



Representative, Member Services - CFHP

Job Class: 4986 (PRN 4886)

Reviewed: 01/09

POSITION SUMMARY/RESPONSIBILITIES

Serves as a liaison to members and providers in resolving member services issues. Provides information to Community First Health Plan members by phone. Ensures compliance with the Health Insurance Portability and Accountability Act (HIPAA) related policies in regards to all aspects of operations within Member Services.

FUNCTIONS/BEHAVIORS

1. Assists members in determining nature of problem/complaint and/or request of any issues. (E, 15%)
2. Resolves all urgent or complicated cases involving membership, provider and/or claims issues that need immediate attention. (E, 15%)
3. Coordinates with departmental staff to ensure appropriate access to care. (M, 15%)
4. Provides explanation of benefits and co-payment determinations for members utilizing a disclaimer when quoting benefits. (E, 15%)
5. Educates members on services and health plan benefits. (E, 15%)
6. Deals discreetly with serious and complex matters with the utmost of confidentiality. (E, 15%)
7. Performs special projects and other duties as assigned. (M, 10%)
8. **Demonstrates competence to perform assigned and general customer assistance responsibilities in a manner that meets the age-specific and developmental needs of customers served by the department. (E)**
9. **Appropriately adapts assigned work and customer assistance methods to accommodate the unique physical, psychosocial, cultural, and age-specific and other developmental needs of each customer served. (E)**
10. **Supports University Health System mission, vision and values. Demonstrates established customer service behaviors and standards. Treats all customers with courtesy, dignity, respect and professionalism. (E)**

SUPERVISION

Direct supervision is received from the Supervisor, Member Services and indirect supervision from the Manager, Member Services.

EDUCATION/EXPERIENCE

High school graduation or its equivalency is required. One year of college level courses in business, health care administration or related courses is preferred. Minimum of one-year HMO experience is preferred. Health care problem resolution experience is preferred.

ACCURACY

Must be able to provide accurate information to ensure quality patient service. Must report any issues/concerns that would affect patient accessibility/quality of care to supervisor.

EQUIPMENT

Must be able to use standard machines common to most offices, including PC. Auto call distribution phone system experience is preferred.

WORKING CONDITIONS

Works in an office environment. Subject to frequent pressure of deadlines, interruptions. Requires ability to lift, stoop, kneel, reach, hear, see, and carry.

OTHER

Must have strong verbal/written skills. Must possess a high degree of responsibility for confidential matters. Must possess a high stress tolerance level and have problem resolution experience. Bilingual preferred (English/Spanish). Must successfully complete the pre-employment/post job offer health screening examination and the annual screening, each year thereafter, as an employee.

HOW TO APPLY

Community First Health Plans is part of University Health. All job applications are received through University Health Human Resources.

To submit an application, [apply here](#).