Position Summary: The Patient Account Representative (PAR) is responsible for providing courteous and professional assistance to patients and for maintaining accurate and complete patient accounts.

Duties and Responsibilities:

- Demonstrates superior customer services skills, including but not limited to:
  - Interacts with all internal and external customers in a caring and respectful manner.
  - Answers telephone, responds to messages/inquiries and routes calls in a timely and polite manner.
  - Communicates with patients and their families in a courteous, professional, cooperative and mature manner both in-person and over the telephone.
- Accepts patient payments at time of registration and/or at check-out, and provides receipt.
- Posts payments and makes adjustments to patient accounts in the computer system.
- Enters patient charges into Practice Management System.
- Maintains security of cash drawer at all times.
- Balances and reconciles all money collected daily.
- Prepares daily deposits.
- Makes referral to Financial Counselor for counseling and payment plan, as appropriate.
- Gives patient Medicaid Application if patient’s income suggests that they may be eligible.
- Makes referral to Resource Specialist for assistance, as appropriate.
- Responds to patient requests for sliding fee applications, by appointment or walk-ins.
- Counsels patients on correct completion of sliding fee application and supplementary documents needed.
- Reviews completed sliding fee applications prior to submission to PAR II for eligibility determination, making sure the application is complete and that all documents have been provided.
- Enters and updates patient demographic and financial information into computer system with a high rate of accuracy.
- Calculates discount for affected dates of service.
- Researches bad addresses to obtain a good address for returned mail.
- Scans relevant patient information into the Practice Management System.
- Contacts patients at least one business day before the scheduled appointment to Pre-register the patient and to remind them of their appointment. During this interview, the patient is reminded of sliding fee updates as well as financial responsibility at the time of service, as well as any old outstanding balances.
- Rotates between workstations assigned to PARs.
- Assists patients with questions as appropriate, or refers to appropriate person for assistance.
- Participates in orientation/training of new team members as requested by supervisor.
- Assists in providing process improvement reports for improving quality of patient care.
• Cross-trains and works in other areas, as applicable.
• Performs other duties as assigned.

**Department-Specific Duties and Responsibilities (as applicable):**
• Obtains authorization and submits paperwork for Best Chance and Wise Woman as appropriate.
• Obtains authorizations for surgeries, procedures and OB visits
• Initiates Global letters for maternity

**Qualifications:**

**Education/Experience:**
High School Diploma or equivalent required. Two to three (2-3) years previous medical office or related experience required.

**Knowledge, Skills and Abilities:**
• Positive Attitude
• Excellent verbal communication and listening skills
• Excellent telephone etiquette
• Excellent computer and typing skills required
• Ability to establish rapport and deal tactfully with persons from varied racial, ethnic, cultural and/or economic backgrounds
• Ability to maintain confidentiality of patient information
• Ability to respond quickly and appropriately to questions and requests
• Ability to remain calm and professional in stressful or emergency situations
• Computer proficiency in Windows operation system (Microsoft Outlook, Word and Excel)
• Ability to learn and correctly use Electronic Medical Record software program.
• Proficiency in data entry with a high level of accuracy
• Strong math skills
• Ability to understand and follow policy and procedure related to discount programs and payment plans
• Ability to accurately communicate to patients for which discount programs or payments plans they qualify
• Understanding and proficiency of insurance verification process, including pre-authorizations
• Understanding and practical application of insurance benefits (deductible, out of pocket, benefit exclusions, etc.)
• Ability to politely and clearly explain payment requirements to patients.
• Ability to explain required forms and procedures to properly prepare patients for appointment
• Strong organizational and follow-up skills
• High attention to detail
• Ability to handle a variety of tasks ensuring completion with minimal supervision

**Work Environment:**
Very busy atmosphere. Highly stressful when dealing with individual personalities of co-worker, patients and their families. Potential for rare exposure of blood-borne diseases (Category II). Potential for rare exposure to chemical hazards (Category B).

**Physical Demands:**
Considerable time spent sitting at a desk and on the telephone. Some standing and walking. Lifts supplies/equipment up to 20 lbs occasionally, and/or up to 10 lbs frequently. Occasional reaching, stooping, bending, kneeling and crouching.
Schedule and Benefits:
Full-time position with Monday- Friday dayshift schedule. Comprehensive benefits package including health, dental, vision and life insurance, as well as paid time off and holiday pay.

How to Apply:
If you are interested in applying, please download and print an application from our website: www.sumterfhc.com. Return your completed application to:
Sumter Family Health Center
Attn: Human Resources
1278 N. Lafayette Drive
Sumter, SC 29150