STAFF ASSISTANT (ACCOUNTS RECEIVABLE)

DISTINGUISHING FEATURES OF THE CLASS: Under general supervision, incumbents of this class assist in the supervision and coordination of activities of an assigned unit at the Westchester Medical Center. Responsibility involves supervising staff involved in the billing and collection of patient bills from third party reimbursement agents, private insurance carriers or as direct payment for in-patient or out-patient services. Work is coordinated with other hospital units such as the Admitting Office, Emergency Room, Medical Records Division, and Out-Patient Department as well as with the County Department of Social Services. This class functions as the first line supervisor in a billing unit, ambulatory care unit or credit and collection unit monitoring work activities, resolving operational problems, providing leadership and technical guidance to a group of Insurance Clerks or Credit and Collection Analysts. Supervision is exercised over support staff as assigned. Does related work as required.

EXAMPLES OF WORK: (Illustrative Only)

Supervises staff in preparing and processing bills for payment of medical services to patients either directly or through third party coverage and maintains patient billing records to ensure compliance and appropriate billing;

Reviews, screens and researches mail, patient accounts and other documents;

Works with carriers such as governmental agencies, Blue Cross/Blue Shield, private insurance carriers, Worker's Compensation, third party payers, etc., in establishing coverage and reimbursement, resolving discrepancies and denials, and securing maximum reimbursement for services:

Coordinates activities with managed care companies and providers to ensure all required actions for managed care patients are taken, i.e., getting referrals, follow-up, return of medical records, etc.;

Coordinates the activities of the billing unit and collection agency on slow payment and non-payment cases and on follow up with the Credit and Collection Analysts;

Ensures there is no breach in patient confidentiality in releasing information to outside companies;

Coordinates with Case Managers from Managed Care Companies to communicate treatment plans and coordinate care;

Consults with family members, physicians, Social Services, etc., to determine the method of payment for hospital services;

Oversees the maintenance of detailed records and files to insure accurate billing information:

Supervises the entry and update of billing and collection data on electronic data processing equipment and verifies the accuracy of generated reports;

EXAMPLES OF WORK: (Illustrative Only) (Continued)

Keeps abreast of changes in payment methodologies, eligibility criteria, rates of reimbursement, data requirements and internal procedure, and ensures communication of these changes to staff;

Acts as liaison between Patient Accounts and other departments such as Department of Social Services or Data Processing department;

Assists supervisors by relieving them of routine tasks or handling complicated cases;

Reconciles problems and obtains referrals for patients requiring care;

Assists in training and supervising support staff in unit billing procedures;

Compiles statistical data for proposals, financial reports, analysis, etc.;

Assists with special projects as assigned;

Uses computer applications or other automated systems such as spreadsheets, word processing, calendar, e-mail and database software in performing work assignments;

Access protected health information (PHI) in accordance with departmental assignments and guidelines defining levels of access (i.e. incidental vs. extensive);

May perform other incidental tasks, as needed.

REQUIRED KNOWLEDGE, SKILLS, ABILITIES AND ATTRIBUTES: Good knowledge of the various forms of medical coverage available for the payment of hospital services to patients, their methods of payment, and coverage limitations; good knowledge of the methods and procedures used for billing and collection from third party reimbursement agents for the payment of hospital services to patients; familiarity with the functions of hospital admitting, medical records and utilization review, particularly as they impact reimbursable costs; skill in making arithmetic computations; ability to plan and follow up on payment schedules with patients on services determined as self-pay; ability to establish and maintain effective working relations with others; ability to effectively use computer applications such as spreadsheets, word processing, calendar, e-mail and database software in performing work assignments; ability to read, write, speak, understand, and communicate in English sufficiently to perform the essential duties of the position; sound judgment; tact; initiative; resourcefulness; physical condition commensurate with the requirements of the position.

MINIMUM ACCEPTABLE TRAINING AND EXPERIENCE: A high school or equivalency diploma and five years experience where the primary function of the position was credit and collection, billing, loans, insurance or similar work, three years of which must have been in or for a hospital patient accounts unit.

Job Class Code: C2294

J.G.: VIII

<u>SUBSTITUTIONS</u>: Satisfactory completion of 30 credit hours* of post high school education may be substituted on a year for year basis for the general experience up to a maximum of two years. Experience which involved direct liaison with managed care agencies, that included processing referrals, precertifications and required authorizations, may be substituted for the hospital patient accounts experience on a year for year basis up to the three years required.

<u>NOTE</u>: Unless otherwise noted, only experience gained after attaining the minimum education level indicated in the minimum qualifications will be considered in evaluating experience.

*SPECIAL NOTE: Education beyond the secondary level must be from an institution recognized or accredited by the Board of Regents of the New York State Department of Education as a post-secondary, degree-granting institution.

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