UW HEALTH JOB DESCRIPTION

SUPERVISOR FINANCIAL CLEARANCE							
Job Code: 442000	FLSA Status: Exempt	Mgt. Approval: R. Klein	Date: November 2023				
Department: Financia	l Clearance	HR Approval: B. Haak	Date: November 2023				
JOB SUMMARY							

The Financial Clearance Supervisor is responsible for overseeing specific areas of Financial Clearance and personnel while ensuring timely, efficient, compliant and productive workflows that relate to financially clearing a patient for their upcoming services. The incumbent must understand Revenue Cycle protocols, billing practices, utilization management, coding practices, payer practices, and provider practices across the various service lines that are supported by Financial Clearance. They must have a good understanding of how their areas impact the flow of work throughout the organization, and how when not done properly, the work can have a negative downstream impact to patients, providers and the overall financial success for UW Health.

The Financial Clearance Supervisor is responsible for the management of front-line staff, including leading recruitment efforts, disciplinary action, performance reviews, and providing day to day operational support to the teams across the revenue cycle. The incumbent will support the development and enforcement of policies and procedures, process improvement initiatives, quality assurance, and workload oversight, while ensuring that patient experience protocols are followed. They will manage the overall training for new or existing team members.

The incumbent will lead or participate in departmental and interdepartmental process improvement work. Projects may involve departments external to Financial Clearance. They will work with other teams/departments to ensure that their activities and contributions align with priorities and timelines within the organization. The Financial Clearance Supervisor will be required to use advanced communication and project management skills to lead quality and efficiency improvement efforts. An understanding of and the ability to apply the UW Health Way principles and systematic evaluation is important to success in this position.

The position requires the ability to independently plan, schedule, organize and respond appropriately on a wide variety of subjects and situations. The incumbent will be expected to be knowledgeable of, and be able to perform, the duties of the staff supervised. Involvement in departmental and interdepartmental process improvement teams will also be expected.

MAJOR RESPONSIBILITIES

Supervision and Training

- Serves as the knowledge expert and informational resource for staff.
- Develops staffing calendars and assures staffing needs are met. Implements alternative staffing plans as needs arise, taking into consideration department budgetary constraints, benchmark timelines, financial risk to the organization, performance requirements and restrictions.
- Interviews and makes hiring decisions to maintain adequate staffing in the department.
- Reviews and processes timecards in an accurate and timely manner.
- · Maintains accurate employee files.
- Coordinates and leads team meetings and huddles.
- Provides timely performance improvement feedback and coaching. Initiates corrective action for staff
 when warranted by inappropriate employee behavior or inadequate work performance. Conducts timely
 training assessments and performance reviews. Solicits feedback from other staff and managers as
 appropriate.
- Leads initiatives to identify gaps in training knowledge and areas for staff performance improvement.
- Evaluates, develops and/or updates training modules. Keeps accurate records of personnel training schedules as well as training checklists. Ensures training is completed timely. Identifies focus areas for competency assessments. Provides training opportunities addressing areas highlighted by these assessments.

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Operational Duties

- Ensures that patient experience and service standards are met.
- Monitors workloads and ensures that all cases are getting worked in a timely fashion. Escalates cases, and/or staffing concerns to the next level when necessary.
- Makes decisions under tight time constraints, on allowing cases to proceed when necessary. This is
 done using critical thinking skills, while taking multiple factors into consideration, including financial risk
 to patient and/or organization, back filling of Operating Room schedules, patient inconvenience, medical
 urgency, etc.
- Handles patient and provider complaints as needed when work is subpar and has resulted in a negative impact to patient or provider.
- Works collaboratively with hospital departments on issues relating to patient registration, insurance prior authorization/verification, referrals, and overall financial clearance. Represents the department in meetings and on committees relating to these issues.
- Participates in training and development programs as agreed upon with the Revenue Cycle Leadership.
- Gathers and analyzes departmental specific productivity and quality of service statistics.
- Provides input into the budgetary process.
- Leads the planning and implementation of new workflows, services, initiatives, and/or staff development.
- Works with revenue cycle leadership, contracting, payers, and information systems to determine ways to minimize financial risk to the organization.
- Participates in department's strategic plan development and execution of assigned goals.
- Develops, recommends, and implements policies and procedures for the department. Updates policy and procedure manuals as required. Apprises staff of changes.
- Monitors adherence to policies and established procedures both within and outside department.
- Proposes procedural methods which assures effective execution of workflows and responsibilities.
- Maintains and distributes monthly stats as needed, including phone calls, SL standards, WQ productivity and user productivity scorecards.

