

EYE-Q Vision Care, a large successful Central California Ophthalmology practice seeks a full-time **BILLING SPECIALIST II** for a unique and rewarding position within the Business Services Department.

ABOUT THE POSITION:

Maintain billing, follow-up, and collection activity including letters, telephone and personal contact. Research non-payment notifications, resubmit claims to carriers when necessary, and patient billing. Advise, inform, and assist the patient/guarantor/family in regards to financial policy. Perform other various responsibilities as assigned.

QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. Must have strong written and verbal skills, ability to deal effectively with all levels of management and the public. Prior experience with online billing system desirable. Knowledge of third party payment procedures, managed care contracts, and government programs strongly preferred. Good communication skills and ability to problem solve.

DUTIES AND RESPONSIBILITIES (Other duties may be assigned)

- Follows facility and departmental policies and procedures.
- Demonstrates cooperation with coworkers, patients, and, staff.
- Processes patient statements in a timely manner.
- Handles all payer types as assigned by supervisor.
- Edits billing in Practice Management System to ensure accuracy of diagnosis and procedure code(s) prior to claims being electronically submitted. Utilizes electronic billing system effectively, and completes the Electronic Claims Log as directed.
- Maintains system(s) to ensure prompt follow-up (i.e. "tickler" function in Practice Management System).
- Begin follow-up on accounts aged over 60 days.
- Reviews billing forms to ensure accuracy that all balances, diagnoses, and procedure codes are correct per payer guidelines prior to mailing hard-copy claims to carriers.
- Places telephone calls to payors for claim status and resolution when necessary.
- Makes financial arrangements with patients/guarantors.
- Completes appeals and follow-up for claims paid at a lesser benefit than contracted.
- Resolves incoming correspondence within 72 hours of receipt.
- Documents every contact made to or by Third Party payor, patient, family, or employee.
- Advises Manager of problem accounts and trends at time of encounter.
- Monitors payments made on patient accounts. Notes payment discrepancies and takes action for solution.

- Identifies and reports inaccurate registration data to Manager to ensure appropriate reporting requirements.
- Prepares Bad Debt and other non-contractual adjustments for Manager's approval.
- Performs audits of accounts, evaluates collectability, and processes refunds as necessary.
- Requests medical records when necessary.
- Adheres to HIPAA regulations regarding patient privacy and confidentiality.

EDUCATION and/or EXPERIENCE

High school diploma or general education degree (GED); and/or technical school training; or equivalent combination of education and experience. Two years prior collections experience in medical field required.

TO APPLY:

Prospective candidates should email their resume to jobline@eyeqvc.com or fax to the HR Department at (559) 256-8504. Visit our website at www.eyeqvc.com. We offer a competitive salary & benefits package & many other perks.

We are proud to be an EEO employer.