



## Klamath Tribal Health & Family Services

3949 South 6<sup>th</sup> Street

Klamath Falls, OR 97603

Phone: (541) 882-1487 or 1-800-552-6290

HR Fax: (541) 273-4564

Open: 01/22/2024  
Close: 02/02/2024

EXEMPT  X   
NON-EXEMPT    

### POSITION DESCRIPTION

**POSITION:** BUSINESS OFFICE MANAGER

**RESPONSIBLE TO:** Health Finance Officer

**SALARY:** Step Range: 35 (\$75,292) - 54 (\$132,023); Full Benefits

**CLASSIFICATION:** Professional, Regular, Full-time

**LOCATION:** Klamath Tribal Health & Family Services  
3949 South 6<sup>th</sup> Street  
Klamath Falls, Oregon

**BACKGROUND:** Comprehensive

### POSITION OBJECTIVES

Klamath Tribal Health & Family Services is a Tribally operated health facility offering direct medical, dental, pharmacy, mental health, and alcohol/drug counseling services to Native Americans and Alaska Natives residing within the service delivery area. Non-emergency transportation services are offered. The Business Office Manager is responsible for the direction of daily operations and procedures that ensure that all insurance claims are billed correctly and followed up on in a timely manner to ensure prompt resolution of the claims. The Business Office Manager is responsible for managing patient accounts in this highly complex, multi-disciplinary business office environment. The incumbent shall train other members of the Klamath Tribal Health Business Office Staff and shall participate in all functions of the billing cycle. The incumbent shall also function as a resource for clinic providers and staff and will assist with billing questions, and quality assurance activities. The Business Office Manager is responsible for the managerial responsibilities of the Business Office staff.

## **MAJOR DUTIES AND RESPONSIBILITIES**

1. Exercise the full range of supervisory duties of Business Office staff; including but not limited to overall work planning, schedules, priorities, work assignments, progress of the work and problem areas as they arise. Resolve complaints or minor grievances; work with employees on matters related to less than adequate performance, keep employees informed of management policies and goals.
2. Develop and maintain procedures for efficient and accurate processing of encounters. Ensure all encounters are processed and submitted with any pertinent information to the insurance carriers on a weekly basis. Coordinate the paper/document flow related to billing and patient accounts.
3. Review patient ambulatory encounter for each provider and assure that the appropriate ICD-X-CM & CPT codes are accurate as outlined by the CMS guidelines. Assure medical Necessity billing guidelines are met.
4. Ensure that all applicable billing forms are submitted with the most accurate data and adequately reflects Ensure continued education of department staff on coding and billing compliance trainings, seminars, and WebEx trainings.
5. Analyze and track claim denials, rejections and Payer information requests to identify and implement revenue enhancement opportunities. This includes, but is not limited to, calling the appropriate provider or department staff for clarification of patient encounter date.
6. Identify and establish relationships with third party insurers to improve patient revenue.
7. Work outstanding A/R by reviewing, rebilling, and adjusting accounts to ensure accurate and thorough billing of claims, by running reports and working on claims, track and monitor claims processing, ensure timely follow-ups for the payment of bills; identify, and resolve all outstanding/pending claims.
8. Oversee timeliness of insurance collections, billing efficiency, payment posting accuracy and reconciliation of third party insurance payers.
9. Complete contracting applications with insurance companies for Klamath Tribal Health & Family Services' providers, including tracking when contract was received, completed by provider and mailed to proper agency. Track effective date of each contract and provider numbers assigned by each agency.
10. Provide timely, complete and accurate monthly business office accounts receivable reports to the Health finance officer, and Health General Manager. Run Month-end reports, provider statistical data, insurance carrier data, and any reports requested

for auditing purposes. Identify, collect, and report relevant statistical data to reflect the activities of the department and staff.

