



Job Code: 6527

Grade: 11

HCWR: N

Job Title

Pre-Registration Specialist

Department

Finance Registration

Job Summary

Under the direction of the System Manager of Patient Access, Pre-Processing, collects information to preregister patients, verifies insurance and/or other payment sources for all outpatient-related services, including same day procedures and other ambulatory and hospital-based outpatient services. Identifies and determines order of priority for coordination of benefits (COB). Responds to customer concerns and reports status to Supervisor or Manager. The pre-registration specialist's role helps to avoid implications of incomplete preregistration/insufficient staffing. Such implications include, but are not limited to, inability to locate the patient file in the system and/or submit a request for pre-certification, non-submission of claims for processing, and payment discounts and/or timely filing denials.

Typical Duties

- Utilizes electronic reports and/or schedules to identify patients needing to be preregistered for admission and same day surgery, in addition to any outpatient and/or ancillary services
- Contacts patients via telephone to preregister at least 5-7 days prior to schedule appointments
- Completes initial screening of self-pay patients to determine eligibility for financial assistance of hospital-based outpatient services
- Acquires all essential demographic and insurance information needed for processing and pre-registration purposes
- Identifies procedures that require pre-certification and subsequently notifies the appropriate department.
- Utilizes eligibility vendor, or other electronic communication media to verify benefits
- Identifies and determines order of priority for coordination of benefits (COB)
- Updates Patient Management System with all insurance coverage updates; classifies the patient account with the appropriate coverage
- Makes appropriate notes documenting the reason patient information may be missing from the file
- Responds to customer concerns in a timely and professional manner and reports all developments or outcomes to System Manager of Patient Access, Pre-Processing
- Answers all incoming phone calls in an efficient and courteous manner
- Adhere to HIPAA standards and complies with patient confidentiality policies for the retention of patient information, handling, distribution or disposal of patient health information
- Adheres to key performance indicators (KPI's) to meet departmental and organizational pre-registration goals
- Communicates with supervisors, managers, and patients daily; physicians, administrative and clinical staff members occasionally
- Performs other duties as assigned by the department System Manager of Patient Access, Pre- Processing



Minimum Qualifications

- High School diploma or GED equivalent
- Three (3) years of experience in patient access or patient registration in a health care setting
- One (1) year of data entry experience

Preferred Qualifications

- Prior call center experience

Knowledge, Skills, Abilities and Other Characteristics

- Knowledge and understanding of Federal, State and local healthcare regulations
- Knowledge of Microsoft Office Suite, registration and eligibility system
- Strong customer service and empathy skills
- Demonstrates good computer and typing skills
- Demonstrate good phone and email etiquette skills with strong response times
- 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 mathematical skills
- Ability to follow HIPAA standards and comply with patient confidentiality policies
- Ability to prioritize, plan, and organize projects and tasks
- Ability to multi-task and meet quotas and deadlines in a fast paced and stressful environment
- Ability to adhere to department policies and standards utilizing best practices
- Ability to make competent professional judgments and decisions
- Understanding of the formal and informal organization structure
- Demonstrates a desire and willingness to maintain and upgrade professional skills and education
- Demonstrate analytical and organizational, problem-solving, critical thinking, and conflict management/resolution skills
- Demonstrate attention to detail, accuracy, and precision
- This position requires various types of physical exertion with the use of hands, legs, and fingers including but not limited to lifting, twisting, turning, reach above shoulder, reach outward, standing, walking, bending, prolonged sitting, operating office equipment and other devices or carrying light weight

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.