

Interested parties should submit resumes with cover letter to Aisha Muslim, Director of Organizational Management, amuslim@jespy.org. Please enter “BILLING ADMINISTRATOR” in the subject line. For more info feel free to call 973-319-4660.

Job title	Billing Administrator
Classification	Salary

Job Purpose

Under the supervision of the Director of Operations, the Billing Administrator will be responsible for overseeing and submitting Fee for Service Billing through CareLogic electronic health record system, monthly vouchers through the fiscal intermediary as well as invoicing for private pay, DDD, Medicaid, and DVR. The Billing Administrator demonstrates knowledge of JESPY House, Inc.'s quality mission, vision, and values. In addition, this position actively participates in quality improvement projects (i.e. communicating issues, offering suggestions) to ensure ongoing excellence for JESPY's clients, staff, and programs. This position is also responsible for assisting in the tracking of timely documentation submitted in the CareLogic electronic health record system. This position is responsible with staying abreast of current trends as they relate to billing practices and staying aligned with best practices.

Essential Functions

- Learns and follows the Agency's policies and procedures by attending mandatory in-service programs given by the Agency.
- Act as a key player in implementation of the accounting billing module, through our Electronic Health Record (EHR). Some duties include, but are not limited to, data entry and configuring activities.
- Overseeing billing through our EHR including entering charges and submitting claims as well as additional set up tasks including:
 - Entering ISP and SDR data in the billing module
 - Setting up fiscal periods
 - Configuring payers and billing types
 - Inputting billing groups and billing info
 - Data entry of billing rates
- Ensure activities outlined in the Policy and Procedure Manual are followed for programmatic areas including:
 - Direct-care service that was provided has a valid prior authorization
 - Claims include participant information and service information (such as Medicaid ID, diagnosis, procedure code, rate etc.) which can be found within the service plan and service detail report
 - Service is properly documented along with any deliverable documents necessary to substantiate the claim in the case of an audit (such as strategies, time sheets, behavior plans)
- Handle accounts receivable reconciliation, claims corrections, and resubmission process
- Interact with payers (e.g. Medicaid, Insurers)
- Data entry from billing module to the agency accounting system
- Work as a team member of the Business Office
- Assist with Medicaid and DDD audits as required
- Business Office cross training as required