

Billing Specialist Job Interview Questions And Answers



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Billing Specialist Interview Questions And Answers Guide.

Question - 1:

Explain me what impact did you have in your last job?

Ans:

I leave an impression that I can stand up to the challenges that the work has to offer and in my own assessment, I know I didn't fail them in any way. I have improved and developed my organization and communication skills during my last job and I continue to strive excellence in everything I do.

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Question - 2:

Tell us how do you Manage Rejected or Unpaid Claims?

Ans:

It is quite a problem when a claim gets rejected or is not paid. I make sure that no delays occur when submitting claims as I appreciate the fact that the longer a claim is unpaid, the less likely it is to be paid and can get rejected too. However, should this situation occur, I make sure that I correct and re-submit the claim as soon as possible. Further, I'll can establishing measure to Reduce Claim Denials.

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Question - 3:

Explain how do you Deal Rejected or Unpaid Claims?

Ans:

I find out why a claim has either been rejected or left unpaid. If the insurance company has made a mistake in rejecting it, I re-file it after providing further information on why it should have been paid. If the insurance company is right in denying it, I follow up with the client in order to solicit payment.

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Question - 4:

Explain me how do you deal with rejected or unpaid claims?

Ans:

The longer claims go unpaid, the less likely it is they will be paid. Getting denied or rejected claims corrected and re-submitted can be a lot of revenue to a provider. A prospective biller or coders effectiveness and experience here is very important to a practice's accounts receivables and likely one of the top interview questions.

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Question - 5:

Tell us what Is Your Strategy For Ensuring Accuracy?

Ans:

A reimbursement specialist typically uses software to conduct transactions using medical billing codes. Answer this question with details about how you find the right codes quickly, stay organized and focused, and double-check your work with industry-standard tools, such as the American Billing Association's Medical Coding & Billing and Resource Center. Express how your goal is to reduce or prevent errors from happening entirely.

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Question - 6:

Tell me what usually gets your number one priority in a typical day?

Ans:

- * 1- check my mail for any correspondence from clients and reply
- * 2- check AR aging to avoid any bad debt in our customers
- * 3- Check bank movements if we have payment advice from any client
- * 4- Make allocate payments and analysis any queries.

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**Question - 7:**

Tell me what type of certifications do you have?

Ans:

I would expect this question to be asked more for medical coding jobs. Certification in medical billing is a definite plus, but I haven't seen that requirement for strictly medical billing jobs. Certification does show you are committed to your profession and meet certain minimum standards. If you are not certified, a good response would be that you are working towards certification - assuming you are. But don't dwell on what credentials you don't have - emphasize the experience and skills you do have.

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Question - 8:

Tell me have you used Computer Software?

Ans:

I have been using computer and softwares comfortably. Apart from being able to work with most common software, tell if you are familiar with any Medical Billing Software or EMR Software System e.g Intellect and ECLIPSE.

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Question - 9:

Tell me do you keep updated with Insurance and Healthcare coverage changes?

Ans:

Yes, I keep myself constantly updated with Medical Billing and Coding industry updates in regular basis. Additionally, certification upgrades help and so does maintaining liaison with insurance companies and other healthcare agencies help as well.

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Question - 10:

Tell me why Are Good Communication Skills Essential in This Field?

Ans:

Interviewers want to know whether, in addition to dealing with clinical records and submitting medical claims, you can also deal with patient calls and work with other medical billing personnel to resolve disputes. This role typically requires strong verbal and written skills to effectively interact with others, so describe situations that required you to communicate effectively under pressure with co-workers and medical office personnel.

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Question - 11:

Tell me how do you deal with rejected or unpaid claims?

Ans:

I find out why a claim has either been rejected or left unpaid. If the insurance company has made a mistake in rejecting it, I re-file it after providing further information on why it should have been paid. If the insurance company is right in denying it, I follow up with the client in order to solicit payment.

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Question - 12:

Explain me do You Like to Take on New Responsibilities?

