Billing & Insurance Coordinator

Reports To:
Practice Management Software:
Status:

The Billing & Insurance Coordinator acts as the second checkpoint after patient checkout. This role ensures the financial accuracy of patient invoices, supports insurance processing, and manages daily financial reconciliation. Attention to detail and consistency help maintain a seamless flow between front desk operations and claims processing.

Key Responsibilities:
Post-Checkout Review:

- Receive patient charts directly after checkout from the front desk.
- Double-check procedure codes for accuracy and verify that invoices have been created correctly.
- Ensure any x-rays taken are billed and attached to the correct invoice in the practice management system.
- Verify payments from the “deposit wallet” function are properly applied.

Insurance Claims Preparation:

- Prepare claims and supporting documentation for submission.
- Make notes if charting is missing, if additional x-rays are needed, or if communication with the Dental Assistant or Provider is required to complete the claim file.
- If necessary, indicate whether follow-up with the patient’s current dentist is needed or if the patient should return for updated x-rays.
- Verify whether insurance payments (Assignment of Benefits) are designated to go to the patient or to the office by checking the ledger sheet or confirming with the Office Manager.

Mail & Claims Corrections:

- Open and review all incoming mail daily.
- Separate insurance claim payments from bills. Place bills into the designated folder for review.
- Enter all insurance check payments and immediately correct and resubmit any claims requiring updates.

Patient Communication & Financial Discussions:

- Handle patient requests for billing statements or breakdowns of amounts paid.
- Review financial questions with the Office Manager before discussing with patients.
- Clearly and professionally explain charges, balances, or claim outcomes with patients as needed.
- If a patient cancels, email the referring provider and notate the chart, following established procedures.

Treatment Plan Follow-Up:

- Collaborate with the Office Manager to follow up with patients who have not accepted proposed treatment plans.
- Conduct follow-ups using the following schedule:
  Day 1: Call the day after treatment was presented but not accepted.
  Day 7: Follow up again one week later.
  Day 14: Make a final follow-up call.
- On the final call, offer a 50% discount off the treatment total listed in the patient’s ledger, as per office protocol.

Financial & System Reconciliation:

- Monitor electronic payment platforms for incoming payments.
- Regularly check designated office emails for billing and insurance updates.
- At the end of each day, reconcile the day sheet with the online payment dashboard, including patient and insurance credit card payments.

Skills & Attributes:

- Strong attention to detail with excellent organizational and multitasking skills.
- Proficient in dental billing, insurance documentation, and financial reconciliation.
- Clear and professional communication with both internal staff and external providers.
- Dependable, proactive, and solution-oriented.

Acknowledgment & Signature
I acknowledge that I have read and understood the responsibilities and expectations listed in this job description. I agree to perform these duties to the best of my ability and understand that this document may be updated as needed.

Employee Signature: _____
Date: _____
Manager Signature: _____
Date: _____