

Gastroenterology Associates Job Description

Insurance Coordinator

Department: Administration

Reports to: Business Office Manager

FLSA status: Non-exempt

Qualifications: Preferred three years of healthcare insurance claim processing experience while working with an EPM/EHR system.

Job summary and essential duties/responsibilities performed:

- Process Accounts Receivables as it relates to the revenue cycle in the most efficient manner possible. This would include but not limited to filing appeals with payers, calling payers directly, efficiently processing on-line submissions/communications when available, etc.
- Post transactions accurately and efficiently to patients accounts/charts
- Possess a global knowledge of coding as it relates to claims filed in order to properly resolve issues that relate to coding specific areas
- Able to properly read a patients accounts and have the ability to properly explain to the patient their balances, eob's, and insurance related adjustments
- Engage in professional conversations with patients and payers regarding charts while remaining HIPAA compliant
- Work with other departments as it relates to insurance related items
- Stay abreast of payer updates, allowed amounts, and any pertinent information that has impact on the practice
- Communicate with Team Leader and Manager on important Accounts Receivable items
- Provide phone support to the Insurance Department
 - Take calls from third parties and patients and promptly handle them in a professional and efficient manner
 - Provide phone support to other departments when needed; i.e. phone department, billing department.
- Work well in a team environment while providing support to co-workers in work related areas of need while being flexible and open minded to departmental/company needs
- Willing to complete other assigned tasks
- Work independently with little supervision while keeping the practice's best interest at hand

Last updated 07.19.21

- Lift up to 15 lbs

Employee's Signature

Date