



## JOB DESCRIPTION

**TITLE:** Practice PFS Biller  
**DEPARTMENT:** Practice PFS  
**REPORTS TO:** Director of Practice PFS  
**FLSA:** Non-Exempt

### **SUMMARY OF JOB:**

Prepare bills timely for payments for services performed, and resolve problems from patients and insurance companies.

### **RESPONSIBILITIES:**

Colorado West Healthcare System expects job performance to be consistent with its mission and believes that each Employee contributes to improve performance by continuously searching for ways to increase efficiencies and enhance fiscal performance and viability.

### **ESSENTIAL DUTIES AND RESPONSIBILITIES:**

(The following statements are illustrative of the essential functions of the job and do not include other non-essential or marginal duties that may be required. Community Hospital reserves the right to modify or change the duties or essential functions of this job at any time. All responsibilities may not be performed by all incumbents.)

1. Follows up on all assigned accounts within the billing systems in accordance with pre-established goals.
  - a. Initiates proactive measures that result in account resolution.
  - b. Researches and analyzes accounts and payments; reverses balances to credit or debit if charges were improperly billed or if payments were incorrect.
  - c. Ensures that all conditions for payment receipt have been satisfied, which includes, but is not limited to, accurate charges and financial class, authorization/certification/information, claims address, ICD-10 and CPT-4 coding, patient insurance eligibility, patient benefit coverage, and patient responsibility
  - d. Writes appropriate notes in system for every account, including any action taken.
  - e. Meets daily and weekly productivity standards.
2. Responds timely and accurately to all incoming correspondence and inquiries from payers, patients, and other appropriate parties.
  - a. Initiates contact with patient, as necessary.
  - b. Initiates recommendations and action plans for resolving accounts.
  - c. Evaluates accounts to determine any write-offs or corrections required, including duplicate charges.
  - d. Handles in a professional and confidential manner all correspondence, documentation, and files.

- e. Attempts to locate patient/guarantor through direct contact, letter, or other means.
  - f. Receives and answers inquiries or complaints concerning self-pay accounts; gathers information for timely resolution of issues.
  - g. Speaks with patient/guarantor to find third-party sponsorship, settlement, or to begin charity process.
  - h. Prepares correspondence to patient/guarantor, as necessary.
  - i. Establishes payment arrangements according to preset guidelines.
  - j. Elevates issues, as appropriate, to the supervisor.
3. Submits claims for secondary payment. Prepares refund requests for any monies due to patient or insurance company.
  4. Reviews various reports to identify denials and edits; corrects claims, suggests action plans to eliminate these denials/edits in the future, and determines appropriateness for appeal. Prepares write-offs requests for denied claims which cannot be appealed. Investigates the possibility of Medicaid linkage.

#### **QUALIFICATIONS**

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

#### **EDUCATION and/or EXPERIENCE**

High school diploma or equivalent. One to three years related experience and/or training required.

#### **SPECIAL SKILLS**

Excellent computer skills, filing and typing proficiency. Familiarity with CPT-4 and ICD-10 coding.

#### **LANGUAGE SKILLS**

Must be able to read and write English. Ability to read and interpret documents such as safety rules, operating and maintenance instructions, and procedure manuals. Ability to write routine reports and correspondence. Ability to effectively present information in one-on-one and small group situations to supervisors, patients, patient's family and other employees of organization. Able to work in a team-oriented environment.

#### **MATHEMATICAL SKILLS**

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent.

#### **REASONING ABILITY**

Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

#### **COMPUTER SKILLS**

To perform this job successfully, an individual should have general computer literacy skills and knowledge of Microsoft Office applications.

