



Bill Review Manager

The Bill Review Manager is responsible for facilitating the maximum savings possible for clients by accurately analyzing and processing large, complex medical bills. Bill Review requires an affinity for medical billing, coding and claims, and a meticulous attention to detail to identify errors and discrepancies.

Position Specifics: Exempt position; option to work remotely

The job responsibilities will include, but are not limited to:

- Responsible for management of all Bill Review related operations, including management of Bill Review staff members.
- Responsible for all Bill Review Quality Initiatives.
- Accurately and appropriately analyze complex medical bills and make payment recommendations based on claim history, medical notes, usual and customary rates (UCR), statutory regulations including state laws and fee schedules, available MPN/PPO contracts, coding guidelines, client instructions, and company policies and procedures.
- Generate accurate and easy-to-understand Explanation of Review (EOR) statements.
- Participate in the quality assurance (QA) process from initial receipt of bills through final payment.
- Protect system integrity: monitoring and correcting duplications and inaccurate/outdated data.
- Communicate with medical providers to obtain needed information and resolve bill-specific issues.
- Communicate directly with clients, offering excellent customer service by responding to and answering their questions quickly and professionally.
- Participate in ongoing training to enhance job skills and knowledge.
- Other duties as assigned.

Job Requirements:

- High School Diploma required, some college or college degree preferred
- 5+ years of experience in complex Workers' Compensation Bill Review with customer service exposure.
- Knowledge of medical terminology, CPT codes, and DRG.
- Ability to read, analyze, and interpret technical procedures, medical reports, state laws and fee schedules.
- CPC (Certified Professional Coding) coursework or certification a big plus.
- Experience managing staff of 10+ preferred.
- Other medical/health care/insurance industry experience a plus
- Excellent Written and Oral Communication Skills
- Excellent Interpersonal Skills
- Strong Organization Skills
- High comfort level with computers and computer programs (MS Word, MS Excel, Email)
- Ability to work independently with minimal supervision
- Ability to meet deadlines in a high pressure, time sensitive environment
- Ability to lift up to 20 lbs
- Sit (approx. 75-100% of the time), stand (approx. 0-25% of the time), type (approx. 75-100% of the time) and do the job with or without reasonable accommodation.