MEDICAL AUDIT SUPERVISOR

DISTINGUISHING FEATURES OF THE CLASS: This position involves administrative oversight of a medical audit unit in a social services agency. The incumbent supervises a large staff of employees engaged in auditing and authorizing payment for vouchers submitted by medical vendors. This employee participates in auditing and authorizing payment for the more difficult vouchers in cases of a non-routine nature. Work is performed under general supervision in accordance with outlined objectives and policies of the agency.

<u>TYPICAL WORK ACTIVITIES:</u> The typical work activities listed below, while providing representative examples of the variety of work assignments in the title, do not describe any individual position. Incumbents in this title may perform some or all of the following, as well as other related activities not described.

Plans, coordinates, supervises and manages the activities of the medical audit unit;

Plans, assigns and reviews the maintaining and checking of a wide variety of financial records and

reports;

Interprets federal, state and local policies and directives relating to auditing and payment of medical

vouchers;

Revises and develops improved work procedures and methods and installs those approved by

supervisors;

Handles complaints, suggests solutions to problems, and conducts correspondence relative to unit

activity;

Establishes necessary controls for determining staff performance and makes necessary performance

evaluations;

Audits and authorizes payment on vouchers for extensive and/or non-routine medical services;

Reviews difficult vouchers with medical, psychiatric or dental consultants when necessary;

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Assists in preparing and/or reviews numerous mandatory reports pertaining to unit activities.

FULL PERFORMANCE KNOWLEDGES, SKILLS, ABILITIES AND PERSONAL CHARAC-

<u>TERISTICS</u>: Thorough knowledge of federal, state and local laws, rules, regulations as they affect auditing and payment of medical bills; thorough knowledge of modern methods used in keeping and checking financial records and reports; thorough knowledge of office terminology, procedures, and equipment; comprehensive knowledge of agency's overall policies and procedures; thorough knowledge of other laws and programs which may affect payment for medical services, such as Worker's Compensation, Medicare, Disability, and other insurance programs; ability to plan and supervise the work of account keeping and clerical staff; ability to understand and carry out complex oral and written directions; ability to make accurate arithmetic computations; ability to prepare correspondence and reports; and ability to deal effectively with the public.

MINIMUM QUALIFICATIONS: Either:

- (A) Possession of a Bachelor's Degree and one year of experience in processing insurance claims or in auditing and maintaining financial records or reports; or
- (B) Five years of experience as indicated in (A) above; or
- (C) An equivalent combination of training and experience as described in (A) and (B) above.

NOTE: Your degree or credits must have been awarded by a college or university accredited by a regional, national, or specialized agency recognized as an accrediting agency by the U.S. Department of Education/U.S. Secretary of Education. If your degree or credits were awarded by an educational institution outside of the United States and its territories, you must provide independent verification of equivalency. A list of acceptable companies who provide this service can be found on the Internet at: <u>https://www.cs.ny.gov/jobseeker/degrees.cfm</u>. You must pay the required evaluation fee

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Placed into Classplan on 8/4/04 Revised and Replaced in Classplan: 2/21/2023 Revised and Replaced in Classplan: 4/22/2025 (Edu)