



Position Description

Position: Medical Bill Payment Representative

Reports To: Claims Quality Manager

Position Description: This position has the responsibility of reviewing and processing of all claim-related medical and expense bill payments in accordance with regulatory timeframes and fee schedules required in all states of operation.

Job Duties

- Review and process medical bills in accordance with regulatory timeframes and fee schedules required in all states of operation.
- Follow quality assurance guidelines when processing all bills.
- Provide good customer service to all doctors, hospitals and other vendors.
- Provide good customer service to the claims department.
- Pay all bills accurately and check for duplicate payments.
- Provide 24 hour response time to all telephone and email customer inquiries.
- Follow process for recovery of overpayments and make all requests timely.
- Keep current with all fee schedules within states of operation.
- Follow all procedures for reconsiderations and maintain contact with the associated provider until the reconsideration has been completed.
- Maintain an error ratio of less than 8%.

Education Required: High school graduate required. College degree and medical coding certification preferred. A minimum of two years of medical payment experience preferred.

Skills Required: Ownership mind-set, interpersonal skills, analytical skills, math skills, organizational skills, written and verbal communication. Ability to communicate effectively with inside/outside customers including medical providers and vendors.