

DEPARTMENT OF CASEMANAGEMENT--LLC

Job description: Clinical Care Coordinator

Reports to Casemanagement Supervisor

Revised 6/07

Statement: Case Management is a multidisciplinary process that facilitates transition of patients and families through the appropriate levels of care, providing quality, cost effective outcomes.

Essential job functions:

- 1. Applies critical thinking skills to monitor patient progression, suggesting alternative treatments to ensure a cost effective and efficient plan of care as needed.**
- 2. Identifies, documents, reports and works to resolve opportunities for process improvement in patient care delivery, patient safety and in departmental work through data collection and serving on performance improvement teams.**
- 3. Works to assure the clinical documentation is an accurate reflection of the patient's condition through evaluating the clinical documentation, comparing to clinical picture of patient and educating physicians to the need for thorough documentation.**
- 4. Participates in the psychosocial patient and family management in a supportive role with care coordination team members, addressing patients' and families' needs for therapeutic interventions.**
- 5. Facilitates plans for the transition of patient care to next level and location of care through critical thinking and assessment of patient condition to determine appropriate level of care, supporting actual transition and continuity of care.**
- 6. Assists with and supports the financially related activities affecting the hospital stay and transition plan, assuring approved days from payers and intervening to resolve any admission or continued stay denials.**
- 7. Maintains accountability for utilization management and communication with payers to assure continued stay authorization, performing admission review and payer notification as necessary, collaborating with physician to assure in-patient services meet medical necessity, working with physician advisor to resolve impending denials**
- 8. Maintains accountability for denials and appeals management and communication with insurance companies, working with physician to avoid concurrent denials and assisting with information in the support of appeals of any denials.**

9. Demonstrates a daily commitment to the department's value of teamwork and customer satisfaction.

OTHER DUTIES/PERSONAL AND PROFESSIONAL DEVELOPMENT

1. Exhibits and adheres to the *Liberty Health Behavioral Standards*
2. Assume responsibility and accountability for individual knowledge, professional self development, skill, competency, performance and behavior in accordance with hospital, division, and unit standards of care (policies and procedures).
3. Actively participates in training and development and maintains Case Management competencies and competency in all areas of assigned duties
4. Maintain patient, employee, physician and corporate confidentiality; respect the rights, privacy and property of others.
5. Demonstrate compliance with infection control guidelines and the hospital chemical hygiene plan including proper use of personal protective equipment.
6. Foster and promote intra/inter departmental relations.
7. Achieve high productivity by keeping job responsibilities current and up to date.
8. Participates in staff meetings, self-directed work team, and other departmental initiatives.
9. Assists in coverage of other clinical areas as dictated by patient care needs, fluctuations in census
10. Participates in on-call schedule, *if required for department functioning*
11. Performs other duties as assigned

Preferred Skills and Traits:

- Excellent verbal and written communication skills
- Able to work productively in a team structure
- Capable of working with multiple tasks simultaneously
- Expert critical thinking and problem solving skills
- Self motivation
- Assertiveness
- Respected / trusted by staff and physicians
- Ability to relate and converse with all levels
- Persistent
- Organization and time management skills
- Computer skills
- Knowledge of Interqual criteria
- Familiar with CMS, JCAHO guidelines, governmental rules and regulations
- Excellent negotiating skills
- Can break down barriers

Education and Experience

- Minimum Education: associate degree in nursing with 5 years current relevant clinical experience, or bachelor's degree in nursing with 2 years current relevant clinical experience, or graduate of medical school with managed care/ home care experience
- Current New Jersey RN license for registered nurses