



Job Title: ACCOUNTANT

Department(s): Finance

Position Summary: Responsible for day-to-day operations and administrative functions in the finance office including payroll, accounts payable, audit preparation, G/L account reconciliation, grant and other miscellaneous billing, daily bank transaction recording, and other reporting needs.

Supervision Received: Finance Director

Supervision Exercised: None

Hours/Week 40 Full-Time Part-Time Exempt Non-Exempt

FLSA Definition:

ESSENTIAL FUNCTIONS:

- **Accounts Payable**
 - Reviews invoices for completeness and proper authorization
 - Reviews vendor statements to determine if we have all invoices accounted for
 - Makes proper classification and coding of expenses if not coded by authorized staff
 - Maintains a vendor-/payee-driven accounts payable file
 - Generates checks for timely payment of agency bills and disburses checks
 - Prepares 1099s for applicable vendors
- **Payroll & Benefit Accounting**
 - Ensures that timecards are complete and meet level of detail required for grant accounting
 - Enters payroll data into automated system
 - Audits the payroll summary and use to prepare month-end journal entries
 - Maintains automated leave of absence and paid time off records
 - With information provided by HR, keeps deductions and other payroll information up-to-date
 - Assures that W-2s are prepared and distributed by payroll vendor
 - Prepares invoices for vendors of Voluntary Life, 403B plan, Life and Disability Services; also updates benefit vendor with salary and benefit eligibility changes
 - Interacts with management and staff regarding payroll and benefit questions
- **Cash Receipts**
 - Records detailed non-patient cash receipts and copy supporting detail as necessary
 - Records patient cash receipts from Centricity deposit reports
 - Works with Business Office staff to ensure subsidiary ledger for Accounts Receivable is balanced monthly and appropriate accounting entries are generated

- **Financial Data Management**
 - Uses spreadsheet/database applications to produce financial and payroll reports as needed or as requested by other departments
 - Enters monthly journal entries into the accounting system
 - Produces daily “Provider Visits” summary report
 - Assists in preparation of work papers required annually for CPA audit
 - Monitors bank balances daily; prepares journal entry from daily bank account activity – both debits and credits to the bank
- **Grant Accounting**
 - Distributes expenses to underlying grants according to procedures developed for fund accounting
 - Prepare invoices to granting agencies with assistance from the grants manager
 - Monitors at least monthly whether grant invoices have been produced according to contract and whether timely payment has been received
- **Business Office**
 - Drives own vehicle between clinics to participate in daily inter-clinic mail run

CORE REQUIREMENTS:

- Works collaboratively and respectfully with staff and others—individually and as part of a team—to achieve optimal efficiency, outcomes and morale
- Interacts in a culturally competent manner with individuals and groups from diverse backgrounds, including but not limited to: socio-economics, race and ethnicity, nationality and religion, both in-clinic and in the community
- Maintains excellent and punctual attendance
- Attends and actively participates in staff and departmental meetings
- Attends agency functions and meetings as relevant or required
- Works at any or all NHS clinics, as needed
- Uses computer daily including e-mail, word documents, spreadsheets, patient management system, electronic health record, and patient portal, as needed to carry out essential job functions
- Maintains any required licensure/certification
- Demonstrates commitment to agency mission and goals
- Abides by corporate compliance program, HIPAA regulations and other agency policies and procedures
- Participates daily in pre-visit planning and huddles (RN, Provider, Medical Assistant, Front Desk)
- Utilizes Patient Portal to access patient information and communicate with patients, as relevant
- Plans, organizes, and multitasks
- Speaks, understands, reads and writes English sufficiently to carry out all essential duties
- Performs other duties as assigned

QUALIFICATIONS:

