



Munster Eye Care Associates, P.C.
Comprehensive Ophthalmology/Optometry and Optical Dispensary
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Position: Patient Services Coordinator (Insurance Specialist, Transaction Specialist, Authorization Specialist and Triage Specialist)

Department: Patient Services

Reports to: Office Manager or Practice Administrator in the absence of the Office Manager

Job Summary:

This individual is responsible for obtaining all pertinent information to initiate patient treatment and billing of claims in order to efficiently facilitate patients to the patient care department. In addition, this individual is responsible for collecting all monies due from patients; managing patient's care and maximizing the office's schedule through appointment and recall scheduling.

Education and Experience:

- High School diploma.
- Computer Background with practice management software.
- General knowledge of physician business office procedures.
- General knowledge in the operation of a computer
- General knowledge of Microsoft Excel and Word.

Essential Skills and Abilities:

- Ability to exercise a degree of initiative and judgment.
- Ability to establish and maintain effective working relationships with patients, medical staff, coworkers, and the public.
- Physical abilities: sit for extended periods of time; push, pull, and reach; occasionally bend, stoop, and stretch.
- Hand eye coordination and manual dexterity needed to operate a keyboard, photocopier, telephone, and other office equipment.
- Effective communication with physicians, practice manager, employees, business contacts and the public through grammar, telephone and writing.

Personal Skills:

This individual must be a professional, have a positive attitude, be a team player, create efficient work patterns through organization, pay special attention to detail, possess strong customer service/ communication skills with patients, doctors, managers and co-workers, computer literate, multi task oriented and possess values and beliefs that are in accordance with the practice's core values.

Detailed Job Description:

1. Insurance Specialist

- Open office main door at 7:45 AM
- Verify completion of paper patient registration sheets or pull in electronic registration from patient portal:
 - Patient information
 - Insured information
 - Insurance information
 - Referral information
 - Signatures for treatment and assignment of benefits
 - Patient/Family History form
 - VLQ
- Arrive patients scheduled for current day by using the arrive feature in the practice management system
- Acknowledge the Notice of Privacy Practices
- Data Entry
 - Responsible for the completion of the registration sheets manually and electronically and scan into the practice management system
 - Demographics Entry– patient full name, address, DOB, phone numbers, employer and occupation, account responsible, emergency contacts
 - Driver's License & Insurance Cards- Obtain current copies of insurance cards from patients and scan into practice management system
 - Record referrals for new and/or established patients
 - Photograph patients for EHR Identification Purposes
 - Electronic Health Records Meaningful Use fields – Sex, Birth Date, Primary Language, Race, and Ethnicity.
- Inform patients of outstanding balances and or fees that will be collected at check out following their appointment
- Follow up on no show appointments according to the written office protocol
- Clean waiting room area at the end of each work day
- Follow up on recall, optical promotion, and miscellaneous mailers returned address issues
- Maintain and scan registration sheets for patients not seen in office
- Maintain and clean up the list of Web Registrations pulled into the practice management software
- Practice Management System-
 - a. Add new employers, occupations, and cities to tables
 - b. Add/Insert New Insurances to system for electronic or paper billing according to protocol
 - c. Obtain NPI information, including direct email for new physician's entries in office database

2. Transaction Specialist

- Collect copayments, deductibles, previous balances, co-insurance, refraction fees, contact lens fitting fees, and contact lens balances according to the written office protocol
 - Inform patients of Administrative Fee if current fees are not paid when services are rendered
- Daily charge entry and claim setup for all examinations, office procedures, surgeries, and miscellaneous appointment types.
- Electronic claims transmission for optical charges and contact lens charges: VSP, EyeMed, CHS, Mittal, Self-Pay, Medicaid
- Reconcile all payments and charges
- Pre-appoint patients who are scheduled for current day
- Process Care Credit Transactions
- Transact and balance credit card, check, and cash transactions for End of Day Reports according to written office protocol
- Run all End of Day Reports according to the written office protocol
- Process and submit paper claims via fax to Social Security Determination according to office protocol

