary: \$15.00 to \$21.00 /hour

How to Apply / For more Information

Qualified and interested candidate can contact: Abbey - *via Email:* mogunlesi@axelixhc.com