JOB ANNOUNCEMENT
JOB TITLE: Claims Processor/AP Data Entry/MLR Adjuster I
Contract Health Services (CHS)

OPEN: May 14, 2018	**CLOSE:** May 29, 2018
EXEMPT: No	**JOB CODE:**
SALARY: 4 ($12.47-$13.97 DOE)	**DIVISION:** HHS
SHIFT: Day	**DEPARTMENT:** Business Office Dept.
LOCATION: LTHC	**SUPERVISOR:** CHS Supervisor
DURATION: Regular Full Time	**VACANCIES**: 1

JOB SUMMARY: Process CHS claims for payment or denial. Incumbent will determine eligibility and other factors for Contract Health Services (CHS). Perform Accounts Payable (AP) Data Entry.

ESSENTIAL JOB DUTIES AND RESPONSIBILITIES include the following, and other related duties as assigned.

1. Screen patient claims for other insurance, adjust/process incoming claims from vendor list.
2. Work hand in hand with patients in understanding CHS and alternate resources available; also work with patients on referral and bill pay issues.
3. Must be able to interface with LTHC personnel; health care professionals; representatives of state county and federal welfare agencies; health care agencies; patients and their families; Contract Health providers, tribal representatives in a courteous and informative manner.
4. Identifies possible alternate resources, maintains CHS billing and payment records. Identifies claims paid upon request by a provider. Keeps providers informed of CHS billing procedural requirements, and LTHC/CHS liability.
5. Responsible to ensure proper and timely notification to patients and others of denial services and of payment of services in accordance with LTHC regulations governing contract health care.
6. Coordinate the methods and systems established for identifying and referring patients for use of third-party resources; coordinate operation of the CHS Program; provide technical CHS advice and assistance to LTHC staff and providers; provide information to patients about CHS services and regulations.
7. Checks and verifies health insurances online.
8. Will send any updates on patient demographic information to Patient Registration or to another CHS staff, if needed.
9. Keep updated on Excel Spreadsheet for vision expenditures.
10. Process & pay claims assigned by vendor, A-M, N-Z, or All hospital.
11. Create checks, balance checks before they print in Accufund.
12. Create invoice (P.O.), pay invoice (P.O.), print EOB's.
13. Attach copies of checks to EOB and mail to CHS vendors.
14. Send denials to patient and vendor, keep copy for records.
15. Prepare CHS vouchers at proper payment dates, attach proper documentation, and input to the computer. Balance accounts payable printout to batch tape.
16. Enter check numbers in RPMS system; file invoices.
17. Receive refund checks from vendors, apply charge line to check, attach batch slip and send to cash receipts for posting, wait for receipt and attach receipt to statement. Send refund request where applicable.
18. Notify vendors, if the patient's may have other insurance, by phone or mail.
19. Maintain good working relationship with co-workers.
20. Keep track of W-9 forms, then put them in Vendor list & send a copy to Finance.
21. CHEF Case filing and tracking – patient tracking nearing CHEF case status.
22. Process Appeals as they come in – attach all information required and route to appropriate person for approval or uphold denial.

23. Send claims out to appropriate companies for readjusting on a timely manner.
24. Input ER data into excel for data statistics / patient statistics.
25. Input Outpatient cost data into excel for monthly savings statistics.
26. Review and calculate DRG claims and repricing on all inpatient claims for all hospitals.
27. Review and calculate Medicare Like Rate for facilities and professional fees on outpatient claims for all hospitals & vendors.
28. CHS file clerk/files processed claims and patient bill statements.
29. Open/Sort daily incoming mail and bill statements from patients.
30. As other duties assigned.

MINIMUM QUALIFICATIONS:
- Must have High School Diploma or GED.
- 6 months – 1 year experience with Provider One & Accufund software programs, *preferred*
- 6 months-1 year Experience in RPMS program, *preferred*
- 6 months -1 year CHS work experience, with Medical Terminology and Medical Coding, *preferred*
- Must obtain MLR Certification within one (1) year of hire
- 1 year Microsoft Outlook, Word and Excel experience *required*
- Must possess a valid Washington State Driver's license and meet eligibility requirements for tribal insurance.
- Lummi/Native American/Veteran preference policy applies.

KNOWLEDGE, ABILITIES AND SKILLS:
- Ability to maintain a good working relationship with co-workers
- A basic knowledge of the CHS Program and LTHC policies procedures and regulations.
- Knowledge of provider service program and CHS problems encountered.
- Knowledge of CHS eligibility and priority requirements.
- Previous CHS work experience preferred
- Knowledge of Medicare Like Rates
- Understanding of Contract Health Service Regulations
- Knowledge of third party reimbursement sources and their procedure, e.g., Medicare, Medicaid, Veterans Administration, private insurance etc., in order to supplement budget as much as possible from outside sources.
- Proficient in Microsoft Word and Excel
- Must operate ten (10) key adding machine skills with speed and accuracy.
- Must have filing experience and good organizational skills.
- Must have good communication skills, both oral and written.
- Ability to sit for long periods at computer.
- Must have the ability to maintain strict confidentiality in all work related areas and must be consistent with the Lummi Nation's Policies

REQUIREMENTS:
- Must pass pre-employment and random drug and alcohol test to be eligible for and maintain employment, as required by the LIBC Drug & Alcohol Free Workplace Policy.
- This position is subject to extensive Criminal Background Check.
- LIBC Drug Free Workplace policy applies
- Must attend all relevant training for Billing Certification, and as requested by immediate supervisor

TO APPLY:

To obtain a Lummi Indian Business Council (LIBC) application go to: http://lnnr.lummi-nsn.gov/LummiWebsite/Website.php?PageID=376 or request by e-mail libchr@lummi-nsn.gov For more information contact the HR front desk (360) 312-2023. Submit LIBC application, cover letter, resume & reference letters no later than 4:30 p.m. on the closing date listed above. If listing degrees or certifications include copies. Mailing Address: 2665 Kwina Road, Bellingham, WA 98226. Human Resource Fax number: 360-380-6991.