

Revenue Cycle Manager PFS

Valley View Hospital

Job Location: Glenwood Springs, CO

Position Salary Range: \$76,460.80 - \$105,000/year

Full Time

GENERAL OBJECTIVES:

- Manage the Hospital's Revenue Cycle – Billing and Insurance follow-up to ensure organizational KPI's are met and exceeded
- Continuously improve processes, services and systems
- Hire and develop appropriate staff to help meet organizational goals

PRIMARY DUTIES AND RESPONSIBILITIES:

- Implements efficient and effective operational policies, processes and performance monitoring across assigned functions of the Patient Financial Services Department
- Ensures PFS staff across assigned functions complies with established policies, processes and quality assurance programs
- Performance monitoring: KPI that the department is expected to meet and exceed
- Establishes performance improvement initiatives and coordinates accordingly with the department leadership to develop and implement appropriate action plans
- Measures and reports ongoing financial and operation performance of the PFS Department. Recognizes areas of excellences and oversee development of staff.
- Interprets and communicates key revenue cycle performance indicators; reports key findings to the appropriate leadership.
- Drives accountability across PFS staff based on responsibilities of outlined job descriptions
- Coordinates with other organizational areas to ensure timely processing of accounts receivables
- Identifies and resolves problems in PFS processes, and when appropriate, initiates changes to prevent future problems
- Works with the Information Systems Department to escalate and resolve relevant issues to maintain day-to-day operations. As necessary, participates in review of selection of relevant technology enablers/tools to support PFS and other revenue cycle functions.
- Oversees the handling of "special handling" requests, complaints or billing inquiries regarding patient accounts to ensure correct and satisfactory resolution.
- Utilizes knowledge of contractual constraints and federal and state regulations pertaining to billing and monitor impact of organizational receivables.
- Works to ensure full utilization of technology and processes to create an efficient and effective department.
- Attends periodic meetings with Director and Contract Management department to discuss managed care contract discrepancies and assist in developing an action plan for correction.
- Manages activities required to initiate legal proceedings with the Director and Managed care contractors.
- Oversees vendor management relations with the Systems Manager to monitor vendor performance.
- Tracks and analyzes major federal and state reimbursement changes, which would affect operations follow-up and revenue collections.
- Performs related responsibilities as required or directed.

REQUIREMENTS:

- Bachelor's degree preferred in Business, Health Administration or related degree; equivalent work experience may substitute degree requirement
- Registration in HFMA and obtain CHFP certification within one year of employment
- Leadership experience: 3-5 years
- Revenue Cycle or related PFS experience (Hospital accounts receivable and business office management preferred): 5-7 years

FOR MORE INFORMATION/TO APPLY:

<https://recruiting.ultipro.com/VAL1004VVH/JobBoard/7a5186be-89cf-4eb5-b2e5-869118e3e2f0/OpportunityDetail?opportunityId=caebaec3-f6ac-4472-8f98-1e065c67260a>