



Patient Services Representative Senior

Job Code: 7236

Salary Grade: C04

FLSA Status: Non-Exempt

The following statements are designed to outline the general functions and typical responsibility levels associated with positions in this classification. They are not intended to serve as an exhaustive list of specific duties or requirements for individual positions assigned to this classification.

Duties and Responsibilities

Coordinates schedules of patients in an outpatient clinic and provides clerical assistance toward the smooth operation of the facility.

- Schedules patient appointments, either by telephone or in person. Obtains patient demographics on new patients and updates demographics on established patients. Answers telephone calls and distributes to the appropriate personnel. Prepares and enters healthcare providers; schedules into the computer. Coordinates schedules as directed to patient requiring multiple services.
- Greets patients as they come into the clinic for scheduled appointments. Accepts payments and writes receipts. Inspects the encounter form for completeness and accuracy. Copies insurance cards and distributes to the appropriate employee. Prepares encounter forms and billing packets for patients to be seen. May prepare and type daily deposits. Balances and closes cash box daily. Prepares ancillary forms for other services, to include but not limited to x-rays, vascular studies, etc. Prints and faxes physician schedules to offices.
- Pulls patient charts for appointments or to file lab, x-ray, hospital information or other information into the chart. Copies medical records for patients and other providers or facilities. Files patient charts. Prepares inactive patient charts for storage. Maintains log of charts in storage. Secures charts that have been sent to storage that are needed in the clinic. Replaces torn charts with new covers. Makes up new patient charts and/or packets of information. Requests medical records from other facilities.
- Discusses financial accounts with patients. Verifies insurance eligibility and primary care physicians for patients. Secures referrals to other providers for HMO patients. Secures referrals from PCPs for HMO patients to be seen in the clinic. Collects and verifies proof of income in order to determine what sliding scale discount is appropriate.
- Dispenses supplies as needed. Notifies appropriate person when supplies are low and need to be reordered. Types notes and letters for physicians. Makes immunization cards. Logs mail receipts according to University policy. Sorts and distributes mail.
- Performs various duties as needed in order to successfully fulfill the function of the position.

Minimum Qualifications

Education:

Required: High School Diploma or GED.

Experience:

Required: 18 months experience with a minimum of 6 months experience in a clinical environment and 12 months experience in a customer service role.

Certifications or Licenses:

None.

Verification of education and licensure (if applicable) will be required if selected for hire.

Knowledge, Skills, and Abilities

- Customer service.
- Ability to communicate verbally and in writing.
- Ability to resolve problems in a timely manner.
- Proficient with Microsoft Office Suite (Word, Excel, and Outlook)
- Ability to multitask and meet deadlines.
- Ability to maintain patient confidentiality.
- Ability to enhance professional growth and development through in-service meetings and education programs.

Working Conditions

Physical:

- Sitting for prolonged periods. Communicate effectively and listen. Use of computer and telephone. Manual dexterity and engage in



repetitive motion.

Environmental:

- Standard Office Environment.

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