



JOB DESCRIPTION

Job Title: Customer Service Specialist I
F.L.S.A. Status: Non-Exempt

Position Summary

Responsible for delivering outstanding customer service to all starling patients while handling in-coming or out-going calls and communications. Responsible for actively collecting on patient outstanding balances. Manage all in-coming patient disputes, inquiries and/or concerns in a positive and helpful manner. Presentation of the representative should be in line with the values and morals of the organization, consistently ensuring a positive encounter with all contacts.

Key Accountabilities

- Logs into the ACD line for in-coming billing inquiries from patients, practices and others.
- Rotation out to Customer Service locations in patient facing offices.
- Maintains an active and equal call handling distribution when compared to team.
- Understands claim adjudication procedures, filing limits, and coding policy.
- Demonstrates understanding of carrier guidelines for corrected claims and appeals.
- Calls insurance carrier(s) to question denials and request re-processing of claims as needed.
- Utilizes insurance carrier website(s) to investigate eligibility, claim status, prior authorizations, and other information needed for inquiry resolution.
- Maintains productive relationships with Account Receivable Representatives to maximize opportunities for assistance with inquires/concerns from patients.
- Identifies trends relative to particular offices, carriers, services, providers or policies and initiates report to supervisor for a comprehensive approach to issue.
- Evaluates an average of 500 cases monthly for self-pay collections.
- Contacts patients following the FDCPA guidelines to collect outstanding balances.
- Assists patients with payment plans and hardship waiver submission when appropriate.

Relationships (Reports to, Supervises)

- Reports to the Customer Service Manager.
- Establishes and maintains effective working relationships with patients, co-workers, physicians, administration, and external customers.

Qualifications (Education, Experience, Additional Skills & Requirements)

- High School graduate or equivalent required.
- Knowledge of medical terminology and general coding concepts.
- Knowledge of accounts receivable practices and the FDCPA.
- Ability to navigate CMS and other carrier websites.
- Ability to research and examine carrier policy and compose an effective appeal letter.
- Good computer and calculator skills, including Microsoft Word, Excel and Outlook.
- Ability to work effectively and professionally under pressure.
- Ability to work effectively with co-workers as a team member and share responsibilities and duties.
- Ability to set priorities, be organized and be a self-starter.
- Ability to communicate clearly, effectively, and professionally.

Working Conditions, Physical Requirements

- Incumbent may be required to work at any facility based on operation need, and schedule may vary.
- Travel to various practice locations will require ability to drive, valid driver's license and use of own reliable transportation.
- Physical activity will include walking, standing, and sitting.
- Physical demands may also include lifting and carrying equipment up to 30 lbs.
- Other physical requirements include speaking and hearing ability sufficient to communicate effectively by phone or in person at normal volumes; vision adequate to read correspondence, computer screen, forms, etc.; and good manual dexterity.

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.