**JOB DESCRIPTION AND PERFORMANCE EVALUATION**

**Job Title:** Front Office Associate  
**Status:** Non-Exempt  

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**EVALUATION GRADING**

1 = **Unacceptable Performance:** Work does not meet minimum requirement standards. Significant improvement needed.

2 = **Below Standards:** Inconsistently meets standards. Improvement needed. Requires more than normal supervisory direction and follow-up.

3 = **Meets Job Standards:** Work demonstrated consistently meets standards.

4 = **Above Standards:** Work demonstrated frequently exceeds standards.

5 = **Outstanding Performance:** Work demonstrated is an exceptional performance of standards.

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**GENERAL SUMMARY**

Employees are hired with an expectation to help carry out the vision of overall health and wellness of Piedmont Internal Medicine, PC's patients and community. Employees are expected to exhibit a continuous behavior of professionalism, which includes but is not limited to, treating customers and co-workers with respect and dignity, aligning behavior with customer service principles, maintaining customer and patient confidentiality, abiding by employee guidelines for professional behavior, appearance, and communication, exhibiting teamwork behaviors, being effective in conflict resolution, helping others to understand issues and accept changes, demonstrating high standards of work performance and flexibility, maintaining positive interdepartmental relationships, keeping a positive attitude, and adhering to the policies and procedures of the organization.

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**JOB SUMMARY**

The Front Office Associate works under the direct supervision of the Front Office Coordinator, Site Manager, and/or Practice Manager, and in cooperation with other office staff in assisting with safe and effective patient care in compliance with established standards and protocols of Piedmont Internal Medicine, PC's goals and objectives.

Responsible for all front office functions including patient registration, check-in, check-out, collecting copayments, deductibles, and any other patient owed account balance at both check-in and check-out, appointment schedule, answering and directing incoming telephone calls, filing, medical records, and all other duties as assigned by their direct supervisor and/or Practice Manager.

Additional responsibilities include compliance in ensuring all required patient paperwork has been received, completed, updated, and filed into patient record, in accordance to Piedmont Internal Medicine, PC, and any other state and/or federally mandated requirements.
Use of computers, telephone, fax machine, copier, calculator, adding machine, credit card processing machine, document scanner, and other office equipment necessary to perform required duties as appropriate to the scope of the practice.

POSITION REPORTS TO:  Front Office Coordinator/Site Manager/Practice Manager

JOB QUALIFICATIONS

Required Education:  High School Diploma or General Education (GED)
Proficiency must be attained via on-the-job training and orientation within three (3) months.

Preferred Education:  Graduation from a vocational or other technical school with training or apprenticeship.
Certification in Front Office Administration, preferred

Experience:  Minimum of one (1) year in Medical Office Front Office and/or Medical Physician Practice Billing experience. Candidates who have performed an externship in a private practice setting may be considered.
Basic knowledge of health insurance products (HMO, PPO, Commercial, Medicare, and etc.). Basic knowledge and understanding of CPT procedure coding and ICD-10 diagnostic coding.

Skills:  

Language:  Ability to read and comprehend simple instructions, short correspondence, and memos. Ability to write simple correspondence. Ability to effectively present information in one-on-one and small group situations to customers, clients, physicians, and other employees of the organization.

Mathematical Skills:  Ability to add, subtract, multiply and divide in all units of measure, using whole numbers, common fractions, and decimals.

Reasoning Ability:  Ability to apply common sense understanding to carry out detailed but uninvolved written or oral instructions. Ability to deal with problems involving a few concrete variables in standardized situations.

Computer:  Previous exposure to electronic patient management systems. Ability to acquire working knowledge of EPIC Scheduling software, including how to process patient eligibility through EPIC and 3rd party vendor. Ability to process online credit card payments. Ability to operated Windows 7 Operating System, Microsoft Outlook, Word, and Excel.

Required Competencies:  Ability to accurately collect and enter patient demographics and insurance into PM system. Ability to answer multiple incoming telephone calls. Excellent customer skills demonstrated.
**Other Equipment:** Ability to use telephone, fax machine, scanner, copier, and other similar equipment typically used in a physician office setting.

## WORKING ENVIRONMENT

### 1 PHYSICAL DEMANDS: See attached Physical and Mental Requirements Sheet for details.

**Additional Physical Demands are:**
- Ability to grasp with both hands; pinch with thumb or forefinger; turn with hand/arm; reach for (above shoulder height).
- Ability to simultaneously operate clinical equipment and read gauges.
- Ability to simultaneously speak on the telephone and write.
- Ability to hold delicate instruments in a steady and firm manner.

### 2 VISUAL, HEARING, DEXTERITY, AND MENTAL DEMANDS:

**Vision:**
Ability to read small print, and other paperwork pertinent to the correct data entry into the patient registration system.

**Hearing:**
Adequate to perform the essential functions of the job such as listening to callers on the telephone and communicate with various people in person.

**Speaking:**
Adequate to perform the essential functions of the job such as providing patient information including appointment times, registration documents, and other information pertinent to the patient’s appointment.

