MISSION: To inspire health, well-being and humanity in our community, through all of life’s stages.

JOB SUMMARY: The Medical Biller works to ensure Tepeyac Community Health Center’s financial stability and remains strong by providing, maintaining, and collecting on outstanding accounts receivables from payers and patients. The Medical Biller makes sure all claim submissions and payment receipts are posted and balanced. This position must provide excellent customer service to all patients, vendors and customers associated with Tepeyac. This role works in collaboration with all employees.

ESSENTIAL DUTIES & RESPONSIBILITIES:
• Scrub, edit, and adjust patient claims and balances within eClinicalWorks.
• Submit claims to clearinghouse within timely filing limits.
• Reconcile all payments received to eClinicalWorks.
• Work all pending claims within eClinicalWorks with identified errors.
• Answer incoming calls and respond to patients’ needs or transfer communication to the appropriate party.
• Send subsequent bills when initial attempts to collect are unsuccessful.
• Conduct appropriate follow-up when patient has lost coverage due to ineligibility.
• Process medical bills and send statements and claims to patients or to insurance providers as required.
• Work closely with Revenue Cycle Manager to help identify claim denial trends and provide possible solutions to reduce rejected and/or unpaid claims.
• Maintain work operations by following policies and procedures and reporting compliance issues.
• Participate in special projects as needed.

OTHER DUTIES AND RESPONSIBILITIES:
• Attend required internal meetings, trainings, and events.
• Other duties as assigned.

EDUCATION AND EXPERIENCE:
Minimum Education:
• High School diploma or GED certificate. Associate’s degree in business or related field preferred.

Minimum Experience:
• Medical Terminology knowledge strongly preferred
• Two to three years of billing experience within a Federally Qualified Health Center (FQHC) desired. Direct experience with Medicaid, Medicare and commercial claims submissions required. Certified Professional Coder (CPC) preferred or equivalent work experience.
• Oral and written fluency in English and Spanish.
**Knowledge, Skills & Abilities**

- Medical/Behavioral/Dental terminology strongly preferred
- Detail-oriented, efficient, organized, and able to work independently.
- Strong analytical and problem-solving skills, with the ability to make well thought out decisions.
- Excellent written and verbal communication skills.
- Highly trustworthy, discrete, and ethical.
- Maintain a creative and positive approach to communication and problem solving.
- Comfortable with change and willing to adapt to new workflows.
- Strong initiative and passion to provide healthcare to the underserved.

**Pay and Benefits:** Tepeyac Community Health Center offers a comprehensive-compensation package to all full-time employees. Benefits include medical, dental and vision insurance, a flexible spending account, a 401k, disability insurance paid for by Tepeyac, nine paid holidays, approximately four weeks of paid time off each year and over a week of sick time. The hourly range for the Medical Biller is $21.00-$25.00, depending on experience. After the onboarding process is complete, this position can be hybrid with three days in the office and two days remote.

If you are interested in applying, send your cover letter and resume to hr@tepeyachealth.org. We look forward to hearing from you!

As required by Colorado’s CMS Vaccine Mandate, all Tepeyac Community Health Center employees must be fully vaccinated against COVID-19, subject to the requirements of the American with Disabilities Act (42 U.S.C. § 12101 et seq.), Title VII of the Civil Rights Act (42 U.S.C. § 2000e et seq.), the Colorado Anti-Discrimination Act (C.R.S. § 24-34-401 et seq.), and any other relevant federal or State law. As such all persons offered a position will be required to provide valid proof of vaccination prior to starting employment.