



# **Collections Specialist**

#### Job Overview:

We are looking for a dedicated, detail-oriented professional with a strong understanding of FQHC billing processes. This role involves managing and processing billing information, ensuring accuracy in coding, and maximizing reimbursement through diligent follow-ups and appeals.

## Responsibilities:

- Follow up on unpaid or denied claims, ensuring timely collections
- Appeal denied claims and ensure accurate resubmission
- Communicate with insurance companies, healthcare providers, and patients to resolve outstanding balances
- Verify and update patient insurance information as needed
- Maintain accurate records of collections and billing activities
- Work closely with the billing and coding team to ensure compliance with industry standards and regulations
- Qualifications:
- Minimum of 3 years of medical billing and collections experience, specifically for an FQHC.
- Strong understanding of Medical & Dental coding for an FQHC (CPT, ICD-10)
- Familiarity with EHR/EMR systems and billing software (e.g., EclinicalWorks)
- Excellent communication and negotiation skills
- Ability to handle high volumes of work efficiently and accurately
- Knowledge of insurance processes, Medicare/Medicaid, and commercial payers
- Strong attention to detail and problem-solving skills

If you meet the requirements above and are looking to contribute your skills to a rewarding role as a collector, we encourage you to apply.

## Job Type: Full-time

Expected hours: No more than 40 per week

#### **Benefits:**

- · Opportunities for advancement
- Work from home

## **Experience:**

ICD-10: 2 years (Required)

### Location:

- Maine (Required)
- Work Location: Remote/Hybrid