



**VALLEY HEALTH TEAM**  
LIVE BETTER. VIVE MEJOR.  
JOB DESCRIPTION

POSITION:	LEAD MEDICAL BILLING SPECIALIST
REPORTS TO:	BILLING MANAGER
POSITIONS SUPERVISED:	NONE
CLASS:	REGULAR
CAT:	FULL-TIME
	NON-EXEMPT

**BASIC FUNCTIONS:**

Under the supervision of the Billing Manager, this position oversees billing specialist staff members and requires substantial experience and understanding of the healthcare billing industry including ICD-10 + CPT coding. Responsibilities entail capturing patient demographics, entering, reviewing and preparing patient and insurance data into the practice management system, researching and verifying accuracy of billing data and the revision of coding errors including adjustments and denials.

**DUTIES AND RESPONSIBILITIES:**

1. Oversee the day-to-day functions for a group of billing specialists.
2. Responsible for reviewing patient logs, demographic, insurance eligibility and other activity to ensure billing is captured for all patients and completed accurately.
3. Monitor Insurance electronic claim billing process is completed successfully on a daily basis.
4. Report coding discrepancies to the Certified Coding Specialist Associate and Management team.
5. Assist with closing open encounters in order to timely close month and year end reporting
6. Oversee open credit balance report and resolve any refunds due
7. Stay up-to-date on current coding regulations, and departmental policies.
8. Assist with third party payer and other audit request, by compiling and organizing documentation.
9. Assist the coding and compliance team with the procedure manuals related to coding and billing compliance.
10. Train new and current Billing Specialist on charge capture and coding process.
11. Generate Excel spreadsheets for special projects as assigned.
12. Monitors and reports to Management team and Certified Coding Specialist on matters related to coding compliance.
13. Oversee payment posting to ensure timely and accurate posting of patient/payer receipts.
14. Contribute to team effort by assisting other departments as needed and while maintaining confidentiality of VHT's business.
15. Work cooperatively with all staff members and outside sources in a professional manner to deliver a high level of service.
16. Follow applicable regulations: Joint Commission, OSHA, HIPAA, and CLIA.
17. Serves and protects the practice by adhering to professional standards, policies and procedures, federal, state, and local requirements, and The Joint Commission Accreditation of Healthcare Organization standards.
18. Observe and practice all VHT Patient Experience Service Standards as outlined in "World Class Practices: My Commitment to Care (which I have read and signed). Practice CICARE when interacting with patients, their families, visitors, or internal customers.
19. Practice CICARE phone etiquette during all phone interactions.
20. Always exercise courtesy whenever patients, family members, visitors and co-workers are present.
21. Respect privacy and dignity of our patients, family members, visitors and co-workers.
22. Maintain professionalism in the presence of patients, their families, visitors and co-workers.
23. Act as a role model, verbally and behaviorally demonstrating skill, enthusiasm, positive problem solving, commitment and loyalty to the profession and the organization.

24. Perform other related duties, which may be inclusive, but not listed in the job description.

**MINIMUM QUALIFICATIONS:**

1. Associates degree or equivalent from two-year college or technical school; Bachelor’s degree preferred. A minimum of three years of work experience in a related field is necessary.
2. Strong knowledge of ICD-10, CPT/HCPCS coding guidelines
3. Be self-motivated and have the ability to prioritize work and meet deadlines
4. Good judgment and decision-making skills
5. Strong ethics and a high level of personal and professional integrity
6. Computer literate and highly proficient in using MS Office
7. Strong customer service skills (preferably within a service industry)
8. Knowledge of federal laws and regulations affecting coding requirements
9. Knowledge of billing practices required, FQHC billing preferred
10. Knowledge of Electronic Health Records – NextGen experience strongly preferred
11. Extensive knowledge of official coding conventions and rules established by the American Medical Association (AMA) and the Center for Medicare and Medicaid Services (CMS) for assignment of diagnostic and procedural codes
12. Excellent oral and written communication skills – be able to provide information in a clear and concise manner; good interpersonal skills
13. Fluent conversational English/Spanish strongly preferred
14. Ability to be flexible with work schedule and available to work at all site locations
15. Must have own transportation, valid California Driver’s License and current proof of automobile insurance coverage
16. Demonstrated ability to provide world-class patient experience using CICARE principles and practices. Ability to be proactive and to go above and beyond the call of duty; take initiative to provide a world class patient experience in all encounters via email, phone or in person.

**TYPICAL WORKING CONDITIONS:** The office setting is a normal work environment. Occasionally work during early morning, evening or weekend. May be subject to temperature variances in the office.

**TYPICAL PHYSICAL DEMANDS:** Requires sitting, standing, or walking for up to eight hours a day. Some bending, stretching, or reaching may be necessary. Lifting up to 40 pounds may be required on occasion. Vision must be correctable to 20/20 and hearing must be in the normal range for telephone contact.

**WORK ENVIRONMENT:** The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. I, the employee, understand the responsibilities and standards of my position as listed above, and I agree to fulfill them to the best of my ability. I understand I am an at-will employee and can be terminated at any time with or without cause. I also understand the Valley Health Team Inc. will not be responsible in any manner for termination’s which are due to defunding of Federal or State Contracts. I also agree that the VHT Board of Directors have the right to modify the Personnel Policies which govern my employment at any time.

This organization is an Equal Opportunity Employer. It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification.

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Employee’s Signature

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Date