



PROFESSIONAL MEDICAL BILLERS ASSOCIATION  
"Certifying Excellence in Medical Billing."

# Becoming a Health Claims Assistance Assistance Professional



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As the healthcare sector continues its overall growth, the demand for healthcare support occupations is expected to expand as well.

According to the U.S. Bureau of Labor Statistics (BLS), the employment of medical secretaries, which includes medical billing and coding specialists, is projected to experience an 8% increase from 2021 to 2031. This growth indicates a rising need for skilled professionals who can efficiently handle medical billing and coding tasks in the healthcare industry. As the landscape of healthcare evolves, these specialized professionals play a vital role in ensuring accurate and streamlined billing processes, contributing significantly to the overall efficiency of healthcare facilities. With such promising prospects, pursuing a career in medical billing and coding can lead to rewarding opportunities and a stable future in the healthcare field.

According to the Bureau of Labor Statistics (BLS), as of May 2021, medical secretaries, regardless of experience levels, earned a median annual wage of \$47,150. This figure indicates that half of the workforce in this occupation earned more than this amount, while the other half earned less.

It is important to note that the salary for medical secretaries can vary significantly based on several factors, including geographic location, the type of healthcare facility or office they work in, and the amount of work experience they have accumulated. These variables can have a notable impact on the overall compensation for individuals in this role.

For more detailed and up-to-date information on medical secretary salaries, I recommend referring to the Bureau of Labor Statistics (BLS) website ([www.bls.gov](http://www.bls.gov)) or other reputable salary data websites that provide region-specific and industry-specific wage data.

### **Is a Career in Medical Billing and Coding a Good Fit for You?**

Consider asking yourself the following questions to assess whether a career in medical billing and coding aligns well with your strengths and preferences:

- Am I proficient at meticulously following instructions and guidelines?
- Can I uphold patient privacy and confidentiality with utmost responsibility?

- ✓ Do I feel comfortable using technology and electronic systems for data management?
- ✓ Am I capable of working at a computer for extended periods without difficulty?
- ✓ Do I possess good teamwork skills and the ability to collaborate effectively with others?
- ✓ Can I remain composed and handle stressful situations, such as billing errors, with a calm demeanor?
- ✓ Do I excel at organizing and maintaining accurate records and data?
- ✓ Are my interpersonal skills strong enough to communicate effectively with colleagues, patients, and insurance providers?
- ✓ Am I naturally attentive to even the smallest details, ensuring precision in my work?

If you find yourself answering "yes" to all of the questions above, it indicates that you may be well-suited for a rewarding career in medical billing and coding. Your strengths in following guidelines, handling technology, maintaining patient confidentiality, and engaging in effective communication make you a valuable candidate for success in this field.



# Skills:

As stated by the Bureau of Labor Statistics (BLS), essential qualities for medical secretaries include:

- ▶ Decision-making skills, enabling them to analyze diagnoses and medical records to select the most appropriate codes for patients' medical records. (Source: [www.bls.gov](http://www.bls.gov))
- ▶ Organizational skills, which are indispensable for accurately recording and coding patient data. (Source: [www.bls.gov](http://www.bls.gov))
- ▶ Good communication and interpersonal abilities, particularly valuable during high-stress situations like handling billing discrepancies or dealing with rejected insurance claims. (Source: [www.bls.gov](http://www.bls.gov))
- ▶ Writing skills, encompassing grammar, professionalism, and accuracy, are significant assets to develop for effective email communications that are often part of this role. (Source: [www.bls.gov](http://www.bls.gov))

Developing and honing these qualities can contribute to a successful career as a medical secretary, facilitating efficient medical recordkeeping and communication within the healthcare setting.



## What is a Health Claims Assistance Professional?

A Health Claims Assistance Professional, also sometimes referred to as the Patient Advocate, is someone who is experienced in the medical billing/health insurance industry that helps the public with any or more of the following listed below:

A Health Claims Assistance Professional is responsible for the accurate and timely adjudication of medical claims and can process claims using practice management software. Processing of claim forms and adjudication for allocation of deductibles and co-pays, co-insurance maximums and provider reimbursements are the main responsibilities of a medical claims processor. In addition, follows adjudication policies and procedures to ensure proper payment of claims.

Should have a basic knowledge of using a computer and be able to perform data entry functions.

