

## **Case Review Specialist- RN req'd**

**Full-time and per diem available**

### **Position Purpose**

As the Case Review Specialist (RN), you will be responsible for the review and processing of all requests for Independent Reviews from External Agencies in accordance with contract guidelines. Upon receipt of the medical records, communicate with contractors, providers and beneficiary/representatives. In applicable cases, perform case review utilizing InterQual criteria and clinical knowledge for medical necessity and quality of care issues and coordinate with coding specialist for cases requiring diagnosis related groups validation. Formulate a case summary and the review questions for the Physician Reviewer based upon the External Agency's concern(s). Review physician determinations, ensuring all categories of concern have been addressed. Prepare written correspondences to contractors, providers and beneficiaries/representatives. Maintain contractual timeframes and URAC standards for case completion. Interface with Medical Director.

Full-time: in-office, Mon.- Fri., no weekends or holidays

Per diem: remote, up to 20 hrs. per week

### **Qualifications**

- The ability to communicate effectively and interact with providers, internal customers and beneficiaries/ representatives
- Excellent written and oral communication skills and professional demeanor
- The ability to work independently, as well as in a team environment
- Proficient in the use of standard EHR applications, office technology and Microsoft applications including Word, Excel, and PowerPoint
- Ability to handle sensitive and confidential information

### **Minimum Education & Experience**

- Licensed Registered Nurse in CA, required
- Graduate of a School of Nursing, required
- Bachelor of Science in Nursing (BSN), preferred
- A minimum of three (3) years clinical experience in an acute care setting or related experience, required.
- Experience in utilization and quality reviews, required
- Experience in the application of InterQual criteria, preferred
- Experience in managed care, quality management and peer review, preferred

**HOW TO APPLY:**

**Interested candidates must note the position identified in the title line when applying for this position.**

**Please submit a resume, along with a cover letter (which should include salary requirements and full-time or per diem preference) to:**

Lumetra Healthcare Solutions  
550 Kearny Street Suite 300  
San Francisco, CA 94108  
[careers@lumetrasolutions.com](mailto:careers@lumetrasolutions.com).

While we are grateful for all interest expressed in employment with Lumetra, only qualified candidates being considered will be contacted.

Lumetra is an Equal Opportunity/Affirmative Action Employer;  
Minority/Female/Disabled/Veteran