

Would you like to make a difference?

Our mission is to provide a quality, affordable and compassionate health home for every patient, every time – in all communities. AxessPointe started in 1995 as the first Federally Qualified Health Center in Summit County, Ohio and has since expanded to five locations between Summit and Portage Counties. We are looking for a team member who can grow with us.

SUMMARY: Under the general supervision of the AxessPointe Community Health Center, Inc. (API) Site Manager, the Certified Application Counselor (CAC) is responsible for facilitating the enrollment of eligible health center patients and service area residents into affordable health insurance coverage through the Health Insurance Marketplaces (Exchanges), Medicaid, and/or the Children's Health Insurance Program (CHIP). The CAC behaves in a professional manner and consistently demonstrates and promotes the values of respect, honesty, care, and dignity for the patient and all members of the healthcare team. The CAC is committed to the constant pursuit of excellence in improving the health status of the community and promotes the API mission, vision, and values.

MANAGER: Site Manager

DUTIES AND RESPONSIBILITIES:

1. Patient/Customer Focus: Makes patients and their needs a primary focus of one's actions; shows interest in and understanding of the needs and expectations of internal and external customers; gains patient trust and respect; meets or exceeds patient's expectations. Core values of Patient-Focused Care: Timely answering of calls; respect: compassion, empathy, caring, non-judgmental, focusing on one patient at a time, establish trust and ensure patient satisfaction. Compassionate Care : Treating patient as if they are our family/friends: Platinum Rule (Treat others the way they want to be treated), being kind and courteous, showing empathy and not passing judgment, showing patients respect, understand patient's limitations, demonstrating professionalism even under stressful situations.
2. Quality Orientation: Monitors and checks work to meet quality standards; demonstrates a high level of care and thoroughness; checks work to ensure completeness and accuracy.
3. Technical/Professional Knowledge and Skills: Possesses, acquires and maintains the technical/ professional expertise required to do the job effectively. Demonstrates knowledge through problem solving, applying professional judgment and competent performance.
4. Assists consumers in obtaining access to a single and streamlined application process (Federal portal) that will enable them to determine if they, or a family member, are eligible for enrollment under Medicaid or CHIP or if they are eligible for financial assistance for a qualified health plan offered through the Marketplace and, if so, facilitate the enrollment.
5. Demonstrates and maintains expertise in eligibility and enrollment rules and procedures; the range of qualified health plan options and insurance affordability programs; the needs of the underserved and vulnerable populations; and privacy and security standards.
6. Conducts public education activities to raise awareness about coverage options available under Medicaid, CHIP, and the Marketplace.
7. Helps individuals understand and access affordable options.
8. Provides information and assistance in a fair, accurate, and impartial manner that is culturally and linguistically appropriate to diverse communities and accessible to individuals with disabilities.

9. Provides referrals to any applicable office of health insurance consumer assistance or ombudsman established under Section 2793 of the Public Health Services Act to address consumer grievances, complaints, or questions about their health plan, coverage, or a determination.
10. Complies with and successfully completes all required and applicable federal and/or state consumer assistance training as is required for all assistance personnel carrying out consumer assistance functions.

11. Demonstrates the ability to conduct “in reach” with currently uninsured health center patients and “outreach” to non-health center consumers in the API approved service area.
12. Collaborates with other health centers and providers in the API service area to ensure that outreach and enrollment assistance activities are coordinated with other local, regional, and/or state- wide outreach and enrollment assistance efforts and training requirements.
13. Collects data for national, state, and local agency reports.
14. Performs other duties as required including working the front desk.
15. Demonstrates leadership qualities including professional and written communication skills, ability to be flexible and to prioritize in complex situations, and decision-making skills.
16. Demonstrates knowledge in working with Electronic Health Records (EHR).
17. Familiarity with Patient Center Medical Home (PCMH) Concepts.
18. Demonstrates the ability to work independently.
19. Willingness to learn.
20. Demonstrates excellent patient service.
21. Participates as an active and contributing member of a team to achieve team goals. Works collaboratively with others, involves others, shares information as appropriate, shares credit for team accomplishments. Core Value of Collaborative Care: teamwork, closer co-worker communication, making best use of time, positive attitude.
22. Makes the needs of the patient the first priority.
23. Actively supports the Mission, Vision and Values of API.
24. Actively participates in staff meetings, in-services and training sessions.
25. Adapts well to changes in assignments and priorities, adapts behavior or work methods in response to new information, changing conditions or unexpected obstacles. Uses creativity and imagination to develop new insights into situations and applies new solutions to problems. Core Value of Creative Care: open to change, optimistic, focus on learning and sharing.
26. Remains open to feedback for improvement.
27. Suggests new ways to address issues.

