

## CIVIL SERVICE POSITION DESCRIPTION

INCUMBENT \_\_\_\_\_ CSN N10872 FLSA STATUS: Non-Exempt

PRESENT CLASSIFICATION Medical Office Associate DATE 2/04/2022

DEPARTMENT Family & Community Medicine Decatur

DIVISION SIU Center for Family Medicine – Decatur AND  
SIU Decatur Family Medicine Residency Training Program

### Position Function

Provides clinic reception duties, including greeting patients, scheduling patients, assembling patient information and assisting with the completion of forms, updating patient information, scanning appropriate information into the practice management system, posting copayments/payments and balancing cash drawer. Actively participates in provider and staff team projects in order to enhance patient care coordination and patient satisfaction.

### Organizational Relationship

This person reports to the Health Center Administrator I who reports to the Site Administrator.

### Duties and Responsibilities

The following information is intended to be representative of the work performed by incumbent in this position and is not all-inclusive. The omission of a specific duty or responsibility will not preclude it from the position if the work is similar, related, or a logical extension of position responsibilities.

Demonstrates, by actions, commitment to the mission and the behavioral standards of SIU School of Medicine. Provides excellent service to both internal and external customers through collaboration and partnership; compassion and respect; integrity and accountability; diversity and inclusion; as well as continuous learning and improvement.

#### **A. Patient Registration Responsibilities 25%**

1. Enters/makes corrections to patient registration information into IDX.
2. Assists with filing of registration forms and other patient related documents.
3. Prepares new patient paperwork.
4. Scans information into IDX according to guidelines.
5. Informs new patients of institutional and/or billing/payment/insurance procedures and guidelines and responds to standard questions regarding them (acceptable methods of payment).
6. Verifies insurance eligibility including primary care physician data in MEDI, as applicable.

#### **B. Patient Check-In/Out Responsibilities 25%**

1. Collects copayments/payments at the time of service and records patient payments accurately.
2. Balances the cash box, following current policies, without discrepancies.
3. Completes the daily reconciliation report accurately, in a timely manner and without errors.
4. Demonstrates a complete understanding of charge pricing, coding and billing procedures.
5. Assists and/or directs in answering patient billing questions.
6. Encourages the use of My Health patient portal by providing information to patients at check-in and sending invitations to patients, as requested.
7. Monitors arrival and departure of scheduled patients. Maintains secure environment, including alerting appropriate personnel, as necessary.

**C. Scheduling Duties****20%**

1. Utilizes the IDX scheduling system to schedule appointments for patients based on patient need and physician request.
2. Schedules patients according to established guidelines.
3. Verifies accuracy of patients scheduled two days in advance according to established guidelines. Alerts appropriate staff of errors and resolves problems accordingly.

**D. Receives and Distributes Messages for Physicians and Staff****15%**

1. Demonstrates ability to receive and distribute messages accurately and on a timely basis.

**E. Telephone Duties****5%**

1. Answers some incoming phone calls and directs them accordingly.
2. Answers calls within 3-4 rings without direction.

**F. Other Duties As Assigned****10%**

1. Maintains patient confidentiality.
2. Communicates with patients, visitors, physicians, insurance agents, attorneys and clinic staff in a professional manner.
3. May assist in training of new Office Associates or other clerical staff.
4. Monitors work completed and alerts manager to problems that may occur.
5. Maintains tidiness of lobby area.

**Skills and Abilities Needed for the Position**

1. Must be able to provide excellent customer service.
2. Ability to stay calm and adapt to change quickly.
3. Must be able to multi-task, be flexible, and a team player.
4. Ability to work independently and as part of a team.
5. Excellent communication skills, both verbal and written.
6. Ability to comprehend and implement both verbal and written instructions, as well as policies and procedures.
7. Strong organizational and time management skills.
8. Ability to coordinate all work activity to provide for smooth patient flow.
9. Sensitive to the needs of underrepresented minority populations.

**Responsibility****A. Supervisory Controls**

1. Assignments, priorities and directions may be communicated verbally, in writing, or both. Although this position requires some degree of independent decision-making, direction and supervision are available, as needed, by the Health Center Administrator I.
2. The Health Center Administrator I evaluates the employee's performance, based on University and Department procedures, with input from the Site Administrator and Faculty at Family & Community Medicine Decatur.