11. Assist department staff in various functions required to monitor and collect delinquent insurance reimbursement of claims. Ensure resubmission of claims and attach any information required by insurance companies to process claims.
12. Lead regular quality assurance activities for the department. Arrange coding/chart audits and documentation meetings with Business Office Staff and Medical Providers/Staff to clarify documentation issues. Create and maintain meeting minutes for compliance purposes.
13. Perform table maintenance in Next-Gen, including fee schedule, insurance coding, provider information updates and other needed system function updates.
14. Prepare annual business office budget and manage the department consistent with approved budgetary goals. Review and monitor department expenditures.
15. Prepare annual revenue forecast of potential third party billing revenue from existing data to assist with organizational budgeting.
16. Research insurance company rules and policies on what services and types providers they will cover. This may include researching OARs and ORS definitions of scope of practice for a given provider and their services.
17. Responsible for keeping staff apprised of current Medicare, Medicaid and commercial insurance plan rules and regulations as they apply to an FQHC and 638 Tribal organizations to ensure department compliance. This includes downloading the most current version of the Program Rulebook from the Department of Human Services and CMS websites...
18. Ensure continued education of department staff on coding and billing compliance trainings, seminars, and WebEx trainings.
19. Assess and analyze existing workflows used by departments and provide recommendations to improve methods for data collection that will increase potential revenue.
20. Collaborate with Department Managers on the development of workflows for the programs for billing purposes.
21. Work closely with Pharmacy Billing Staff by providing ICD-10 codes, comparing patient insurances on file, reporting month revenue, notifying any billing issues with OHS, CHA or private payers.

22. Interact with local state and federal agencies on topics of billing requirements provider enrollments and organization enrollment.
23. Responsible for reconciling the third party revenue in NextGen with the General ledger in the finance department. Prepare third party revenue reports for yearly financial audit.
24. Responsible for tracking, monitoring and submitting 100% FMAP claims for OHA on a quarterly basis, Track and report reimbursement payments.
25. Responsible for the setup and maintenance of commercial and government insurance payer connections through the clearinghouse. Manage the contract and agreements with the clearinghouse.
26. Attend all supervisory meetings as well as other meetings at the request of the Health finance officer or Health General Manager.
27. Attend required trainings, seminars, conferences, Third Party Revenue workshops, DMAP Tribal or FQHC quarterly meetings.
28. Like all employees of the Klamath Tribes, the incumbent will be called upon to accomplish other tasks that may not be directly related to this position, but are integral to the Klamath Tribes' broader functions, including but not limited to, assisting during Tribal sponsored cultural, traditional, or community events that enable the successful operation of programs and practices of The Klamath Tribes as aligned with The Klamath Tribes' Mission Statement. Some of these tasks may be scheduled outside of regular work hours, if necessary.

### **SUPERVISORY CONTROLS**

All major duties are performed with minimum supervision from the Health Finance Officer who defines and establishes overall program objectives and operation and specifies resources available. These duties are performed using sound judgment and comprehensive understanding of the operational environment of the position.

Assignments are performed according to various established office procedures using set standards. New assignments are provided in detail, as well as changes in current procedures. Major or new issues are referred to supervisor.

### **KNOWLEDGE, SKILLS, ABILITIES**

Technical knowledge and understanding of medical terminology and anatomy, encountered in daily routing of abstracting coding data from a variety of medical and financial forms and sources.

Technical knowledge, skill and understanding of the American Medical Association developed CPT-X coding system in order to acquire, interpret, and resolve problems based on information derived from system monitoring reports to be carried over to the required billing forms.

Technical knowledge, skill and understanding of the concepts of the coding system, International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-X-CM) form classification of diseases and/or procedures.

Knowledge and understanding of the CDT Coding.

Knowledge and understanding of HCPCS Coding.

Knowledge and understanding of the behavioral health services, DSM—IV.

Ability to develop and evaluate policies and procedures.

Skill in planning, directing, and administering efficient departmental procedures and to professionally direct staff in day-to-day activities, including tracking multiple projects.

Skill in establishing and maintaining cooperative working relationships with other employees.

Ability to communicate professionally and effectively in written or verbal form and work effectively with staff, managers, and administrators. This person should be able to express themselves in a clear and concise manner for the purposes of correspondence, reports, and instructions, as well as for obtaining and conveying information.

