

Facility name	
Job description: Insurance Verification Specialist	
Title	Insurance verification specialist
Main function	Verifies and documents all patients' third-party payer coverage/noncoverage.
Duties and responsibilities	<ol style="list-style-type: none"> 1. Philosophy <ol style="list-style-type: none"> a) Supports the facility's ideology, mission, goals, and objectives b) Performs in accordance with the facility's policies and procedures c) Follows the facility's standards for ethical business conduct d) Conducts self as a positive role model and team member e) Recognizes patients' rights and responsibilities and supports them in performance of job duties f) Respects patients' rights to privacy, dignity, and confidentiality g) Participates in facility committees, meetings, inservices, and activities 2. Communication <ol style="list-style-type: none"> a) Communicates effectively and professionally with patients, visitors, physicians, and coworkers b) Interacts with others in a positive, respectful, and considerate manner 3. Financial practices <ol style="list-style-type: none"> a) Uses facility resources appropriately and avoids wasteful practices b) Reports wasteful practices c) Analyzes work area and makes recommendations for potential cost-effective improvements 4. Compliance program <ol style="list-style-type: none"> a) Contributes to the progress and development of the organization's adopted compliance program b) Performs according to established compliance policies and procedures 5. Performance-improvement program <ol style="list-style-type: none"> a) Contributes to the progress and development of the organization's adopted QAPI program b) Performs according to established QAPI policies and procedures 6. Safety/risk-management program <ol style="list-style-type: none"> a) Adheres to safety policies and procedures in performing job duties and responsibilities b) Maintains responsibility for safe work area by reporting to safety officer or designee observed or suspected safety violations, hazards, and policy/procedure noncompliance c) Responds to emergency situations with competence and composure d) Reports observed or suspected medical emergencies, notifies appropriate personnel, and responds appropriately e) Identifies facility emergency situations (e.g., fire, disaster) and notifies appropriate personnel and external agencies 7. Professional competence <ol style="list-style-type: none"> a) Participates in continuing education and other learning experiences b) Shares knowledge gained in continuing education with staff c) Maintains membership in relevant professional organizations d) Seeks new learning experiences by accepting challenging opportunities and responsibilities e) Welcomes suggestions and recommendations 8. Duties <ol style="list-style-type: none"> a) Verifies all commercial insurance coverage, workers' compensation insurance, accident insurance, and state programs and determines patient's responsibility if applicable b) Obtains precertification number from physician's office if applicable c) Determines patient qualification for coverage by third-party payer and informs financial counselor, patient, or family member of status d) Maintains current list of facility insurance contracts and payment schedules e) Documents prequalification for third-party payer before date of scheduled admission f) Maintains current information on correct and lawful practices for billing government and private payers for ambulatory surgery care g) Follows all federal, state, and regulatory guidelines to maintain compliance h) Enters all insurance information into computer i) Ensures that patient financial counselor is aware of any copayments, deductibles, etc.
Responsibility for assets	Not applicable

Qualifications	<ol style="list-style-type: none"> 1. Cooperative work attitude toward co-employees, management, patients, visitors, and physicians 2. Ability to promote favorable facility image with physicians, patients, insurance companies, and general public 3. Ability to make decisions and solve problems
Requirements	<p><i>Required</i></p> <ol style="list-style-type: none"> 1. High school diploma or GED certificate 2. Training or courses in business office activities 3. Good typing skills 4. Good communication skills 5. Good computer skills 6. Strong ethical and moral character references <p><i>Preferred</i></p> <ol style="list-style-type: none"> 1. Insurance verification experience 2. ASC experience
Job quality requirements	<ol style="list-style-type: none"> 1. Accuracy 2. Attention to detail 3. Timeliness 4. Organization 5. Little supervision needed to accomplish task
Dependability	<ol style="list-style-type: none"> 1. Attendance 2. Punctuality 3. Ability to follow instructions 4. Ability to meet deadlines
Physical/mental requirements	<ol style="list-style-type: none"> 1. Ability to sit, stand, and walk 2. Visual and auditory acuity for frequent use of computer and telephone and occasional use of other office equipment
Working conditions (environmental)	<ol style="list-style-type: none"> 1. Well lit and ventilated, with non-hazardous and hazardous equipment 2. Category III: exposure to bloodborne pathogens and may encounter chemical hazards
Reports to	Business office manager
Supervises	Not applicable
Contacts	<ol style="list-style-type: none"> 1. Patients 2. Patients' family/significant others 3. Physicians and physician office personnel 4. Insurance company personnel 5. Facility personnel 6. Vendors 7. Administration 8. Medical director
Formal lines of promotion	<ol style="list-style-type: none"> 1. Other business office positions 2. Business office manager

Employee statement

I have read the insurance verification specialist job description and understand the functions of the position at this facility.

Employee's signature

Date