Authorization Coordinator

Job Code: AUTH - 107
Revision Date: Dec 21, 2018

Salary Range:
$13.10 - $21.42 Hourly
$1,048.00 - $1,713.60 Biweekly
$27,238.00 - $44,558.00 Annually

FLSA: Non-Exempt

Overview

We are an agency committed to innovative behavioral health services in trauma-informed care that promote healing and recovery to instill a sense of empowerment and foster a lifelong sense of resilience.

General Description

The purpose of this job is to verify benefits and eligibility of clients' inquiries, preparing authorization folders, indicating co-pays/deductibles in client's record, providing ongoing patient benefit information, secures authorizations for all paying sources.

This class works under close to general supervision according to set procedures but determines how or when to complete tasks.

Duties and Responsibilities

The functions listed below are those that represent the majority of the time spent working in this position. Management may assign additional functions related to the type of work of the position as necessary.

- Provides training material to EHN staff in order to ensure authorization requirements are met.
- Contacts representatives at insurance companies and organizes educational training.
- Verifies eligibility and benefits for all clients.
- Communicates benefit information and co-payments to front office coordinators and reimbursement specialists must be made when needed.
- Ensures all pre-authorization calls and paperwork are addressed and completed in an accurate and timely manner:
  - Contacts the appropriate payors to obtain treatment authorization numbers, reimbursement structure, and client eligibility. Upon receipt of scheduled appointment, verification of eligibility and benefits for all clients must occur.
  - Maintain ticker filing system for authorizations and benefit expiration.
  - Completes the telephone profile of insurance benefits in a timely fashion.
- Assures concurrent reviews (OTRs) forms are completed accurately and appropriate signatures are obtained.
- Assigns the correct financial class and adjust financial class as required.
- Notifies the appropriate departmental director of any potential problems related to an authorization.
- Completes a demographic pre-certification if required.
- Completes the authorization folder within one working day of obtaining authorization, and schedule all critical dates for appropriate follow up:
  - Ensures written confirmation of benefits and eligibility is sent to the primary and secondary insurance carrier and scheduled for follow up.
  - Documents all activity occurring during the authorization process as it pertains to eligibility, benefits, reimbursement and required signatures.

- Coordinates with other departments within EHN to assure appropriate usage of client benefits for treatment extensions when appropriate, as well as coordinating coverage limits and other length of stay issues for clients.
- Collaborates and assist Reimbursement Specialist with denials related to authorization and eligibility.
- Ensures denials are below 3% due to authorized services.
- Collaborates and assist Reimbursement Specialist with the Fiscal Balance Aging Report follow up as it pertains to their assigned payor.
- Adheres to EHN, department, personnel and standard policies and procedures.
- Adheres to EHN standards concerning conduct, dress, attendance and punctuality.
- Supports facility-wide quality/performance improvement goals and objectives.
- Maintains confidentiality of EHN employees and patient information.
- Performs other duties as assigned.

**Minimum Education and Experience Requirements**

Requires an Associate's Degree and one (1) year of experience in a medical/behavioral health setting verifying eligibility; or equivalent combination of education, training, and experience which provides the required knowledge, skills, and abilities.

Experience with trauma-informed services; cognitive behavioral therapies, including DBT; and motivational therapies including the use of incentives, preferred.

**Required Knowledge and Abilities**

Knowledge of trauma-informed theories, principals, and practices (includes multi-faceted understanding of concepts such as community trauma, intergenerational and historical trauma, parallel processes, and universal precautions), preferred.

**Physical Demands**

Performs sedentary work that involves walking or standing some of the time and involves exerting up to 10 pounds of force on a regular and recurring basis or sustained keyboard operations.

**Unavoidable Hazards (Work Environment)**

- None

**Special Certifications and Licenses**

- Must possess and maintain a valid state Driver's License with an acceptable driving record.
• Must be able to pass a TB, criminal background and drug screen.

**Americans with Disabilities Act Compliance**

Emergence Health Network is an Equal Opportunity Employer. ADA requires Emergence Health Network to provide reasonable accommodations to qualified persons with disabilities. Prospective and current employees are encouraged to discuss ADA accommodations with management.

**Other Job Characteristics**

• Staffing requirements, including criteria that staff have diverse disciplinary backgrounds, have necessary State required license and accreditation, and are culturally and linguistically trained to serve the needs of the clinic’s patient population.
• Credentialed, certified, and licensed professionals with adequate training in person-centered, family centered, trauma informed, culturally-competent and recovery-oriented care.

**Note:** This Class Description does not constitute an employment agreement between the Emergence Health Network and an employee and is subject to change by the Emergence Health Network as its needs change.