Must possess strong analytical capabilities. Above average ability to work with numbers and set standards in order to assure proper payments and adjustments.

Ability to operate computers using Word, Outlook, and Excel.

Ability to work with minimal supervision. Must be dependable, thorough, accurate, well organized and detail oriented.

Ability to conduct self in accordance with KTHFS Employee Policy & Procedure Manual.

Ability to maintain strict confidentiality of medical records and adhere to the standards for health record-keeping, HIPAA and Privacy Act requirements.

## **QUALIFICATIONS, EXPERIENCE, EDUCATION**

**Minimum Qualifications:** *Failure to comply with minimum position requirements may result in termination of employment.*

- **REQUIRED** to possess a Bachelor's Degree in Health Information Management, Healthcare Administration Business Administration, or Business-related field OR a minimum of four **(4)** years of equivalent combination of specialized training and experience demonstrating technical knowledge of medical terminology and the CPT and ICD-X-CM coding systems. **(Must submit copy of degree, transcripts or training certificates with application.)**
- **REQUIRED** One **(1)** year of supervisory experience.
- **REQUIRED** to possess and maintain one **(1)** of the following nationally recognized professional medical coding certifications; AAPC **(CPC)** or AHIMA **(CCS-P)**. Applicants who do not currently possess the required certification must obtain one within one year of hire date. KTHFS will cover the associate cost.
- **REQUIRED** to demonstrated knowledge of Medical Terminology.
- **REQUIRED** to have knowledge and experience in third party reimbursement, internal audits, budgeting, financial analysis, and management information systems.
- **REQUIRED** to have computer and/or word processor experience.
- **REQUIRED** to submit to a background and character investigation, as per Tribal policy. Following hire must immediately report to Human Resource any citation, arrest, conviction for a misdemeanor or felony crime.
- **REQUIRED** to submit to annual TB skin testing and adhere to KTHFS staff immunization policy in accordance with the Centers for Disease Control immunization recommendations for healthcare workers.
- **REQUIRED** to accept the responsibility of a **Mandatory Reporter** in accordance with the Klamath Tribes Juvenile Ordinance Title 2, Chapter 15.64 and General Council Resolution #2005 003, all Tribal staff are considered mandatory reporters.

### **Preferred Qualifications:**

Knowledge of Centers for Medicare and Medicaid Services **(CMS)** Federally Qualified Health Centers **(FQHC)** and the Prospective Payment System **(PPS)** reimbursement methodology.

**Indian Preference:**

Indian and Tribal Preference will apply, as per policy. **(Must submit tribal documentation with application to qualify for Indian Preference).**

**ACKNOWLEDGEMENT**

This position description is intended to provide an overview of the requirements of the position. It is not necessarily inclusive and the job may require other essential and/or non-essential functions, tasks, duties, or responsibilities not listed herein. Management reserves the sole right to add, modify, or exclude any essential or non-essential requirement at any time with or without notice. Nothing in this job description, or by the completion of any requirement of the job by the employee, is intended to create a contract of employment of any type.

**APPLICATION PROCEDURE**

Submit a Klamath Tribal Health & Family Services **Application for Employment** with all requirements and supporting documentation to:

**Klamath Tribal Health & Family Services**  
**ATTN: Human Resource**  
**3949 South 6<sup>th</sup> Street**  
**Klamath Falls, OR 97603**  
[jobs@klamathtribalhealth.org](mailto:jobs@klamathtribalhealth.org)

IT IS THE RESPONSIBILITY OF THE APPLICANT TO PROVIDE SUFFICIENT INFORMATION TO PROVE QUALIFICATIONS FOR TRIBAL POSITIONS.

**Please Note:** If requirements are not met, i.e., submission of a resume in lieu of a tribal application or not including a required certification, your application **will not** be reviewed and will be disqualified.

Indian Preference will apply. In accordance with Klamath Tribal policy, priority in selection will be given to qualified **applicants who present proof of eligibility for “Indian Preference”.**

**Applications will not be returned.**

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Employee Signature

Date

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Supervisor Signature

Date