ALL DUTIES AND REQUIREMENTS MUST BE PERFORMED CONSISTENT WITH THE UW HEALTH PERFORMANCE STANDARDS.

JOB REQUIREMENTS							
Education	Minimum	Associate degree in business, healthcare administration or related field. Two (2) years of experience in a business or healthcare related field may be considered in lieu of a degree in addition to the experience below.					
	Preferred	Bachelor's degree in business, healthcare administration or related field					
Work Experience	Minimum	Three (3) years of experience in a healthcare revenue cycle or at least two (2) years of related experience in a leadership role.					
	Preferred	Three (3) years management experience in healthcare revenue cycle operations for a large, complex health care environment, including experience in an academic medical center.					
Licenses &	Minimum						
Certifications	Preferred						
Required Skills, Knowledge, and Abilities		 Expert knowledge of Medicare and third-party payer reimbursement preferred. Intensive knowledge in managed care requirements as they relate to hospital reimbursement. Excellent verbal and written communication skills. Effective interpersonal skills to facilitate work in a team environment and to collaborate with a variety of professionals. Detail oriented, with a data driven attitude. Strong decision making and self-motivation skills. Ability to work in a team environment and to collaborate with a variety of professionals. 					

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- Proficiency in word processing and spreadsheet programs
- Experience with a hospital-based computer system (preferably Epic)
- Ability to effectively incorporate the mission and core values into processes and workflows.
- Ability to effectively manage multiple demands, working under moderate to high degree of pressure.
- Excellent organizational skills
- Ability to maintain and convey a positive attitude and customer service approach to program development.
- · Ability to multitask and problem solve.

PHYSICAL REQUIREMENTS

Indicate the appropriate physical requirements of this job during a shift. *Note: reasonable accommodations may be made available for individuals with disabilities to perform the essential functions of this position.*

Physical Demand Level		Occasional Up to 33% of the time	Frequent 34%-66% of the time	Constant 67%-100% of the time
X	Sedentary: Ability to lift to 10 pounds maximum and occasionally lifting and/or carrying such articles as dockets, ledgers, and small tools. Although a sedentary job is defined as one, which involves sitting, a certain amount of walking and standing is often necessary in carrying out job duties. Jobs are sedentary if walking and standing are required only occasionally and other sedentary criteria are met.	Up to 10#	Negligible	Negligible
	Light: Ability to lift to 20 pounds maximum with frequent lifting and/or carrying of objects weighing up to 10 pounds. Even though the weight lifted may only be a negligible amount, a job is in this category when it requires walking or standing to a significant degree.	Up to 20#	Up to 10# or requires significant walking or standing, or requires pushing/pulling of arm/leg controls	Negligible or constant push/pull of items of negligible weight
	Medium: Ability to lift to 50 pounds maximum with frequent lifting/and or carrying objects weighing up to 25 pounds.	20-50#	10-25#	Negligible-10#
	Heavy: Ability to lift to 100 pounds maximum with frequent lifting and/or carrying objects weighing up to 50 pounds.	50-100#	25-50#	10-20#
	Very Heavy: Ability to lift over 100 pounds with frequent lifting and/or carrying objects weighing over 50 pounds.	Over 100#	Over 50#	Over 20#
bon	er - list any other physical requirements or a fide occupational qualifications not cated above:			

Note: The purpose of this document is to describe the general nature and level of work performed by personnel so classified; it is not intended to serve as an inclusive list of all responsibilities associated with this position.