Job Title: US Healthcare Medical Billing Credit Balance Specialist – Hyderabad, India

Job Description:

OnQ Global Inc. is seeking a Medical Billing Credit Balance Specialist to support US healthcare providers with revenue cycle and refund management processes. In this role, you will be responsible for identifying, researching, and resolving credit balances within patient and guarantor accounts to ensure accurate financial records and proper reimbursement.

The Credit Balance Specialist plays a key role in reviewing accounts, correcting misapplied payments, and coordinating patient or insurance refunds in accordance with client and payer guidelines. The goal is to maintain accurate billing records, ensure compliance with healthcare regulations, and prevent revenue leakage while maintaining strong financial integrity within the billing system.

This is a full-time position based in India, typically working night shifts aligned with US business hours to support payer communication and client operations.

Key Responsibilities

- **Identify and research credit balances:** Review patient and guarantor accounts to identify credit balances. Analyze payment postings, adjustments, and reimbursement history to determine the root cause of credit balances and ensure proper resolution.
- **Transfer credits within accounts:** Transfer credits appropriately within patient or guarantor accounts when applicable. Ensure all transfers are completed accurately and documented in the billing system according to established guidelines.
- **Correct misapplied payments:** Identify and post any unposted or misapplied patient payments. Reconcile payment discrepancies to ensure that all transactions are correctly reflected in the patient's financial account.
- **Manage patient and insurance refunds:** Initiate and process refunds for patients and insurance carriers when credit balances cannot be applied elsewhere. Follow client policies and payer regulations to ensure proper refund procedures are followed.
- **Post credit balance adjustments:** Post appropriate adjustments in the billing system for approved refunds or corrections. Ensure all adjustments are supported with proper documentation and approvals as required by internal policies or client guidelines.

- **Address patient information discrepancies:** Review and resolve issues related to patient or guarantor address discrepancies to ensure refunds and communications are sent to the correct location.
- **Maintain accurate records:** Maintain accurate documentation of credit balance investigations, payment corrections, and refund actions. Ensure that all activities are properly recorded in the billing system to maintain a clear audit trail.
- **Balance refund batches:** Reconcile and balance refund batches according to client-specific processes and financial guidelines. Ensure that all refund batches are accurately tracked and documented.
- **Meet productivity and quality standards:** Complete assigned workloads while meeting production targets and quality expectations established by management. Maintain a high level of accuracy while handling a high volume of accounts.
- **Collaboration and communication:** Work closely with billing teams, payment posting teams, and supervisors to resolve complex credit balance issues. Escalate cases when additional review or approvals are required.
- **Compliance and confidentiality:** Ensure all work complies with HIPAA regulations and company policies regarding patient privacy and data security.

Required Skills & Qualifications

- **Medical Billing Experience:** Minimum of 1 year of experience in medical billing, preferably within US healthcare revenue cycle operations. Experience with credit balance analysis, payment posting, or refunds is preferred.
- **Knowledge of US Healthcare Payers:** Understanding of US health insurance plans, including commercial insurance carriers and government programs such as Medicare and Medicaid. Familiarity with payer reimbursement processes is required.
- **Explanation of Benefits (EOB) Knowledge:** Ability to interpret Explanation of Benefits (EOBs) and identify payment discrepancies, adjustments, or refund requirements.
- **Medical Terminology and Coding:** Basic understanding of medical terminology, along with familiarity with CPT and ICD-10 coding concepts related to medical billing and claims processing.
- **Billing Software Experience:** Experience with healthcare billing and practice management software is essential. Familiarity with Imagine and portals like Cedar, Ipay, Cleargage, Royal, EIS RIS, Availity RCM, Availity Apps, BCBS eRM and UHC.

- **Computer Skills:** Proficiency with computers and Microsoft Office applications, particularly Excel. Strong data entry and typing skills are required to manage account reviews efficiently.
- **Communication Skills:** Strong written communication skills to document account research, refund details, and internal communications clearly and accurately.
- **Attention to Detail:** Ability to process high volumes of accounts while maintaining accuracy and attention to detail, ensuring all financial transactions are handled correctly.
- **Analytical Skills:** Strong problem-solving ability to investigate credit balances, determine root causes, and implement appropriate corrective actions.
- **HIPAA Compliance:** Knowledge and understanding of patient health information confidentiality requirements under the Health Insurance Portability and Accountability Act (HIPAA).

Preferred Skills & Qualifications

- **Revenue Cycle Experience:** Experience working with credit balance resolution, refund processing, or payment reconciliation within the US healthcare revenue cycle.
- **Healthcare Billing Systems:** Familiarity with major practice management or healthcare billing systems used in revenue cycle operations.
- **High-Volume Processing:** Experience managing large volumes of account reviews while maintaining strict accuracy and compliance standards.

OnQ Global Inc. offers a collaborative environment for professionals looking to grow in US healthcare revenue cycle management. The ideal candidate will combine strong analytical skills, attention to detail, and medical billing knowledge to ensure accurate financial processes and compliance while supporting client revenue integrity.