

Reimbursement Officer V

Salary Group: B20 Class Code: 1250

| CLASS TITLE | CLASS CODE | SALARY GROUP | SALARY RANGE |
|---------------------------|-------------------|--------------|---------------------|
| REIMBURSEMENT OFFICER I | 1242 | B12 | \$30,840 - \$46,798 |
| REIMBURSEMENT OFFICER II | 1244 | B14 | \$34,144 - \$52,134 |
| REIMBURSEMENT OFFICER III | 1246 | B16 | \$37,918 - \$58,130 |
| REIMBURSEMENT OFFICER IV | 1248 | B18 | \$42,521 - \$67,671 |
| REIMBURSEMENT OFFICER V | 1250 | B20 | \$48.158 - \$77.477 |

GENERAL DESCRIPTION

Performs highly advanced and/or supervisory (senior-level) reimbursement or claims processing work. Work involves coordinating and monitoring billing and collection activities. May supervise the work of others. Works under minimal supervision, with extensive latitude for the use of initiative and independent judgment.

EXAMPLES OF WORK PERFORMED

Oversees, coordinates, and/or monitors billing and collection activities.

Oversees and/or resolves billing problems and financial determinations.

Oversees and/or coordinates staff engaged in financial interviewing, financial investigations, asset research, and fee determinations.

Conducts reviews to monitor compliance with state and federal laws, rules, and regulations pertaining to reimbursements that are highly complex in nature or large in scale.

Conducts investigations that are highly complex in nature or large in scale and determines amounts to be charged for care and treatment based on findings.

Assesses training needs based on observations and monitoring of reimbursement programs.

Determines proper payment, collection of charges, and issuance of payment on claims.

Interprets, establishes, and implements policies and procedures.

Prepares and disseminates reports and information involving policies, procedures, and activities.

Gathers financial data to be used in reports to management.

Coordinates, plans, and conducts training sessions, workshops, and seminars.

May supervise the work of others.

Performs related work as assigned.

GENERAL QUALIFICATION GUIDELINES

EXPERIENCE AND EDUCATION

Experience in claims processing and health-related account and collection work, including supervisory experience. Graduation from an accredited four-year college or university with major course work in business administration or a related field is generally preferred. Experience and education may be substituted for one another.

KNOWLEDGE, SKILLS, AND ABILITIES

Knowledge of the principles of collection and accounting, and the rules and regulations governing reimbursement for agency services.

Skill in resolving problems; in reviewing and evaluating options; in implementing solutions; in interviewing techniques; and in the use of standard office equipment, a computer, and applicable computer software.

Ability to communicate effectively, and to supervise the work of others.