**Add logo here**

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| --- | --- | --- | --- |
| **Job title:** | Practice & billing manager | **Job category:** | Administration/billing |
|  |  |  |  |
| **Department/group:** | Administrative | **Job code:** |  |
| **Location:** |  | **Travel required:** | No |
| **Level/salary range:** | Entry  Managerial  C-Suite | **Position type:** | FT  PT  PRN |
| **HR contact:** | Practice President/Owner | **Effective date:** |  |
| **Will train applicant(s):** | Yes | **Exempt/not exempt:** | Exempt |
|  |  |  |  |

Applications accepted by email: **[practice general inbox address]**

Subject line: **[Attention: Recruiting - Job Title]**

**Job description**

Under direct supervision of the physician(s), the practice manager oversees the practice’s day-to-day operations. In conjunction with the physician(s) and professional advisor(s), makes critical business decisions to expand the practice, increase profitability, and better meet the local community’s needs.

**ROLE & RESPONSIBILITIES**

**Practice Operations**

* Works with physicians to develop business strategies and patient services.
* Designs, implements, and regularly reviews workplace policies and procedures to ensure the practice complies with federal, state, local, and other laws and regulations.
* Liaises with other members of the practice team to ensure they have the necessary support.
* Oversees daily practice operations, including appointment scheduling, billing procedures, debt collections, maintenance and cleaning, security, and occupational health and safety.
* Coordinates team members’ time off in a manner that supports necessary daily functions.
* Maintains practice equipment and orders medical supplies.
* Controls the inventory and maintenance of medications and medical equipment.
* Manages incoming correspondence.

**Financial**

* Works with a professional advisor to manage practice and department budgets.
* Works with the physician owner to ensure the availability of funds for operational consistency.
* Performs daily and month-end closing.
* Provides supporting documentation for audits.

**Human Resources**

* Leads a team of secretaries, receptionists, medical records professionals, and others as applicable.
* Coordinates hiring new team members, negotiating benefits, developing personnel policies, and resolving conflicts.
* Recruits, trains, and supervises new members of the administrative team.
* Maintains job results of direct reports by counseling and disciplining employees, planning, monitoring, and appraising job results. Conducts performance evaluations and recommends personnel actions; motivates team members to achieve peak productivity and performance. Coordinates employment termination when necessary.
* Manages team member schedules and work hours. Coordinates payroll processing in conjunction with the payroll manager.
* Verifies all overtime, holiday, vacation, and ancillary reimbursable hours with the appropriate management personnel before scheduling and approving work hours.

**Disclaimer:** While the information and guidance provided in this document is believed to be current and accurate at the time of posting, it is not intended to be and should not be construed to be or relied upon as legal, financial, or consulting advice. Before use, each document should be tailored to the unique nature of your practice, including applicable state law. Consult with an attorney and other advisors. References and links to third parties do not constitute an endorsement or sponsorship by the AMA, and the AMA hereby disclaims all express and implied warranties of any kind in the information provided.



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**Medical Records**

* Manages patient records and information system, guaranteeing medical records are stored properly.

**Marketing and Customer Service**

* Oversees marketing of the practice brand and ensures customer satisfaction.
* Interacts with patients and gains customer feedback about the practice.
* Addresses patient complaints in a compassionate and timely fashion.
* Manages the production of patient brochures, newsletters, other correspondence, and marketing and advertising material.

**Quality Programs**

* Supports quality program initiatives across practice operations.

**Billing**

* Follows up on any issues regarding the accuracy and completeness of claims.
* Audits current procedures to monitor and improve the efficiency of billing and collections operations.
* Ensures that the activities of the billing operations are conducted consistently with overall department protocol and follow federal, state, and payer regulations, guidelines, and requirements.
* Participates in the development and implementation of standard operating policies and procedures with support from billing team members.
* Reviews and interprets operational data to assess the need for procedural revisions and enhancements.
* Analyzes trends impacting charges, coding, collection, and accounts receivable. Takes appropriate action to realign team members and revise policies and procedures.
* Responsible for physician credentialing actions.
* Understands and remains updated with the latest coding and billing regulations and compliance requirements.
* Maintains working knowledge of all health information management issues, such as HIPAA and all other relevant health regulations.

**Professional Growth**

* Maintains professional and technical knowledge by attending educational workshops, reviewing publications, establishing personal networks and participating in professional societies.

**General**

* Protects the organization by keeping information confidential.
* Accomplishes the organization’s mission by completing related results as needed.
* Complies with federal, state and local legal requirements by studying policies, enforcing adherence to them, filing reports, and advising management on needed actions.
* Contributes to team effort by accomplishing related results as needed.

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**QUALIFICATIONS AND REQUIRED SKILLS**

* Bachelor’s or associate degree in business or health Management (or similar).
  + Instead of a degree, five to seven years of experience in practice management will be accepted.
* Prior one to three years of experience with medical practice management and medical billing and coding.
* Hands-on experience with spreadsheets and proprietary software.
* Proficiency in the following areas:
  + Microsoft Office.
  + Electronic health record technology.
  + Data entry.
  + Customer service, including process and people management.
  + Negotiation.
  + Reporting and financial data.
  + Organizational and leadership capabilities.
* A high degree of accuracy, attention to detail, and thoroughness.
* Decision-making and problem-solving skills.

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| --- | --- | --- | --- |
| **Reviewed By:** |  | **Date:** |  |
| **Approved By:** |  | **Date:** |  |
| **Last Updated By:** |  | **Date/Time:** |  |

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