



Unified Community Services is seeking applicants for a full-time **REVENUE CYCLE MANAGER**. The position will oversee the revenue cycle from client registration and scheduling to claims, billing, and collections.

Responsibilities:

- Supervise administrative staff while integrating with the clinical team to efficiently capture revenue.
- Guide operations for client intake, daily billing, coding reviews, denials management, payment posting, and collections.
- Ensure compliance with Medicaid, Medicare, HIPAA, payer regulations, and agency policy.
- Stay current to changes affecting revenue cycle to drive updates to electronic health record. Ensure accuracy through testing.
- Implement, train, and monitor policies and procedures affecting revenue cycle.
- Conduct audits to ensure adherence to all applicable regulations and policy.
- Monitor outstanding receivable and pursue timely collections.
- Track and analyze key performance indicators to the revenue cycle to assess performance and identify trends that may require attention.
- Prepare and deliver revenue cycle performance reports.

Qualifications:

Minimum Qualifications

- Bachelor's Degree in Business Administration, Healthcare Administration, or a related field.
- Minimum of 5 years' experience in business office environment.
- 3-5 years supervisory experience.
- Exceptional organizational, communication, and problem-solving skills.
- Ability to use initiative appropriately and make sound judgments.

Preferred Qualifications

- Coding Certification, Certified Professional Biller, Certified Specialist in Healthcare Revenue Cycle

Competitive salary and comprehensive benefit package, including Wisconsin Retirement System, health, life and disability insurance, training, and paid time off.

How to Apply: A Grant County Employment Application and job description may be obtained at www.co.grant.wi.gov (under employment opportunities) or by contacting the Human Resource Department at (608)723-2540. Screening of applicants will begin immediately and will continue until the position is filled. Submit application, resume, and letter of interest to:

Grant County Human Resources
111 S. Jefferson St. - PO Box 529
Lancaster, WI 53813

*This is an **Affirmative Action/Equal Employment Opportunity employer** (AA/EEO). All qualified applicants are encouraged to apply including minorities, veterans, women, and persons with work related limitations.*

UNIFIED COMMUNITY SERVICES
JOB DESCRIPTION

Revenue Cycle Manager

Fair Labor Standards Act (FLSA) Status: Executive Employee Exemption
Supervisor: Finance Director

Responsibilities:

I. Revenue Cycle Operations:

- A. Manage daily revenue cycle functions including registration, billing, coding, collections, and compliance.
- B. Plan, organize, and oversee department workflow to ensure accurate and timely processing of revenue cycle activities.
- C. Monitor and resolve claim issues, including denials and rejected claims.
- D. Ensure accurate submission of claims and proper posting of remittances.
- E. Track and manage outstanding accounts receivable and pursue timely collections.
- F. Analyze revenue cycle processes to identify inefficiencies and implement improvements.
- G. Monitor sliding fee scale applications and processing for compliance with agency procedures.

II. Electronic Billing Systems:

- A. Maintain and update the electronic billing components of the Electronic Health Record (EHR) system.
- B. Conduct system testing to ensure accuracy following regulatory, payer, and program changes.
- C. Collaborate with staff to develop and refine reporting tools needed for business operations.
- D. Monitor payer updates and healthcare regulations to ensure system alignment and billing accuracy.

III. Policies, Procedures & Compliance:

- A. Ensure compliance with HIPAA, CMS, payer requirements, and agency policies.
- B. Conduct routine audits to verify accuracy and completeness of financial and billing documentation.
- C. Identify and mitigate compliance risks related to billing, documentation, and financial processes.
- D. Implement and monitor departmental policies and procedures.
- E. Provide guidance to staff related to billing regulations and compliance changes.

IV. Supervision of Administrative and Billing Staff:

- A. Select employees for vacant administrative and billing support positions, subject to appropriate approval. Provide orientation.
- B. Train or arrange training for staff on billing, compliance, and revenue cycle procedures.
- C. Supervise and coordinate daily activities of assigned staff.
- D. Establish working hours and schedules to ensure adequate departmental coverage.
- E. Complete performance evaluations for assigned staff.
- F. Inform staff of new and revised policies and procedures.
- G. Conduct regular department meetings to support communication and team performance.
- H. Provide coaching, guidance, and support to staff to enhance productivity and accuracy.

V. Reporting & Financial Performance:

- A. Prepare and present routine and ad hoc revenue cycle performance reports.
- B. Track and analyze key performance indicators to assess revenue cycle performance.
- C. Identify trends that require attention and collaborate with cross-functional teams to improve outcomes.
- D. Validate rate changes and ensure proper system configuration.

VI. Training:

- A. Develop training materials and provide education to staff on billing processes, compliance requirements, and best practices.
- B. Assist staff in understanding payer rules and procedural updates.

VII. Other General Responsibilities:

- A. Participate in management or departmental meetings as needed.
- B. Be knowledgeable of and adhere to agency policies and procedures.
- C. Dress appropriately for position and function.
- D. Possess a valid driver's license and dependable transportation.
- E. Maintain a minimum of \$100,000 automobile liability insurance on each vehicle driven for agency business.

VIII. Other Duties as Assigned.

Qualifications:

I. Education, Experience, and Background Requirements:

- A. Bachelor's degree in Business Management, Health Information Management, or related field; or an equivalent combination of training and experience.
- B. A minimum of four to five years of relevant revenue cycle or billing experience.
- C. Supervisory experience preferred.
- D. Coding certification preferred.
- E. Completion of a Caregiver Background Check in accordance with DHS 12, WI Administrative Code, with no disqualifying findings unless rehabilitation approval is received.

II. Knowledge, Skills, and Abilities:

- A. Knowledge of healthcare billing, coding, accounts receivable, and payer requirements.
- B. Familiarity with electronic health record systems and billing modules.
- C. Ability to analyze financial and billing data and prepare accurate reports.
- D. Knowledge of compliance standards, including HIPAA and CMS guidelines.
- E. Ability to supervise and guide the work of others.
- F. Ability to communicate effectively and follow complex written and oral instructions.
- G. Ability to establish and maintain effective working relationships with staff, officials, payers, and the public.
- H. Strong organizational skills and attention to detail.
- I. Proficiency in Microsoft Office applications and other billing-related software.
- J. Knowledge of best practices in revenue cycle management.