A health claims professional is a person who specializes in processing and managing health insurance claims. They play a crucial role in the healthcare industry, ensuring that medical claims are processed accurately, efficiently, and in compliance with the relevant rules and regulations. Their responsibilities may include:

**Claims Processing:** Health claims professionals receive and review medical claims submitted by healthcare providers or policyholders. They verify the accuracy and completeness of the information provided, including patient details, diagnosis codes, and procedure codes.

**Coding and Billing:** Health claims professionals use medical coding systems (such as ICD-10 and CPT) to translate medical procedures and diagnoses into standardized codes. These codes are essential for insurance reimbursement and accurate record-keeping.

**Claims Adjudication:** After reviewing the claims and verifying their accuracy, health claims professionals determine the appropriate reimbursement amount based on the insurance policy coverage and the allowed benefits.

**Communication:** They may communicate with healthcare providers, policyholders, or insurance company representatives to gather additional information or clarify claim-related queries.

**Regulatory Compliance:** Health claims professionals must stay updated with the latest healthcare regulations and insurance policies to ensure compliance with industry standards.

**Claims Resolution:** In cases where a claim is denied or not fully reimbursed, health claims professionals may work to resolve issues, appeal denied claims, or reprocess claims with corrected information.

**Record Keeping:** Accurate and organized record-keeping is vital in claims processing. Health claims professionals maintain detailed records of all processed claims and related interactions.

**Fraud Detection:** They may also be involved in identifying potential fraudulent activities, such as false claims or billing discrepancies.

## And

- ▶ also Claim appeals
- ▶ Submission of claims
- ▶ Requesting medical records Obtaining refunds
- ▶ Informing and assisting seniors with Medicare, Medicare Advantage, and choosing a plan (YOU must be experienced with Medicare to offer this service!!)



# Licensing:

While licensing or certification is not mandatory for a medical claims processor, individuals looking to establish their own medical claims processing business should be aware of certain obligations. It is essential to file for a business license, similar to any other type of business. Additionally, depending on the state's regulations, obtaining insurance coverage and bonding might be necessary.

Prospective entrepreneurs interested in starting a medical claims processing business should seek guidance from their state governments to understand the specific requirements and regulations governing this type of venture. Being informed about the necessary steps ensures compliance and helps establish a successful and legally compliant medical claims processing business.

## Experience and Training:

You cannot operate this type of business without medical billing and health insurance experience and/or training. If you have no experience in this field, I recommend taking CPMB certification . If you prefer online classes, the Professional Medical Billers Association offers classes at [www.pmbausa.com](http://www.pmbausa.com) . If you are not experienced with Medicare and Medicare Advantage, it is imperative to become so! You must know Medicare deductibles, Medicare premium rates, and how Original Medicare differs from Medicare Advantage, as well as the role of a Medigap plan.

To become a health claims professional, individuals often need a strong understanding of medical terminology, coding systems (ICD-10, CPT, HCPCS), and health insurance procedures. Many professionals acquire certifications like Certified Professional Coder (CPC) or Certified Coding Specialist (CCS) from organizations like the American Academy of Professional Coders (AAPC) or the American Health Information Management Association (AHIMA).

Health claims professionals work in various healthcare settings, including hospitals, clinics, insurance companies, and third-party billing organizations. Their accurate and efficient processing of health insurance claims is essential for the smooth functioning of the healthcare system and ensuring that patients receive the appropriate benefits from their insurance coverage.

PMBA offers Comprehensive Medical Coding and Medical Billing Training with AAPC CPC Exam Preparation and CPMB Certification.

# Starting Fresh or Adding to Your Current Services:

Health claims assistance services can be offered as a standalone business or as an additional service to an existing medical billing business. The demand for medical billers and claims assistance services has been increasing, especially during ongoing healthcare crises or times of significant changes in healthcare regulations and policies.

## Starting a New Health Claims Assistance Home-Based Business

If you are registering your business name as a sole-proprietor, you may either use your social security number as your tax-id #, or register for a separate tax id# with your state.

Consult an attorney with any legal questions you may have regarding registering your business name in your state.

If claim submissions will be a service you offer, check with your state to see if you are required to register with your state's Department of Banking and Finance, as certain states require 'third-party billing services' to be registered with such.

If you are registering as a Limited Liability Company, there are many websites that offer these services ex: [www.legalzoom.com](http://www.legalzoom.com) or you may be able to register as an LLC directly online with your state's business website. You may also incorporate at the above listed website. If you incorporate, your tax guidelines will be different than those of other business entities, so I recommend guidance from an attorney if choosing this type of business entity.

