



Job Description

Patient Access Representative

First and foremost: We recognize communication as our most vital tool. Every employee should focus on communicating across the system to ensure we are functioning as a team. This will require active communication with patients, team members in your department as well as other departments, managers, and physicians. You are encouraged and expected to look for ways to use communication to solve challenges and enhance the patient experience.

Summary: The Patient Access Representative is responsible for all aspects of the registration process, insurance verifications, patient collections, referrals and scanning documents into the EPM system.

Essential Functions:

Provide excellent customer service to internal and external customers through prompt response and courteous communication within 24 hours of the request.

Verify all insurances as necessary to ensure accurate eligibility for coverage of treatment

Effectively collecting patient co pays for their visit or collecting patient balance as needed.

Maintain departmental goals and productivity parameters as set forth by Director.

Assist patients with filling out paperwork, questions or concerns regarding insurance, or balances.

Other Functions:

Assist team members as needed.

Other Duties as assigned

Education: High School Diploma or GED.

Experience: 2 Years of medical office or customer service experience.

Skills: Excellent 10-key skills. Knowledge with Word and Excel systems. Knowledge of EHR is a plus. Excellent interpersonal communication skills and customer service skills. Ability to maintain quality control standards. Ability to meet deadlines.

Reports to the Director of Revenue Cycle Management via the Team Lead Patient Access Rep.