

## VACANT POSITION ANNOUNCEMENT

**Date Posted:** 01/06/2014

**Cutoff Date:** 01/17/2013

***All applications must be submitted before 3:00 pm on the cutoff date indicated above.***

**Job Position:** Utilization Review Specialist  
*Full-Time w/Benefit – 40 hours per week*

**Department:** Utilization Review (Men's Program/IOP)

**Date Position Available:** Immediately

**Job Description:** The Utilization Review Specialist is responsible for communicating pertinent information to third party payors and managed care organizations in order to ensure maximum benefit from treatment services and the insurance benefits available. This person also coordinates with the assigned counselor and treatment team in development of treatment plans. The primary duties and responsibilities include, but are not limited to, the following:

- Compiles clinical information and prepares case presentations for conducting pre-certification, concurrent, transition, discharge, and appeal reviews with third party payors.
- Maintains schedule of reviews and ensures all are conducted according to third party payor time frames.
- Works with and develops professional relationships and trust with provider/payor UR staffs.
- Communicates decisions and requests of third party payors and/or managed care organizations back to treatment team members, serving as a liaison between the two.
- Coordinates with intake, patient registration, financial advisors, and accounts receivable personnel.
- Writes appeal letters following discharge when needed.
- Meets with patients to assess current level of functioning and treatment progress.
- Collects collateral information for case presentations via patient and family interviews.
- Collaborates with the treatment team to assist in development of treatment and continuing care plans.
- Acts as a liaison between the treatment team, the marketing team, and referral sources, keeping them abreast of patient progress and continuing care needs through verbal and written communication.
- Documents pertinent clinical information into the electronic patient record, as well as documenting pertinent information into the business record re: utilization reviews, according to established timeframes.
- Maintains confidentiality of company and patient information.

### **Qualifications for Position:**

- LADAC, LPN, or Bachelor's degree in social work, psychology, or related field with a minimum of two (2) years of behavioral healthcare experience; OR a Master's degree in counseling or social work; and/or equivalent education or experience in job related activities. Addiction specific and UR experience strongly preferred.
- Excellent customer service and interpersonal skills, including the ability to work calmly and professionally with people in crisis.
- Good problem-solving and analytical skills; ability to organize multiple tasks and use time efficiently.
- Strong written and oral communication skills.
- Excellent interviewing and observational skills.
- Computer skills with ability to quickly learn and use clinical, office, and web-based software.
- Knowledge of signs/symptoms of intoxication/withdrawal of alcohol and common drugs of abuse; knowledge of general options for addiction treatment.
- If recovering, two years of verifiable abstinence required with five years preferred; active participation in the appropriate Twelve Step program preferred.

***Inquiries for this position should be directed to Dale Kirkham. To apply for the above position, please submit a cover letter along with a current resume to Dale Kirkham via fax (615) 432-3134 or email to [dale\\_kirkham@cumberlandheights.org](mailto:dale_kirkham@cumberlandheights.org). You will be contacted should an interview or other information be desired.***

*This notice is posted in keeping with Cumberland Heights' policy of offering preferential consideration for new/vacant job positions to current employees. Of course, the employee applicant must be equally or better qualified for the position, as any other applicant.*