

INCUMBENT _____ CSN _____

PRESENT CLASSIFICATION Medical Insurance Specialist 1

DATE 10-20-2011

DEPARTMENT/DIVISION Patient Business Services

Position Function

The incumbent in this position obtains, verifies and confirms patient demographic information, insurance eligibility and coordination of benefits using a variety of mechanisms including, but not limited to, an on line eligibility module, direct to payer websites or calls to payers.

Organizational Relationship

The individual filling this position reports directly to the supervisor of the Pre-Arrival Team, who reports to the Assistant Director of Patient Business Services who, in turn, reports to the Director of Patient Business Services.

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.

- 75% Obtains and Verifies Demographic and Insurance Information
 - 1) Collects pertinent patient demographic information and enter data completely and accurately into practice management system.
 - 2) Collects pertinent patient insurance information and verifies insurance information and eligibility using electronic on line eligibility modules, payer websites or phone calls to payers. Enters data completely and accurately into practice management system.
 - 3) Insures all applicable billing information and requirements are obtained and entered into practice management system.
 - 4) Assists patients in understanding insurance benefits including copays, deductibles and referrals.
 - 5) Accesses electronic on line eligibility modules to assess rejections and contact patients or payers to resolve discrepancies.
 - 6) Accesses affiliated hospital data bases to obtain demographic and/or insurance information.

- 20% Customer Service
 - 1) Receives calls from patients and other SIU HC staff.
 - 2) Make outbound calls to patients and payers.
 - 3) Maintain strict confidentiality regarding knowledge of all patient information.

- 5% Other duties as assigned

Skills and Abilities Needed for the Position

1. Ability to correct or edit demographic or insurance information based on verbal or written communication with third parties or patients.
2. Make inquiries of and respond to a variety of questions from physicians, patients, payers and related interested parties.
3. Ability and desire to communicate in a pleasant and professional manner.
4. Identifies and takes necessary actions to complete a variety of non-complex registration updates within the practice management system.
5. Reviews and identifies sources of potential patterns causing eligibility related rejections.
6. Ability to complete work in a timely and efficient manner.
7. Comfortable with repetitious work.
8. Effective interpersonal skills.
9. Knowledge and experience in utilizing a variety of systems and web based sites.

Supervisory Controls

The incumbent receives direction in either written or oral form from their supervisor, Assistant Director or Director of Patient Business Services or the CFO of SIU HC.

Peer/Unit Demands

The incumbent in this position is a peer with other co-workers within Patient Business Services. It is the responsibility of this individual to ensure that the execution of the above described duties are performed expeditiously and completely according to policies and procedures established by SIUHC, and the School of Medicine, as well as applicable federal and state regulations.

Personal Contacts

The incumbent will have daily contact with patients, payers, all Patient Business Services staff as well as other individuals outside the unit and the School via phone, email, fax or face to face communication.

Working Conditions

See attached *Physical and Environmental Requirements* form.

PHYSICAL AND ENVIRONMENTAL REQUIREMENTS

SIU SCHOOL OF MEDICINE

Incumbent: _____ Classification: Medical Insurance Specialist /

Position No. (If applicable): New MIS I Department: SIU HealthCare Patient Business Services-SMS

WORK ENVIRONMENT: (Check all applicable environments)

<input checked="" type="checkbox"/> Office	<input type="checkbox"/> Hospital
<input 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 <small>(Performed rarely less than 2% of the time)</small>	Occasionally <small>(Performed less than 25% of the time)</small>	Frequently <small>(Performed 26% to 50% of the time)</small>	Constantly <small>(Performed 51% or most of the time)</small>	N/A
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(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 type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Writing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Speaking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Close visual acuity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Travel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Hearing - Conversation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Hearing - Other Sounds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Stooping	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Squatting	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gross hand manipulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Fine hand manipulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Working in dust, fumes, gases, or irritants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" 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 type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Working in close quarters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" 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 type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Sitting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Standing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Walking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Working above shoulder level	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Twisting	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kneeling	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pushing or pulling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Carrying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lifting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<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.