

High Risk Nurse Case Manager (HR RN CM)

Position Description: A registered nurse who is part of the primary care practice team and is responsible for organizing, coordinating, and providing care coordination and care management services to patients within the practice.

The High Risk Nurse Case Manager acts as an integral part of the primary care team and is responsible for ensuring that the primary care physician (PCP) and practice team maintains a central role in coordinating and managing the care of these vulnerable patients.

The High Risk Nurse Case Manager is responsible for a panel of 60-75 complex patients. S/he will work with a team including behavioral health, case management, and primary care to establish goals and a plan of care for each complex patient. The RN CM is the point person for complex patients, making sure that services are coordinated and communicated between all team members and the patient's primary care provider (PCP).

The highest risk patients are:

- 1) Transitioning to or from home and community-based health care facilities for acute care services (hospital or emergency department), rehabilitation services, skilled nursing services, or other community-based services;
- 2) Being seen in the office with co-morbidities, unmanaged disease severity, poor self-care, polypharmacy, and high utilization rates.

Required Experience, Education, Skills, and Working Conditions

- 1) Experience in case management, home health care nursing, hospital nursing, or primary care.
- 2) Education: Registered Nurse (minimum)
- 3) Skills
 - a. Comprehensive nursing assessment, problem identification and care plan development
 - b. Screening for developmental issues, depression, other psychological conditions, and frailty
 - c. Behavioral strategies including motivational interviewing and self-management support
 - d. Relationship building with patients, staff, and providers
 - e. Documentation in an EMR
 - f. Computer skills including Microsoft Excel, Word, and PowerPoint
- 4) Working conditions: PCP office-based with the ability to do home visits on a limited basis

The High Risk Nurse Case Manager is responsible for all or part of these position requirements:

Primary objectives of the position:

- 1) Review high risk patient lists (including those from payers) and provider input to identify a panel of patients that are at highest risk for health deterioration, sentinel events, and/or poor outcomes.
- 2) Develop a tracking system for patient care coordination and care management across the continuum, including care transitions, and two-way communication between the PCP, specialists, and/or other providers
- 3) Coordinate care for identified high risk patients experiencing a transition to or from outside care facilities and/or providers. Coordinate follow-up for high risk patients discharged from the ER or inpatient hospital stay within 48 hours to prevent readmission and related complications.
- 4) Coordination of care with specialists and other health care providers (referrals, testing, procedures, etc.)
- 5) Communicating/affirming patient needs, plan of care, and changes in status with the PCP, team and the patient/family.
- 6) Improvement in utilization and disease-related outcome measures in the high risk patient population.
- 7) Integration of the patient/family into care coordination and care management planning and communications, assuring that the patient/family are informed and supported in decision-making.

Essential Functions:

- 1) Assuring that care is patient-centered and that the patient/family are informed about the plan of care and are involved in decision-making about that care.
- 2) Identifying and managing the patient's primary driver (Reason or problem that caused the hospitalization or ER visit)
- 3) Comprehensively assessing patient's physical, mental, and psychosocial needs. He/she will delegate and involve case management and other support staff as needed.
- 4) Maintaining a registry of highest-risk patients with documented completion of measures and interventions, care management interventions, and care plans.
- 5) Developing care plans that prevent disease exacerbation, improve outcomes, increase patient engagement in self-care, decrease risk status, and minimize hospital and ER utilization for high risk patients.

For consideration please forward CV to:

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EOE

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