

JOB SUMMARY:

Performs all duties/responsibilities with professionalism and complete confidentiality. Performs efficient, orderly registration of all patients. Insures that accurate patient information is collected and entered into the registration module of the Meditech system. Operates a console telephone switchboard in order to relay incoming, outgoing, and intra-facility calls. Operates hospital-wide paging system.

ESSENTIAL FUNCTIONS:

Demonstrates and verbalizes understanding of Corporate Compliance, Privacy (HIPPA), Confidentiality of Information, and Ethics policies and adheres to the guidelines of the policies, other regulations, and governing agencies of the organization relative to the Registrar responsibilities.

Greets patients in a friendly, courteous manner using an understanding, compassionate approach.

Greets patients registering for hospital services. Makes a good impression with patients and their families; the patient encounter begins with the registration process, and the initial impression should be a favorable one.

Accepts patients in order of arrival or scheduled appointments, with the exception of emergency cases, which are processed first.

Processes Physicians' Orders:

Receives physicians' orders via fax and logs receipt of them; receives orders from patients as they present for services; processes orders appropriately, i.e. verifies completion, files, forwards for scheduling, or returns to physicians' offices for more information.

Reads referring physicians' orders and registers the patients appropriately to have test or procedure completed.

Obtains correct ICD-9-CM code from physician order or identifies proper codes for outpatient, nonsurgical accounts, and enters the codes into the registration.

Understands the ABN process and obtains additional information from physicians when necessary; assists patients in understanding their right to choose or refuse services based on anticipated denial of coverage by Medicare.

Gathers pertinent system-defined information required for a complete registration, including personal information data, insurance/billing information, and emergency notification data.

Performs verification process through Davincian/Guardian software to correct registration errors that may prevent a clean billing process and reimbursement for services provided, and to maintain integrity of the records.

Verifies insurance eligibility via internet sites or Revenue Cycle Management software (Davincian/Guardian).

Generates appropriate registration forms.

Obtains necessary signatures for consent for treatment and billing procedures. Obtains and documents verbal consent of parent or guardian for minors presenting for tests or treatment.

Provides appropriate departments with registration forms and/or chart forms as required. Distributes to patients and/or responsible parties any and all required documents or literature, including but not limited to PAH Patient Privacy Notice, Advanced Directives Notice, MCR Beneficiary Notice, Champus/Tricare Admission Notice, Patient's Rights and Responsibilities.

Assists patients in understanding of insurance requirements and benefits; refers patients to appropriate billing office personnel for further assistance when appropriate; refers uninsured patients to credit manager.

Uses Davincian parallel to Meditech to insure accurate registration and timely insurance eligibility verification.

Obtains necessary referrals and/or pre-authorizations from the patient's Primary Care Physician for any test or treatment requiring them for payment of services. Collects authorization numbers or referrals for procedures or tests not scheduled in advance, and collected by Central Scheduling Staff.

Escorts patients to their rooms; directs patients and/or visitors to appropriate locations within the facility.

Collects time of service payments for specified services. Collects payments on accounts when billing office is closed. Provides patient with a receipt for either of the above. Uses card machine to accept debit and credit card payments and forwards receipts to the Billing Office.

Works with the Billing Department to identify insurance eligibility issues and works toward ongoing goal to reduce registration errors affecting or preventing a clean claim.

Operates hospital switchboard:

Answers and screens incoming calls, relays calls to the proper destination, transfers and/or holds calls as necessary;

Pages authorized personnel, including physicians, over the intercom system as requested for incoming or intra-facility calls;

Encodes pocket and/or radio pages as required;

Makes all necessary announcements as instructed to activate the Emergency Response Plan;

Informs appropriate personnel of fire drills, emergency preparedness exercises, and other hospital functions by announcing them over the paging system.

Maintains on-call schedules for various departments; contacts on-call personnel as requested by RN Supervisor.

Monitors alarm indicators and activation of fire, security, and function alarms located in the department; Receives disaster information; notifies proper personnel and departments. Works effectively with the Communications Officer to notify appropriate individuals of disaster situation by following defined protocols.

Serves as physicians' answering service, handling incoming calls by collecting information pertinent to the physicians' protocols, and relaying that information directly to the physician on call; Documents all calls on the designated log.

Monitors emergency department and outpatient waiting area as needed; notifies RN Supervisor of need for assistance, i.e. security.

Maintains working knowledge of all current procedures and policies for efficient performance of all required duties; including periodic review of Safety, Personnel, and department specific manuals, and Emergency Response Plan.

Reports for work as scheduled and as needed to insure adequate coverage in the Central Registration Department or Central Scheduling Department.

Provides adequate coverage and assumes responsibility for outpatient registration, emergency room registration, admissions, and switchboard operations within the work day, along with and in lieu of other scheduled staff.

Remains informed of current Quality Performance Improvement efforts within the hospital and without the department; participates as needed.

Maintains a clean, neat working environment by cleaning surfaces and door frames as needed, dusting work areas as needed, notifying housekeeping staff if vacuuming and other services are needed.

Understands that performance and competency will be evaluated at least yearly, involving all components of this job description.

Attends staff meetings as scheduled.

QUALIFICATIONS:

EDUCATION: High School diploma is required. Medical or business training preferred.

EXPERIENCE: General clerical experience, accurate typing skills, and computer knowledge or experience required

SPECIAL REQUIREMENTS: Excellent customer service skills demonstrated by courtesy, patience, and cooperation in dealing with customers. Clean and neat appearance, and pleasant telephone voice required. Respect for patient confidentiality essential. Ability to perform various tasks simultaneously essential.

JOB KNOWLEDGE Basic knowledge of insurance coverage issues and medical terminology necessary. Extensive knowledge of both is expected.

WORKING CONDITIONS: Works in a well-lit, temperature controlled environment 100 percent of the time. No physical hazards associated with the job.

PHYSICAL DEMANDS: The position requires the ability to enter data into a computer, sitting or standing for periods of two hours at a time. Requires the ability to use the telephone; requires the physical ability to access all patient care departments of the hospital. Also requires minimal lifting ability normally not exceeding 10 lbs. Typing is required less than 25% of the time for one shift. Single key stroke and the use of a computer mouse are required for approximately the same time.