

Hospital Medical Insurance Denials Specialist

Benefits: Candidates on temporary assignment may qualify for our competitive benefits package which includes group health, life and disability insurance and voluntary benefits such as retirement savings and holiday pay.

Salary range: \$22.12 to \$30.80 hourly

Employment status: Contract / Temporary to Hire

Description

We are seeking a highly detail-oriented and reliable Hospital Medical Insurance Denials Specialist to join our Hospital. The successful candidate will be responsible for investigating, tracking, and resolving denied medical insurance claims. We are ideally seeking someone with 2 years medical billing and medical insurance collections experience,

Responsibilities:

1. Investigating and resolving denied claims from various insurance providers.
2. Coordinate with medical coders, billers, and other staff to ensure accurate billing and collection practices.
3. Conduct thorough and detailed review of patient bills, insurance benefits, and medical records to identify discrepancies and ensure proper billing.
4. Follow up on outstanding claim denials and secure reimbursement where possible.
5. Liaise with insurance companies, healthcare providers, and patients to rectify claims denials and resolve discrepancies.
6. Responsible for identifying patterns and trends in claim denials and propose solutions for reducing denial rates.
7. Submit appeals and reconsideration requests to insurance companies for denied claims.
8. Strong understanding of HMO, PPO and Government insurance.

Requirements

Medical Billing, Medical Collections, Medical Appeals, Medical Denials, HMO - Health Maintenance Organization, PPO - Preferred Provider Organization, Hospital Inpatient, Hospital Revenue Cycle

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