

CLINICAL NURSING UTILIZATION REVIEW/TELEPHONIC TRIAGE

Clinical nursing professional who is committed to adhering to organizational requirements, meeting quality standards, and attaining optimal outcomes. Licensed practical nurse with a career marked by success in managed care, medical case management, quality management, telephonic triage, and direct patient care.

- Broad background includes experience in workers' compensation; practiced in prospective, concurrent, and retrospective utilization review, ICD-10 coding, and CPT procedures.
- Demonstrate in-depth understanding of complex healthcare and health services systems, policies, and standards of practice. Consistently adhere to state laws, workers' compensation guidelines, and Utilization Review Accreditation Commission (URAC) accreditation standards.
- Currently enrolled in Albany NY Tech College's Bachelor of Science Health Care Management Program.



SELECTED ACHIEVEMENTS

- » Earned distinction as the internal contest winner in May, June, July and August of 2010 for processing the highest number of UR cases.
- » Recognized for saving the organization more than \$50,000; met state timelines by taking on additional UR responsibilities in the aftermath of Hurricane Irma.
- » Generated and consistently maintained the highest productivity of staff members for processing \$50,000 UR per month.
- » Achieved the S.T.A.R. Award for performance excellence twice during tenure.
- » Realized a 100% QA score over the years.
- » Credited for achieving a 99.4% rating with the CA State audit for account (1 UR request was not submitted by examiner, which accounted for the .6).
- » Played a key role in developing the UR opioid-weaning process.

PROFESSIONAL EXPERIENCE

CONSTANT CARE INNOVATIVE SOLUTIONS, Lakeland, FL

2005-Present

Utilization Review Nurse, Remote Telecommute

Employ a wide range of clinical nursing expertise to engage in diverse prospective, concurrent, and retrospective utilization management functions in accordance with state and national guidelines.

- Develop lasting professional relationships with clients, medical providers, and key business partners. Draw on extensive clinical knowledge and strong analytical thinking abilities, along with a collaborative approach to achieve optimal outcomes.
- Cultivate and maintain relationships while engaging in positive interactions with injured workers, employers, medical providers, and claims adjusters. Consistently focus on customer satisfaction and retention.
- Adhere to rigorous standards, procedures, and protocols to maintain URAC accreditation.
- Achieve optimal results by applying clinical expertise and utilizing nationally recognized, evidence-based guidelines to make decisions based on medical necessity.

Triage Nurse

Collected the injured claimant's medical information, in considering compensability and referral for medical case management services. Coordinated medical care services to support medical only claims and coordinated direction of care to approved provider networks for those cases not referred for case management services.

- Compiled medical history. Determined current treatment plan appropriateness.
- Built solid professional relationships and achieved excellence in communicating with clients, ensuring satisfaction and customer retention.
- Adhered to standards and protocols to maintain URAC accreditation.

SPECTRAL ASTRA HEALTHCARE RESOURCES, Lakeland, FL

2004-2005

Referral Management Nurse

Engaged in review of specialty care referrals to determine appropriateness and covered benefits. Delivered medical consultative advisement and administrative support to the medical treatment facility; aided beneficiaries with specialty care referrals.

- Served as a functional/subject-matter expert around health benefits.
- Scheduled specialty care appointments and delivered pre-appointment instruction to facilitate continuity of care.
- Liaised with/and between beneficiaries, medical treatment facility staff, the network, outside providers, and ancillary healthcare providers.

HEALTHCARE CORPORATION/LMF SCRIPT, Lake Mary, FL

1999-2004

Nursing Supervisor-Clinical Services

Promoted to this role after demonstrating strong clinical and leadership skills. Delivered quality disease and treatment management to patients with chronic illnesses. Applied expertise to provide patients with disease specific education and clinical support. Monitored patients' progress to ensure therapy efficacy and achievement of optimal outcomes. Standardized training and tested staff to ensure patients consistently received high-quality care.

- Hepatitis C nurse specialist accountable for prior authorization and utilization management. Engaged in quality assurance improvement. Respected for outstanding supervisory, training coaching, motivating, and mentoring skills.
- Set high expectations to ensure patients received unparalleled customer service and quality care.
- Earned a solid reputation for adhering to high ethical standards, ensuring quality, and consistently achieving organizational goals and objectives.

OTHER ROLES

CONSTANTIA VISITING NURSES, Lakeland, FL/South Bend, IN

Staff Field Nurse

Emphasized patient care management and coordination of quality nursing services in home health. Applied case management expertise to support 25-30 patients with high-risk, complex needs, and catastrophic illnesses in a prospective payment program. Involved in multidisciplinary team conferences; evaluated practical options, services, and resources, and presented viable options that extended delivery of care, promoted quality outcomes, and generated cost effectiveness.

EDUCATION / CREDENTIALS

ALBANY NY TECH COLLEGE, Albany, NY – In Progress

Bachelor of Science in Health Care Management

INDIANA TECHNICAL SCHOOL SBI, South Bend, IN

Practical Nurse Program

New York, Florida, California, Texas, Tennessee, Licensure

Certified Managed Care Nurse

IV Certified

Medtronics Mini-Med 407 C Certified