**Dexterity:**
Adequate to perform the essential functions of the job such as picking up and scanning small insurance cards and other ID.

**Mental Demands:**
Adequate to perform the essential functions of the job such as entering data into computer system, processing payments, answering the telephones, making telephone calls, checking in patients, checking out patients, scheduling, working reports, and other important front office functions in a fast pace, multi-tasking/function area.

### 3 WORKING CONDITIONS:

- Position requires individual to be dressed in uniform and/or business casual attire 100% of the time.
- Position may have occasional exposure to blood and body fluids. Appropriate protective equipment (such as gloves and masks) will be provided.
- Exposure to hazardous materials is limited to occasional cleaning products/disinfecting sprays.
- The Exposure Control and Hazard Communication plans of the practice detail all of these materials and the situations when exposure to blood and bodily fluids are unlikely to occur.
- Employee should be current with all vaccinations including Hepatitis B.

## PRINCIPAL DUTIES AND JOB RESPONSIBILITIES

1. Greets all patients and visitors with a smile in a prompt, courteous, and helpful manner.
2. Schedules patient appointments for all practice locations and providers. This includes all new patients, established patients, follow up appointments, and any/all other appointments within the office as appropriate including lab, x-ray, nurse visits, allergy shots, other office based diagnostic, and so forth.

3. Patient Registration Paperwork – **New Patients**: Ensures all patient paperwork is completed either prior to or upon patient check-in and prior to patient being seen by provider. Ensures all paperwork is scanned and/or uploaded into patient account/electronic health record (EHR) in a digital format, including: Patient Registration (demographic and insurance), Patient Consents and Authorizations, HIPAA Notice and Acknowledgement, Medicare As Secondary Payer Questionnaire (MSPQ, Financial and No Show Policies, and/or other forms as required by the Practice.

4. Patient Registration Paperwork – **Established Patients**: Ensures all patient paperwork is completed either prior to or upon patient check-in and prior to patient being seen by provider. Prints and/or verifies with patient their "patient profile page" from system and gives to patient upon check-in to ensure patient insurance and demographic information is correct and updates information in computer system. Ensures all paperwork is scanned and/or uploaded into patient account/electronic health record (EHR) in a digital format, including: Patient Registration (demographic and insurance), Patient Consents and Authorizations, HIPAA Notice and Acknowledgement, Medicare As Secondary Payer Questionnaire (MSPQ, Financial and No Show Policies, and/or other forms as required by the Practice.

5. Ensures front office area and office is secured each evening by locking all doors leading to the outside of the suite and turns off any equipment/lights that should be turned off each evening.

6. Obtains and maintains the patient’s current insurance information. This includes obtaining, viewing, and/or scanning patient’s insurance card(s) into the EPM system and updating patient’s insurance information in EPM system (including entering insurance effective and termination dates).

7. Obtains and reviews patient verification through appropriate identification. This includes viewing and/or scanning patient identification (such as driver’s license) into the EPM system at each visit.

8. Checks patient insurance eligibility information for every visit to include frequently checking online/real time eligibility for active insurance information, confirmation of current/active insurance, patient co-payment amounts and/or other patient amounts due to be collected prior to the patient’s appointment; verification of Medicare status; and possible restrictions on number of visits as directed by insurance. (For example Managed Medicare plans may have additional coverage benefits than traditional Medicare.)

9. Supports and/or maintains appointment schedule for providers and office services by coordinating scheduling changes with Front Office Coordinator, Site Manager, and/or Practice Manager and other clinic staff members. This may include: blocking/unblocking appointment times, opening/closing provider schedules, assisting other staff members in making appointments, and ensuring scheduling changes/requests have been properly approved by Office Coordinator/Practice Manager and/or other key management personnel.

10. Answers and directs telephone calls received into the Piedmont Internal Medicine, PC with a friendly and helpful tone.

11. Collects copays, self-pay deposits, and other patient balances due upon check-in.

12. Posts charges, payment, and/or appropriate discounts at check-out for self-pay patients, calculates appropriate self-pay discounts, reconciles self-pay net charges with self-pay up front deposits and either refunds or collects additional money due.
13. Establishes and maintains courteous, tactful and professional level of interpersonal skills necessary to deal effectively with:
   • Patients
   • Guests
   • Medical staff
   • The public
   • Co-workers

14. Sends out patient registration paperwork and/or instructs patient on how to download paperwork and answers questions patient may have on various paperwork.

15. Ensures patients have appropriate referral and/or authorization for office visit as required by insurance.

16. Reconciles cash change drawer assigned at the beginning of the day, middle of the day, and end of the day. Reports any discrepancies to supervisor.

17. Reconciles over the counter payments with end of day reports in computer system, receipts, and payment intake logs. Reports any discrepancies to supervisor.

18. Review, reconciles, and reports all charges entered into computer system through daily reporting system. Reports any discrepancies to supervisor.

19. Responsible for education and signing up patient for Meaningful Use through the patient portal via email, online token, or other means as directed by Management.

