

JOB DESCRIPTION

Job Title: Pre Authorization Specialist	Department: Utilization Management
Reports to: Clinical Manager	FLSA Status (Exempt/Non-Exempt): Non-Exempt
	Date: 08/26/2008

Purpose of the job:

Responsible for providing accurate and complete data input for precertification requests and for providing excellent customer service.

Essential Functions/Responsibilities:

1. Answer calls from physician offices, hospitals, and patients using exemplary customer service skills.
2. Accurately enter required information (non-clinical and structured clinical data) into computer database.
3. Review structured clinical data matching it against specified medical terms and diagnoses or procedure codes (without the need for interpretation) and follow established procedures for authorizing request or referring request for further review.
4. Attach incoming information to iCare database and follow established procedures for distributing information for further review.
5. Call back providers with precertification numbers as needed and file completed precertification requests as per established procedures.
6. Call hospitals for discharge dates as needed.
7. Refer callers to benefit departments of correct claims administrator when requesting benefit information.
8. Print and send form letters from iCare system as directed.
9. Maintain patient confidentiality as defined by state, federal and company regulations.
10. Establish effective rapport with other employees, professional support service staff, customers, clients, patients, families, and physicians.
11. Actively support departmental and corporate strategic plans and ensure successful implementation.
12. Maintain cooperative working relationships with all ICM departments and providers.
13. Support company and departmental QA/QI initiatives.

Qualifications:

Education and/or Experience Required at Entry:

1. Six months previous experience in customer service.
2. High School Education or GED.
3. Two years of college preferred.
4. Knowledge of medical services coding.
5. Familiarity with medical terminology or willingness to learn.

Skills, Abilities and Professional Competencies:

1. Demonstrated proficiency in keyboarding/computer use.
2. Self motivation and the ability to work effectively in an independent environment.
3. Provide quality customer service by being available for scheduled shifts. Includes arriving promptly and completing shifts as needed to meet demands of daily call levels.
4. Excellent communication and organizational skills.
5. Demonstrated ability to deal effectively with emotionally charged situations.
6. Detail orientation.
7. Strong organizational and task prioritization skills.
8. Patient advocacy focus.
9. Empathy.

Special Licenses or Certificate:

1. None required.

Working Conditions and Environment/Physical Demands:

1. Ability to use a computer keyboard and mouse 6-8 hours per day.
2. Ability to dial, answer, and talk on a telephone for 6-8 hours per day.

The above statements are intended to describe the general nature and level of the work being performed by people assigned to this work. This is not an exhaustive list of all duties and responsibilities associated with it. ICM management reserves the right to amend and change responsibilities to meet business and organizational needs.