



Our mission at *Apicha Community Health Center* is to improve the health of our community and to increase access to comprehensive primary care, preventive health services, mental health, and supportive services. We are committed to excellence and to providing culturally competent services that enhance the quality of life. We advocate for and provide a welcoming environment for underserved and vulnerable people, especially Asians and Pacific Islanders, the LGBT Community and individuals living with and affected by HIV/AIDS.

Title: Revenue Cycle Associate

Reports to: Director of Revenue Cycle and Patient Accounts

FLSA Status: Non-Exempt

Position Summary: Under the supervision of the Revenue Cycle and Patient Account Director, the **Revenue Cycle Associate** is responsible to ensure and reconcile billing encounters - claim and statement processing, corrective coding, payment posting, accounts receivable/denial follow-up.

Duties and Responsibilities:

- Prepare, review, transmit 827P/837I and process primary and secondary claims for Institutional (UB04) & Professional (HCFA) billing as well as printing paper claims for timely submission.
- Adjusting encounters and correct patient statements according to our Sliding Scale policy.
- Monitor, research and resolve unpaid, rejected and denied claims
- Initiate and answer correspondence for claims resolution with insurance carriers.
- Import and Export EDI / ERA files from multiple sources and verify all payments posted and adjustments have been applied according to policy.
- Maintain files and documentation thoroughly and accurately, in accordance with company policy and accepted accounting practices
- Assist with projects and other duties as assigned

Qualifications:

- High school diploma or equivalent
- Three years' Billing and Coding (Medical and/or Dental) FQHC/CHC experience
- Solid understanding of Medicaid, Medicare and other insurance benefits
- Knowledge of Insurance portal ePaces, Connex, Navinet and other provider portals
- Electronic claims submissions and excellent communication and organizational skills
- Experience billing for a Federally Qualified Health Center (FQHC) or Community Health Center (CHC) environment.
- Knowledge of Medicaid – Wraparound / 4028, Medicare and other insurance guidelines, including Commercial / Managed Care / Advantage /HMO /PPO etc.
- Knowledge of facility based billing/reimbursement methodologies including revenue codes and rates, as well as knowledge of federal, state and payer specific regulations and policies is a plus
- Knowledge of one or more specialties; Dental, Family Health, Infection Disease, Pediatrics, Women's Health - GYN / Obstetrics, Mental Health,
- In depth knowledge of CPT4 and ICD10 Coding required
- Working knowledge of Medical Billing Systems / Electronic Health Records – eClinicalworks experience strongly preferred
- Excellent oral and written communication skills – be able to train and provide information in a clear and concise manner; good interpersonal skills to communicate effectively with providers, patients, clinical and administrative staff.
- Strong computer skills with fluency in Microsoft Office applications including Excel, Outlook, and Word

Physical Demands/Working Conditions:

- Ability to stand, walk or sit for an extended period of time.
- Ability to hear within normal range
- Strong verbal and written communications skills
- Ability to see within normal range
- Extended periods of time at a computer
- Noise level is moderate

The physical requirements described herein are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made, whenever possible, to enable individuals with disabilities to perform the essential functions.

Apicha CHC is an Equal Opportunity Employer. M/F/D/V/SO

Revised on April 2018