

## UW HEALTH JOB DESCRIPTION

<b>POSITION SPECIFICS</b>			
<b>Title:</b> Business Specialist		<b>Department/Number:</b> Transformations Clinic (28008_02)	
<b>Reports to:</b> Administrative Director			
<b>Job Code:</b> UWMF: 28008 UWHC:	<b>FLSA Status:</b> Non-exempt		
<b>Manager Approval:</b> Anne Buol	<b>Date:</b> 1/2016	<b>HR Approval:</b> C.Cichy-Krantz	<b>Date:</b> 1/2016
<b>POSITION SUMMARY</b>			
<p>Under the general supervision of the Administrative Director, the Business Specialist has responsibility for obtaining, verifying and/or updating patient demographic and insurance coverage information, establishing prepayment accounts, collecting co-payments and time of service payments and conducting daily cash reconciliation. Additional responsibilities include scheduling patient procedures performed in clinic, preparing price agreements and obtaining prepayment for non-covered services performed in clinic, and submitting prior authorization requests for covered procedures to the PBS Prior Authorization Specialists. This position is also responsible for scheduling patient appointments in the clinic including consults, procedures, follow ups and post ops.</p> <p>The Business Specialist will also serve as back up for the surgery scheduling, reception duties and phone coverage as needed.</p>			
<b>MAJOR RESPONSIBILITIES</b>			
<ol style="list-style-type: none"> <li>1. Serve as a contact for Transformation patients regarding financial/reimbursement requirements associated with their care.</li> <li>2. Assist patients with understanding/interpreting their insurance benefits as it relates to the services they will receive. Explain referral and/or authorization requirements, terminology, benefit limitations, etc.</li> <li>3. Answer patient's questions regarding UWMF billing policies, responsible party obligations, and UWMF billing processes. Maintain awareness that some questions may be sensitive issues with the patient and approach them accordingly.</li> <li>4. Check out patients and schedule follow-up appointments for patients, as necessary</li> <li>5. Respond to patient questions regarding account status</li> <li>6. Work cooperatively with Special Billing and Coding staff to ensure complete and accurate billing for services subject to prepayment.</li> <li>7. Function as a liaison between the patient, physicians, clinic staff, coding, and business office regarding financial/reimbursement issues/considerations, and prepayment requirements to ensure all parties have consistent and complete information.</li> <li>8. Collect demographic and billing information in a courteous and professional manner. Enter new or revised patient demographic and insurance information into computer system.</li> <li>9. Establish guarantor accounts, including persona/family and prepayment accounts. Ensure that insurance coverage, if applicable, is recorded in correct priority order.</li> <li>10. Collect time of service payments, including gift card purchases. Post prepayments in HealthLink.</li> <li>11. Collect co-payments, when required. Post in HealthLink.</li> <li>12. Work patient, charge review, follow-up and account work queues and credit balance work queues, as requested.</li> <li>13. Conduct daily cash conciliation for clinic. Schedule patient procedures done in the clinic.</li> <li>14. Prepare detailed, written agreements for patients relating to high-cost services recommended by the physician.</li> <li>15. Collect prepayment for high-cost procedures/services.</li> <li>16. Identify services which require prior authorization and inform Prior Authorization Specialist, or as appropriate, initiate prior authorization request directly with patient's insurer. Assist Prior Authorization Specialist, as necessary, in securing medical documentation and other information necessary to complete the authorization process. Inform patients of authorization decision and</li> </ol>			

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- counsel patients regarding implications of such decision.
17. Maintain professional composure and confidence during stressful situations.
  18. Promote a positive and professional image. Answer telephone, identifying self in a pleasant manner using proper telephone etiquette, taking and delivering messages in an accurate and timely manner.
  19. Serve as a backup for the surgery scheduler, reception duties and phone coverage as needed.
  20. Maintain CPR certification.
  21. Maintain neat appearance in proper attire and identification as required for work environment.
  22. Perform other duties as requested.

**All duties and requirements must be performed consistent with the UW Health Performance Standards.**

### POSITION REQUIREMENTS

Education	Minimum	High school diploma or equivalent
	Preferred	
Work Experience	Minimum	2 years of experience in a medical billing, registration, or related environment
	Preferred	
Licenses & Certifications	Minimum	
	Preferred	
Required Skills, Knowledge, and Abilities		<ul style="list-style-type: none"> <li>• Knowledge of third-party reimbursement policies and procedures strongly preferred</li> <li>• Excellent interpersonal and communication skills. Must be able to deliver sensitive, personal, and confidential information to patients in a clear, concise, and empathetic manner.</li> <li>• Ability to interact and effectively communicate with a variety of internal and external customers, including patients, physicians, clinical staff, and insurance representatives</li> <li>• Must be computer literate</li> <li>• Competency in navigating patient billing software, preferably Epic</li> <li>• Strong organization skills and detail-orientation</li> <li>• Manages stress appropriately and able to deal tactfully and effectively with employees and physicians</li> <li>• Flexibility and willingness to learn is a must</li> <li>• Ability to multi-task</li> <li>• Ability to meet deadlines</li> <li>• Ability to work independently</li> </ul>

### PHYSICAL REQUIREMENTS

**Indicate the appropriate physical requirements of this job in the course of a shift.** *Note: reasonable accommodations may be made available for individuals with disabilities to perform the essential functions of this position.*

Physical Demand Level		Occasional Up to 33% of the time	Frequent 34%-66% of the time	Constant 67%-100% of the time
<b>x</b>	<b>Sedentary:</b> Ability to lift up to 10 pounds maximum and occasionally lifting and/or carrying such articles as dockets, ledgers and small tools. Although a sedentary job is defined as one, which involves sitting, a certain amount of walking and standing is often necessary in carrying out job duties. Jobs are sedentary if walking and standing are required only occasionally and other sedentary criteria are met.	<b>Up to 10#</b>	<b>Negligible</b>	<b>Negligible</b>
	<b>Light:</b> Ability to lift up to 20 pounds maximum with frequent lifting and/or carrying of objects weighing up to 10 pounds. Even though the weight lifted may only be a negligible amount, a job is in this category when it requires walking or standing to a significant degree.	<b>Up to 20#</b>	<b>Up to 10#</b> or requires significant walking or standing, or requires pushing/pulling of arm/leg controls	<b>Negligible</b> or constant push/pull of items of negligible weight
	<b>Medium:</b> Ability to lift up to 50 pounds	<b>20-50#</b>	<b>10-25#</b>	<b>Negligible-10#</b>

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	maximum with frequent lifting/and or carrying objects weighing up to 25 pounds.			
	<b>Heavy:</b> Ability to lift up to 100 pounds maximum with frequent lifting and/or carrying objects weighing up to 50 pounds.	<b>50-100#</b>	<b>25-50#</b>	<b>10-20#</b>
	<b>Very Heavy:</b> Ability to lift over 100 pounds with frequent lifting and/or carrying objects weighing over 50 pounds.	<b>Over 100#</b>	<b>Over 50#</b>	<b>Over 20#</b>
List any other physical requirements or bona fide occupational qualifications:		•		

**Work/Environmental:** Moderate noise level consistent with an office environment

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Note: The purpose of this document is to describe the general nature and level of work performed by personnel so classified; it is not intended to serve as an inclusive list of all responsibilities associated with this position.