### Items/Supplies Needed to Get Started:

To get started as a health claims professional, you'll need certain items and supplies to perform your job efficiently and effectively. Here's a list of essential items:

**1. Computer:** A reliable desktop computer or laptop is essential for accessing medical billing and claims processing software, as well as online resources.

**2. Internet Connection:** A stable internet connection is necessary to communicate with clients, access medical databases, and submit electronic claims.

**3. Medical Billing and Claims Software:** Invest in reputable medical billing and claims processing software to manage and process claims accurately and efficiently.

**4. Medical Coding Books/Resources:** Obtain current versions of medical coding books such as ICD-10, CPT, and HCPCS, or use reputable online coding resources.

**5. Reference Materials:** Have reference materials and guidelines related to health insurance policies, reimbursement rates, and billing regulations.

**6. Office Space:** Set up a dedicated workspace with a comfortable chair and desk to facilitate your work and maintain organization.

**7. Phone:** A phone with reliable service will be necessary for communicating with clients, healthcare providers, and insurance companies.

**8. Fax Machine/Scanner:** Some healthcare facilities still use fax for documentation, so having a fax machine or scanner will be beneficial.

**9. Printer:** A printer is useful for generating hard copies of documents, billing statements, and other paperwork.

**10. Stationery and Office Supplies:** Stock up on pens, notepads, folders, envelopes, and other office supplies to keep your work organized.

**11. Calculator:** A calculator will come in handy for performing calculations related to claims processing and billing.

**12. Secure Storage:** Invest in secure storage solutions (physical or digital) to keep patient information and records confidential and compliant with privacy regulations.

**13. Billing Forms:** Obtain standard billing forms required for claim submissions and ensure they comply with the current regulations.( CMS-1500)

**14. Training and Certification:** Enroll in relevant training courses and obtain certifications such as Certified Professional Medical Biller (CPMB) Certified Professional Coder (CPC) or Certified Coding Specialist (CCS) to enhance your credentials.

**15. Client Contracts and Agreements:** Prepare clear and comprehensive contracts or service agreements outlining the terms and conditions of your health claims assistance services.

**16. Business Insurance:** Consider obtaining professional liability insurance to protect yourself and your business in case of errors or omissions.

**17. Calendar/Planner:** Use a calendar or planner to schedule appointments, deadlines, and important tasks.

**18. Email and Communication Tools:** Set up a professional email account and use communication tools like Skype or Zoom for virtual meetings with clients.

As you establish yourself as a health claims professional, you may also need to adapt and expand your resources based on the specific needs of your clients and the healthcare industry's evolving demands. It's crucial to stay informed about industry updates and maintain a high standard of accuracy and professionalism in your work.

### **Website:**

PMBA will provide the Medical Billing Services Website.

Having a well-developed and informative website is highly beneficial when starting as a healthcare claims professional. An informative website serves as your online presence and can be a powerful tool to attract potential clients, showcase your expertise, and provide essential information about your services. Here are some reasons why a website is important for a healthcare claims professional:

**1. Professional Image:** A well-designed website gives a professional and credible impression to potential clients. It shows that you take your profession seriously and are committed to providing quality services.

**2. Information Hub:** Your website can serve as a central hub for all relevant information about your healthcare claims assistance services. You can provide details about the services you offer, your experience, certifications, and contact information.

**3. Showcasing Expertise:** Use your website to highlight your expertise in healthcare claims processing and billing. You can include case studies, success stories, and testimonials from satisfied clients to demonstrate your capabilities.

**4. Reach a Wider Audience:** Having an online presence allows you to reach a broader audience beyond your immediate geographic location. Potential clients from various regions can find and learn about your services through your website.

**5. 24/7 Availability:** Your website is accessible 24/7, allowing interested parties to learn about your services at any time, even outside of regular business hours.

**6. Contact and Inquiry Forms:** You can include contact forms or inquiry forms on your website, making it easy for potential clients to reach out to you with questions or to request your services.

**7. Blogging and Resources:** Consider incorporating a blog section where you can share industry insights, updates on healthcare regulations, and tips related to healthcare claims processing. This establishes you as an authority in your field and helps attract organic traffic to your website.

**9. Mobile Accessibility:** Ensure that your website is mobile-friendly to accommodate users accessing it from various devices like smartphones and tablets.

