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## Quality Assurance/Utilization Review Analyst

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### Description

Reporting to the VP Behavioral Health, the Quality Assurance/Utilization Review Analyst is responsible for leading the division in identifying, analyzing, and resolving patterns of quality assurance and providing recommendations for improvements in the intake to payment process. In collaboration with the Compliance Department, the Quality Assurance/Utilization Review Analyst participates in the development and implementation of clinical policies, protocols and programs.

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### Responsibilities

#### 1.0 Quality Assurance/Utilization Review

- 1.1 Develop systems for maintaining timeliness and quality of documentation
- 1.2 Examines data, evaluates information, communicates results & follows up on missing information
- 1.3 Coordinates quality assurance activities within the programs.
  - 1.3.1 Reviews clinical records to assess for appropriateness of care in relation to client needs, proper documentation, and compliance with regulatory standards.
  - 1.3.2 Identifies and communicates any concerns related to clinical care or documentation to the Program Director and/or the Vice President of Behavioral Health and makes recommendations for improvement.
  - 1.3.3 Identifies clinical issues requiring review by the Quality Assurance Review Committee.
- 1.4 Oversees the development and maintenance of medical records in accordance with OASAS & OMH guidelines.
- 1.5 Supervises the development and maintenance of record systems, policies, and procedures to assure compliance with appropriate regulations.
- 1.6 Provides coordination and support during internal audits of Behavioral Health's medical records.
- 1.7 Reviews and analyze reports related to clinical/support documentation requirements.
- 1.8 Reviews individual clinical records for presence of adequate and required documentation, documents areas of deficiency and recommends corrective action to staff supervision, if required.
- 1.9 Supports the Performance Quality Improvement processes across the division.
- 1.10 Establish and implement a utilization review plan, ensuring that admissions are appropriate, retention and discharge criteria are met, and services reflect treatment needs.

#### 2.0 Compliance

- 2.1 Leads staff in understanding and compliance with applicable federal and state laws, including but not limited to those governing client confidentiality, privacy, program standards and billing and documentation standards.
- 2.2 Works closely with the Compliance Department to address any compliance concerns and to identify areas needing special attention.
- 2.3 Ensure compliance and track the timeliness of all clinical documentation.
  - 2.3.1 Oversee the review of the intake to payment process.

#### 3.0 Administration & Training

- 3.1 Assists in the development and implementation of the programmatic policies and procedures, as well as process work flows, for Behavioral Health programs.

3.2 Assists in the provision of training to clinical and support staff related to providing quality services and documentation.

3.3 Coordinates agency documentation/orientation training for new staff in the Behavioral Health Pillar and serves as a coach and mentor for best practices.

3.4 Coordinate and provide Quality Assurance training.

3.4.1 Assists in the development of the calendar of Quality Assurance training and personally leads some training activities.

3.4.2 Participates in the initial orientation/training schedule for new staff and coordinates requested sessions.

3.4.3 Interact effectively with individuals with various backgrounds and experience.

## Qualifications

### SKILLS:

- Knowledge of insurance billing & collection regulations, requirements & best practices.
- Strong knowledge of medical terminology.
- Ability to provide impartial and unbiased judgment
- Knowledge of procedures and work flows in a behavioral health care organization
- Excellent verbal and written communication skills
- Good leadership skills with a team-oriented approach
- Excellent time management, decision-making and interpersonal skills
- Excellent written and oral communication skills.
- Strong attention to detail and ability to multi-task.

### EXPERIENCE:

- Knowledge of federal and state standards governing program documentation and billing standards.
- Three to five years experience in quality assurance in a behavioral health or medical clinic.
- Must have experience in training and a defined ability to interact with a variety of individuals.
- Case management experience is a plus.

### EDUCATION:

- Bachelors degree in healthcare management, social work or related field required. Masters degree preferred.
- Three to five years of experience as a clinical supervisor and/or Qualified Health Professional (QHP) preferred.
- Black Belt certification or training preferred.

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