PATIENT ACCOUNT REPRESENTATIVE I / II

DEFINITION
Under supervision, prepares patient accounts for billing; prepares and issues bills; evaluates patient financial resources, establishes payment terms and performs collections; determines and approves eligibility for specialized medical care financial programs; and performs other related work as assigned.

DISTINGUISHING CHARACTERISTICS
Patient Account Representative I is the entry level of the Patient Account Representative series. Under initial close supervision, incumbents will learn and perform a variety of duties related to patient billing, credit collections, and/or financial program eligibility. Incumbents are expected to work with a greater independence as they gain experience.

Patient Account Representative II is the journey level class in the series. Under general supervision, incumbents perform the full range of duties, and may do so on a rotational or specialization basis of assignment. This class is distinguished from the Senior Patient Account Representative in that the latter has lead-worker responsibility or performs the more advanced and difficult assignments.

This series is distinguished from Account Clerk series, which has primary duties that are fiscal or statistical in nature. This series is distinguished from Patient Services Representative series in that the latter performs a variety of duties related to patient interviewing, verifying and documenting admission information, patient registration, and appointment scheduling.

EXAMPLES OF DUTIES
Nothing in this specification restricts management’s right to assign or reassign duties and responsibilities to this job at any time.

Levels I and II
1. Reviews, verifies, obtains and corrects patient financial status and payor source information, medical diagnosis, laboratory and other diagnostic services information, hospital/clinic services and supplies, applicable dates, required authorizations and certifications, signatures, and other information related to preparation and processing of patient bills, and eligibility for coverage
2. Enters data into and operates a computerized patient account system
3. Researches and resolves missing or conflicting information
4. Interviews and works with patients, families, and others regarding financial resources, eligibility for coverage, status and basis of charges, payment requirements, payment plans, collections, and related matters, in person, by telephone and by letter
5. Works with other service providers, claim adjudicators, insurance companies, private payors, governmental payor sources, the County Revenue Recovery Division, and others to obtain, correct or provide information; verify eligibility; process patient accounts; verify procedures; initiate collection and/or resolve disputed, unprocessed, and other claims requiring follow-up
6. Assembles pre-billing materials; assigns CPT codes; prepares, generates and sends individual, insurance, governmental, crossover, and other bills for medical care related services; evaluates, modifies and resubmits bills
7. Determines and approves eligibility for specialized publicly funded medical care financial programs; assists patient with enrollment procedures
8. Evaluates and processes bad debt accounts; performs collection and follow-up activities; refers uncollectible accounts to collection services
9. Requests completion of additional forms or information for denied claims or special processing requirements
10. Prepares correspondence; maintains logs, records, files and manuals; prepares manual and computer-generated reports related to patient business services and desk activities
11. Reconciles accounts; posts payments; adjusts balances to reflect denials, adjustments, shares-of-cost, payments, and other modifications to balances; prepares refund packages for approval

Level II
12. Reviews billing documentations; resolves issues that would prevent accurate, prompt claim billing
13. Runs computerized reports to search for missing or conflicting information
14. Troubleshoots download problems; communicates problems and recommendations to supervisor for approval
15. May work in a specialty area such as pre-billing, billing, or collections

QUALIFICATIONS
A combination of experience, education, and/or training which substantially demonstrates the following knowledge, skills and abilities:

Knowledge and Skills:

Patient Account Representative I

Working knowledge of:
1. Clerical bookkeeping practices and procedures.
2. General Clerical Office Practices and procedures, including operation of common office equipment and filing systems

Some knowledge of:
1. Basic Medical Terminology and/or medical billing operations.
2. Personal Computer operations.

Skill and Ability to:
1. Perform arithmetical computations, comparisons and postings rapidly and accurately.
2. Perform data entry on a computer keyboard quickly and accurately
3. Operate a 10 key adding machine quickly and accurately
4. Accurately match and file materials using alphabetic and numeric systems.
5. Read and apply complex procedures and regulations
6. Establish and maintain effective working relationships with a variety of individuals under potentially hostile or emotional circumstances
7. Prepare routine correspondence
8. Some positions require bilingual skills

**Patient Account Representative II** (In addition to all of the requirements for level I, above)

**Thorough knowledge of:**

1. Federally Qualified Health Center billing procedures and operations
2. Hospital/clinic billing procedures and operations
3. Insurance, other private workers compensation, governmental and special payor requirements, procedures, codes and forms
4. Sources and eligibility requirements for publicly-funded medical care payment programs

**Working knowledge of:**

2. CPT coding procedures

**Skill and Ability to:**

1. Assemble pre-billing packages and prepare bills
2. Operate a patient accounts computer system
3. Evaluate patient financial status and payor sources, establish payment plans and follow-up and collect past due accounts
4. Evaluate, determine and approve eligibility for specialized publicly-funded medical care payment programs
5. Prepare medical billing for electronic billing submission.
6. Evaluate patient payor sources; and follow-up on past due accounts
7. Evaluate, determine and approve eligibility for specialized publicly-funded medical care payment programs.
8. Read and apply complex procedures and regulations

**REQUIRED CONDITIONS OF EMPLOYMENT**

As a condition of employment, the incumbent will be required to:

1. Work various shifts, including weekends and holidays
2. Work with, and be exposed to, potentially infectious diseases, disorderly patients and family members
3. Remain calm and operate effectively in confrontational and stressful situations

**EXAMPLES OF EXPERIENCE/EDUCATION/TRAINING**

Any combination of training, education and/or experience which provides the knowledge, skills and abilities and required conditions of employment listed above is qualifying. An example of a way these requirements might be acquired is:
Level I

- One (1) year of experience performing duties directly related to patient account billing, patient financial resources evaluation, account collection or assessment of patient eligibility for specialized medical care financial programs; or
- One (1) year of experience at a level equivalent to Monterey County’s Account Clerk

Level II (in addition to the above)

- Two (2) years of experience equivalent to Monterey County’s Patient Account Representative I

PHYSICAL AND SENSORY REQUIREMENTS

The physical and sensory abilities required for this classification include:

1. Manual dexterity sufficient to operate a computer, to use calculators, and to write legibly
2. Mobility, flexibility, gross body coordination, and dexterity typical for an office environment
3. Ability to sit and/or stand for long periods of time, such as at a computer
4. Vision sufficient to read standard text and data on computer screens and as text
5. Ability to speak clearly and with the volume required to carry on clear conversations in person and over the phone
6. Hearing sufficient to carry on clear conversations in person and over the phone

CLASS HISTORY

Patient Account Representative I

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Prepared by:  Gerta McClay, SPHR, IPMA-CP
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Approved by:  Janine Bouyea, PHR
    NMC Human Resources Administrator

/s/ Janine Bouyea

2/17/2010

Date