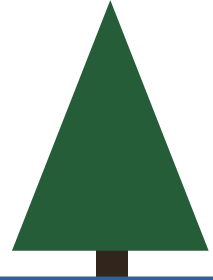




St. Croix Regional Family Health Center



OPTOMETRIC TECHNICIAN

Department: Medical
Effective date: 01/15/2025

Reports to: COO / CFO
Reviewed/Revised:

SUMMARY OF FUNCTIONS: Responsible for providing comprehensive eye care to patients.

MAJOR DUTIES AND RESPONSIBILITIES:

Patient Care & support:

- Assist with patient care and eye examinations.
- Take patient histories and update as necessary.
- Explain testing process to patients, preparing them, and administering tests on visual capabilities.
- Maintain records and inventory. Assist in equipment maintenance.
- Assist with documentation of patient encounters.
- Order and dispense eye wear.
- Perform minor repairs on broken or damaged glasses.
- Educate patients on care and maintenance of lenses.
- Ensure insurance payer records, coding, and claims are accurate. Facilitate timely billing process. Investigate denials to satisfactory resolution.
- Develops and sustains positive working relationships with the SCRFHC team.
- Successfully complete SCRFHC credentialing process and re-credentialing as necessary.
- Maintain licensure in good standing during employment.
- Complete mandatory training as assigned

FRONT OFFICE:

- Take referrals & process for an appointment
- Register patient in the system or update reg if already a patient
- Verify insurance information, benefits & eligibility.
- Submit for prior authorizations as indicated
- Schedule patient for appropriate visit type
- Check patients in and review all information, including insurance
- Collect any copay, co-insurance, balances or self-pay amounts
- Check out the patient in the system and schedule follow up visit as indicated by provider.

BILLING:

- Direct data enter all secondary claims and EOB's in MIHMS Portal, daily.
- Work with provider and insurance companies to get a claim processed and paid as identified. Confirm codes are billable and within SCRFHC Fee Schedule when creating claims.

Optometric Technician and Biller

- Research and appeal denied claims, as identified.
- Identify and bill secondary and tertiary claims, daily.
- Follow up on unpaid claims (Aging) weekly.
- Research denied claims information in the EMR to update claims with accurate insurance information for patients as identified.
- Assure CPT/HCPC codes and modifiers are appropriate to maximize reimbursement.
- Review aging (at a minimum) bi-weekly.
- Import daily ERA and EFT payments.
- Check insurance payments for accuracy and compliance with contract discounts.
- Post payments within 48 hours of receipt, or sooner when possible.
- Review patient statements for accuracy and completeness and obtain missing information.
- Telephone insurance companies regarding any discrepancy in payments when identified.
Create daily Insurance, patient payment deposit slips and copy all checks for payment posting.

EXPERIENCE AND/OR EDUCATIONAL REQUIREMENTS:

- High School diploma or equivalent required.
- Post-secondary school optometric technician training, or equivalent experience.
- Excellent communication, interpersonal skills, and organizational skills.
- Experience with electronic medical record systems and billing systems, or willing to learn.