



---

## Medical A/R Specialist Job Description

**Role/Position Definition:** Responsible for maintaining accounts receivables. Process claims daily, submit all primary, secondary and tertiary claims electronically. Collects unbilled claim edits. Understands and abides by billing compliant regulations.

### Qualifications/Position Requirements:

- High School Diploma required.
- One to two years' experience of revenue cycle management or billing experience in the healthcare field.
- Knowledge of Medicaid/Managed Care Organization (MCO) billing practices, and other insurance websites.
- Experience with billing in an Electronic Data Interchange/3<sup>rd</sup> party clearinghouse environment.
- Intermediate to advanced computer skills, including the use of Microsoft Office applications.

### Duties and Responsibilities:

- Submits claims to payors in accordance with payor requirements and agency policy.
- Receives notices of claim rejections and denials.
- Properly track and resolve issues to ensure claim payment.
- Maintains complete and accurate accounts receivable records.
- Performs troubleshooting for billing error codes.
- Alerts the Manager regarding late or missing documents required for billing.
- Assists with the collection of receivables by monitoring accounts receivables, resubmitting bills to overdue accounts, and alerting the Manager regarding seriously overdue accounts.
- Produces reports as needed.
- Performs administrative duties such as sorting, scanning, filing, and emailing records.
- Address denials and determine next steps.
- Follow up on unpaid claims prior to filing deadlines.
- Re-bill or submit corrected claims.
- Monitor provider newsletter and communications for changes impacting claims payment.
- Prepare insurance refunds.
- Request off-sets and take-backs for overpayments.
- Performs all other duties as assigned.