**10. SEO and Online Visibility:** Implement search engine optimization (SEO) strategies to improve your website's visibility on search engines like Google. This can increase the likelihood of potential clients finding your website when searching for healthcare claims professionals.

Having a website doesn't have to be overly complex or expensive. There are user-friendly website builders and templates available that can help you create a professional-looking website without extensive technical knowledge. Remember to keep the content accurate, up-to-date, and user-friendly to provide the best experience for visitors to your website.

## Your Potential Clients:

As a health claims professional, your potential clients can include individuals, healthcare providers, and healthcare facilities who need assistance with various aspects of medical billing and claims processing. Here are the potential clients you can target:

**1. Individual Patients:** Many individuals may seek your services to resolve issues related to unpaid medical bills, insurance claim denials, and appeals. They may need help understanding their insurance coverage and Explanation of Benefits (EOB) statements.

**2. Healthcare Providers (Doctors, Hospitals, Labs, etc.):** Healthcare providers often face challenges with claim submissions, coding errors, and dealing with insurance companies. They may hire your services to streamline their claims processing and increase reimbursement rates.

**3. Medical Billing Companies:** Medical billing companies may collaborate with you to offer specialized health claims assistance services to their clients, improving their overall service offerings.

**4. Healthcare Facilities:** Hospitals, clinics, and other healthcare facilities may seek your expertise to manage their medical billing and navigate the complexities of insurance reimbursement.

**5. Seniors and Medicare Beneficiaries:** Elderly individuals who are eligible for Medicare may need guidance in choosing the right Medicare plan and understanding the complexities of Medicare billing.

**6. Insurance Agents and Brokers:** Insurance agents and brokers may refer their clients to you when they need assistance with claim denials, appeals, or understanding their insurance benefits.

**7. Patient Advocacy Groups:** Patient advocacy groups may partner with you to provide support and assistance to their members dealing with health insurance and medical billing challenges.

**8. Legal Firms:** Legal firms involved in healthcare or insurance law may consult with you for expert advice and assistance in claims-related cases.

**9. Employers:** Companies and employers providing healthcare benefits to their employees may seek your expertise in resolving billing disputes and ensuring accurate claims processing.

**10. Individuals with Complaints:** Individuals who have complaints or issues with their insurance companies may approach you for guidance and assistance in filing complaints with State Departments of Insurance.

When targeting potential clients, it's essential to tailor your marketing efforts and services to address their specific needs. Highlighting your expertise in dealing with unpaid medical bills, claim denials, appeals, and other related challenges will be crucial in attracting and retaining clients. Building a strong reputation for providing reliable and effective health claims assistance will lead to increased referrals and a loyal client base.

# Marketing:

- 1. Create a Professional Website:** Develop a professional website that highlights your services, expertise, testimonials, and contact information. Optimize it for search engines (SEO) to improve online visibility.
- 2. Utilize Social Media:** Establish a presence on social media platforms such as LinkedIn, Facebook, and Twitter. Share informative content, industry updates, and success stories to engage your audience.
- 3. Networking Events:** Attend local networking events, business expos, and healthcare-related conferences to connect with potential clients and referral partners.
- 4. Referral Program:** Implement a referral program that rewards existing clients, healthcare providers, or partners who refer new clients to your services.
- 5. Email Marketing:** Build an email list of potential clients and regularly send them newsletters or updates about your services and industry trends.
- 6. Google My Business:** Set up a Google My Business profile to improve your local online presence and appear in local search results.
- 7. Offer Free Workshops or Webinars:** Organize workshops or webinars to educate the community on healthcare claims and billing topics. This can establish you as an expert in your field.
- 8. Client Testimonials:** Request satisfied clients to provide testimonials and reviews that you can showcase on your website and marketing materials.
- 9. Community Involvement:** Engage in community events and sponsor local health-related activities to build brand awareness and demonstrate your commitment to the community.
- 10. Collaborate with Medical Professionals:** Partner with doctors, clinics, and healthcare facilities to offer your services as an added benefit to their patients.
- 11. Google Ads or Social Media Ads:** Consider running targeted online advertisements on platforms like Google Ads or social media to reach a specific audience.

**12. Local Directories:** List your business in local directories and online platforms related to healthcare services.

**13. Content Marketing:** Create informative blog posts, articles, or videos related to healthcare claims and billing to establish yourself as an authority in your field.