20. Completes all “Work Que” assigned by EPIC system, business office, or management as it pertains to demographic, insurance, and/or charge entry errors; and is responsible to correct data entry errors made in order to meet and maintain an overall goal of less than 3% error ratio in claim edits due to front office data entry errors.

21. Ability to understand the basics of a patient’s billing account in order to answer questions regarding a patient due balance. If familiar in how to directly contact the Business Office on behalf of the patient in order to assist patient with in-depth questions or analysis of the patients account.

22. Contacts patients to remind them of upcoming appointments in concert with automated appointment reminder systems. This may require contacting each patient manually or only contacting certain patients who were not contacted via automated means.

23. Takes and forwards telephone messages to the appropriate staff members throughout the day.

24. Distribute mail and faxes to appropriate staff members.

25. Distribute electronic faxes to appropriate staff members and monitors faxing queue to ensure faxes are being received and sent through outlook and/or computer system(s).

26. All other duties as assigned by the Management Team and/or Physician(s). The responsibilities defined above are intended to outline those functions typically performed by individuals assigned this job classification. The description of responsibilities is not intended to be inclusive or limit the discretionary authority of supervisors to assign other tasks of a similar level of responsibility for which the individual has demonstrated competency through performance.

**PRACTICE SUPPORT AND CONDUCT**

1. Establishes and maintains courteous, tactful and professional level of interpersonal skills necessary to deal effectively with:
   • Patients
   • Guests
   • Medical staff
   • The public
   • Co-workers
2. Demonstrates effective communication skills; is able to report and convey required information verbally or in writing; maintains required level of confidentiality; consults with and/or advises appropriate personnel of situations requiring follow-up or attention.

3. Conforms to Piedmont Internal Medicine, PC’s organizational and departmental policies and procedures including but not limited to:
   - Mission & Values
   - Corporate Compliance
   - Confidentiality Agreement
   - Rules of Conduct as outlines in the “Guidelines for Employees” handbook
   - Dress Code (personal hygiene)

4. Establishes and maintains a history of regular attendance; makes appropriate use of PTO, and observes department call-in procedures for absence; establishes and maintains punctual work habits. Exhibits timely arrival and departure and dependable time habits including meal and other breaks.

5. Attends/participates in mandatory facility-wide and department training/meetings as required (including but not limited to: annual education, safety training, etc.). Is able to demonstrate and apply knowledge of fire, safety, security and disaster procedure regulations as presented in policies and procedures, outlined in safety manual, and as pertains to each work area.

6. Supports departmental and organizational Mission through:
   - Appropriate use of resources – conserving equipment, supplies and personal time, and personal calls
   - Providing assistance to team members
   - Accepting work or schedule assignments
   - Participating in performance improvement process as required

INITIATIVE AND JUDGEMENT: The Front Office Associate is to be considered the technical expert in all front office areas. Individual will be required to work alone without supervision. Legal consequences of error have the potential to be large and lengthy due to the nature of the responsibilities. Individuals must be able to make some independent decisions about patient scheduling conflicts. Will be responsible for the development of policy and procedures for all areas responsible.

RESPONSIBILITY FOR CONTACT WITH OTHERS: The Front Office Associate has continual contact with patients, family members, physicians and other departments. Ordinary courtesy is adequate but may encounter situations where special tact is required, especially in the areas of collecting current and/or past due balances. Must be able to answer quick and easy questions regarding a patient’s bill and knowing when to get the business office involved in assisting the patient with detailed billing questions.

RESPONSIBILITY FOR LEGAL COMPLIANCE AND CONFIDENTIAL INFORMATION: Confidential patient information is used routinely throughout the day. This position requires knowledge of and compliance with corporate compliance, OSHA, HIPAA, local, state, and federal laws, The Piedmont Clinic (as it pertains to membership), Community Connect (as it pertains to EPIC), and requirements as they relate to your responsibilities, department, and Piedmont Internal Medicine.

RESPONSIBILITY FOR USE OF RESOURCES: This position requires frequent use of resources of moderate value. Appropriate use of resources is expected – conserving equipment, supplies and personal time, and personal calls.
JOB DESCRIPTION SUMMARY STATEMENTS: This job description is intended to only describe the general nature and level of work done by people assigned to this job. It is not intended to provide an exhaustive list of duties, or requirements. All employees are expected to follow the direction of their supervisors.

I have read and understand the above job description:

This position description reflects the general duties and responsibilities necessary to describe the principal functions of the job, as identified, and shall not be considered an exhaustive list of job responsibilities which may be inherent in the job, nor as a contract of employment. To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed are representative of the knowledge, skill, and/or ability required. The responsibilities listed may be subject to change at any time and individuals may be asked to perform duties outside of their regular responsibilities to support the ongoing operations of Piedmont Internal Medicine, PC.

________________________________________________________________________
Date
Employee Signature

I have reviewed this job description in detail with the above-signed employee:

________________________________________________________________________
Date
Supervisor/Manager Signature