Definition: This is technical, administrative and supervisory work in billing and collecting money for the reimbursement for the costs of health care and maintenance provided for clients in a Mental Retardation facility within the Department of Public Welfare (DPW) or within the Veterans Homes facilities in the Department of Military Affairs (DMA).

An employee in this class investigates and determines clients' eligibility for various health care benefits and directs and controls the assessment, billing and collection of funds from a variety of financial resources for the reimbursement of costs for the clients' health care and maintenance. Work is characterized by the requirement to provide billing and collection services to a client population that is relatively stable, the majority of whom are primarily eligible for Medicaid benefits, and there are relatively few admissions and/or discharges. Work involves verifying client census with the Admissions/Discharge Office; gathering and reviewing information from county assistance offices, Social Security Offices, banks, guardians, legally responsible relatives and/or the client to determine the clients' financial resources and health care benefits; and assessing maintenance costs based on the appropriate level of client care. Work includes billing appropriate health care benefit resources; collecting and depositing funds collected for the reimbursement of costs for the clients' health care and maintenance into proper state and federal accounts; notifying the Department's Comptroller's Office of such deposits; and informing appropriate authorities of uncollectible client health care and maintenance accounts. Work also includes anticipating client health care and maintenance costs for facility budgetary projections. Records are reviewed through federal and state audits. Supervision is exercised over a clerical and technical reimbursement office staff. Administrative and technical supervision is provided by a Facility Reimbursement Program Manager, or appropriate administrative manager who monitors, reviews and evaluates the work performed for results achieved.

Examples of Work: Plans and supervises the reimbursement activity at a Mental Retardation facility or a Veterans Home Facility.

Determines clients' assets and ability to pay for their health care and maintenance costs through client and legally responsible and liable relatives, third party payors or guardian interviews and investigations; contacts county assistance offices, banks, Social Security Offices, Retirement Funds, Courts of Law, Blue Cross/Blue Shield and other health care insurance carriers to determine client eligibility for health care financial support; determines sequence and method for billing appropriate health care financial resources; and collects full, or partial payments or recommends approval of abatement of costs for the health care and maintenance provided for clients.

Assigns, supervises and reviews the work of subordinate staff engaged in gathering clients' personal financial information and health care insurance benefits prior to the assessment,
billing and collection of funds from Medicaid, the clients' health care insurance providers, legally responsible and liable relatives or other financial resources.

Assists eligible clients in obtaining financial support and health care benefits from Medicaid, social security, private pensions, veterans' and other benefits and health care insurance providers.

Bills appropriate health care financial/benefit resources for clients' health care and maintenance costs.

Collects payment for health care and maintenance costs, deposits funds in banks and notifies the Department's Comptroller's Office of the deposit of all funds to proper state and/or federal accounts for transfer to the State Treasury.

Maintains multiple ledgers to account for clients' health care and maintenance funds, including accounts receivable, various control accounts, abatements and other types of accounts.

Prepares financial and statistical reports such as the monthly financial/resources report and delinquent accounts report.

Reviews problem and/or uncollectible accounts with the Facility Reimbursement Program Manager, or appropriate administrative manager when necessary.

Prepares documents necessary to refer delinquent accounts to the Attorney General's Office for collection or write-off and forwards report of delinquent accounts to the technical supervisor.

Provides client census, billing charges and collections data to the facility accountant for completion of the Medicaid cost report as required.

Provides actual client census and collections data and census and collections estimates for future fiscal planning to the Office of Mental Retardation (DPW or appropriate administrative manager (DMA).

Represents the Commonwealth at court proceedings or magistrates' hearings relative to liability assessments, delinquent accounts and write-off requests.

Provides on-the-job training and arranges for needed staff development and technical training for subordinate staff.

Approves/disapproves subordinates' leave requests, completes performance evaluation reports of subordinate staff and disciplines employees when necessary.

Performs related work as required.
Required Knowledges, Skills and Abilities: Knowledge of interviewing and investigative techniques, sources and methods used in the investigation and determination of appropriate health care financial resources and benefits for clients.

Knowledge of practices and procedures utilized in the reimbursement office and of the maintenance of various client accounts, records and files.

Knowledge of Blue Cross/Blue Shield, railroad retirement, social security, Medicaid, private health care insurances, other health care benefit programs and/or county liability for clients' health care and maintenance costs.

Knowledge of per diem rates appropriate for the level of clients' health care and maintenance and the financial records and data used in reimbursement office operations.

Knowledge of Departmental reimbursement office rules, regulations and policies.

Knowledge of the principles and practices of modern office management.

Knowledge of business mathematics as applied in the billing and collection operations.

Knowledge of individual and group behavior and effective ways of working with people.

Ability to plan, assign, review and supervise the work of subordinate staff.

Ability to effectively communicate both orally and in writing with clients, legally responsible and liable relatives of clients, third party payors, guardians, county assistance offices, private insurance and retirement fund personnel, the public, and federal and other state or community organizations and agencies.

Ability to gather and assess clients' personal financial information and health care insurance benefits.

Ability to determine sequence and method of billing and to bill the appropriate financial/health care benefit resources.

Ability to investigate and assist eligible clients in obtaining financial support and health care benefits.

Ability to collect monies for the reimbursement of client health care and maintenance costs.

Ability to maintain multiple ledger accounts for clients' health care and maintenance accounts.

Ability to prepare periodic financial and statistical reports.

Ability to represent the Commonwealth at court proceedings or magistrates' hearings.
Ability to evaluate the performance of subordinate employees and to administer discipline when necessary.

Ability to understand and follow oral and written instructions.

MINIMUM EXPERIENCE AND TRAINING: One year of experience as a Facility Reimbursement Technician;

OR

Two years of experience involving public contact work in office management which included billing and collection of accounts or debts in a health facility; and completion of two years of college level work with major course work in business administration, finance, accounting, or health care management;

OR

Any equivalent combination of experience and training.