



Hawaii Health Systems Corporation—Maui Region

Kula
HOSPITAL
100 Keokea Highway
Kula, HI 96790

Maui Memorial
MEDICAL CENTER
221 Mahalani Street
Wailuku, HI 96793

Lanai
COMMUNITY HOSPITAL
P.O. Box 630650
Lanai City, HI 96763

VACANCY ANNOUNCEMENT

CONTINUOUS RECRUITMENT UNTIL NEEDS ARE MET

DATE POSTED: 04/14/2009
JOB TITLE: CREDIT & COLLECTION CLERK (BEHAVIORAL HEALTH)
RECRUITMENT NO.: MMMC 0903
JOB LOCATION: MAUI MEMORIAL MEDICAL CENTER, WAILUKU, MAUI
SALARY RANGE: \$2,601 PER MONTH (SR-13)

JOB DUTIES: The Credit & Collection Clerk (Behavioral Health) will be assigned to work in the Behavioral Health Unit and is responsible for collecting cash by working with all payers to ensure timely recovery of outstanding accounts receivables. The Credit & Collection Clerk is also responsible for contacting patients, sending patient statements and demand letters, making payment arrangements, and processing accounts for collection agencies in accordance with established policies. All communications are conducted in a manner that will result in positive patient relations. Other duties include providing a variety of clerical and office assistance to support the Behavioral Health Clinic such as scheduling appointments and registering patients to be seen by the Physician(s), processing of claims to ensure maximum reimbursement is received for services provided; and other duties as assigned.

MINIMUM QUALIFICATION REQUIREMENTS: To qualify, you must meet all of the following requirements. Please note that unless specifically indicated, the required education and experiences may not be gained concurrently. In addition, qualifying work experiences are based on a 40-hour work week.

Training & Experience: Graduation from high school and two (2) years of full-time work experience in credit and collection work; or any equivalent combination of education and experience.

Knowledge of: Credit and collection methods; principles and techniques of interviewing; and office practices and procedures.

Ability to: Collect, organize and evaluate facts; be tactful and objective in interviewing and dealing with people; present information clearly and comprehensible both orally and in writing; appreciate the effect of the work on the well being of the patient; and learn the laws, rules, regulations, policies and procedures connected with the work.

REQUIRED FORMS AND DOCUMENTATION: Applicants must submit **at the time of application**, the **Supplement for Credit and Collection Clerk** and **evidence of the appropriate training** (e.g., official transcript or diploma) in order to be given credit for education. A legible photocopy will be accepted; however the Maui Memorial Medical Center reserves the right to request for an official copy.

**PERSONS WITH DISABILITIES MAY CONTACT THE EMPLOYMENT OFFICER, MAUI
MEMORIAL MEDICAL CENTER AT (808) 242-2251 TO DISCUSS SPECIAL NEEDS IN
APPLYING.**

QUALITY OF EXPERIENCE: Possession of the required amount of experience will not in itself be accepted as proof of qualification for the position. Overall paid or unpaid experience must have been of such scope and responsibility as to conclusively demonstrate that you have the ability to perform the duties of this position. Provide a detailed description of your duties and responsibilities. If you worked on a part-time basis, indicate the average number of hours worked per week. Please note that experience will be based on a 40-hour workweek.

Note: We will not postpone the recruitment process because of your failure to provide accurate and complete information concerning your qualifications.

MERIT OR CIVIL SERVICE SYSTEM: You must meet the minimum qualification requirements, including education, experience, other public employment requirements for State Civil Service employment, and HHSC Standards of Fitness. Only those applicants that are scheduled for an interview with the hiring manager will be contacted. Applications will be kept active for six (6) months.

CITIZENSHIP AND RESIDENCE REQUIREMENT: Applicants must be eligible to work in the U.S. and at the time of appointment intend to reside in the State of Hawaii during the course of employment with the Hawaii Health Systems Corporation.

VETERAN'S PREFERENCE: If you are claiming Veteran's Preference, you must submit a copy of your DD214 and/or other substantiating documents specifying the periods of your service.

PHYSICAL/MENTAL REQUIREMENTS: Applicants must be able to physically and mentally perform efficiently the duties of the position. Qualified applicants with disabilities who can perform the essential functions of the advertised position are encouraged to apply. The Hawaii Health Systems Corporation is committed to making reasonable accommodations on a case-by-case basis. Applicants seeking reasonable accommodation should be ready to discuss the accommodation sought so that a determination can be made that such accommodation is reasonable and would not cause the employer undue hardship.

