**Affinity Health Center**

**Position Description**

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| **Title:** | Patient Access Specialist |
| **Department:** | Patient Access |
| **Reports To:** | Patient Access Supervisor |
| **FLSA Status:** | Hourly, Non-exempt |
| **Date Revised:** | July 2020 |

**Vision:** Affinity Health Center’s vision is for a healthy and vibrant community where all people have access to exceptional and comprehensive healthcare.

**Mission:** Affinity Health Center serves the healthcare needs of our community by providing access to high-quality, comprehensive care with compassion, dignity and respect.

**Goal and General Summary**

Patient Access Specialists are responsible for ensuring access to all Affinity Health Center services in a welcoming manner. Participates in the organizational Performance Management System and Continuous Quality Improvement initiatives.

**Essential Job Functions**

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| **% Time** | **Function** |
| 65% | **Patient Access Services:** Responsible for implementing the Affinity Health Center model for patient care by incorporating the Patient Centered Care Principles in the daily workflow to enhance the patient experience and to make patient appointments efficient at main site and satellite sites; responsible for opening/closing building procedures as applicable; conducts intakes with new patients and assists community members in process of becoming new patients at Affinity Health Center; reviews forms to ensure accuracy/completion of required information; reviews/verifies all demographic and insurance information for each patient at each visit and makes necessary changes in EMR; requests and scans new patient required documents (ID, income verification, insurance card); follows process for addressing household income and sliding fee scale; reviews income/insurance and makes referrals to Benefits Navigator as appropriate; cross trains on all patient access roles/work stations (check in 1, 2, 3, dental, call center, check out, satellite sites, etc.); schedules patient appointments, cancellations, reschedules in EMR; assists AHC clients with accessing services as needed. Manages confidential information in workspace/lobby area according to privacy laws (including patient requests related to phone messages and mail). Maintains lobby area. Initial contact for all patient payments; prepares/balances bank reconciliation/deposits daily; maintains petty cash.  ***Competencies:*** Good verbal communication skills; ability to relate to diverse people; ability to manage multiple tasks; strong organizational skills; awareness of and sensitivity to external environment; helpful and responsive attitude; good customer service skills; knowledge of phone system, electronic health record/practice management system and HIPAA laws; sensitivity to patient confidentiality. |
| 20% | **Call Center:** Provides information to callers and/or refers caller to appropriate department; incorporates Patient Centered Care principles with managing calls and scheduling; provides quality customer service while assisting callers; flags medical care team in EMR for medical-related questions; assists patients with scheduling medical appointments, cancellations, reschedules in EHS; collaborates with nurse/MA triage to support patient care.  ***Competencies:*** Good communication and customer service skills; ability to work in fast paced high-pressure environment; knowledge of phone systems, electronic health record and HIPAA laws. |
| 10% | **Quality Assurance:** Responsible for providing quality customer service and enhancing the patient experience; reviews call center recordings for QA purposes with Patient Access Supervisor; collaborates across departments to support AHCs Patient Centered Care Principles; provides input/feedback on processes to ensure quality care and services; reviews data entry in EMR to ensure accuracy and quality; works with the Patient Access Supervisor to work reports to maintain QA and compliance with data entry, sliding fee scale and accuracy for insurance and billing.  ***Competencies:*** Ability to take initiative, work in high pressure environment, and coordinate and manage multiple projects efficiently, effectively, and independently; data management, effective communication skills (verbal and written). |
| 5% | **Other:** Responsible for receiving and documenting incoming medications for pickup by medical team; assists with the coordination of transportation services as needed; assists staff with projects/special services as needed and as time is available, including coordination of pharmaceutical lunches; assists with other duties as assigned; supports patient access responsibilities at satellite sites.  ***Competencies:*** Ability to take initiative, work in high pressure environment, and coordinate and manage multiple projects efficiently, effectively, and independently; data management, effective communication skills (verbal and written); helpful and responsive attitude; team player; good communication skills; knowledge of relevant community resources; good organizational skills. |
| **100%** | **Total Essential Functions** |

**Education, Experience, Etc.**

* High School diploma or equivalent
* Customer Service experience preferred
* 2-3 years of medical office experience preferred
* Electronic Medical Record experience preferred
* Valid Driver’s License preferred; reliable transportation required

**Working Conditions**

* Frequently sits for long periods of time.
* Regularly works inside throughout the year.
* Regularly types and reads on a computer.
* Regularly communicates in-person, by telephone and written correspondence.
* Frequently stands, stoops, reaches, pushes and pulls
* Rarely lift items 15 lbs. or less
* Occasionally non-traditional working hours
* Occasionally some travel (driving) may be required