



To proclaim Jesus Christ as Lord and to demonstrate His love by providing affordable, quality primary healthcare to the underserved.

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| Job Title: Patient Services Manager Supervisor's Title: Executive Director Department: Patient Services | FLSA Status: Exempt Pay Type: Salaried Revised: 10/25/2018 |
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General Summary:

Under the supervision of the Executive Director, the Patient Services Manager leads all patient registration functions and the maintenance of provider schedules/templates with the goal of fostering an excellent patient experience and outstanding interdepartmental teamwork. Specific functions under the supervision of the Patient Services Manager include phone support (operators), appointment scheduling, check-in, check-out, and receipt of point-of-service payment.

Major Areas of Responsibility:

Patient Experience

- Ensures patients are loved and served excellently on the phone and in person by all patient registration staff before/after appointments;
- Oversees the overall cleanliness/tidiness of patient reception areas and ensures that all required patient notices are posted;
- Works with other teams to maximize the effectiveness of patient communication tools and workflows, including those comprised within the electronic health records (EHR), the patient portal, and the check-in kiosks.

Staff & Policy Management

- Enforces applicable policies, procedures, and workflows with uniformity and grace;
- Maintains adequate staffing – including interviewing, hiring, scheduling, and training – of operators, over-the-phone schedulers, and front office staff;
- Leads all patient registration staff to obtain and document all relevant patient information, including insurance coverage and demographic information, and to communicate effectively with patients in a variety of forms.
- Oversees the collection of payment at the point of service and the management of cash drawers.
- Regularly seeks potential improvements and works intimately with other teams and leaders to make timely updates and revisions to policies, procedures, and workflows, as appropriate;
- Performs a variety of other administrative projects as assigned by the Executive Director.

Provider Schedules & Revenue Cycle

- Oversees the maintenance of provider schedules/templates in the EHR in order to optimize overall clinic efficiency and effectiveness, and to assist providers in meeting their productivity goals;
- Corresponds regularly with providers and other staff regarding clinic schedules and provider out-of-office notices.
- Ensures that provider schedules are filled and devises strategies to address and reduce no-shows.
- Provides timely reporting to senior management and providers, as directed, related to provider productivity, no-shows, etc.
- Communicates basic insurance-related concepts in an easy-to-understand manner, and directs/trains staff to do the same;
- Produces, interprets, and responds to reporting related to point-of-service collections
- Works with the Patient Accounts/Billing team to maximize point-of-service collections with grace and in accordance with CCHSA policies and procedures.

Required Knowledge, Skills, Abilities:

- Eager and able to embody the mission and vision of CCHSA;
- Able to demonstrate love, compassion, and genuine care when interacting with others;
- Fundamental knowledge of medical and insurance terminology and basic payment collection practices;
- Exceptional interpersonal communication skills that allow for regular and effective communication with a variety of people, including patients, visitors, providers, and senior management;
- Able to “think on your feet” and collaborate/communicate effectively with the goal of fostering an environment of teamwork;
- Very high attention to detail;
- Strong overall computer skills with experience working within an EHR;
- Able to organize, direct, prioritize, and delegate work appropriately.

Education and Experience:

- A high school diploma or equivalent is required. A college degree in relevant field is preferred.
- Significant experience working in an EHR is required. Experience working with eClinicalWorks is a plus.
- At least 5 years of patient registration related experience, with at least 2 years of demonstrated success managing a patient registration or related team is required. Experience in a primary medical care setting is preferred.

CHRIST COMMUNITY HEALTH

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| Physical Requirements: | Rarely (0-12%) | Occasionally (13-33%) | Frequently (34-66%) | Regularly (67-100%) |
|---|-------------------|--------------------------|------------------------|------------------------|
| Seeing: Must be able to read reports and use computer | | | | X |
| Hearing: Must be able to hear well enough to communicate with coworkers | | | | X |
| Standing/Walking | | | X | |
| Climbing/Stooping/Kneeling | X | | | |
| Lifting/Pushing/Pulling | X | | | |
| Fingering/Grasping/Feeling: Must be able to write, type, and use phone system | | | | X |

Working Conditions: The position has normal office working conditions with the absence of disagreeable elements.

Note: The statements herein are intended to describe the general nature and level of work being performed by employees, and are not to be construed as an exhaustive list of responsibilities, duties, and skills required of personnel so classified. Furthermore, they do not establish a contract for employment and are subject to change at the discretion of the employer.

By signing below, I acknowledge that I have read and understand this job description and I am ready to perform the duties listed above.

Employee Signature

Date