



POSITION DESCRIPTION

Revenue Cycle Director

Reports to: Vice President of Finance/CFO

Position Status: Exempt

Supervises: Patient Accounting &
Patient Finance Teams

Effective Date: 11/14/22

GENERAL SUMMARY

The Revenue Cycle Director (RCD) reports to the Vice President of Finance/CFO and leads the patient accounting and patient finance teams. The RCD oversees the revenue cycle process and ensures accurate and timely billing of patient services (In-clinic dialysis, Home Program dialysis, and Acutes) within the time constraints of the monthly accounting closing schedule. Includes oversight of patient intake, authorization, billing, cash posting and collection functions, the design of a revenue control environment and develops new and improved revenue processes and policies. The RCD also ensure appropriate use and maintenance of the revenue cycle applications and interfaces with IT and application vendors for training and maintenance of these systems.

This position is responsible for ensuring that patient billing and processing of payment receipts are consistently completed in a timely fashion and in accordance with policy and regulations. The RCD will minimize bad debt, improve cash flow, and effectively manage accounts receivables, including timely appeals of denied or short paid accounts. The RCD will work closely with the Director of Payer Contracts to ensure contracts can be operationalized by the Billing staff and that contract performance is met. As needed, the RCD will communicate with Payers and/or Legal to ensure full expected reimbursement is received.

Additional responsibilities include coordinating day-to-day activities with other NKC personnel; liaison with patients and insurances, Medicare/Medicaid, and other organizations; and performance of all billing and collection duties and responsibilities.

DUTIES AND RESPONSIBILITIES

1. Responsibilities include Clinical and RCD System reporting, accurate and timely submission of claims, diligent claims follow-up and collections activity, identification and reporting of reimbursement trends, assisting management in claims projects, and working closely with dialysis clinic staff.

2. Establishes revenue cycle benchmarks, standards of practice with policies and procedures consistent with organizational goals, infrastructure, state, and federal requirements.
3. Assists in recruiting, interviewing, hiring, and maintaining an efficient and qualified revenue cycle staff, possessing skills consistent with position duties. Maintains the time management system for hourly employees. Is responsible for overall motivation, individual growth, hiring/firing and retaining productive department personnel. Oversees all staffing functions and provides leadership with training.
4. Maintains and develops proficiency with revenue cycle systems and communicates changes to Revenue Cycle Staff. Pursues and implements all available automated processes with commercial carriers.
5. Reviews revenue cycle reports, develops, and continues to improve collection strategies. Identifies problem payer trends and communicates to leadership. Maintains Days in AR at acceptable levels.
6. Develops and maintains relationships with all government and commercial payers to facilitate claims resolution.
7. Responsible for staying abreast of changes in Medicare, Medicaid, and private insurance billing requirements and distributes information to Revenue Cycle teams.
8. Develops goals, objectives, and competencies for Revenue Cycle teams and provides training and motivation as necessary to support teams in meeting these goals.
9. Prepares well-documented inquiries and/or appeals for reconsideration of outstanding claims. Confers with Director of Payer Contracting when necessary.
10. Maintains a regular schedule for any uncollectible accounts adjustments or writing off bad debts, including a process that documents attempt to collect or resubmit prior to removing the charge from outstanding receivables. Submits Bad Deb Write Off Report to Controller for approval.
11. Oversees the response to overpayment notices and requests for refunds appropriately.
12. Takes initiative and action to respond, resolve, and follow up regarding escalated customer service issues in a timely manner.
13. Identifies trends that may result in insurance claim rejections/denials

and remedies them expediently.

14. Keeps third-part billing agency, and/or in-house revenue cycle personnel, up to date on third-party coverage contracts, assuring that current contractual terms are understood and applied correctly to ensure proper revenue recognition in accordance with ASC 606.
15. Maintains current information for billing and collections processes for each third-party carrier.
16. Manages month-end revenue close processes including revenue analysis.

