

The RUSH GROUP Skills Assessment Tool

We developed this tool while conducting diagnostic reviews of Ambulatory Surgery Centers. We have shared it with clients to use as a self-assessment tool because it identifies key job responsibilities that influence revenue collection. Consider it an appreciation gift for joining The RUSH Forum.

Please let us know how you utilized it at www.therushgroup.com

Rating Scale - rate staff in the following roles to identify people to acknowledge or enact improvements
 5 = excellent, 4 = good, 3 = average, 2 = needs improvement, 1 = seriously - call us!

Receptionist/ Registration Specialist (AM)	Primary Responsibilities:					
	Reception	5	4	3	2	1
	• Answers phones, greet patients and accompanying family					
	Registration:					
	• Verbally reviews registration documents with patient to ensure all information is correct and complete					
	• Copies patient's insurance card and driver's license. (or alternative ID such as a check that has patient's current address.)					
	• Collects co-pays, deductibles and co-insurance amounts.					
• Updates patient accounting system for demographic and insurance changes noted at time of service.						
Medical Records						
• Assembles initial Medical Record for subsequent day.						

Notes:

Receptionist/ Registration Specialist (PM)	Primary Responsibilities:					
	Reception	5	4	3	2	1
	• Answers phones, greet patients and accompanying family					
	Registration:					
	• Verbally reviews registration documents with patient to ensure all information is correct and complete					
	• Copies patient's insurance card and driver's license. (or alternative ID such as a check that has patient's current address.)					
	• Collects co-pays, deductibles and co-insurance amounts.					
	• Updates patient accounting system for demographic and insurance changes noted at time of service.					
	Medical Records					
	• Assembles initial Medical Record for subsequent day as needed.					
Administrative						
• Prepares daily deposit for Claims Analyst.						

Notes:

Medical Records Specialist	Primary Responsibilities					
	Medical Records:	5	4	3	2	1
	<ul style="list-style-type: none"> Completes each patient chart (organizes forms and documents according to completed medical record profile, gathers supporting documentation from third party sources including transcription and lab services, and ensures all documents are signed by respective medical staff member and nursing staff.) 					
	<ul style="list-style-type: none"> Faxes operative notes to the performing surgeon's office 					
	<ul style="list-style-type: none"> Provides pathology reports for Charge Nurse's review before filing in patient's chart. 					
	Credentialing:					
	<ul style="list-style-type: none"> Validates credentials of physicians requesting facility privileges and maintains files for active physicians according to accreditation standards. 					
Administrative						
<ul style="list-style-type: none"> Orders medical staff lunches daily 						
Notes:						
Scheduling Specialist	Primary Responsibilities					
	Scheduling	5	4	3	2	1
	<ul style="list-style-type: none"> Schedules cases with complete billing and patient demographic information and notes special requests. 					
	<ul style="list-style-type: none"> Notifies physician's office and/or manager if patient is insured by a non-contracted plan. 					
	<ul style="list-style-type: none"> Provides Insurance Verifier with Surgery Request and supporting documentation. 					
	<ul style="list-style-type: none"> Confirms schedule with anesthesiologists at end of each day and notes last name of anesthesiologist covering each case. 					
	<ul style="list-style-type: none"> Provides schedule copies to clinical staff and alerts them to special requests. 					
	<ul style="list-style-type: none"> Releases block time in accordance with the center's bylaws 					
	<ul style="list-style-type: none"> Markets available time to surgeons with privileges at center. 					
	Physician Relations					
<ul style="list-style-type: none"> Coordinates with Medical Records staff to notify surgeons of delinquent records. Requests completed documentation and/or dictation. 						
Notes:						

Financial Coordinator	Primary Responsibilities					
	Insurance Verification	5	4	3	2	1
	• Verifies eligibility, insurance benefits and claim office.					
	• Completes insurance verification worksheet and estimates patient's financial liability.					
	Financial Counseling					
	• Notifies patient of amount due at time of service and explains benefits as needed.					
	• Reviews patient demographic information in patient accounting system for correct spelling and transposed numbers. Inputs patient's insurance information, summarize benefits and note amount due at time of service.					
	• Prepares financial packet and forwards both packet and charts to registration/reception staff.					
Payment Plan Follow Up						
• Monitors patient's granted expended payment arrangements to ensure payments are received according to agreement.						
Notes:						
Claims Analyst	Primary Responsibilities					
	Billing:	5	4	3	2	1
	• Generates paper claims for implant cases and matches with corresponding invoice for implant(s) billed.					
	• Electronically submits claims without implants, clears edits when claims are rejected and validates receipt.					
	• Schedules each account billed for initial follow up within 15 days.					
	Payment Posting:					
	• Reviews and verifies accuracy and posts all payments received to patient accounting system system at each day's end.					
	• Ensures payments posted balance to control totals on					
	• Initiates next action to fully settle account.					
	Collections:					
• Confirms receipt of claim with third party payers and when necessary resubmits claim or submits additional documentation (such as Op Notes and invoice copies needed to process claim.)						
• Notes actions taken in memo tickler and schedules account for follow up by Collection Specialist.						
Notes:						

Collection Specialist	Primary Responsibilities					
	Billing	5	4	3	2	1
	<ul style="list-style-type: none"> Prepares billing spreadsheet used as a control to ensure all cases performed and charges incurred are billed. 					
	<ul style="list-style-type: none"> Enters codes provided by Coder. 					
	Collections					
	<ul style="list-style-type: none"> Follows facility's standard collection protocol to fully collect balances due from third party payers and patients. 					
	<ul style="list-style-type: none"> Responds to patient inquiries by educating patients about benefits, allowed amounts and their payment portion. 					
<ul style="list-style-type: none"> Offers extended payment arrangements when necessary and documents terms in accordance with center's policies. 						
Notes:						



The RUSH GROUP is a strategic consulting and training firm specializing in healthcare financial operations.

Check out our website at www.therushgroup.com and join the RUSH Forum for a lively exchange of healthcare business ideas. Or give us a call at 415-885-4900.