



HEALTH SERVICES AUTHORIZATION COORDINATOR I

Position Status: Non-Exempt
Reports To: Health Services Authorization Supervisor
Effective Date: 03/23/98
Revised Date: 12/22/20
Job Level: S1

POSITION SUMMARY

Under close supervision, this position:

1. Processes incoming treatment and referral authorization requests and verifies member plan eligibility
2. Performs basic research on member authorization requests
3. Performs other duties as assigned

DISTINGUISHING CHARACTERISTICS

The Health Services Authorization Coordinator I is the entry and first working level classification in the series and is distinguished from the next higher, full working level Health Services Coordinator II by the latter's responsibility for responding to the more complex provider inquiries, researching and resolving the more complex health authorization related issues, training staff in daily operations, and assisting with special projects

RESPONSIBILITIES

1. Processes incoming treatment and referral authorization requests and verifies member plan eligibility, with duties including but not limited to:
 - Performing clerical duties related to the processing of authorization requests and provider referrals
 - Contacting providers and requesting additional information for review based on Prior Authorization requirement protocols where necessary
 - Verifying member plan eligibility, with subsequent notification to designated staff regarding eligibility issues
 - Adhering to the established criteria and timeframes for processing urgent authorization or referral requests
 - Collaborating with Concurrent Review Nurses, Case Managers, Medical Social Workers and Prior Authorization Nurses regarding member authorizations and referrals within the scope of the role and responsibilities
 - Providing effective departmental communication with both internal and external customers
 - Reviewing authorization requests for completeness and appropriateness prior to forwarding to an assigned nurse
 - Forwarding authorizations concerning eligibility and other coverage, pricing, and benefit issues to appropriate department staff
 - Scanning, attaching, reviewing and working with electronic images as part of the authorization process
 - Processing provider notices in accordance with established timeframes

- Conducting work within queues that are used to manage authorization requests
 - Reviewing and processing In-Network Referral Forms for all members, including those under 21 years of age as assigned
 - Documenting amendments received from providers in the designated electronic systems within the established time frame
 - Identifying, maintaining and protecting sensitive HIPAA information (Personal Health Information) and following procedures to ensure the security of such information
 - Responding to providers regarding authorization/referral status
 - Entering data into Alliance systems and notifying the appropriate personnel immediately of any issues related to the electronic systems
2. Performs basic research on member authorization requests, with duties including but not limited to:
- Locating authorization status and history, as needed
 - Researching and communicating with requesting provider for any identified amendments, such as codes and/or modifiers for authorization requests
3. Performs other duties as assigned

EDUCATION AND EXPERIENCE

- High School Diploma or equivalent and a minimum of two years of experience in the health care field (an Associate's degree may substitute for one year of the required experience); or an equivalent combination of education and experience may be qualifying.

KNOWLEDGE, SKILLS, AND ABILITIES

- Working knowledge of standard business office practices and equipment
- Some knowledge of medical terminology or billing codes procedures
- Some knowledge of the principles and practices of customer service
- Some knowledge of Windows based PC systems, including Microsoft Word
- Ability to verify eligibility information utilizing various organizational sources
- Ability to interpret, explain and apply processes, policies and procedures
- Ability to pay close attention to detail and utilize effective organizational skills
- Ability to produce and maintain accurate records
- Ability to demonstrate strong customer service skills, specific to telephone inquiries
- Ability to solve routine problems and appropriately escalate more complex problems to higher level staff
- Ability to use general office equipment, such as telephone, photocopier machine, personal computer, fax and 10-key calculator
- Ability to perform routine tasks independently and work as a member of a team

DESIRABLE QUALIFICATIONS

- Working knowledge of and proficiency with Windows based PC systems, including Microsoft Word, Excel, and Outlook

WORK ENVIRONMENT

- Ability to sit in front of and operate a video display terminal for extended periods of time
- Ability to bend, lift, and carry objects of varying size weighing up to 10 pounds
- Ability to travel to different locations in the course of work

This position description, and all content, is representative only and not exhaustive of the tasks that an employee may be required to perform. Employees are additionally held responsible to the Employee Handbook, the Alliance Standard Knowledge, Skills and Abilities and the Alliance Code of Conduct. The Alliance reserves the right to revise this position description at any time.