

### ROLE

**EMPLOYER:** Penn Medicine

**TOTAL YEARS EXPERIENCE:** 14

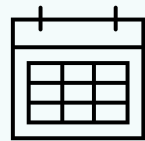
**HEALTH SYSTEM SIZE:** 14,000+

**KEY RESPONSIBILITIES:** Verifies patient insurance coverage, obtains pre-authorizations and referrals, schedules patient appointments, coordinates the patient intake process and provides administrative support for eligibility. Manages patient records in an electronic health record system.

### MOTIVATIONS

1. Provide thorough record and documentation to support both the practice and the patients in their care plan.
2. Act as a liaison between the patients and providers to remove any barriers in care and coverage.
3. Be the go-to resource for insurance program and coverage questions.

### DAY IN THE LIFE OF



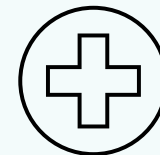
Scheduling



Patient  
Direction



EHR  
Record  
Mgmt



Insurance  
Mgmt

### WEB SAVVY

low  high

### CHALLENGES

- Spends a lot of time navigating CMS resources
- Making sense of CMS reports, reporting status, scoring, and payment adjustments
- Understanding CMS program updates and if they are applicable to her organization
- Understanding eligibility requirements

### SELF-SERVICE PORTAL OPPORTUNITIES

- Live chat for simple questions
- Record of account cases
- Call scheduling with SC Agents
- Robust search or decision-tree nav to articles
- Quick links to list serve updates and known issues
- Ability to append cases with screenshots

### TOPICS OF INTEREST

Payment

Coding

Billing

### PERSONAL

**AGE:** 36

**LOCATION:** Philadelphia, PA

**EDUCATION:** Cert. Med. Assistant

**HOBBIES:** Volunteering, Yoga

*I'm extremely careful with medical records and coding. I often double check CMS resources and don't hesitate to call.*