PHYSICAL EXAMINATION REQUIREMENT: Offers of employment will be conditioned on the results of a complete physical examination, which includes a drug screening. For certain job categories, applicants may be referred to a HHSC-designated physician, rather than the applicant's personal physician of choice. The cost for all physical examinations, except the cost for the drug screening, shall be borne by the applicant and not the Hawaii Health Systems Corporation. The Hawaii Health Systems Corporation shall bear the cost of the drug screening.

CRIMINAL/BACKGROUND, CREDENTIALING CHECKS: Applicable checks will be conducted. If a job offer is made or employment is begun prior to completion of all applicable checks, any offer of employment or continued employment is contingent upon satisfactory return of all required checks.

HOW TO APPLY: Applications are available at the **Maui Memorial Medical Center;** Human Resources Office, 285 Mahalani St. Apt #22 Wailuku, HI 96793. **Mailing Address:** 221 Mahalani St. Wailuku, HI 96793. You can call (808) 242-2251, e-mail: mmmcjobs@hhsc.org or visit our website at www.hhsc.org. Application hours are: M-F 7:45 a.m. to 4:30 p.m., excluding holidays at which time applicants are able to complete an application and have their application reviewed by the facility Human Resources Office. Only applicants that have been through a Human Resources (HR) applicant screening process will be considered for an interview with a hiring manager. Applications for announcements with a deadline date must be filed no later than the last day to file applications. Applications for announcements with "Continuous Recruitment Until Needs are Met" will be accepted as long as there are vacancies. Inactive/filled announcements will be taken off the HHSC website.

STEPS TO AN ADMINISTRATIVE REVIEW: If you do not agree with a decision made by the Employment Office as to your non-qualification or non-selection for a position, you may complete a Request for Administrative Review form (available on the HHSC website) or you may submit a written request within twenty (20) days from the date of your sent notice to the Regional Chief Executive Officer/Designee. Your letter requesting the Administrative Review must include 1. The job title(s) and recruitment number(s). 2. The specific reason(s) you are requesting the review noting if there is a statute or rule violation, and 3. Any additional information you want to submit to substantiate your request. **If you do not submit your request within the twenty (20) days deadline, no Administrative Review will be conducted.** Since the Administrative Review is a prerequisite to subsequent steps, failure to utilize this process will make you ineligible for subsequent appeals. The administrative review, formal complaint and/or appeals hearing will not necessarily postpone the recruitment process and/or rescind a selection.

If you do not agree with the Administrative Review, you may file a Formal Complaint and then, if you are still not satisfied, you can appeal to the HHSC Merit Appeals Board.

Name: _____

Supplement for Credit and Collection Clerk

Instructions: In order to better evaluate your qualifications for the Credit and Collection Clerk position, we request that you complete this form and submit it with your application. Complete a separate form for each position you held which involved credit and collection work. All employers should be listed on the experience page of the application. If you need to clarify an item below, please use the backside of this sheet.

Employer: _____

Hours Worked Per Week: _____

Job Title: _____

Did this position involve the following:

1. Interviewing patients and/or responsible representatives to obtain financial information to determine ability to pay, credit rating, financial status? Yes _____ No _____
2. Conferring with patient or responsible representative after admittance or prior to discharge to make arrangements for payment of hospital costs not covered by insurance or other coverages by arranging for method of payment and securing assignments, promissory notes or other commitments to pay? Yes _____ No _____
3. Arranging for method of payment and extension of credit? Yes _____ No _____
4. Contacting payer to seek payment? Yes _____ No _____
5. Determining credit status? Yes _____ No _____
6. Determining whether arrangements for payment should be modified and credit extended? Yes _____ No _____
7. Reviewing patients' accounts to ascertain whether payments are current and on the amounts specified?
Yes _____ No _____
8. Sending notices of payments due? Yes _____ No _____
9. Reviewing accounts for delinquent payments? Yes _____ No _____
10. Contacting payers who are delinquent personally, by telephone or by mail? Yes _____ No _____
11. Collecting delinquent accounts? Yes _____ No _____
12. Determining accounts that are uncollectible, and preparing list of such accounts to be forwarded to collection agencies? Yes _____ No _____
13. Keeping records of contacts and status of accounts and preparing monthly status report of delinquent accounts, collections, extensions and other related activities? Yes _____ No _____
14. Preparation of monthly statements and aging of accounts? Yes _____ No _____

Signature: _____ Date: _____

Please print name: _____