FACILITY REIMBURSEMENT OFFICER 2

S0862
Pay Group 7
November 17, 2015

Definition: This is technical, administrative and supervisory the work in billing and collecting money for the reimbursement for the costs of health care and maintenance provided for clients in a Mental Health facility or State General Hospital within the Department of Public Welfare (DPW) or the Veterans Homes facilities within 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 a high turnover rate in client admissions and discharges, or outpatient treatments, or a high number (approximately 100 or more) monthly reassessments conducted at Veterans Homes Facilities; and by the variety and diversity of health care financial resources and complexity of accounts billed, such as Medicare, Medicaid, Blue Cross/Blue Shield, veterans' benefits, social security, railroad retirement, private insurances, and/or liable relatives or counties. Work involves reviewing admission/discharge, or outpatient treatment data; assessing maintenance costs based on the appropriate level of clients' care and gathering information from county assistance offices, Social Security Offices, banks, other state agencies, client guardians, legally liable relatives or from the client, and determining the clients' financial resources and health care benefits. Work includes billing the appropriate health care benefit resources; collecting and depositing funds collected 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 projects. Records are reviewed through federal and state audits. Supervision is exercised over a clerical and technical reimbursement office staff and may include supervision of admission/discharge and data processing staff. Administrative and technical supervision is provided by a higher level facility administrator or from a Facility Reimbursement Program Manager who monitors, reviews and evaluates the work performed for results achieved.

Examples of Work: Plans and supervises the reimbursement activity at a Mental Health facility, State General Hospital or 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, various 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 for abatement of costs for the health care and maintenance provided for clients.
Reviews admission/discharge or outpatient treatment data for accuracy to be used in monthly reports and to determine maintenance charges based on the appropriate level of client health care.

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 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 Medicare, 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.

Plans, schedules and supervises the work of the admission/discharge/data processing staff in a State General Hospital or Veterans Home facility.

Maintains multiple ledgers to account for clients' health care and maintenance funds, 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 administrator or Facility Reimbursement Program 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 or administrative supervisor.

Provides client census, billing charges and collections data to the facility accountant for completion of the Medicaid and/or Medicare Cost report(s), as required.

Provides actual client census and collections data and census and collections estimates for future fiscal planning to the Office of Mental Health or Bureau of State General Hospitals and/or appropriate administrative staff in the Veterans Homes facilities.

Represents the Commonwealth at court proceedings or magistrates' hearings relative to liability assessments, delinquent accounts and write-off requests.
Determines and implements appropriate billing charges for new client health care and maintenance services.

Provides on-the-job training and provides or 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 account records and files.

Knowledge of Medicare, Blue Cross/Blue Shield, union retirement funds, 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 Shared Medical Systems coding used in State General Hospitals and/or Veterans Homes facilities.

Knowledge of Departmental reimbursement office rules, regulations and policies.

Knowledge of the Mediqual and Health Care Cost Containment programs which are referenced by physicians, utilization review staff and administrators.

Knowledge of the principles and practices of modern office management.

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

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

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

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

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,
insurance and retirement fund personnel, the public, and federal and other state or community organizations and agencies.

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

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

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

Ability to determine and implement appropriate billing charges for new client health care and maintenance services which result from the introduction of new diagnostic procedures and equipment.

Ability to evaluate the performance of subordinate employees and to administer discipline when necessary.

**Minimum Experience and Training:** One year as a Facility Reimbursement Officer 1; OR

Two years of experience as a Facility Reimbursement Technician; OR

Three years of experience involving public contact work in office management which included the billing and collection of accounts or debts in a health care 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.