

# Revenue Cycle Manager

## Peninsula Community Health Services (PCHS)

Job Location: Bremerton, WA

Full-time, Onsite



Join Peninsula Community Health Services (PCHS) in making a difference in people's lives and the surrounding community every day. PCHS exemplifies a culture of community service that is Patient Driven, Empathetic, and Staff Empowered. We are, a Federally Qualified Health Center supporting access to healthcare services (medical, dental, pharmacy, behavioral health) for Kitsap County, Mason County, and Rural Pierce County.

### **JOB SUMMARY**

The Revenue Cycle Manager is responsible for directing, organizing, and managing all components of revenue cycle.

### **ESSENTIAL DUTIES AND RESPONSIBILITIES**

- Direct and oversee all functions of coding, claim management, billing, payment, collections, and coordinates credentialing processes
- Establish revenue cycle benchmarks, standard of practices with policies and procedures consistent with organizational goals, infrastructure, state and federal requirements
- Oversee all staffing functions and provide leadership with training
- Support the Clinic Operations Director to ensure the quality of the insurance, demographics, and eligibility data entered, as well as, monitoring all time-of-service collections by providing revenue cycle reporting and training materials
- Work with Clinic Operations Director to ensure best practices related to patient access and the revenue cycle
- Establish and maintain revenue cycle duties across the organization that include prioritization of work (e.g., ensure there is a system of prioritization for claims processing and accounts receivables management depending on the volume, revenue, payer mix, etc.)
- Communicate changes and updates to the Chief Financial Officer in a timely fashion
- Ensure an appropriate education and feedback process is in place to provide regular education to FQHC providers on revenue cycle
- Responsible for overseeing posting charges, adjustments, and payments to patient accounts and assuring accuracy and timeliness
- Keep abreast of Medicare, Medicaid, and other third-party payer rules and regulations with respect to billing and other matters and communicate this information to the physicians and appropriate personnel to help ensure increased cash flow and profitability on an ongoing basis
- Work closely and partner with Controller to prepare month-end and year-end financial close
- Gather productivity, quality and financial data from EHR and other sources and use to provide meaningful management information to the CFO, providers and other appropriate personnel on a regular basis to develop strategic plans for all functions related to the revenue cycle
- Assist the CFO with compliance issues specific to billing services
- Develop and implement the Finance Department and other revenue cycle policies and procedures, including all aspects of federal and state mandated compliance
- Implement new processes and protocols as these become necessary and assigned
- Conduct reimbursement monitoring for individual insurance carriers
- Familiar with using electronic health record (Ex. Athena and NextGen)
- Other duties as assigned

## **SUPERVISORY RESPONSIBILITIES**

This position directly supervises the Billing Coordinator, Billing Specialists, and Certified Coders.

## **QUALIFICATIONS**

- Two to five years of customer service experience (required)
- One to two years of supervisory experience in a healthcare setting (preferred)
- Two (2) years of experience working at a FQHC (preferred)
- CPC Certification within 120 days of hire (required)
- Active driver's license (required)

## **For More Information/ To Apply:**

<https://www.vscyberhosting3.com/pchs/Careers.aspx?req=2022-90-14-003&type=JOBDESCR>

Candidates may contact HR Director, Huda Swelam, at hswelam@pchsweb.org.