**14. Offer Free Consultations:** Provide potential clients with a free initial consultation to discuss their needs and how you can assist them.

**15. Participate in Online Forums:** Engage in online forums and discussion groups related to healthcare and insurance to offer valuable insights and gain visibility.

Remember to tailor your marketing efforts to your target audience and continuously track the effectiveness of each strategy to refine your approach over time. Building a strong online and offline presence will help establish your health claims professional services and attract potential clients.

- ▶ Hang flyers on bulletin boards in (pharmacies, supermarkets, banks, etc.)
- ▶ Advertise in your local free community newspapers; the charge to advertise is usually very reasonable
- ▶ Send brochures to assisted living facilities (obtain facility name and address from the internet or phone book)
- ▶ Speak with the association heads of retirement villages and ask if you may post a flyer in the community clubhouse or possibly give a presentation (if you are comfortable doing so).
- ▶ Register with ACAP (Alliance of Claims Assistance Professionals - will add your Business name to website for referrals)
- ▶ Register as a member of the PMBA (Professional Medical Billers Association-will add your name to 'members' page on website) [www.pmbausa.com](http://www.pmbausa.com)
- ▶ Rent a table at local craft shows—many people, including seniors and soon-to-be seniors frequent these shows and you may just meet the person who needs you!
- ▶ Put large magnets advertising your business name on your car doors! These can be ordered from [www.vistaprint.com](http://www.vistaprint.com)

## Authorization to act as patient advocate:

You will need to obtain an authorization from the patient to act as their patient advocate. This will be a form signed by the patient you will need to fax/send to the physician's office and/ or insurance company to speak on their behalf.

## Fee for Service:

Health Claims Assistance Professionals may charge as little as 15-20-\$30 per hour, while some can charge greater than \$150 per hour.

Before quoting a fee, it is important to obtain the details of the patient's specific health claim/insurance problem/s or needs. Never quote a fee until you are aware of the client's need and work involved in each case!

You can quote an hourly fee or a per project fee. If your services will be needed on a long-term basis, say if the client wants you to handle all medical bills and EOBs they receive on a daily basis, you will need to negotiate a fee for such.

It is crucial not to over-charge seniors. Many are on a fixed, limited income and do not have the financial resources others may have, yet they may be the ones who need you the most!

I suggest offering a free consultation to get your' foot in the door'

## Contract:

If a client wishes to hire you, you must get a signed contract outlining the specific services/fees pertaining to each client. You may have an attorney look over your contract. See sample contract # 1 below. The below is strictly a sample. You may use it; tweak it, to suit your needs!

If your are comfortable charging a retainer fee up front-let the client know there will be an 'up-front' fee amount required (for example if you believe it will take 2 hours to complete the assignment-you may request half of the amount before you begin the task and the remaining due balance upon completion of the task)

# Client Data Sheet

If you are hired by a client, you will need the client to complete a client data sheet, much like a patient registration form.

The advice given in this guide is not legal advice. If you need legal advice, you should contact an attorney. For tax advice, contact an accountant.

You may use the sample contracts presented in this guide. Feel free to add, delete, or change text to suit your needs.

Fees you will charge may vary by project or service performed, as well as by the state you are providing services in.

**Note: A Health Claims Assistance Professional** should possess fundamental computer skills, including data entry capabilities. Since most claims are received via email, it is crucial for potential claims processors to be proficient in opening or downloading email attachments and uploading forms as necessary. Familiarity with data entry software commonly used by medical claims processors is advantageous for job qualifications. Medisoft is a prominent example of such software, extensively utilized in the healthcare industry for billing and claims processing.

Moreover, a proficient **Health Claims Assistance Professional** should have the ability to print standardized claim forms that can be customized to meet specific requirements. The use of medical billing and claims processing software aids in tracking and managing insurance claims and facilitates accurate billing with the appropriate CPT and ICD codes. Mastering these computer skills and software applications enables efficient and accurate claims processing for medical claims processors.

Healthcare continues to be one of the most rapidly expanding industries, offering numerous opportunities for job seekers. If patient care doesn't align with your interests, you can still embark on a fulfilling career in the thriving healthcare field by becoming a Certified Professional Medical Biller.

Thank you and enjoy!

Should you have any questions, please feel free to email me at [support@pmbausa.com](mailto:support@pmbausa.com)

Sincerely,  
**President-Professional Medical Billers Association USA**

[www.pmbausa.com](http://www.pmbausa.com)





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