



**Job Code:** 6489  
**Grade:** 13  
**HCWR:** N

**Job Title**

Call Center Customer Service Representative

**Department**

Call Center

**Job Summary**

The Call Center Customer Service Representative (CSR) is responsible for call center-based education, proactive outreach, and enrollment of eligible enrollees into the financial assistance programs. Ensures that enrollees understand the financial assistance programs available i.e., charity care, Medicaid, and health insurance available through the Affordable Care Act (ACA). Utilizes knowledge of the Finance Revenue Cycle Department's policies, procedures, and guidelines as well as Medicaid/Redetermination Process, and Managed Care to handles patient complaints and propose suitable solutions. Utilizes best practices and performs all duties in accordance with Cook County Health & Hospitals System (CCHHS) and departmental standards, policies, and procedures.

**Typical Duties**

- Educates Medicaid enrollees of plan options including information on the mandatory managed care choice process
- Assists Non-Medicaid individuals with application screening questions and details on how to apply for financial assistance programs
- Answers questions from patients, providers and the public seeking information and assistance with redetermination process and form completion; creates a three-way call with Illinois Medicaid Redetermination Project staff to support the caller's inquiry
- Provides information and assistance for re-instating or re-applying for coverage to those who have recently lost Medicaid or cash assistance coverage due to failure to complete in a timely manner the redetermination process
- Offers information on other resources or coverage for those who are not eligible for Medicaid or financial assistance programs
- Verifies demographic information of applicants and members for inbound calls for the purpose of updating with the State of Illinois Department of Health Services, Third Party Administrators, and other payors as necessary
- Communicates with quality assurance, patient relations, and patient advocates to support the commitment to quality customer service
- Escalates complex customer inquiries or complaints to the supervisor or manager
- Makes corrections to selected registration errors identified by during the quality review process
- Performs other duties as assigned

**Minimum Qualifications**

- High School Diploma or GED
- Two (2) years of experience associated with screening/processing of individuals seeking Medicaid, SNAP, cash assistance, charity care, or other related social services
- Must be able to travel to work sites throughout Cook County



**Preferred Qualifications**

- Associate's Degree or equivalent from a college or technical school
- Three (3) years of experience associated with screening/processing of individuals seeking Medicaid, SNAP, cash assistance, charity care, or other related social services within a multi-hospital system or Medicaid managed care plan
- Prior experience in Medicaid, managed care, or human services with customer contact by telephone
- Call Center experience in a healthcare related organization
- Bilingual in one or more of the following: English/Spanish, English/Polish, English/Mandarin or English/Arabic (May be required based on need)

**Knowledge, Skills, Abilities and Other Characteristics**

- Thorough knowledge of web-based application processing system, Cerner, eligibility verification system, Illinois Department of Human Services application benefits eligibility systems
- Proficiency with Microsoft Office Suite
- Excellent verbal and written communication skills necessary to communicate with all levels of staff and a patient population composed of diverse cultures and age groups
- Strong interpersonal and team skills
- Strong customer service skills
- Ability to maintain confidentiality and adhere to HIPPA standards
- Demonstrate strong customer service, email, and phone etiquette skills with strong response times
- Demonstrate analytical and organizational, problem-solving, critical thinking, and conflict management/resolution skills
- Demonstrate attention to detail, accuracy, and precision
- Ability to Educate Medicaid enrollees of plan options including mandatory managed care choice process
- Ability to complete annual educational requirements
- Ability to prioritize, plan, and organize projects and tasks
- Ability to multi-task and meet deadlines in a fast paced, high output and stressful environment
- Ability to adhere to department policies and standards utilizing best practices
- Ability to maintain a professional demeanor and composure when challenged
- Must be able to travel to work sites throughout Cook County

**Physical and Environmental Demands**

This position is functioning within a healthcare environment. The incumbent is responsible for adherence to all hospital and department specific safety requirements. This includes but is not limited to the following policies and procedures: complying with Personal Protective Equipment requirements, hand washing and sanitizing practices, complying with department specific engineering and work practice controls and any other work area safety precautions as specified by hospital wide policy and departmental procedures.



**The above statements are intended to describe the general nature and level of work being performed by people assigned to this classification. They are not intended to be construed as an exhaustive list of all responsibilities, duties and skills required of the personnel so classified.**

**For purposes of the American with Disabilities Act, “Typical Duties” are essential job functions.**