Billing Manager

Central Ozarks Medical Center

Job Location: Richland, MO

Full Time/Days

JOB SUMMARY:

- Seek to understand and meet the needs of the customer through respectful, courteous and caring interactions with patients, families and other health professionals.
- Maintain strong and positive relationships with key clinic contacts including external vendors, insurance plan representatives and peer contacts in other community clinics.
- Know, understand and adheres to organizational policy related to the patient's rights for confidential care.
- Maintain strict confidentiality standards regarding patient financial information and promote and enforce strict confidentiality standards for billing department staff.
- Actively participate and work positively, flexibly and cooperatively in a team effort to accomplish the goals of the organization.
- Demonstrate effective, culturally sensitive communication skills and effectively communicate verbally and in writing with a variety of people.
- Recruit, train, and supervise business office staff in comprehensive operations of the medical billing and collections function.
- Evaluate staff performance and provide appropriate feedback and training as required.
- Oversee billing functions including correct coding, charge entry, claims processing and collections.
- Establish efficient processes for multi-site/program claims processing; work collaboratively with department managers, physicians and other staff to establish new/changing programs or identify and resolve billing related issues.
- Manage technical operations of billing system, including database maintenance, generation of reports, filing/resolution of claims, issuance of patient statements, and processing of payments.
- Assist in developing operating policies and procedures for the department in conjunction with the Chief Financial Officer; develop and execute an organization-wide accounts receivable management plan.
- Establish goals with measurable objectives for timely accurate filing of claims according to payer standards and reimbursement regulations.
- Develop and enforce credit and collection policies consistent with program and grant requirements; maintain system on ongoing review of open personal accounts receivable that minimizes bad debt and promotes use of the sliding fee program for eligible patients.
- Analyze and report trends impacting accounts receivable and take appropriate action to address issues.
- Keep abreast of current billing regulations and compliance requirements.
- Participate in the development and monitoring of the annual department budget.
- Establish and maintain effective working relationships with key health plan/insurance contacts and the billing system vendor/centralized support staff.
- Conduct regular and ongoing coding education, auditing and training; participate in/lead initiatives to improve billing and collection processes.

MINIMUM REQUIREMENTS:

- Minimum of three to five years in business office or billing systems in a healthcare setting.
- Minimum of one year of supervisory experience.
- Ability to handle confidential material, in compliance with HIPAA Legislation.
- Skill in exercising initiative, judgment, discretion, and decision-making.
- Ability to operate a computer keyboard, copy machine and other office equipment with moderate speed and high accuracy.
- Strong written and verbal skills in person and telephone etiquette in problem-solving situations.

- Eyesight correctable to read numbers, policies and computer printouts or terminal. Hearing correctable to within normal range for telephone use and patient interactions.
- Working knowledge of revenue cycle areas of patient registration, charge capture, billing, accounts receivable and cash management.
- Knowledge of government and third-party insurance practices, and business office operations.
- Knowledge and understanding of state and federal laws, regulations and guidelines pertaining to medical billing.
- Knowledge of collections, accounts receivable and financial report technology and health care billing systems requirements.
- Ability to communicate effectively, verbally and in writing with patients, vendors, insurance payers, other business contacts, and other employees.
- Ability to fully utilize EHR/practice management system billing software and effectively utilize technical support.

EDUCATION/LICENSES/CERTIFICATIONS:

- Certified Coder required.
- Minimum of one year of supervisory experience. Experience using eClinicalWorks software and degree preferred.

FOR MORE INFORMATION/TO APPLY:

https://centralozarks.bamboohr.com/careers/297