

FLORIDA HEART ASSOCIATE, PL

JOB POSTING

Accounts Receivable Specialist

REPORTS TO: Supervisor – Accounts Receivable

GENERAL DUTIES: Review aged accounts for anomaly; work with insurance company reps and co-workers to resolve open accounts and ensure a positive cash flow; prepare appeals and respond to patient inquiries. Initiates patient contact to collect past due balances via cycle statements, letters, and telephone. Establishes monthly payment plans with patients.

DUTIES INCLUDE, BUT NOT LIMITED TO:

- Review EOB's for denials/rejections/anomalies in payment within 48 hours of receipt.
- Review medical insurance claims for resolution and payment
- Research, compile and response to documentation requests from insurance carriers in a timely basis finding resolution to open account balances.
- Systematically work accounts receivable to improve and reduce A/R days.
- Perform various collection actions including contacting insurance companies and/or patient by phone, correcting and resubmitting claims
- Reviewing claims rejections/denial submit appeals for unpaid claims
- Prepare appeals when appropriate and file to insurance timely
- Work with insurance company reps to get claims resolved
- Maintains strictest confidentiality; adheres to all HIPAA guidelines/regulations
- Perform other duties as assigned by supervising manager.

PERFORMANCE REQUIREMENTS:

- Ability to interpret rules and regulations set by Medicare, Medicaid and Commercial payers
- Familiarity with insurance companies processes and nuances in regard to claim adjudication
- Knowledge of insurance billing and reimbursement, working knowledge of medical terminology and CPT codes, ICD-9/ICD-10
- Previous denials management experience preferred
- In-depth understanding of explanation of benefits (EOBs)
- Working knowledge of computerized medical management systems and/or web based programs
- Strong interpersonal and communication skills including verbal and written communication
- Extremely organized and detail oriented with the ability to work on multiple competing priorities
- Ability to work within a team setting and independently
- Excellent communication skills with internal and external customers
- Computer literate
- Knowledge of business office procedures

EDUCATION:

- High school diploma or equivalent

EXPERIENCE:

- **Three years of experience with medical insurance benefits**

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