

**THE NAVAJO NATION**  
**Department of Personnel Management**  
**JOB VACANCY ANNOUNCEMENT**

REQUISITION NO: DOH07214100 DATE POSTED: 07/17/17  
POSITION NO: 244004 CLOSING DATE: 07/28/17  
POSITION TITLE: Reimbursement Specialist (S)

DEPARTMENT NAME / WORKSITE: DOH/Department of Behavioral Health Services/Window Rock, AZ  
WORK DAYS: Monday-Friday REGULAR FULL TIME:  GRADE/STEP: AB61A  
WORK HOURS: 8:00 am-5:00 pm PART TIME:  NO. OF HRS./WK.: \_\_\_\_\_ \$ 31,179.20 PER ANNUM  
SEASONAL:  DURATION : \_\_\_\_\_ \$ 14.99 PER HOUR  
TEMPORARY:

**DUTIES AND RESPONSIBILITIES:**

Submits claims to third party providers; coordinates billing documents reflecting stable billing execution activities, corrections and adjustments as a part of operating fiscal management responsibilities; computes, calculates and enters billing data information; validates and transmits claims; rebills and/or corrects billing claims/statements.

Resolves billing invoice and voucher inconsistencies; verified information, reviews reports to identify claims using various types of computer software; identifies and resolves billing transactions and connecting problems; provides automated transmission of all third party claims; identifies inconsistencies and discrepancies and makes corrections; explains claims collections questions; explains governing regulations and procedures; responds to third party inquiries on post payments, exclusions, denials and appeals; prepares, validates and transmits reports of billing and data activity.

Assures claims are completed with appropriate supporting documents; performs initial research of transactions to determine cause of erroneous billing where applicable; considers financial reports of billing obligations and corrects as necessary; maintains standard reconciliation system; enters and verifies data in a computerized system and prepares reports; compiles reports; identifies sources and extracts necessary information.

Assures computations and billing documents are accurate and transmitted; monitors automated transmission of all third party claims in a timely manner; receives, examines and processes claims to assure claims are completed with appropriate supporting documents; attends related governmental meetings/consultations when necessary.

**QUALIFICATION REQUIREMENTS: (Education, Experience and Training)**

**Minimum Qualifications:**

- A high school diploma or GED; and two (2) years of experience in billing and coding medical records and third party billing.

**Special Requirements:**

- A favorable background investigation is required.
- Possess a valid state driver's license.

***(To receive full credit for education, certification, or licensure, transcripts, copies of degrees, certificates, and other appropriate documents must be submitted along with employment application.)***

**Special Knowledge, Skills and Abilities:**

Knowledge of automated databases associated with financial management software to input a range of standard billing information or adjustments; knowledge of the structure and content of accounts maintenance or other financial management related documents (e.g., invoices, reports, travel orders, payroll forms, etc.); knowledge of basic mathematical calculations; knowledge of customer services and public relations practices; knowledge of basic accounting methods and practices.

Ability to coordinates, communicate and demonstrate customer service and interpersonal skills with third party programs, healthcare professionals and customers; ability to manage fiscal matters, forecast educational and training resources and equipment needs and identifying budget needs; ability to resolve complex billing transactions and maintain the integrity of confidentiality of sharing electronic health record/medical information.

**THE NAVAJO NATION GIVES PREFERENCE TO ELIGIBLE AND QUALIFIED APPLICANTS IN ACCORDANCE WITH THE NAVAJO PREFERENCE IN EMPLOYMENT ACT AND VETERANS' PREFERENCE.**