

**HFMA Career Center
Sample Job Description**

Manager of Medical Department Revenue Cycle

Department Name and ID:

Reports to (job title): CAO

Grade:

Current Job Code:

FLSA Status: Exempt - All per diem positions are considered Non-Exempt

Effective Date:

Status: Submitted to Compensation

Job Summary:

The Manager of Revenue Cycle reports to the Director - Finance Services

Cycle:

This position is responsible for the day to day billing and revenue cycle processes with special attention to billing outcomes and coding performance. This includes working with the billing company, departmental staff and physicians to assure optimum billing performance.

The following statements are intended to describe the general nature and level of work being performed by individuals assigned to this position. They are not intended to be an exhaustive list of all duties, responsibilities and skills required of this position.

Primary Responsibilities:

1. Manage the day to day billing operations within the Department with special emphasis on the front end systems to assure that all information provided to billing company is accurate and timely across all divisions and locations. This may include registration, scheduling, referral management, co-pay collection, self pay collection, systems set up and issues. (essential)
2. Ensures timely visit ticket entry and E-ticket entry for all services provided. Works collaboratively with the IS team to ensure systems integrity for these functions. Responsible for denial work file management, collaborating with divisional managers and staff to ensure claims processing occurs in a timely manner. Coordinates edit code training for front end staff. (essential)

3. Responsible for entire pipeline of charge capture activities from encounter form development and review to correct coding and oversight for ensuring accurate reimbursement for services billed. Responsible for driving process improvement initiatives related to front end revenue cycle functions, in collaboration with the operations leadership and divisional managers. (essential)
4. Manages the monthly OR reconciliation process to ensure that all procedures/operative cases are billed in a timely manner. Analyzes month end reports presented by billing vendor, identifying opportunities for work process improvements with respect to claims denials. Works with divisional managers on strategies to improve front end related issues. (essential)
5. Oversees and provides input to ensure all systems are functional in categories such as dictionary file, data elements, interface and mapping, payer specificity, file transmission, billing area set, adding/deleting ICD-9 and CPT codes, etc.). (essential)
6. Responsible for denial code work file management by coders, ensuring timely submission of charges to the billing vendors. Develops encounter forms for each Division to ensure all services provided are captured on fee ticket. Reviews encounter forms at least twice a year to ensure appropriateness of ICD9 and CPT codes. (essential)
7. Coordinates and facilitates compliance audits for the department. Directs internal compliance reviews conducted by the department coders. Provides feedback and education to physicians on coding errors for both procedure and E&M services. Verifies that fee schedules are appropriate against insurance payers' allowable fees. (essential)
8. Serves as a key resource for changes in payment and coding guidelines from all payers. Educates and reeducates them on these continual updates. Responsible for constant and continual education of the physicians on coding changes. (essential)
9. Facilitates and influences the credentialing process to assure prompt ability to bill for services rendered by newly hired physicians. (essential)
10. Analyzes monthly Appeals reports, tracking work effort by the billing vendor to ensure collections activity on a regular basis. Analyzes weekly charges and payments data to ensure billing vendor is on track to meet established targets for productivity. Reviews EOBs as needed to determine/address payer problems. Coordinates efforts regarding authorization issues. (essential)
11. Has the authority to direct and support employees daily work activities. Has the direct responsibility to undertake the following employment actions: hiring, termination, corrective action and performance reviews. Direct Reports: More than 7 Indirect Reports: None
12. Has full responsibility for planning, monitoring and managing department budget.

Required Qualifications:

1. Bachelor's degree required .

2. Certificate 1 preferred: Certified Professional Coder
3. 8-10 years related work experience required and 5-8 years supervisory/management experience required
4. Knowledge of ICD-9 and CPT coding
5. Advanced skills with Microsoft applications which may include Outlook, Word, Excel, PowerPoint or Access and other web-based applications. May produce complex documents, perform analysis and maintain databases.

Preferred Qualifications:

1. Certified coder.

Competencies:

1. Decision Making: Ability to make decisions that are guided by precedents, policies and objectives. Regularly makes decisions and recommendations on issues affecting a department or functional area.
2. Problem Solving: Ability to address problems that are highly varied, complex and often non-recurring, requiring staff input, innovative, creative, and Lean diagnostic techniques to resolve issues.
3. Independence of Action: Ability to set goals and priorities for functional area. May make recommendations for department policies, practices and programs. Manager or Director provides broad guidance and overall direction.
4. Written Communications: Ability to communicate complex information in English effectively in writing to all levels of staff, management and external customers across functional areas.
5. Oral Communications: Ability to verbally communicate complex concepts in English and address sensitive situations, resolve conflicts, negotiate, motivate and persuade others.
6. Knowledge: Ability to demonstrate broad and comprehensive knowledge of theories, concepts, practices and policies with the ability to use them in complex and/or unprecedented situations across multiple functional areas.
7. Team Work: Ability to act as a team leader for small projects or work groups, creating a collaborative and respectful team environment and improving workflows. Results may impact the operations of one or more departments.
8. Customer Service: Ability to lead operational initiatives to meet or exceed customer service standards and expectations in assigned unit(s) and/or across multiple areas in a timely and respectful manner.

Social/Environmental Requirements:

1. Work requires close attention to task for work to be accurately completed. Intermittent breaks during the work day do not compromise the work.
2. Work routine is fairly consistent, but employee needs to be able to use judgment to respond to events several times a week.
3. No substantial exposure to adverse environmental conditions
4. Health Care Status: No patient contact. Health Care Worker Status may vary by department

Sensory Requirements:

Close work (paperwork, visual examination), Color vision/perception, Visual monotony, Visual clarity <3 feet, Conversation, Telephone.

Physical Requirements:

Sedentary work: Exerting up to 10 pounds of force occasionally in carrying, lifting, pushing, pulling objects. Sitting most of the time, with walking and standing required only occasionally

This job requires frequent sitting, Power Grasping using one hand, Fine Manipulation using one hand, Keyboard use.