

PayerWatch

Preventing Denials. Winning Appeals.

PayerWatch, Inc. is a nationwide trusted leader in Healthcare revenue recovery. We use a twofold approach to equip hospitals and health systems to achieve better outcomes at a lower cost. Our Veracity Software and AppealMasters service help prevent and lower denials and reduce the cost of the claims appeals process.

Job Title: Appeal Coordinator

Reports to: Senior Director of Clinical Appeal Services

Job Type: Full Time, Non-Exempt

Job Description:

The Appeal Coordinator is responsible for having situational awareness of their account(s). The Appeal Coordinator has demonstrated the following qualities to advance to this position including, but not limited to:

- Outstanding attention to detail
- Thorough understanding of assigned account(s)
- Demonstrates organizational and time management skills needed to manage accounts successfully

Duties and Responsibilities

To perform this job successfully, the Appeal Coordinator must be able to perform each of the following job duties satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required.

- Situational awareness of the inventory
- follow up status
- Work closely with the Payer Content Unit for specific Payer insight
- Close cases as required for your account(s)
- Review medical records and provide input and needed claim information
- Reviewing Explanation of Benefits (EOB), audit and denial letters, and taking appropriate action via verbal or written appeal to challenge low payments and various denials
- Input all Payer Disputes into the database daily and complete assigned tasks.
- Preparing payer appeals for denied claims.
- Contact payers to request needed documents and follow up on pending decisions.
- Perform other duties as assigned.

Knowledge, Skills, and Abilities

- Solid problem-solving and analysis skills that demonstrate resourcefulness and attention to detail.
- Ability to work in a team environment by collaborating with others and sharing tools, skills, and knowledge.
- Demonstrated computer, prioritization, time management, and multi-tasking skills.
- Outstanding interpersonal, verbal, and written communication skills are required.
- Must be flexible and able to work in a fast-paced, heavy-volume work environment.
- Clinical: Broad-based knowledge and experience with inpatient medical care and clinical services.
- Analytical: Able to synthesize the worthy components within a medical record and formulate a convincing appeal based on evidence.
- Excellent writing skills: Able to synthesize even poorly documented medical records into a compelling written argument to overturn the reimbursement denial using carefully gleaned evidence found throughout the medical record.
- Organized: Disciplined time management skills.

Working Conditions

The Appeal Coordinator works in our corporate office.

QUALIFICATIONS Required Education and Experience

- High school or equivalent required
- Associate degree or higher preferred
- Healthcare billing office or health plan experience
- Basic skills in Microsoft Excel and Word programs: 1 year
- Proficient in Microsoft Office and Word programs
- Some prior experience in web-based applications is a plus
- 1-2 years of related experience in a related healthcare field
- Understanding of medical terminology

PayerWatch, Inc. provides equal employment opportunities to all employees and applicants for employment with regard to race, color, religion, gender, sexual orientation, national origin, age disability, genetic information, marital status, amnesty, or status as a covered veteran under applicable federal, state, and local laws.

Please email all cover letters and current resumes to the attention of Gail Adams, Human Resources Director; gadams@payerwatch.com