



PREMIER SURGICAL ASSOCIATES

Overprovisions Coordinator

Summary of Duties: Responsible for corresponding with insurance companies regarding overpayments and coordinating recoupment. Responding to requests for refunds from insurance companies and disputing or approving as appropriate. Responsible for processing refund checks or credit card transactions to patients who have an unapplied balance on account.

Reports to: Billing and Revenue Director

Supervises: None

Essential Functions:

1. Review all credit balances and prepare refund checks where appropriate.
2. Run reports weekly and apply refunds when necessary.
3. Respond to refund requests from Insurance Companies.
4. Identify and resolve any patient questions and complaints.
5. Answer patient phone calls regarding claims.
6. Maintains strict confidentiality of PHI following Premier HIPAA policy and government regulation. Maintains strict confidentiality of employee information.
7. Any other duties assigned by the Billing and Revenue Director or COO.

The jobholder must demonstrate current competencies and experience applicable to the job position.

Education: High School diploma or GED.

Experience: Minimum **five** years' experience in a medical billing office setting dealing with insurance companies and billing. Overprovision experience preferred.

Requirements: Certificate/License: none.

Knowledge:

1. Knowledge of medical billing and collections practices with understanding of fee schedules and how modifiers affect reimbursement.
2. Knowledge of medical billing software, Excel, and Word.
3. Knowledge of insurance companies' websites, policies and procedures related to overpayments.
4. Knowledge of legal and regulatory government provisions relating to collections.

5. Knowledge of most frequent insurance company denial codes and/or reason for refund requests.

Skills:

1. Skill in planning, organizing and prioritizing.
2. Skill in using computers and office equipment.
3. Skill in customer service principles by using appropriate phone protocol.
4. Skill in dealing with high volume of detailed information.

Abilities:

1. Ability to identify refunds.
2. Ability to deal courteously with patients, office staff and insurance personnel.
3. Ability to communicate effectively and clearly, written and verbal.
4. Ability to write effective refund dispute letters.
5. Ability to organize and prioritize tasks effectively, written and verbal.
6. Ability to pay attention to very detailed tasks and follow up frequently.
7. Ability to work effectively as a team member with physicians, CEO and other staff.
8. Ability to type 45 wpm.

PHYSICAL/MENTAL DEMANDS:

Lifting up to: <input type="checkbox"/> 5 lbs. <input checked="" type="checkbox"/> X 20 lbs. <input type="checkbox"/> 40 lbs. <input type="checkbox"/> 60 lbs. <input type="checkbox"/> Over 60 lbs. Pushing up to: <input checked="" type="checkbox"/> X 25 lbs. <input type="checkbox"/> 50 lbs. <input type="checkbox"/> 150 lbs. <input type="checkbox"/> 250 lbs. Manual Dexterity: <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> X High Other: Vision should be correctable to 20/20 Hearing should be within normal limits. Occasional stress related to workload and deadline goals. Must be able to view computer screens for long periods._____ _____	Average % of time during regular shift devoted to:					
	Standing <input checked="" type="checkbox"/> X 0-20 <input type="checkbox"/> 21-40 <input type="checkbox"/> 41-60 <input type="checkbox"/> 61-80 <input type="checkbox"/> 81-100	Walking <input type="checkbox"/> X 0-20 <input type="checkbox"/> 21-40 <input type="checkbox"/> 41-60 <input type="checkbox"/> 61-80 <input type="checkbox"/> 81-100	Squatting <input type="checkbox"/> 0-20 <input type="checkbox"/> 21-40 <input type="checkbox"/> 41-60 <input type="checkbox"/> 61-80 <input type="checkbox"/> 81-100	Sitting <input type="checkbox"/> 0-20 <input type="checkbox"/> 21-40 <input type="checkbox"/> 41-60 <input type="checkbox"/> 61-80 <input checked="" type="checkbox"/> X81-100		
Indicate % of time employee must perform each activity						
		0-20	21-40	41-60	61-80	81-100
Repetitive Motion:						
Right hand		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x
Left hand		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Right foot		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Left foot		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A <input type="checkbox"/>						
Bending:						
to waist		x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
to floor		x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A						
Reaching:						
to shoulder		x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
above shoulder		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A <input type="checkbox"/>						

Environmental/working conditions:

Remote or hybrid position. Rare evening and/or weekend work. Interaction with others is frequent and at times, interruptive. Frequent telephone contact with insurance companies and patients.

This description is intended to provide only basic guidelines for meeting job requirements responsibilities, knowledge, skills, abilities and working conditions may change as need evolves.

Revised January 2024

I have received and read my job description.

Employee signature _____ Date _____