

**New York State Department of Civil Service**  
DIVISION OF CLASSIFICATION & COMPENSATION

Classification Standard

**Occ. Code 5517200**

**Utilization Review Coordinator, Grade 19**

Brief Description of Class

Utilization Review Coordinators analyze and evaluate the necessity, quality, effectiveness, and efficiency of psychiatric and medical services provided to individuals in State facilities. Incumbents evaluate the appropriateness of admissions, individual length-of-stay, and discharge policies and procedures; and conduct reviews of clinical records to ensure consistency with laws, rules, and regulations.

Positions are classified in the Office of Mental Health, and the Office for People With Developmental Disabilities.

Distinguishing Characteristics

*Utilization Review Coordinator:* develops, implements, and monitors utilization review policies, procedures, and plans for a facility; and evaluates the appropriateness of provided psychiatric and medical services, individual admissions, length-of-stay, medical charts, and discharge plans.

Illustrative Tasks

*Utilization Review Coordinator*

Reviews medical records of new admissions, placement decisions, length-of stays, and discharge plans against established criteria to determine if they are medically necessary, appropriate for individuals' needs, effective, and efficient.

Reviews clinical records for completeness and accuracy to ensure compliance with accreditation, research, and legal requirements.

Develops utilization review policies, procedures, and plans to ensure uniform practices facility-wide, and assists the facility in preparing for internal and external surveys and audits.

Collects and analyzes statistical data related to the utilization review process, and prepares reports on findings, patterns, and trends for internal and external use.

Assists in the development of standards, policies, and procedures related to admissions and medical care based on utilization review findings.

Communicates utilization review findings to clinical and administrative staff; and trains and provides consultation to staff on requirements to ensure that records are complete and consistent with regulatory, research, and legal standards.

Completes Patient Review Instrument documentation in compliance with State and federal guidelines.

Consults with clinicians from various departments to develop discipline-specific processes for the collection and evaluation of utilization review data.

Collaborates with Health Information Management departments to identify deficiencies in medical care requiring additional study and corrective action, and develops and recommends corrective actions.

May supervise staff assisting in utilization review processes.

### Minimum Qualifications

#### *Utilization Review Coordinator*

Open Competitive: a bachelor's degree in a human services field, and three years of utilization review experience in a health care facility regulated by Centers for Medicare and Medicaid Services Utilization Review standards.

Or: possession of a license and registration to practice nursing, and two years of post-licensure nursing experience, one of which must have included utilization review and/or discharge planning.

**Note:** Classification Standards illustrate the nature, extent, and scope of duties and responsibilities of the classes they describe. Standards cannot and do not include all the work that might be appropriately performed by a class. The minimum qualifications above are those required for appointment at the time the Classification Standard was written. Please contact the Division of Staffing Services for current information on minimum requirements for appointment or examination.

Date: 11/2020

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