



## Cow Creek Government Office

### Medical Billing Manager

Job Code: 2601  
Department: Cow Creek Health and Wellness Clinics  
Location: Roseburg, OR.  
Minimum Salary: \$73,329.11

#### POSITION PURPOSE:

The Medical Billing Manager is responsible for the direction of daily operations and procedures that ensure that all insurance claims are coded and billed correctly as well as followed up on in a timely manner to ensure prompt resolution of the claims.

#### ESSENTIAL FUNCTIONS:

- Exercise the full range of supervisory duties of medical billing staff- including hiring, coaching and evaluating.
- Establish working relationships with the providers from each clinic to assist with coding and billing guidelines. Provide education, training, and instruction to providers on coding updates and/or coding questions or issues that the providers may encounter.
- Complete specific contracting applications with insurance companies for CCH&WC providers.
- Assist with the preparation of an annual clinic budget.
- Oversee timeliness of insurance collections, billing efficiency, payment posting accuracy, and reconciliation of accounts receivables from third party insurance payers.
- Analyze and track claim denials, rejections, and payer info requests to identify and implement revenue enhancement opportunities.
- Provide a yearly revenue forecast of potential third-party billing revenue from factual data to assist with organizational yearly budgeting.
- Responsible for working with the Oregon Health Authority on the 100% FMAP reporting, and any additional services/reports, to help maximize additional sources of 3rd party revenue.

- Responsible for working with the Indian Managed Care Entity (IMCE) on assessment, reporting and any additional services/reports, to help maximize additional sources of 3<sup>rd</sup> party revenue.

#### QUALIFICATIONS:

- Associate's Degree in Medical Office Systems Technology or Business-related field **OR** a minimum of four (4) years of equivalent combination of specialized training and experience in technical knowledge of medical terminology and the CPT and ICD-10-CM coding systems.
- Possess either the AAPC (CPC) or AHIMA (CCS-P).
- Knowledge and experience in third party reimbursement, internal audits, budgeting, financial analysis, and management information systems as well as medical billing and coding.
- Supervisory experience managing coding and billing personnel.
- Knowledge of Centers for Medicare and Medicaid Services (CMS) Federally Qualified Health Centers (FQHC) and the Prospective Payment System (PPS) reimbursement methodology.
- Strong problem solving, decision making, team building, process improvement, leadership and time management skills required.
- Excellent interpersonal communication skills both written and verbal.
- Proficient use of computers including electronic medical records, MS Office applications.