

## APPLICATION INSTRUCTIONS

Please print off the online application and complete the first 3 pages. Feel free to include your resume and/or typed elaboration of your answers on another page if needed. Reminder this job is currently only part-time; however, has potential to be a full-time position.

### WAYS TO SUBMIT THE APPLICATION:

Scan and e-mail to: [tina.souder@hotmail.com](mailto:tina.souder@hotmail.com)

Mail to: Tina Souder, M.Ed., LPC  
1510 15<sup>th</sup> Street  
Wellington, TX 79095

Fax to: 866-832-2587

### PLEASE DO NOT HAND DELIVER TO THE OFFICE

If you have questions please enquire through e-mail at the above e-mail address. If you are considered for the position you will be called for an interview.

Thank you,

Tina Souder, M.Ed., LPC

# Tina Souder, M.Ed., LPC

1510 15th Street  
Wellington, TX 79095  
tina.souder@hotmail.com

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

Name \_\_\_\_\_ Date of application \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

## 1. GENERAL INFORMATION:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation?  Yes  No

Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.)  No  Yes If yes, explain: \_\_\_\_\_

## 2. EDUCATION & TRAINING:

Circle last grade completed - Grade 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters \_\_\_\_\_ Doctorate \_\_\_\_\_

Name & Address of School

Last High School Attended/Address:

College or University/Address

College or University/Address Other School (Technical, Vocational, Graduate, etc.) /Address

List any scholarships, academic honors, awards or special achievements: \_\_\_\_\_

Major Course studied	Graduated or degree (Yor N)	Average Grade
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## 3. SKILLS Please list any skills you have that are appropriate for the position you are applying for: \_\_\_\_\_

If required, will you work?

Rotating shifts  YES  NO

Saturdays  YES  NO

Overtime  YES  NO

Sundays  YES  NO

Position applying for, be specific:

Salary Requirements

per hour

\$

per month

State fully why you believe you are qualified for this position

INTERESTS / ACCOMPLISHMENTS: You may wish to list significant experience, interests & accomplishments gained while working as a volunteer or as a hobbyist that may be useful in the position (s) you are seeking. Names or organizations designating religion, race, etc. need not be mentioned.

Date you can start

/ /

## REFERENCES

Please list the names of 2 references that we may contact to enquire about your work experience.

1. Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

How you know this person: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

How you know this person: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# EMPLOYMENT HISTORY

Starting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL EMPLOYMENT for at least the past **FOUR** employers. If currently employed, may we contact your employer?  Yes  No

## PRESENT OR MOST RECENT EMPLOYER

FULL NAME OF COMPANY				(AREA CODE)	TELEPHONE	SALARY BEGIN END	EMPLOYED FROM TO MO/YR MO/YR		
STREET ADDRESS		CITY	STATE	ZIP					
NAME & TITLE OF SUPERVISOR				TITLE OF YOUR POSITION		REASON FOR LEAVING:			
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY:									
FULL NAME OF COMPANY				(AREA CODE)	TELEPHONE	SALARY BEGIN END	EMPLOYED FROM TO MO/YR MO/YR		
STREET ADDRESS		CITY	STATE	ZIP					
NAME & TITLE OF SUPERVISOR				TITLE OF YOUR POSITION		REASON FOR LEAVING:			
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FULL NAME OF COMPANY				(AREA CODE)	TELEPHONE	SALARY BEGIN END	EMPLOYED FROM TO MO/YR MO/YR		
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FULL NAME OF COMPANY				(AREA CODE)	TELEPHONE	SALARY BEGIN END	EMPLOYED FROM TO MO/YR MO/YR		
STREET ADDRESS		CITY	STATE	ZIP					
NAME & TITLE OF SUPERVISOR				TITLE OF YOUR POSITION		REASON FOR LEAVING:			
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY:									

**READ CAREFULLY:** I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **TINA SOUDER, M.Ed., L.P.C.**

Licensed Professional Counselor  
Children, Adolescents, Adults  
Offices located in Wellington, Childress, Pampa  
www.tinasoudercounseling.com  
(806) 930-9130

### **JOB DESCRIPTION**

#### **BILLING/ACCOUNTS RECEIVABLE SPECIALIST**

#### **OFFICE MANAGER**

**Hours:** Part-time and flexible and will vary weekly, must be available at least 2 days per week to be in office.

**Job Compensation:** Flexible depending on your experience. There are no benefits with this part-time position at this time.