Ans:

The medical billing industry changes rapidly. Employers want employees who demonstrate resiliency and adaptability. Describe past experiences in utilizing patient financial information systems; adjudicating claims; processing and tracking submissions, remittances and rejections; and how you are willing to take the extra steps necessary to ensure proper cashing, credit and collections to ensure that all patient accounts get paid in a timely fashion.

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Question - 13:

Tell me do you have experience of setting up Provider with Clearinghouse?

Ans:

Yes, I am familiar with claims submission procedures to clearing houses and I have resolved several claim submission problems.

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Question - 14:

Tell us what Certifications do you hold?

Ans:

There are several Medical Coding Certifications e.g CCS, CPC, CHRS and CBCS. Just name it, if you hold any. If not you can tell that its in your future plans to become a Certified Billing Specialist from the AAPC.

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Question - 15:

Tell me what's your strategy and process for appealing a denied claim?

Ans:

The first thing I do is find out just why a claim has been denied. If I feel that the denial is unfair, I consult with the doctor in question and re-file the claim providing



information and proof of why it should not have been denied.

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Question - 16:

Tell me how do you handle insufficient funds received from a customer?

Ans:

We will make sure that we call the customer and let them know. Sometimes it might be a mistake. Send the letter including the payment request and fine for bad check.

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Question - 17:

Tell us what is your Understanding of Medical Terminology?

Ans:

I am comfortable with medical terminology as a whole and have extensive knowledge of terminology associated with CPT and ICD codes.

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Question - 18:

Explain me how do you manage cross-functional teams?

Ans:

Manage through strong strength leadership, build upper management support, select clear objective, communicate clearly and build positive team dynamic.

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Question - 19:

Tell me does Insurances play games to avoid paying claims?

Ans:

I think sometimes they do. Not all of them and it is up to us to see who may be playing games following reputation and insight.

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Question - 20:

Tell me how do you manage your time?

Ans:

I am very good at managing my time because I do not let things get behind, I dont let things stress me out. I can multitask.

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Question - 21:

Explain what specialties have you billed or coded for?

Ans:

I have worked for both ophthalmologists and dermatologists and have coded and billed for both these specialties.

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Question - 22:

Tell me which type of software have you used: Epic, Medisoft or other programs?

Ans:

I have had extensive experience using Epic.

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Question - 23:

Tell me what experiences do you have in accounts receivable?

Ans:

I do not have much, but I did work for C&S and one of my job duties were to call and get payments on delinquent accounts.

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Question - 24:

Tell me which forms have you most often used in your current and former positions?

Ans:

I have had considerable experience with CPT, HCPCS and ICD-9 Vol 3.

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Question - 25:

Tell me have you billed for Medicare and Medicaid?



Ans:

Yes I have

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Question - 26:

Tell me which Medical Billing Coding System do you know?

Ans:

I have had considerable experience with CPT 9, HCPCS and ICD-9 Vol 3. I am also studying ICD 10 Codes.

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Question - 27:

Tell me what is your personal method for keeping organized?

Ans:

Keeping a clean and tidy desk is a start. Putting things away right away.

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Question - 28:

Tell me how do you manage rejected or unpaid claims?

Ans:

It is quite a problem when a claim gets rejected or is not paid. I make sure that no delays occur when submitting claims as I appreciate the fact that the longer a claim is unpaid, the less likely it is to be paid and can get rejected too. However, should this situation occur, I make sure that I correct and re-submit the claim as soon as possible.

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Question - 29:

Tell me why do you feel excellent accounts receivable execution is important for our business?

Ans:

Do provide quality care for both the patient and the care providers, so everyone gets what they need to do done.

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Question - 30:

Explain me about a time when you had to use your verbal communication skills in order to get a point across that was important to you?

Ans:

When I was convincing the customers to making them to pay the outstanding amounts, I should use polite verbal communication skills and convince him to make the payments.

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Question - 31:

Explain me how do you keep your manager informed about what is being done in your work area?

Ans:

I would only have to contact my manager if something wasn't getting done in my work area.

