

Position Description

Incumbent
Classification Ambulatory Care Aide I
Department Obstetrics and Gynecology Clinics
Anniversary Date

Function

The individual provides clerical support to the billing and coding unit of the department. It is an entry level, training position.

Organizational Relationship

The individual reports to the Business Administrative/Associate who reports to the Department Administrator.

Duties and Responsibilities

The following information is intended to be representative of the work performed by incumbent in this position and is not all-inclusive. The omission of a specific duty or responsibility will not preclude it from the position if the work is similar, related or a logical extension of position responsibilities.

Process clinic, hospital and lab charge tickets upon completed by providers prior to forwarding to department coder.	40%
Provide coverage for ACA II in Fertility Center performing clinic reception duties, including answering phones; greeting patients; entering, reviewing, and/or retrieving demographic information on established patients; accepting patient payments and preparing related forms.	30%
Work outstanding encounter list and notify coding/billing staff of open encounters from the list so a new charge ticket can be generated.	10%
Scanning clinic reports into the Electronic Health Record.	10%
Checking and distribution of clinic fax paperwork.	5%
Other duties as assigned by Business Administrative Associate or Medical Insurance Specialist III	5%

Knowledge required for the Job

1. General clerical skills.
2. Ability to operate standard office equipment including but not limited to: fax machine, photocopy machine, and telephone.
3. Ability to keyboard accurately using a personal computer.
4. Good communication skills and the ability to handle telephone requests and personal contacts appropriately.
5. Demonstrated ability to effectively use the OAS billing system for patient identification.
6. Demonstrated ability to effectively and appropriately use e-mail.
7. Ability to prioritize work and accurately complete multiple tasks simultaneously.

Responsibility

- A. Supervisory Controls – Controls over the position shall be by written and oral directives from the Business Administrative Associate. These directives shall be developed in close consultation with the Coding/Billing staff. The individual in this position is expected to work under direct supervision according to established procedures.

Difficulty

- A. Complexity –S/he must be able to communicate clearly, this individual must be able to multi-task, work with a high degree of accuracy and follow unit procedures. S/he must be able to maintain and utilize existing filing systems and organize work assignments to meet priorities and complete tasks within time limits. This position requires the ability to follow detailed procedures.

Personal Relationships

The individual in this position must communicate through telephone and personal contacts with clinic staff, physicians, residents and medical students and School of Medicine employees in various departments.

Working Conditions

See attached Physical and Environmental Requirements Form.

PHYSICAL AND ENVIRONMENTAL REQUIREMENTS

SIU SCHOOL OF MEDICINE

Incumbent: _____ Classification: Ambulatory Care Assistant I
 Position No. (if applicable): _____ Department: Obstetrics and Gynecology Clinic-SMS

WORK ENVIRONMENT: (Check all applicable environments)

<input checked="" type="checkbox"/> Office	<input type="checkbox"/> Hospital
<input checked="" type="checkbox"/> Clinic	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Research Laboratory	<input type="checkbox"/> Outdoors
<input type="checkbox"/> Other (Be Specific): _____	

PHYSICAL DEMANDS:	Seldom	Occasionally	Frequently	Constantly	N/A
(Indicate frequency of activity during performance of position duties)	(Performed rarely less than 2% of the time)	(Performed less than 25% of the time)	(Performed 26% to 50% of the time)	(Performed 51% or most of the time)	

(Click on the Physical Demands Definitions button at the bottom of the form for a list of physical demands definitions)

Reading	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Writing	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speaking	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Close visual acuity	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Travel	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing - Conversation	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing - Other Sounds	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stooping	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Squatting	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gross hand manipulation	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fine hand manipulation	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in dust, fumes, gases, or irritants	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working at heights	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in extreme cold, heat and/or humidity	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in close quarters	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Climbing	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Operating motor vehicles	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sitting	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Standing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Walking	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working above shoulder level	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Twisting	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kneeling	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pushing or pulling	5 - 10 lbs.				<input type="radio"/>
Carrying	5 - 10 lbs.				<input type="radio"/>
Lifting	5 - 10 lbs.				<input type="radio"/>
Other (Please list): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I affirm the environmental and physical demands listed on this form are an accurate reflection of the requirements of this position to the best of my knowledge and belief.

I have read, understand and am capable of meeting the physical and environmental demands of this position.