- Minimum two year associate degree in accounting or business or equivalent combination of education and experience
- Proficient use of spreadsheet and financial accounting software
- A passion for detail and accuracy
- Strong organizational and analytical skills
- Ability to analyze a problem or process and recommend possible solutions for improvement
- Valid drivers license, insurance and vehicle required
- Able to:
 - Write routine reports and correspondence
 - Communicate with vendors regarding financial issues
 - Communicate effectively with employees regarding confidential compensation and benefit issues
 - Manage multiple tasks and work with minimal supervision
 - Plan, organize and multitask
 - Use a computer keyboard to type
 - Speak, understand, read and write English sufficiently to carry out all essential duties
 - Work independently and as part of a team
 - Work cooperatively and respectfully with others

Attachments

- Physical and Mental Requirements
- Work Environment

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PHYSICAL AND MENTAL REQUIREMENTS:

Requirement:	Rarely <15% of day	Occasional 15-39% of day	Frequent 40-74% of day	Continuous >75% of day	Requirement:	Rarely <15% of day	Occasional 15-39% of day	Frequent 40-74% of day	Continuous >75% of day
Bend	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vision: Close/Reading	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squat/Crouch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vision: Distance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crawl	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vision: Depth Perception	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb (stairs, ramps)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vision: Color	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kneel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	View computer screen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Balance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hear: Using phone	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hear: In person	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stand	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speak (English): Using phone	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speak (English): In person	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lift/carry: up to 10 lbs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Speak other language: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lift/carry: 10-25 lbs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Read/comprehend (English)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lift/carry: 25-50 lbs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Read/comprehend other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Push/Pull	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Write/type	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reach: Overhead	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Perform calculations	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach: Forward	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communicate verbally	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handle objects	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Reason and analyze	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Use fine finger dexterity (type, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have reviewed the required Physical and Mental requirements of my job and herein certify that I am able to perform all the duties described above.

Name (Print)

Signature

Date

OR

I have reviewed the required Physical and Mental requirements of this position and herein certify that I am able to perform all the duties described above with the following accommodation:

Name (Print)

Signature

Date

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WORKING ENVIRONMENT

The OSHA category for this position is:

<input type="checkbox"/>	Category I – High risk for exposure to blood or body fluids.
<input type="checkbox"/>	Category II – Moderate risk for exposure to blood or body fluids.
<input checked="" type="checkbox"/>	Category III – Low risk for exposure to blood or body fluids.

On the job, the employee may encounter:

<input type="checkbox"/>	Chemical/Biological Agent		Noise level:
<input type="checkbox"/>	Contact with water/liquids	<input checked="" type="checkbox"/>	low
<input type="checkbox"/>	Confined spaces	<input type="checkbox"/>	moderate
<input type="checkbox"/>	Temperature variations (outdoors)	<input type="checkbox"/>	loud/noisy
<input type="checkbox"/>		<input type="checkbox"/>	

SPECIAL CONDITIONS OF EMPLOYMENT

Explanation:

<input type="checkbox"/>	Occasional weekday evenings required	
<input type="checkbox"/>	Occasional weekend days required	
<input type="checkbox"/>	Occasional overtime required	
<input type="checkbox"/>	Professional license/certification req'd	
<input type="checkbox"/>	Current CPR certification required	
Minimum level of education:		
<input type="checkbox"/>	High school diploma/GED	<input type="checkbox"/> Masters Degree: _____
<input checked="" type="checkbox"/>	Associates Degree	<input type="checkbox"/> Medical Degree: _____
<input type="checkbox"/>	Bachelors Degree: _____	<input type="checkbox"/> Other: _____
Travel:		
<input checked="" type="checkbox"/>	Occasional travel between clinics	<input checked="" type="checkbox"/> Vehicle, drivers license and insurance req'd
<input type="checkbox"/>	Frequent travel between clinics	<input type="checkbox"/> Occasional work outdoors
<input type="checkbox"/>	Occasional or frequent other local travel	<input type="checkbox"/> Frequent work outdoors

I certify that I am aware of the Working Environment for this position and I agree to that I am able to fulfill all Special Conditions of Employment.

 Name (Print)

 Signature

 Date