



<https://phoenixvirtualstaff.com.ph/job/patient-services-specialist-for-pooling/>

Patient Services Specialist (For Pooling)

Description

The Patient Services Specialist role is responsible for interacting with patients to help them understand healthcare, insurance, and cost of procedures. They may connect patients with doctors and specialists, review options for treatment, and discuss financial responsibilities. You will assist clients with applying for benefits through hospital charity assistance programs, Social Security, and Medicaid to ensure that all types of eligible funding for health care services are available for patients. This includes assisting the patients and others to complete forms, applications, and other paperwork.

Responsibilities

- Answer all incoming calls from the patients.
- Making all/any outgoing calls to the patients
- Manage the physicians/doctor's appointment calendar
- Manage and organize Electronic Medical Records (EMR)
- Record, review, and take steps to follow-up on and resolve patient complaints
- Analyze complaints to enhance the overall quality of care
- Create and maintain record-keeping files and systems for both the physicians and the patients
- Assure confidentiality of paperwork, documents, and calls
- Handle calls from providers and plan members regarding balance inquiries and generate appropriate resolutions if necessary and required
- Maintain timely communication with patients
- Represent the Client in an approachable, pleasant, and professional manner
- Work on special projects as assigned by the Client such as Data Entry assignments
- Make outbound calls to patients, healthcare providers, and other relevant parties to facilitate necessary follow-ups, provide updates, and ensure effective communication.
- Maintain confidentiality and privacy of patient information in accordance with HIPAA regulations.
- Provide exceptional customer service to patients, demonstrating empathy,

Hiring organization

Phoenix Virtual Solutions

Employment Type

Full-time

Date posted

September 3, 2024

patience, and professionalism in all interactions.

- Conduct Insurance verification and review benefits and eligibility
- Obtain Prior Authorization
- Be open to accepting new challenges and tasks as they arise.

Qualifications

- Excellent communication skills
- At least 2 years of experience working in US Healthcare
- Experience in scheduling of appointments, insurance verification and reviewing benefits

and eligibility

- Experience using EMR/EHR Tools
- Proficiency with Microsoft Applications
- Highly organized with a strong attention to detail
- Comfortable in a fast-paced environment
- Approachable, professional, discrete, and personable
- Ability to provide high-quality customer service and follow through on all assignments
- Can work under pressure and with minimal supervision
- Has initiative and can meet deadlines
- **Can start ASAP**