

## **BILLING SPECIALIST**

**JOB CODE:** 3501  
**DEPARTMENT:** Tioga Co. Mental Hygiene  
**CLASSIFICATION:** Competitive  
**SALARY:** CSEA - Salary Grade VIII  
**ADOPTED:** Tioga Co. Personnel & Civil Service; Reso. 202-15; Revised 01/20

**DISTINGUISHING FEATURES OF THE CLASS:** The work involves responsibility for the performance of specialized account clerical duties while managing a department's medical billing processes. The incumbent performs account keeping, billing and reimbursement tasks that require the interpretation and application of various federal, state and county regulations. Work involves coding reimbursement billings and the accurate reporting of financial information. Work is performed under the general supervision of the Director of Administrative Services with some leeway allowed for the use of independent judgment. Supervision is exercised over subordinate account clerical staff. Does related work as required

### **TYPICAL WORK ACTIVITIES:** (Illustrative Only)

- Reviews and interprets information received from insurance companies concerning client eligibility and applies appropriate billing methods to interpret data, to correctly enter claims into computer software, and to rectify denied claims and rebilling within a timely and efficient manner;
- Reviews and ensures the proper use of CPT codes, diagnostic codes, revenue codes, APG codes, and NPI numbers and credentialing on billable claims processed by the department;
- Batches billable claims for electronic and paper filing;
- Reviews and interprets medical payment remittance advice and assures appropriate application to billing account, reconciling accounts where appropriate;
- Ensures proper use of new billing codes according to updates issued by the Office of Mental Health and Office of Alcohol and Substance Abuse;
- When instructed, may write checks from departmental checking account and post journal entries to accounting ledgers;
- Supervises subordinate account clerical staff, assigns work, and determines work flow;
- Plans, assigns, and reviews the maintenance of a wide variety of financial records and reports and instructs account clerical staff in the specialized details of such work;
- Reviews claim payments and compares to claims submitted; follows up on claims that are denied;
- Bills appropriate insurers utilizing federally approved billing format in both electronic and paper format as applicable;
- Corresponds with billing software companies to trouble shoot billing issues;
- Answers telephone, walk-in or written inquiries regarding billing claims and corresponds with clients to complete financial information;
- Prepares a variety of reports and records related to billing activities;
- Operates a calculator, personal computer and other related office equipment.
- May be responsible for coordinating and processing purchase orders or the coordinating the purchase order process and ensuring timely submissions.

**FULL PERFORMANCE KNOWLEDGE, SKILLS, ABILITIES & PERSONAL CHARACTERISTICS:** Good knowledge of NYS and Federal regulations, including coverage and entitlement criteria, billing rules, beneficiary rights and provider responsibilities; good knowledge of third party health insurance coverage, requirements and procedures; good knowledge of medical billing requirements and procedures; good knowledge of office terminology, procedures and equipment; working knowledge of electronic billing systems, windows based computer systems, and excel; ability to plan, assign and supervise the work of account keeping and clerical assistants; ability to manage, analyze and reconcile billing and payment detail; ability to make more difficult arithmetic computations rapidly and accurately; ability to understand and carry out complex oral and written directions; ability to prepare correspondence and reports; ability to secure the cooperation of others; ability to deal effectively with the public; ability to readily acquire familiarity with departmental organization, functions, laws, policies and regulations; good judgment in solving complex account keeping problems; accuracy and attention to detail; initiative and resourcefulness; physical condition commensurate with the demands of the position.

**MINIMUM QUALIFICATIONS (Either):**

- a)** Graduation from a New York State registered or regionally accredited college or university with an Associate's Degree in accounting, business, or a closely related field and one (1) year of full-time experience (or its part-time equivalent) in processing medical insurance claims, which involved the supervision of others; **or**
- b)** Graduation from high school or possession of a New York State equivalency diploma and three (3) years of full-time (or its part-time equivalent) experience in processing medical insurance claims, one (1) year of which involved the supervision of others; **or**
- c)** An equivalent combination of training and experience as indicated in a) and b) above.

**Note:** Supervisory experience is defined as: assignment and review of work, providing instruction, the evaluation of work performance, maintenance of work standards, handling absenteeism, discipline, etc.