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Question - 32:

Tell me a time when you took personal accountability for a conflict and initiated contact with the individual(s) involved to explain your actions?

Ans:

I haven't encountered such situation.

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Question - 33:

General Medical Billing Specialist interview questions:

Ans:

- * What motivates you to work as Medical Billing Specialist?
 - * Have you found any ways to make Medical Billing Specialist job easier?
 - * Why did you leave your last job.
 - * Do you work well under pressure?
 - * What's the best movie you've seen in the last year?
 - * Have you ever acted as a mentor to a co-worker?
 - * Describe a group project of which you are particularly proud, what was your contribution?
- Think of an example where you have had to do something on your own initiative in your current job.

This is your chance to show your depth and dimension as a person. Furthermore, try to use verbs, not adjectives in your interview answer.

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Question - 34:

Face to Face Medical Billing Specialist interview questions:

Ans:

- * Are you good at working in a team?
- * How do you keep track of things you need to do?
- * Tell me about your work experience? How has it prepared you for Medical Billing Specialist job?
- * Tell me about an important goal that you set in the past.
- * Example of a time you have placed yourself in a leadership position.
- * What do you think you can bring to this Medical Billing Specialist position?
- * How would you weigh a plane without scales?

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Question - 35:

Operational and Situational Billing Specialist Job Interview Questions:

Ans:

- * Describe your typical day at your current/previous job. How do you prioritize your work?
- * How would you rate your proficiency with Microsoft Office programs, especially Excel?
- * Describe your familiarity with billing and invoice software.
- * How many invoices do you handle on a daily basis?
- * Describe a time you had an invoice discrepancy with a client. How did you resolve it?
- * Explain the financial transactions involved in the billing process and your experience with each (i.e. classifying, computing, posting, verifying, recording)
- * How do you keep track of incoming payments and ensure that it is in compliance with financial procedures? How do you ensure that they're properly posted and accounted for?
- * How do you ensure the timely collection of invoices?
- * Describe your most hostile payment collection call. How did you handle it?
- * Describe a time you went the extra mile to deliver excellent customer service.
- * Describe a time you worked with a team to complete a project on a tight deadline.
- * As a billing specialist, have you ever faced an ethical dilemma at work? How did you respond?
- * What skills do you deem necessary for a billing specialist with our firm. Do you think you possess these skills?
- * This job can be repetitive. What motivates you to do well?

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Question - 36:

Informational Medical Billing Specialist interview questions:

Ans:

- * What is the most enjoyable part of Medical Billing Specialist job?
- * What do you ultimately want to become?
- * What have you done to support diversity in your unit?
- * When were you most satisfied in your job?
- * What kinds of decisions are most difficult for you?
- * Have you done this kind of work before?
- * Give me an example that best describes your organizational skills.

Your preference may also depend on where you are in your career. This question is asked to find out whether you are committed to the Medical Billing Specialist job. These Medical Billing Specialist interview questions reveals the candidate's ability to identify the need for personal improvement.

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Question - 37:

Phone Based Medical Billing Specialist interview questions:

Ans:

- * What kind of software application do you think are important for Medical Billing Specialist?
- * Tell me about your Medical Billing Specialist work experience? How has it prepared you for a career?
- * What techniques and tools do you use to keep yourself organized?
- * How have you coordinated the work of your team to achieve target goals?
- * What's the best movie you've seen in the last year?
- * What were your annual goals at your most current employer?
- * Describe how you have balanced your academic work with your extracurricular activities.

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Question - 38:

First Medical Billing Specialist interview questions:

Ans:

- * What are your salary increases?
- * Where would you like to be in your career five years from now?
- * What was the most stressful situation you have faced as Medical Billing Specialist?
- * Give me an example that best describes your organizational skills.
- * How do you react to instruction and criticism?
- * What are you expecting from Medical Billing Specialist job in the future?
- * How would you describe your work style?

These Medical Billing Specialist interview questions reveals the candidate's ability to identify the need for personal improvement.