#### **Job Summary or overview**

The Billing/Accounts Receivable Specialist is responsible for a variety of duties, as assigned by the supervisor, which may include routine *billing payment posting*, and *problem solving* for various payers, including insurance, HMO, Medicaid, Medicare and private pay, and also *special projects in billing and collection*. In addition, the Specialist may be responsible for billing and posting for Special Contracts and for *obtaining and/or entry of prior authorizations*. The billing Specialist is responsible for *clear, detailed communication* with the clinical and billing staffs and with payers and clients regarding various insurance-related and payment-related issues. Responsibilities may also include *researching and resolving client insurance claims* which are denied or uncollected and, also, *working with the clinical staff members* to resolve billing problems. Communication with clients is trauma-informed rather than confrontive, reflecting sensitive, thoughtful, courteous communication taking into account the emotional nature of our work. Other special projects may be assigned.

#### **Office Manager**

The office manager will be responsible for keeping files and organizing work loads, clerical tasks, scheduling, verifying and maintaining contracts, possible grant writing, assisting with unattended children of clients who might be in session, light cleaning, and other duties as they are pertinent.

#### **Position Qualifications (experience, skills, education, licensure)**

The Billing/Account Receivable Specialist / Office Manager should possess:

**Experience in coding, billing, posting, and adjudication of claims.** *Specialized experience in behavioral health billing services is preferred, but is not necessary.* Would be willing to train eager individuals who possess the needed skills to learn quickly.

#### **Other Vital Skills include**

- The ability to work independently
- The ability to work collaboratively on projects
- The ability to create channels of communication to obtain information necessary to perform job tasks, such as with clients, payers, clinical staff, and billing department staff
- The ability to recognize individual and system problems and to communicate such information the supervisor
- Excellent written and verbal communications skills
- The ability to organize and keep thorough records.
- Experience in grant writing or willingness to learn.
- *Outstanding attention to detail and excellent time management skills. This position requires mastery of a large amount of detail.*
- Outstanding computer skills with billing software, Microsoft Word and Microsoft Excel, able to learn our system, good key-boarding skills
- Able physically to lift the weight of a filled archive box, bend over file cabinets, sit at computer 3-4 hours at a stretch,

#### **Major Duties and Responsibilities**

Duties will be assigned by owner. Among those duties are:

- Verify accuracy of billing data and revise errors.
- Operate software system for billing, posting, and claims research. --Obtain and/or enter such documents as authorizations, financial agreements, and other such ancillary documents as may be necessary.
- Maintain detailed records as required.
- Resolve discrepancies in accounting records.
- Interact with staff, clients, payer and Agencies to answer questions, obtain information, and resolve issues.
- Monitor aging reports and take such steps as necessary to guarantee payment of claims.
- Coordinate and collect necessary information from staff or payers for claim adjudication.
- Participate in take-back, overpayment, and refund process.
- Recognize problem accounts and notify appropriate staff or supervisor to assist in problem resolution.
- Anticipate insurance trends and advise supervisor of changes.

- Assist in the creation of manuals and protocols.
- Participate in the training of new staff members.
- Participate in chart opening and auditing processes as needed.
- Attend and participate in payer meetings/seminars as needed.
- Act as back-up coverage for Clinical Support Staff as needed.
- Maintain open, positive, cordial, team-oriented lines of communication with Manager and other staff members.
- Contribute to the Billing Department team through positive attitude, respectful interaction, innovative ideas, efficiency, and ethical behavior.
- Other duties as assigned.

### **Accountability and Benchmarks**

You are hired not merely to perform a job function but because we believe your skills will make those job functions an effective, integral and important part of *the growth of your department and will contribute to the welfare of your colleagues, our clients and the community.*

You will be making a contribution to profitability from which you and your team members will benefit

**Every duty and expectation is your contribution to the welfare of the company, yourself and the welfare of our clients.**

**Every job function is more than a task! It is way of helping others and helping the company to grow. The others you are helping are your CUSTOMERS. Helping your customers is an important part of what we expect from you.**

**Clients** – To enhance the well-being, health, quality of life and lifestyle functioning of clients by assisting them to receive the help they may need. For Billing, this means helping achieve reimbursement so services can be provided.

**Insurance Carriers/Agencies** – To think of our staff as the premier, “go-to” provider to make their work easier because they know they can rely upon and you. For Billing, this means a positive relationship with payers and an excellent impression of every component of our company leads to more referrals.

**Clinical Staff** – To maximize the clinical staff’s time and income by streamlining the billing process and maximizing reimbursement.

**Supervisor** – To contribute to the department team and to appreciate the wisdom and experience of your supervisor.

**Company** – To maximize productivity and to establish on-going excellence in customer services.

**Yourself** – To work with us on your career development and your job satisfaction to make working at our company your long-term career.

**IMPORTANT**

Background check will be required in final stages before hiring, also must be willing to sign and comply with ethical guidelines and confidentiality requirements along with HIPAA regulations and standards.