Qualifications:

1. Experience: 1-3 years experience working with underserved and vulnerable populations and working with community resource programs is preferred.
2. Minimum of a High School diploma or equivalent is required.
3. Bachelor's degree in a human services field or equivalent experience preferred.
4. Knowledge and demonstration of eligibility and enrollment rules; knowledge of qualified health plan options; and knowledge of privacy and security standards.
5. Knowledge of community resources, including mainstream resources.
6. Demonstrated ability to work effectively with underserved and vulnerable populations.
7. Ability to successfully complete all required and applicable federal and/or state consumer assistance training.

8. Must be able to work independently.
9. Must have excellent oral and written communication skills and advanced computer skills.
10. Must have excellent interpersonal skills.
11. Experience working with diverse population groups.
12. Must maintain a valid driver's license, dependable transportation, and be able to travel between health center sites and throughout the health center's service area.
13. Must be flexible to work evening and weekend hours as needed.

Licenses or Certifications Required:

1. Certification: Must successfully complete the Marketplace Certified Application Counselor Online Course. Must recertify each year.

COMPLIANCE:

This position requires compliance with AxessPointe Community Health Center, Inc. (API)'s written standards, including its Compliance Program and Standards of Conduct and policies and procedures. Such compliance will be an element considered as part of the regular performance evaluation.

Failure to comply with API's Written Standards, which may include the failure to report any conduct or event that potentially violates legal or compliance requirements or API's Written Standards or, for managers and supervisors, fails to detect non-compliant conduct where reasonable efforts would have resulted in detection, will be met by the enforcement of disciplinary action, up to and including possible termination, in accordance with API's Compliance Program Policy and Procedure: Addressing Instances of Non-Compliance through Appropriate Disciplinary Actions.

PHYSICAL DEMANDS:

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to sit, and use hands to finger handle or feel; to talk; or hear. The employee is frequently required to reach with hands and arms. The employee must occasionally stand, walk, climb or balance, stoop, kneel, crouch or crawl. The employee must be able to frequently lift up to 25 pounds. The employee may occasionally be required to lift 25 to 50 pounds; however, this is not essential; duties may be shifted to accommodate lifting restrictions.

WORK ENVIRONMENT:

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with

disabilities to perform the essential functions.

While performing the duties of this job, the employee is frequently required to use close vision (clear vision at 20 inches or less). The employee will occasionally be working near moving mechanical parts, be exposed to outdoor weather conditions and exposed to a risk of electrical shock while running the copier, printer, other standard equipment and answering the telephone. The noise level in the work environment is low to moderate. Stress level can be high at times.

Note: This job description is not intended to be an exhaustive list of all duties, responsibilities or qualifications associated with the job.

* We are a **Drug Free Workplace**, this includes no nicotine at or away from work.

* **Hepatitis B:**

- 1) Documentation of first dose & documentation of appointment for second dose; before first day of work.
- 2) Documentation of second dose within 45 calendar days of first day of work.
- 3) Documentation of third dose within one year of first day of work.

OR

- 4) Documentation of positive titer before first day of work.

* **Competitive Salary & Benefits**

* \$ 17.00 per hour or more based on qualifications and related experience.