

**Transportation**  
**Northeast Colorado Association of Local Governments (NECALG)**  
**Medicaid Billing Assistant**

**JOB TITLE:** Part-time, \$18.00/hour  
**DEPARTMENT:** Transportation/County Express, Logan County

**GENERAL JOB DESCRIPTION**

A Medicaid Billing Assistant plays a crucial role in facilitating the processing and submission of Medicaid claims for reimbursement. They are responsible for ensuring accurate and timely billing, as well as maintaining records and documentation related to Medicaid billing. This position requires a high level of attention to detail, excellent organizational skills, and a strong understanding of Medicaid billing procedures and regulations.

**JOB REQUIREMENTS AND RESPONSIBILITIES**

- Must have a High School Diploma or GED and at least one year's work experience in an office setting.
- Must have general knowledge of computers and basic Microsoft Word and Excel.
- Colorado driver's license is a requirement for this position. All applicants must provide a copy of their driving record from the Department of Motor Vehicles.
- A pre-employment drug test is required. Other required drug tests include random testing, post-accident, and reasonable suspicion. Mandatory termination if the individual employee exceeds drug and alcohol limits or for refusal to test.
- Establish a system for tracking and organizing Medicaid transportation.
- Authorize Medicaid transportation for Medicaid clients in the six-county area on a daily-basis.
- Prepare and bill in the Medicaid Web Portal for Medical and Non-Medical (HCBS) trips for the six-county area.
- Put billing batches together throughout the month to be entered into the A/R account.
- Collects Medicaid reimbursements by gathering, coding, and transmitting patient care information.
- Keeps up to date on information required for remittance of patient care by Medicaid and communicates this information to fellow billing staff.
- Reviews patient records to check for proper Medicaid coding and completeness and makes corrections accordingly.
- Analyzes patient billing records for completeness and accuracy and obtains additional information and clarification as necessary.
- Resolves billing discrepancies by conducting further research and correcting errors.
- Ensures payments by verifying accuracy of Medicaid coding.
- Resolves disputed claims by gathering, verifying, and providing additional information and following up on claims.
- Resolves discrepancies by examining and evaluating data.
- Adjusts patient bills by reviewing remittance advice and consulting with Medicaid office.
- Prepares monthly reports.
- Participates in professional educational opportunities to keep current on Medicaid billing and reimbursement procedures.
- Any other assigned duties.