

Job Description

CALL CENTER CUSTOMER SERVICE REPRESENTATIVE – BILINGUAL ENGLISH/POLISH - FINANCE REVENUE CYCLE – OAK FOREST HEALTH CENTER - SHIFT: FLEXIBLE/ROTATING & ROTATING SATURDAYS

Job Number:

00117803

Job Posting

Collective Bargaining Unit: AFSCME 1178 Health and Hospital Systems

Posting Salary: \$18.149 - HOURLY

Organization

: Health and Hospital Systems



JOB SUMMARY

The Call Center Customer Service Representative (CSR) is responsible for call center-based education, proactive outreach, and assisting Non-Medicaid individuals with application screening questions and details on how to apply for Medicaid or financial assistance programs. Ensures that enrollees understand the financial assistance programs available i.e., charity care, Medicaid, and health insurance available through the Affordable Care Act (ACA). Utilizes knowledge of the Finance Revenue Cycle Department's policies, procedures and guidelines as well as Medicaid/Redetermination Process, and Managed Care to handle patient complaints and propose suitable solutions. Utilizes best practices and performs all duties in accordance with Cook County Health and Hospitals (CCHHS) and departmental standards, policies and procedures. *This position is exempt from Career Service under the CCHHS Personnel Rules.* **MULTIPLE VACANCIES**

Typical Duties

- Educates Medicaid enrollees of plan options including information on the mandatory managed care choice process
- Answers questions from patients, providers and the general public seeking information and assistance with redetermination process and form completion; creates a three-way call with Illinois Medicaid Redetermination Project staff to support the callers inquiry
- Provides information and assistance for re-instating or re-applying for coverage to those who have recently lost Medicaid or cash assistance coverage due to failure to complete in a timely manner the redetermination process
- Offers information on other resources or coverage for those who are not eligible for Medicaid or financial assistance programs
- Verifies demographic information of applicants and members for inbound calls for the purpose of updating with the State of Illinois Department of Health Services, Third Party Administrators and other payors as necessary
- Communicates with quality assurance, patient relations and patient advocates to support the commitment to quality customer service
- Escalates complex customer inquiries or complaints to the supervisor or manager

- Makes corrections to selected registration errors identified during the quality review process

MINIMUM QUALIFICATIONS

- High School Diploma or GED
- Two (2) years of experience associated with screening/processing of individuals seeking Medicaid, SNAP, cash assistance, charity care, or other related social services
- Must be able to travel to work sites throughout Cook County
- Bilingual in English/Polish

PREFERRED QUALIFICATIONS

- Associate's Degree or higher from a college or technical school
- Three (3) years of experience associated with screening/processing of individuals seeking Medicaid, SNAP, cash assistance, charity care, or other related social services within a multi-hospital system or Medicaid managed care plan
- Prior experience in Medicaid, managed care or human services with customer contact by telephone
- Call center experience in a healthcare related organization
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KNOWLEDGE, SKILLS AND ABILITIES

- Strong interpersonal and team skills
- Thorough knowledge of web based application processing system, Cerner, eligibility verification system, Illinois Department of Human Services application benefits eligibility systems
- Excellent verbal and written communication skills necessary to communicate with all levels of staff and a patient population composed of diverse cultures and age groups
- Ability to maintain confidentiality and adhere to HIPPA standards
- Demonstrate strong customer service, email and phone etiquette skills with strong response times
- Demonstrate analytical and organizational, problem-solving, critical thinking, and conflict management/resolution skills
- Demonstrate attention to detail, accuracy and precision
- Ability to Educate Medicaid enrollees of plan options including mandatory managed care choice process
- Ability to complete annual educational requirements
- Ability to prioritize, plan, and organize projects and tasks
- Ability to multi-task and meet deadlines in a fast paced, high output and stressful environment
- Ability to adhere to department policies and standards utilizing best practices
- Ability to maintain a professional demeanor and composure when challenged
- Strong customer service skills

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BENEFITS PACKAGE

- Medical, Dental, and Vision Coverage
- Basic Term Life Insurance
- Pension Plan
- Deferred Compensation Program
- Paid Holidays, Vacation, and Sick Time
- You may also qualify for the Public Service Loan Forgiveness Program (PSLF)

For further information on our excellent benefits package, please click on the following link:

<http://www.cookcountyrisk.com/>

MUST MEET ALL REQUIRED QUALIFICATIONS AT TIME OF APPLICATION FILING.

Degrees and transcripts from non-U.S. accredited institutions must be translated and certified to the US equivalent academic credentials by a recognized US education interpreter service.

COOK COUNTY GOVERNMENT IS AN EQUAL OPPORTUNITY EMPLOYER

<http://www.cookcountyhhs.org/about-cchhs/human-resources/careers/>