



## HEALTH SERVICES AUTHORIZATION COORDINATOR II

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**Position Status:** Non-Exempt  
**Reports To:** Health Services Authorization Supervisor  
**Effective Date:** 03/23/98  
**Revised Date:** 12/22/20  
**Job Level:** S2

### POSITION SUMMARY

Under general supervision, this position:

1. Processes and responds to the more complex treatment authorization and referral authorization requests and verifies member plan eligibility
2. Conducts research on member authorization requests and responds to complex provider inquiries
3. Assists with special projects and training staff
4. Performs other duties as assigned

### DISTINGUISHING CHARACTERISTICS

The Health Services Authorization Coordinator II is the full working level classification in the series and is distinguished from the next lower, entry and first working level Health Services Coordinator I by the former'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 and responds to the more complex treatment authorization and referral authorization requests and verifies member plan eligibility, with duties including but not limited to:
  - Assisting Utilization Managers with appeals processing
  - Performing clerical duties related to the processing of authorization requests and provider referrals
  - Verifying member plan eligibility, with subsequent notification to designated staff regarding eligibility issues
  - Performing extensive phone contact with providers and requesting additional information for review based on Prior Authorization requirement protocols where necessary
  - Adhering to the established criteria and timeframes for processing urgent authorization or referral requests
  - Collaborating with Concurrent Review Nurses, Case Managers and 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 Referral Authorization Forms for all members, including those under 21 years of age, as assigned
  - Ensuring that any changes made to the authorization request or referral forms have been submitted directly from the requesting provider electronically or by fax
  - Documenting amendments received from providers in the designated electronic systems within the established time frame
  - Identifying, maintaining and protecting sensitive Protected Health Information (PHI) and following procedures to ensure the security of such information
  - Collaborating with supervisor, providers and Claims Department staff to resolve complex Authorization issues
  - Entering data into the Alliance systems and notifying the appropriate personnel immediately of any issues related to the electronic systems
2. Conducts research on member authorization requests and responds to complex provider inquiries, with duties including but not limited to:
- Locating authorization status and history, as needed
  - Researching member history for duplications and consideration of authorization limits
  - Verifying fax numbers and system updates
  - Researching and communicating with requesting provider regarding any identified amendments, such as codes and modifiers for authorization requests
  - Performing authorization research to assist Alliance departments
  - Responding to providers regarding authorization and referral status
3. Assists with special projects and training staff, with duties including but not limited to:
- Assisting with special projects and audits
  - Training new and existing staff on current and new practices and procedures
  - Maintaining up-to-date information which impacts the authorization process
  - Acting as a subject matter expert and resource to staff in the area of daily operation of the authorization coordination process
  - Assisting with job shadowing requests from various departments within the Alliance, to provide information regarding the authorization process
4. Performs other duties as assigned

## EDUCATION AND EXPERIENCE

- High school diploma or equivalent and a minimum of three years of experience in the health care field which must have included a minimum of one year of experience performing health services authorization coordination duties (an Associate's degree may substitute for one year of the general health care experience); or an equivalent combination of education and experience may be qualifying

## KNOWLEDGE, SKILLS, AND ABILITIES

- Working knowledge of medical terminology and billing codes procedures
- Working knowledge of standard business office practices and equipment

- Working knowledge of the principles and practices of customer service
- Working knowledge of and proficiency with Windows based PC systems, including Microsoft Word, Excel, and Outlook
- Ability to verify eligibility information utilizing various organizational sources
- Ability to interpret, explain and apply processes, policies and procedures
- Ability to conduct research related to authorization limits and authorization requests
- 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, both in person and on the telephone
- Ability to train staff on current and new practices and procedures
- Ability to assist with special projects and perform basic project coordination tasks
- Ability to be proactive, demonstrate resourcefulness, and problem solve
- Ability to perform basic mathematical calculations
- Ability to use general office equipment, such as telephone, photocopier machine, personal computer, fax and 10-key calculator
- Ability to work independently and as a member of a team

#### DESIRABLE QUALIFICATIONS

- Experience working for the Alliance as a Health Services Authorization Coordinator I
- Working knowledge of Alliance medical acronyms

#### 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

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*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.*