Oroville Hospital	Job Description for	Department:	Admitting/Registration
	Lead Patient Access	Dept.#:	8560
	Clerk	Last	
		Updated:	05/03/11

Reports To

Patient Access Manager

Job Summary

The function of the Lead Patient Access Clerk is to provide leadership, communication and training to the registration team of Oroville Hospital. The Lead Patient Access Clerk provides continuity during the initial and ongoing training of employees throughout Oroville Hospital who have responsibility for registering patients following established policy and procedures. Works cooperatively with the Patient Access Manager, Patient Access Supervisors, Clinic Manager, Diagnostic Imaging Manager, Lab Manager and the Patient Access Clerks. In addition, responsible for knowing/doing all aspects of the Patient Access Clerk job duties.

Duties

Analyze, design and develop accurate, complete and concise training curriculum materials that may be instructor-based, self-study, or computer based for all staff responsible for patient registration.

- 1. Conducts new hire training and on-going industry and functional job skill training for all staff responsible for registration.
- 2. Assist in training development assignments that support the overall training design, including creation of training content, job aids, assessment, etc.
- 3. Use measurement and reporting tools developed for each training curriculum to assess the effectiveness of training including assessments, and feedback from participants.
- 4. Assist in the administration of all training including but not limited to monitoring of staff attendance, scheduling facilities, coordinating training sessions, evaluation and track of effectiveness.
- 5. Conduct initial train-the-trainer sessions for all new training programs and deliver training across multiple audiences, as needed.
- 6. Effectively communicates changes obtained from interactions with other developmental staff.
- 7. Reviews training materials quarterly and revises as required.
- 8. Manage and monitor all assignments of compliance testing with the involvement of management.
- 9. Gathering of correct information to ensure the accurate billing and reimbursement through Patient Financial Services
- 10. Check the patient's paperwork ensuring that all orders are complete with diagnosis and requested test(s)
- 11. Obtain identification and insurance information from each patient during the registration process
- 12. Knowledgeable regarding outpatient registration versus in-patient registration

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- 13. Forwards reports of injury to appropriate agencies on industrial accidents as necessary
- 14. Request cash co-payments, cash deposits and cash payments from each patient
- 15. Accountable to provide accurate receipts for payment transactions
- 16. Files any necessary department paperwork according to department guidelines
- 17. Onsite point person and problem solver for Patient Access, Central Scheduling, and Financial Counseling
- 18. Quality assurance for assigned areas. Daily MSPQ audits, daily pre-cert audits, weekly registration error clean-up and QA with feedback to employees
- 19. Pursuit of 3rd party assistance for Self-Pay patients, 100% of Inpatient Self pay patients assessed for available financial assistance, cases followed and converted to appropriate status as soon as possible
- 20. Performs customer service: patients, families, staff, callers are all greeted courteously. Patients are registered within 15 minutes of arrival; all patients are directed to the correct areas after registration
- 21. Processes payment collection where 100% of all patients expected to pay a co-pay or deductible are asked for their payment
- 22. Duties as assigned by either the manager or supervisor of the department

Qualifications

- 1. High school diploma or its equivalent is required
- 2. 4 plus years registration experience with emphasis on patient contact and accuracy
- 3. Medical Terminology
- 4. In depth knowledge of HIPAA
- 5. Experience with training staff in addition to analyzing, designing and developing training curriculum material preferred
- 6. Demonstrate experience in leadership skills
- 7. Demonstrate understanding of Health Care industry as it relates to the division of Patient Access and registration
- 8. Ability to communicate effectively, gain credibility, and develop productive relationships with management, staff members, and other customers
- 9. Proven abilities to set priorities and multi-task
- 10. Self motivated individual with exceptional customer service skills
- 11. Team oriented individual who shows initiative and demonstrates flexibility
- 12. Knowledge of Medi-Cal; Medicare and private insurance reimbursement and billing procedures helpful
- 13. Must have basic clerical skills, typing, filing, ability to communicate with the public, doctors, nurses and patients
- 14. Ability to maintain composure when faced with difficult situations
- 15. Must be able to handle confidential situations with tact

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16. Ability to work with computers, electronic devices, telephones, fax machines

17. Must possess the ability to do multiple tasks simultaneously

Lifting Requirements

Sedentary- Generally lifting not more than 10 lbs maximum and occasionally lifting and/or carrying such articles as ledgers, files and small items.

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