

Medical Billing Specialist

Marathon Health

Job Location: US-Remote

Full Time/Days

JOB SUMMARY:

As a Medical Billing Specialist, you're responsible for partnering with Revenue Cycle Analyst to support timely and clean processing of medical claims and rebilling within Athena. This includes following set billing processes and being able to identify problematic claims trends and elevate to Revenue Cycle Analyst for further evaluation.

RESPONSIBILITIES:

- Correct professional claims and rebill them in Athena.
- Follow billing processes and procedures for commercial payers.
- Confirm correct insurance package is selected in the quickview.
- Review and resolve denials in Athena and report trends to manager.
- Identify problematic claim processing trends and elevate to manager.
- Monitor assigned "missing slips" (incomplete claims) and identify trends for different departments or providers and report to revenue cycle manager.
- Evaluate unposted cash/remits (unpostables) in Athena.

QUALIFICATIONS:

- Minimum of Three (3) years' previous experience as a medical biller including charge posting and denial management including fee for service models.
- Minimum 2 years of experience with Athena required
- Able to analyze problems and report trends related to denials, missing slips, and payer trends.
- Work with personal information and maintain patient confidentiality.
- Required: 2 years of Athena experience
- Knowledge of ICD-10 and CPT codes.
- Ability to maintain a high level of integrity and confidentiality of medical information.
- Be able to multitask, prioritize, and manage time efficiently.
- Self-motivated and self-directed with excellent verbal and written communication skills.
- Results-oriented
- Eagerness to learn and adapt quickly in a changing environment
- Attention to detail

FOR MORE INFORMATION/TO APPLY:

<https://careers-marathon-health.icims.com/jobs/4626/medical-billing-specialist/job>