



Job Description

Department: Support Staff

Job Title: Insurance Processor

Reports to: Chief Financial Officer

Job Purpose: The Insurance Processor is responsible for completing day-to-day insurance tasks that allow the company to collect and bill for services provided.

Essential Duties and Responsibilities:

- Complete credentialing paperwork for all contract and full-time employees so that payment for service can be received in a timely manner.
- Update provider credentialing files with current provider license, malpractice insurance, controlled substance license, and any other relevant credentialing documentation.
- Ensure credentialing is in compliance with all regulatory standards by calling insurance companies, universities, and certification boards as well as cross-checking all information against government-regulated databases.
- Create and maintain important credentialing reports to include information regarding accreditation, facility privileges and membership in associations or other groups.
- Open and distribute mail to employees
- Post all insurance checks and patient payments to patient accounts on a daily basis.
- Set fees and make payment arrangements for appropriate patients.
- Complete daily electronic and paper billing.
- Create new insurance, payment, and adjustment codes, as needed.
- Complete calls to insurance companies to gain authorization for services.
- Enter and request patient/insurance refunds.
- Conduct insurance denial and unpaid claims investigations.
- Investigate patient accounts before turning over to collection agency.

Additional Duties and Responsibilities:

- Accomplish all tasks as appropriately assigned or requested.

Competencies:

- **Social Skills**—the individual professionally interacts with employees and patients and models a positive teamwork attitude.

- Problem solving—the individual identifies and resolves problems in a timely manner and gathers and analyzes information skillfully.
- Oral communication—the individual speaks clearly and persuasively in positive or negative situations.
- Written communication—the individual edits work for spelling and grammar, presents data effectively and is able to read and interpret written information.
- Leadership—the individual inspires and motivates others to perform well, accepts feedback from others.
- Quality management—the individual looks for ways to improve and promote quality and demonstrates accuracy and thoroughness.
- Judgment—the individual displays willingness to make decisions, exhibits sound, accurate, and ethical judgment and makes timely decisions.
- Planning/organizing—the individual prioritizes and plans work activities, uses time efficiently and develops realistic action plans.
- Safety and security—the individual observes safety and security procedures and uses equipment and materials properly.
- Interpersonal skills—the individual maintains confidentiality, remains open to others' ideas and exhibits willingness to try new things.

Experience and Education:

Required:

- High School diploma or GED
- Previous customer service experience
- Previous insurance experience

Preferred:

- Knowledge and experience working with mental illness
- Knowledge of community resources
- Bi-lingual candidates encouraged to apply
- Completion of the National Career Readiness Certificate through Skilled Iowa

“This job description is not intended to be all-inclusive and does not constitute a written or implied contract of employment. The employee will be expected to perform other reasonably related duties as assigned by the immediate supervisor and / or other management personnel.”