Let the interviewer know that you focus on getting the most important things done first. Impress the interviewer by highlighting your successes that are most relevant to the job.



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Question - 39:

Basic Medical Billing Specialist interview questions:

Ans:

- * What was your best learning experience?
- * Have you found any ways to make Medical Billing Specialist job easier?
- * What will you miss about your present or last job?
- * What's the most important thing you learned in school?
- * What do you think this Medical Billing Specialist position involves.
- * Why are you leaving your present job?
- * How do you keep each member of the team involved and motivated?

Tell them about the training you received or the work related experience you gained.

Your answers to these Medical Billing Specialist interview questions needs to convince the interviewers that your skills are exactly what they want. During the Medical Billing Specialist interview, detailing how you work with others is important.

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Question - 40:

Explain about the last claim you had denied. What happened, and how did you resolve it?

Ans:

There was a time when the insurance company denied a claim for a patient's underarm surgery saying that the procedure was cosmetic. I had the claim resubmitted with proper information. The claim was paid accordingly.

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Question - 41:

Tell me are you familiar with Electronic Medical Records (EMR) systems? Which ones have you used. How did you use it?

Ans:

The use of medical records software - also referred to as EMR or EHR software - is increasingly important to providers. They may want the biller and/or coder to enter and maintain information in the EMR system. Employers value someone who is proficient in electronic medical records software and know how to use it. It can also be a valuable asset to the biller and coder in their job when verifying patient information and treatments for a claim. Many billing and practice management software programs are increasingly integrated or interface with the EMR system.

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Question - 42:

Tell me how long does it take you to process one day's worth of patient visits or claims?

Ans:

It takes about two working days at the very maximum.

[View All Answers](#)

Question - 43:

Tell me what practice management or medical claims software do you have experience with?

Ans:

Once you've learned on practice management or medical billing software program, it's pretty easy to learn another. Most well written software is fairly intuitive to use. If you've only used on software, you might effectively make this point and emphasize your computer skills.

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Question - 44:

Explain me have you performed billing activities for Medicaid or Medicare? How was your experience?

Ans:

I have worked with both. It was interesting working with both despite the delays and the paperwork involved. Nonetheless, the experience has taught me much.

[View All Answers](#)

Question - 45:

Tell me are you comfortable working with computers? What types of software do you have experience with?

Ans:

I am computer savvy. Apart from being able to work with most common software, I am familiar with IntelleChart and ECLIPSE

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Question - 46:

Tell me do you have medical-billing certification? If not, are you planning to get certified or are you in the process of getting certified?

Ans:

Yes, I am a Certified Billing Specialist from the AAPC

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**Question - 47:**

Explain about your most hostile patient-collection case. What was the problem you encountered? Were you able to negotiate payment?

Ans:

We had this patient whom we knew to be extremely difficult. She had a cosmetic procedure done and billed it to the agency who denied it. It was quite a horror trying to extract payment from her as she used abusive language and threatened to take us to court. We managed to negotiate payment from her by reasoning with her gently initially and then very sweetly telling her that we will take legal action. She paid three days later.

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Question - 48:

Explain me do you know how to submit claims to a clearinghouse? Have you ever set up a provider with a clearinghouse or resolved claim submittal issues with them?

Ans:

Yes, I am familiar with claims submission procedures to clearing houses and I have resolved several claim submittal problems.

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Question - 49:

Explain are you comfortable working with computers? What types of software do you have experience with?

Ans:

The ability to create and share documents, reports, manage and upload files, and perform back-ups are skills that are helpful for medical billing and coding jobs. You would also want to mention any word processing (Microsoft Word) or spreadsheet (Excel) programs you have experience with.

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Question - 50:

Tell me have you ever been in a situation where you had to bargain with someone? How did you feel about this? What did you do? Give an example?

Ans:

Well at an event when attendees thought they had already paid, I will give it to them for the pre reg price and if they can email me a receipt I will pay them back.

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Question - 51:

Explain me how long does it take you to process one day's worth of patient visits or claims?