JOB CONDITIONS

Must be able to communicate effectively in English over the telephone, in writing, and in person. Duties and responsibilities are performed in an office environment. Physical activities require the ability to stand, walk, stoop, kneel, crouch, reach, lift; fingering, grasping, talking, hearing, and repetitive motions of hands, wrists, and fingers. Requires visual acuity to read, inspect information on computer monitors, and written materials.

Physical requirements include the ability to lift/move objects weighing up to 20 pounds occasionally, and up to 10 pounds frequently. The individual in this position operates the phone, computer, copy machine, fax machine, and other office equipment as required. Demonstrated skills in Microsoft Office Products and knowledge of financial software programs are required.

PLANNING

The position is responsible for planning required to implement billing-related changes. Typical planning responsibilities are:

- Assisting the Controller and/or Decision Support Manager in developing annual budget data including billing and collection goals and objectives.
- Collaborates with Director of Payer Contracts, Controller and/or Decision Support Manager to establish annual pricing changes for all services.
- Planning new revenue cycle procedures required by changes in state, federal and other regulations. This planning is done in conjunction with Information Systems personnel, the Controller, insurance carriers, and other persons.

SUPERVISION AND COORDINATION

The position supervises department personnel. Direct subordinates include Patient Finance and Accounting staff. The position is responsible for coordinating billing efforts with Patient Finance, Information Systems, Accounting, and other areas.

EXTERNAL CONTACTS

The position has contacts with business office managers and representatives in Blue Cross, Medicare, King County Medical, Medicaid, commercial insurance companies, hospitals, consultants, and other organizations. These contacts are required to clarify, check, or develop new revenue cycle -related procedures and resolve claim-processing problems.

DECISIONS

The position is responsible to the Vice President of Finance/CFO for decision-making required in the billing, patient finance and collection programs. Typical decisions include:

- Deciding whether to authorize and/or refer refunds and adjustments on patients' accounts based on review of the account and consideration of patient or other party claims.
- Decisions regarding billing systems, billing related problems and how they can be corrected.
- Decisions regarding patient finances, eligibility, and collections process.

JOB CONDITIONS and PHYSICAL EFFORT

Must be able to communicate effectively in English on the phone, in writing, and in person. Must be able to demonstrate use of appropriate software after training. Duties and responsibilities are performed in an office environment and/or a remote location. Physical activities require the ability to stand, walk, stoop, kneel, crouch, reach, lift; fingering, grasping; talking, hearing; and repetitive motions of hands, wrists, and fingers. The position requires visual acuity to read, inspect numbers on computer CRTs and written materials.

The physical requirements include the ability to lift/move objects weighing up to 20 pounds occasionally, and lift/move objects weighing up to 10 pounds frequently.

CUSTOMER SERVICE STANDARDS

Staff is responsible for demonstrating good customer service and professionalism.

1. **CONSIDERATION:** Greet customers promptly; show courtesy; recognize customer's needs; respect privacy.
2. **CONCERN:** Listen to customers; express appreciation, be non-judgmental; take responsibility.
3. **CONFIDENCE:** Show a positive attitude; take personal initiative; inform; educate and reassure; provide prompt follow-up.
4. **CONDUCT:** Hold appropriate conversations; maintain a professional appearance; establish teamwork; show professional competency.

EDUCATION AND EXPERIENCE

Five years of progressive experience in revenue cycle management or consulting. Experience with Revenue Cycle Management Systems/Practice Management systems is a plus. Demonstrated effective leadership skills, with the potential to oversee an internal billing department. Demonstrated ability to establish and maintain effective internal and external working relationships.

Significant understanding of audit processes, accounting controls and process design. Strong project management aptitude and ability to lead a project/process through from start to finish. Record of strong analytic skills being practically applied, and the ability to clearly disseminate financial and statistical information. Intermediate to Advanced computer skills in a Microsoft Suite programs. Personal philosophy of continuous process improvement

The above statements are intended to describe the general nature and level of work performed by people assigned to this classification. They are not to be considered as an exhaustive list of all job tasks performed by people so classified.

REVIEW AND APPROVAL

 _____ Vice President of Finance/CFO	11/14/2022 _____ Date
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 _____ Vice President of Human Resources/CHRO	11/14/2022 _____ Date
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