

POSITION DESCRIPTION

Rev: 11/30/2018

Job Title: Claims Payment Specialist
Status: Non-exempt, Full Time
Department: Claims, Reports to Claims Production Supervisor

PURPOSE:

To recover overpayments made on previously processed claim charges. On claims reviewed, make appropriate decisions and convey this information through written or telephone communications with members and providers. Support the claims staff by making phone calls to verify information and by inputting detailed data into the computer system. These duties occur in a production environment with an emphasis on sequenced activities but with fluent decision-making.

ESSENTIAL FUNCTIONS:

- 50% 1. Process the following types of work within department guidelines and standards by visually reviewing claims and determining if additional information is needed.
 - a. Refunds/provider correspondences – send follow-up letters and create reviews, make phone calls to providers to check the status of refunds and document.
 - b. Overpayment Recovery reviews – apply refund, complete refund recovery notice, match with refund check and send it to accounting for deposit.
 - c. Return checks, stale dated checks and voids – verify correct address and have payment reissued.
 - d. Subrogation inquiries – correspond with attorneys and subrogation vendor.
 - e. Overpayments – refer to collections vendor if needed.
 - f. Maintain Overpaid Charges report and send to carrier when needed.
- 15% 2. Enter data obtained from claims correspondence into the computer system, meeting department standards.
 - a. Review correspondence to determine if requested information has been received.
 - b. Make necessary modifications or corrections to insured's claim file in computer.
- 15% 3. Review and process refunds within established department guidelines and standards and make appropriate contact with external source, verbal, written letter or electronic to obtain necessary information to process the refund.
- 15% 4. Index documents into the claims system and verify that all information has been entered correctly and has been matched to the correct plan participant.
- 5% 5. Perform all other duties as requested by management.

REQUIREMENTS:

1. High school graduate or equivalent.
2. Minimum of one-year office and telephone customer service experience.
3. Medical claims processing experience strongly preferred.
4. Collections experience strongly preferred.
5. Ability to speak, read, comprehend and follow written and verbal English instructions. Ability to communicate effectively verbally and in writing.

6. Ability to compose proper business correspondence (i.e., letters, memos and file documentation).
7. Ability to communicate in an assertive but positive manner, using excellent telephone communication skills (i.e. listening for understanding, responding accurately and professionally and expressing self clearly and courteously).
8. Demonstrated decision-making abilities.
9. Ability to perform basic math skills.
10. Ability to operate a ten-key calculator and have experience with computers and typing at industry minimums.
11. Ability to meet company attendance requirements.
12. Ability to sit or stand for 7.5 hours per day.
13. Ability to achieve department training standards.
14. Ability to achieve and maintain department quality and production standards.
15. Ability to work under and handle stress associated with varying workloads and deadlines.
16. Experience commensurate with the essential functions necessary to successfully perform the job.

FACTORS IMPORTANT TO SUCCESSFUL PERFORMANCE OF POSITION:

Problem solving	Interpersonal skills
Analytical ability	Dexterity
Communication skills	Adaptability

The position requires the ability to assess a problem and analyze the facts to reach appropriate claims decisions. Communication and interpersonal skills are necessary, as the position requires telephone contact and written correspondence with internal and external customers. The applicant must possess a positive attitude, be resilient and able to adapt to a changing work environment within the department and organization.

PHYSICAL DEMANDS OF POSITION:

Standing/Sitting	98% of time	Remain at work station to process refunds and other duties.
Walking:	5% of time	Walking to office equipment, meetings, ect.
Lifting/carrying	< 1% of time	Handling files up to 10lbs.
Speaking/Hearing	100% of time	Conversations to secure and give information
Reaching/Handling	100% of time	Reaching for files, placing in file order, placing/removing staples, documents and use telephone, printer/copier/scanner and handle refund materials.
Seeing	100% of time	Review data from charges and medical records, documents, reference materials faxes, ect.

NOTE: Applicants who need accommodation for an interview or job testing, please request this in advance to the Human Resources Department.