

TOIYABE INDIAN HEALTH PROJECT, INC.

POSITION DESCRIPTION

POSITION: Insurance Specialist I

SALARY RANGE: TSS 5

WORK STATION: Bishop

SUPERVISOR: Billing Supervisor

NON-EXEMPT

POSITION SUMMARY: Under the supervision of the Billing Supervisor, the Insurance Specialist I will efficiently and effectively complete, process, and correct billing claims of all payor codes while working cooperatively with staff and insurance companies.

QUALIFICATIONS:

1. High school diploma or equivalent.
2. One year of medical insurance experience to include knowledge of CPT and ICD-10 codes preferred.
3. Experience in progressively responsible clerical work demonstrating arithmetic aptitude and ability.
4. Demonstrated ability for accuracy and attention to detail; the ability to apply established procedures for recording and compiling data, and/or clerical work of any kind that demonstrates the ability to perform to a satisfactory level.
5. Demonstrated ability to work under pressure and handle multiple functions/tasks at a time.
6. Ability to work cooperatively with the staff, patients, and insurance companies.
7. Ability to utilize a computer, research information needed to complete tasks, and complete assignments with accuracy and timeliness.
8. Must have a valid California driver's license and be insurable with company insurance.
9. CPR certified or certified within three months of hire.
10. Must be sensitive and possess an awareness and keen appreciation of Indian traditions, customs, and socioeconomic needs of the Indian community.
11. American Indian preference in accordance with Indian Preference Act (Title 25, U.S. Code, § 472 & 473).

DUTIES & RESPONSIBILITIES:

1. Submit claims for third-party, Medicare and Medi-Cal crossover insurance in a timely manner in order to maximum reimbursement and meet demand; provide timely follow up with insurance companies.
2. Prepare statistical reports as requested by the Billing Supervisor and/or Fiscal Officer.

3. Maintain third party, Medicare and Medi-Cal crossover insurance records for authorization/payment.
4. Keep current on third party, Medicare and general insurance procedures.
5. Research various insurance challenges, by identifying contacts for input.
6. Work independently and complete assignments to the point of final approval.
7. Post non-cash payments to patient accounts and instructs relevant staff on all aspects of non-cash posting.
8. Assist as backup cashier on an as-needed basis.
9. Perform electronic Clearinghouse upload/Electronic billing.
10. Protect and safeguard patient confidentiality in accordance with HIPPA privacy and security guidelines.
11. Other duties assigned by the Billing Supervisor and/or Fiscal Officer.

Job Description Reviewed:

Employee _____ **Date** _____

Supervisor _____ **Date** _____