3. Appointments

- Answer incoming phone calls in accordance with phone etiquette and scheduling template protocol
- Schedule new and established appointments according to the scheduling template protocol
 - Pre-appoint, reschedule and cancel appointments
 - Update recalls according to scheduling template protocol
 - Verification/Entry of patient demographics
 - Verify insurance based on our participating contracts according to the Incorporated Insurance Carrier Worksheet
 - Send welcome packets according to the scheduling template protocol
 - Inform all patients, both new and established of electronic registration available as of 8/27/2013

- Triage patient chief complaints according to the triage protocol and matching the chief complaint to the patient's insurance plan
- General understanding of vision and medical plans in order to set patient payment expectations
- Address the need for treatment of a minor form according to written office protocol
- Address current balances with patients
- Address collections/bad debt write off balances with patients

4. Phone Triage Position 1

- Check voicemail system periodically throughout the day
 - Transfer messages or email to the appropriate party
 - Return phone calls
- Answer Triage phone
 - Direct calls to appropriate departments
- Weekly send notices to patients about the electronic registration process both electronically through the practice management system and manually with preprinted cards. Affix patient name and address labels to the electronic health records cards for patients without email
- Daily maintenance of the info@munstereyecare.com email. Return calls for patients who require communication through this email.

5. Phone Triage Position 2

- Checks the Public Fax Folder and disperses to the appropriate staff members for completion
- Work waitlist for appointment reschedules on weekly basis
- Process patient recalls weekly on Wednesday according to the written office protocol
- View obituaries and record deceased patients according to the written office protocol
- Receives and prints the notifications and paperwork from the Indiana office of disability for upcoming scheduled appointments
- Daily send CCD using practice management system function according to protocol
- Verify Medicaid eligibility daily in the AM from Web Interchange and scan into practice management system
- Maintain and scan miscellaneous records and tests for patients not seen in office
- Medical Records

Authorizations – divided between Position 1 and Position 2 by doctor

- Obtain insurance authorizations for all vision examinations and medical examinations
- Obtain insurance authorization for all office procedures
 - Check Medical Necessity and documentation
 - Check Proper CPT and Diagnostic coding
- Insurance coverage
 - Obtain insurance authorizations for all radiology procedures
 - Obtain insurance authorization for all outpatient surgeries
 - Obtain insurance authorization for post cataract glasses
 - Confirm appointments according to the written office protocol
 - Verify all patient's benefits for vision and medical services according to the written office protocol
 - Chart Preparation:
 - Pull daily charts
 - Verify insurance for authorizations/pre-certifications
 - Verify insurance for referrals
 - Call Skilled Nursing Facilities to address part A or part B stay according to the skilled nursing facility protocol
 - Call Collection Agency for balance or bad debt write off

Coding – knowledge and understanding

- Understand when to bill a NP exam or consult
- Understand when to use 92 vs. 99 codes on insurance claims
- Apply modifiers when appropriate

- Understand insurance payment/coding guidelines
- Understand coding and billing of all surgical services
- Understand coding and billing of all hospital consultations
- Understand coding and billing of all office services such as examinations, procedures, lasers, diagnostic tests, and optical
- Verify the necessity for pre-certifications for surgeries, office procedures and diagnostic tests
- Understand how to reference and utilize the ICD-10 and CPT books as it applies to your duties.
- Understand how to reference and utilize the LCDs for the Medicare contractor and other insurance policies as it applies to your duties.
- Understand how to reference and utilize the Medical Coding Manual and the How To Manual in the Patient Accounts Folder as it applies to your duties.

6. Training Classes and Certification

- Take Practice Management classes assigned by supervisor based on job responsibilities
- Take BSM classes assigned by supervisor based on job responsibilities
- Take Corcoran classes assigned by supervisor based on job responsibilities
- Complete CPSS – Certified Patient Services Specialist certification within 2 years of employment
- Complete ICD-10 webinar training and crosswalk exercises

7. Miscellaneous

- Medical Records-guidelines by Indiana Law and HIPAA
 - Prepare authorizations for release of records
 - Obtain approval from physician
 - Transact fees for medical records and/or narrative letters for patients, physicians, insurance companies or third parties
- File daily charts
- *Complete Customer Service training tape*
- *Complete Practice Management Computer training*
- *Complete Outlook training*