Ans:

It takes about two working days at the very maximum.

[View All Answers](#)

Question - 52:

Tell me do you know how to run customize reports?

Ans:

Since I have worked extensively with most common billing software, I am comfortable with both manual and automated reports generation processes.

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Question - 53:

Tell us have you billed for Medicare and Medicaid?

Ans:

This would be one of the top interview questions for providers who have a lot of Medicare or Medicaid patients. Government payers can be difficult and challenging to bill for. CMS has more paperwork, usually takes longer to pay, and can be frustrating to deal with. Providers who have a lot of Medicare patients will want to know your knowledge and experience of Medicare and the ability to get problems resolved quickly.

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Question - 54:

Tell me how would you handle a customer that is 14 days past due?

Ans:

Started sending payment reminders after 5 days of sending invoice and make phone calls to customers before 4 days end period.

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Question - 55:

Tell me what Would You Change About Existing Record Systems?

Ans:

A medical reimbursement specialist facilitates the claims payment process, spanning from the time a service is rendered right up until the balance is paid. They need to know about coding, medical terminology, insurance claims and billing, appeals and denials, privacy laws and compliance regulations. Record systems in physicians' offices, billing services and health care insurance companies can be very complex. Describe a health record index or storage retrieval system you've worked with and elaborate on procedures you feel could be improved. This shows a potential employer that you take pride in your work and think about ways to make the process more effective for the business and customers alike.



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Question - 56:

Tell me do you know how to run reports? Can you customize reports?

Ans:

Since I have worked extensively with most common billing software, I am comfortable with both manual and automated reports generation processes.

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Question - 57:

Tell me do you think insurance companies sometimes play games to see if they can avoid paying claims?

Ans:

I think they do. Not all of them and it is up to us to see who may be playing games following reputation and insight.

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Question - 58:

Tell me does your current employer use EMR or EHR?

Ans:

Yes. They use both.

[View All Answers](#)

Question - 59:

Tell me what certifications do you hold?

Ans:

I am CPC, CHRS and CBCS certified.

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Question - 60:

Tell us what Specialties have you Billed or Coded for?

Ans:

Tell what specialities have you worked for or have knowledge about e.g Oncology, Cardiology, Ophthalmology, Dermatology, Internal Medicine or Family Practice.

[View All Answers](#)

Question - 61:

Tell me what is the Process for Appealing Denied Claim?

Ans:

The first thing I do is find out just why a claim has been denied. If I feel that the denial is unfair, I consult with the doctor in question and re-file the claim providing information and proof of why it should not have been denied.

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Question - 62:

Tell us how would your previous supervisor describe you?

Ans:

Reliable, quick learner, honest, good accounting knowledge, good communication and hard worker.

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Question - 63:

Explain me what assignment was too difficult for you? How did you resolve the issue?

Ans:

There was a time where I was having difficulty collecting on an account and I could not get in touch with the provider and I had to contact other providers and insurance companies to get in touch with them.

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Question - 64:

Tell me what makes you the best candidate for this position?

Ans:

I believe my skills and abilities match what you are looking for and I can make an impact and bring benefit to the company.

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Question - 65:

Explain what's your understanding of medical terminology?



Ans:

Having a basic understanding of medical billing terms is important not only for medical coding but also for medical billing specialists. Make sure you have a familiarity with the more basic medical terms related to billing and coding as it relates to the billing process.

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Question - 66:

Tell us what's your understanding of medical terminology?

Ans:

I am comfortable with medical terminology as a whole and have extensive knowledge of terminology associated with both dermatological and ophthalmological procedures.

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Question - 67:

Tell me how do you keep current with insurance and healthcare coverage changes?

Ans:

We are trained on a regular basis at work. Additionally, certification upgrades help and so does maintaining liaison with insurance companies and other healthcare agencies help as well.

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Question - 68:

Explain have you billed or coded for any specialties?

Ans:

Yes, I have. Providing coding and billing services to a mental health facility, I had to monitor number of visits and pre-authorizations.

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