**B. Guidelines**

1. This position is guided by University and Department policies and procedures.

**Difficulty**

- A. **Complexity** – The employee in this position will be responsible for a wide-range of medical office duties and responsibilities. As the first contact for patients and guests to our clinic, this person must be able to provide a warm and inviting atmosphere. This employee must be able to gather/verify accurate information

regarding registration and insurance information in preparation for a patient's appointment and at the time of service. This person must be able to collect co-payments and balances from patients at time of service and to coordinate their efforts with the billing department. This person must stay apprised of scheduling guidelines and be able to take corrective action to resolve any problems. This individual must be able to provide timely feedback regarding the physician's compliance with marking the charge ticket before the patient leaves the clinic. The employee is responsible for the security of the patients in their area and they must stay alert to any possible safety hazards. This individual must keep patients updated if a physician is behind schedule and they must be able to gauge the need to change tasks in order to maintain the work flow.

B. Scope & Effect – The assignments of this position affect all aspects of the Family Medicine Residency and clinic operations.

**Personal Contacts**

This person will have contact with patients, faculty, residents, and staff within the SIU Decatur Family Medicine Residency Program. External contacts include University, School of Medicine faculty, resident physicians, staff and vendor consultants.

**Environmental, Health and Safety Responsibilities**

Participates in meetings, trainings and other environmental, health and safety activities as required by SIU School of Medicine.

**Working Conditions**

See attached Physical and Environmental Requirements form.

\_\_\_\_\_  
DATE \_\_\_\_\_

SIU Center for Family Medicine – Decatur AND  
SIU Decatur Family Medicine Residency Training Program

\_\_\_\_\_  
DATE \_\_\_\_\_

Danika L. Holman  
Health Center Administrator I  
SIU Center for Family Medicine – Decatur AND  
SIU Decatur Family Medicine Residency Training Program

\_\_\_\_\_  
DATE \_\_\_\_\_

L. David Samples, MBA  
Site Administrator  
SIU Center for Family Medicine – Decatur AND  
SIU Decatur Family Medicine Residency Training Program

# PHYSICAL AND ENVIRONMENTAL REQUIREMENTS

## SIU SCHOOL OF MEDICINE

Incumbent: \_\_\_\_\_ Classification: Medical Office Associate  
 Position No. (if applicable): N10872 Department: Family and Community Medicine/Decatur-SMS

**WORK ENVIRONMENT: (Check all applicable environments)**

<input checked="" type="checkbox"/> Office	<input type="checkbox"/> Hospital
<input checked="" type="checkbox"/> Clinic	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Research Laboratory	<input type="checkbox"/> Outdoors
<input type="checkbox"/> Other (Be Specific): _____	

PHYSICAL DEMANDS:	Seldom	Occasionally	Frequently	Constantly	N/A
(Indicate frequency of activity during performance of position duties)	(Performed rarely less than 2% of the time)	(Performed less than 25% of the time)	(Performed 26% to 50% of the time)	(Performed 51% or most of the time)	

(Click on the Physical Demands Definitions button at the bottom of the form for a list of physical demands definitions)

Reading	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Writing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Speaking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Close visual acuity	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Travel	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hearing - Conversation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Hearing - Other Sounds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Stooping	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Squatting	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gross hand manipulation	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fine hand manipulation	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working in dust, fumes, gases, or irritants	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working at heights	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Working in extreme cold, heat and/or humidity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Working in close quarters	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Climbing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Operating motor vehicles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Sitting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Standing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Walking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Working above shoulder level	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Twisting	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kneeling	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pushing or pulling		10 - 20 lbs.			<input type="radio"/>
Carrying		10 - 20 lbs.			<input type="radio"/>
Lifting		10 - 20 lbs.			<input type="radio"/>
Other (Please list): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I affirm the environmental and physical demands listed on this form are an accurate reflection of the requirements of this position to the best of my knowledge and belief.

I have read, understand and am capable of meeting the physical and environmental demands of this position.

Supervisor Signature	Date	Supervisor Name	Employee Signature	Date
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