



Utilization Review Nurse

Summary Job Description

The Utilization Review Nurse will be responsible for reviewing claims for medical necessity.

Role and Responsibilities

- Act as a liaison between the case manager and the provider/injured worker
- Reports to the UR Team Leader
- Utilizes the Manager of Clinical Services or other RN Team Leaders as a resource for all clinical questions and advice
- Serve as the first point of contact for treatment plans (C-9). Follow up with all necessary parties regarding treatment requests including injured workers, providers, employers, legal representatives, TPA's, MCO Case Managers and BWC staff.
- Assess the appropriateness and medical necessity of the treatment requests for utilization review on a prospective, concurrent, and retrospective basis.
- Coordinate and review the C-9 (treatment plan)
- Assess quality and clinical risk issues on a concurrent basis; report any recognized issue to the Team Leader/Supervisor
- Assess documentation of medical records for completeness and relationship to the treatment plan
- Ability to obtain and interpret information appropriate to injured workers needs as required for assessment, treatment, and patient care services
- Initiate communication as necessary with the injured worker, employer, provider, BWC, and TPA regarding the treatment plans as well as coordinate services with other UniComp departments
- Provide education and guidance to all parties to the claim; this includes providing direction to any member of the five-point contact
- Assist with analysis of outcome data to identify and make recommendations; report issues to the Team Leader/Supervisor
- Develop and maintain a positive work atmosphere and support the overall team; demonstrate ability to work within a team structure
- Practice capable and effective problem identification and resolution skills as a method of sound decision making
- Maintain confidentiality
- Work independently, efficiently, and deal with priorities
- Understand and uphold UniComp philosophy and demonstrate commitment to UniComp's core values: have a sense of urgency, be optimistic, promote independence, and respect human dignity
- Ability to function as a Utilization Review Nurse and any other duties as assigned
- Practice nursing within the Scope of Practice as designated by the State of Ohio Board of Nursing
- LPN to practice within the Scope of Practice as designated by the State of Ohio Board of Nursing. LPN cannot issue treatment denials.
- Employee may be asked to travel from time to time to attend employer meetings or other offsite functions.

Qualifications

- Ohio Licensed Registered Nurse, or Licensed Practical Nurse, or Bachelor's degree in a health-related field and licensure as a health professional; or certification as a case manager (Certified Case Manager (CCM), Certified Disability Management Specialist (CDMS), Certified Rehabilitation Counselor (CRC), Certified Registered Rehabilitation Nurse (CRRN), Certified Occupational Health Nurse (COHN).
- A minimum of three (3) years of full-time direct care in a health and human services profession; preferably in occupational health or rehabilitation
- Obtain required national certification when eligible; maintains continuing education as required
- Excellent leadership, verbal/written communication skills, strong organizational skills, and excellent decision making and judgment

This job description is not intended to be all inclusive and the employee will also perform other reasonably related business duties as assigned by the immediate supervisor and other management as required.

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