

Claims Specialist

Our established Medical Management Company is built on more than 100 years of collective experience in the managed care (healthcare) industry. We specialize in managing independent groups of physicians with both commercial and senior managed care (HMO) patients.

We are looking for a super star candidate as our full-time, *Claims Specialist*, responsible for processing medical claims, answering customer service inquires and assisting with health plan audit preparation for the company's IPA clients pursuant to designated production quotes for accuracy and productivity benchmarks

Position Requirements:

- Knowledge of health care industry and/or managed care claims processing - 1-3 years of experience minimum.
- Knowledge in ICD-10, HCPCS and CPT coding. Coding Certification a plus
- Requires the ability to speak, read, write and understand English and other general educational skills as is generally obtained by completing high school or a GED.
- Ability to write routine reports, correspondence, and procedure manuals.
- Ability to effectively present information and respond to questions from groups of managers, customers and other employees of the organization.
- Excellent computer skills required specifically Word, Excel, Microsoft Outlook and PowerPoint.

Primary Responsibilities:

- Accurately process fee for service claims that have been accepted for payment utilizing the in-house claims processing system, and follow all departmental policies and written work instructions.*
- Request and follow-up on additional information as needed for incomplete claims according to department timelines.*
- Answer customer service calls in the claims queue a minimum of 10-12 hours per week.*
- Triage claim issues and accurately adjust claims according to company and departmental policy.*
- Assist Senior Claims Specialist with preparation of health plan audits, 10-day letter research and other associated audit related tasks.*
- Perform data entry of medical claims as needed.
- Assist in daily mail sorting, batching and scanning of paper claims, as well as regular purging of filed paper claims per department schedule.
- Adhere to department task specific timeframes.
- Complete other projects as assigned by supervisor.
- Treat peers, superiors, subordinates, clients and vendors with fairness, courtesy and professionalism and contribute to the overall positive work environment of the department and the Company.*
- To complete other tasks as assigned.

Our leadership operates within the highest level of integrity and respect, empowering staff with a strong support system. We are offering a solid opportunity with a growing company including full



benefits, paid holidays and a competitive compensation within a progressive, friendly work environment.

If you consider yourself a qualified, stellar candidate driven to demonstrate your initiative and reliability, please submit your resume with "**Claims Specialist**" as the subject to jobs@pdtrust.com.

Thank you for your interest in joining our team; we look forward to hearing from you!

~Equal Opportunity Employer~