



Bilingual Administrative Medical Biller

About the Center: Join a team that makes a daily positive impact in the lives of our community members! The Center for Well-Being (Center) is a local non-profit committed to creating a healthier, more equitable Sonoma County for all. Our community-based work advances systems and policies that address health and other inequities, and we have deep partnerships with local NGOs, health care providers, and advocacy groups to advance this work. We support individuals and families to live healthier, more active lives through education, advocacy, and resources – and we have fun while doing it! The Center champions a collaborative, communicative, and creative work culture where each individual is empowered to do their best and valued for their contribution to our mission. We also offer a competitive benefits package and a generous time off policy. Together, we transform lives!

Position Overview: The Administrative Medical Biller will join the cardiac rehabilitation and nutrition team and support referral processing, authorization submission, claim creations, submitting follow-ups, mailing patient statements, and reports. Additionally, the Administrative Biller will assist with general administrative tasks as needed. **This is an in-person position.** This is a great opportunity to join a dedicated group of individuals in a highly collaborative team environment that helps individuals regain their strength, confidence, and quality of life.

Status: Fulltime, Non-Exempt

Rate of pay: Starting hourly: \$24

Reports to: Senior Administrative Manager

Responsibilities:

Medical Billing and Authorizations

- Creating and submitting medical claims to insurance companies, ensuring accuracy and completeness.
- Following up on unpaid claims and initiating appeals for denied ones within standard billing cycle timeframes.
- Review patient medical records, insurance information, and treatment plans to determine the need for prior authorizations from insurance companies.
- Verify patient insurance coverage and benefits.
- Contact referring providers and insurance companies to gather necessary information, submit authorization requests, and follow-up on approvals.



- Maintain accurate and detailed records of all authorization requests, approvals, and denials, ensuring compliance with HIPAA regulations and healthcare billing standards.
- Communicate with patients to explain pre-authorization process, answer questions, and provide updates on their authorization status.
- Submit Treatment Authorization Requests and related paperwork for Enhanced Care Management (ECM) patient care through CalAIM.
- Process refund requests.
- Mail patient statements and paper medical billing claims.
- Correctly enter payment and charge in the Center's Electronic Health Record.
- Coordinate and clarify with providers on information that seems incomplete or is lacking for proper account/ claim adjudication, as needed.
- Assist with billing audit related information.
- Assist with Medicare Denials submit paper claims to Partnership
- Contribute to team effort by accomplishing related results as needed.
- Promote effective working relations and work effectively as part of a team to facilitate the department's ability to meet its goals and objectives.
- Submit weekly and monthly reports to the Senior Administrative Manager.
- Provide provider communication after claim submission.

Administrative Tasks

- New referral processing and ensure that referrals are processed accurately in a timely manner.
- Entering all referral data into the referral database management.
- Creating new patient files in the electronic health record.
- Provide excellent customer service to patients and their families.
- Support the operations team as needed.
- Other duties as assigned.

QUALIFICATIONS/ REQUIREMENTS:

- Ability to work collaboratively in a fast pace and dynamic team-based environment.
- Knowledge in HIPAA compliance required.
- Knowledge in Medicare and Medical billing and compliance.
- Experience with electronic health records.
- Experience with database management.
- Ability to work independently.
- Strong communication skills both verbal and written.



- Strong interpersonal skills.
- Proficiency with Microsoft Office applications including Outlook, Word, and Excel.
- Detail oriented with consistent follow-through.
- Bilingual Spanish/English

TO APPLY: Please send your resume and cover letter to info@nccwb.org