Care Manager
Position Description

Employee: _____ Date of Hire: _____

Positions Supervised: Supervisor: Quality Improvement Manager

Status: Full Time

Classification: Non exempt, Hourly Last Revised: 4/5/19

Position Summary: Under the general supervision of the Quality Improvement Manager, the Care Manager is responsible for managing high risk chronic illness patients to promote effective education, self-management support, and timely health care delivery to achieve optimal quality, cost-effective outcomes and support a team-based care approach with population health management. The Care Manager behaves in a professional manner, and consistently demonstrates and promotes the values of respect, honesty, care, and dignity for the patient and all members of the healthcare team. The Care Manager is committed to the constant pursuit of excellence in improving the health status of the community. Job purpose resolves and acts out Fairfield Community Health Center's mission, vision and value statements.

Primary Duties:

- Complete provider/patient driven care plans for high risk patients.
- Provide information to patients on community resources based on social determinants of health with active care management referral from patient's healthcare provider.
- Coordinate hospital follow ups for all patients of the organization.
- Coordinates referrals as per direction of patient's healthcare provider.
- Provides patient education to high risk patients as needed.
- Maintains confidentiality of all patient information and adheres to policies/safety practices as established by FCHC.
- Short staffing situations can periodically result in the care manager being asked to work in the clinic to meet the needs of the operations.
- Supervises Health Navigators.
- Other duties as may be assigned from time to time.

Competencies/Skills:

- Recognizes and participates in continuous quality improvement efforts for preventative and chronic conditions as well as operational and workflow changes.
- Collaborates with providers and medical center staff in identifying appropriate patients for care management, utilizing established Care Management criteria.
- In collaboration with the health care provider and patient, establishes a nursing plan of care and contributes to the revision of the care plan as needed.
- Promotes patient self-management and empowers patients to achieve maximum levels of wellness and independence.
- Collaborates with providers, and other healthcare team members including inpatient facilities, the patient's payer, and health system administrators to facilitate care across the healthcare continuum and optimize clinical outcomes. Determines and completes appropriate referrals and follow-up. Serves as a support to staff, providers, patients and families.
- Maintains active list on care managed population. Maintains accurate and timely documentation. Demonstrates knowledge in working with Electronic Health Records (EHR), and other computer systems.
- Assists in data collection, entry, retrieval and generates reports for QI measures.
- Demonstrates the ability to work independently.
- Ability to communicate and collaborate effectively with the care team.
- Ability to carry out projects and education to identified populations of people.

- Demonstrates leadership qualities including professional and written communication skills, ability to be flexible and to prioritize in complex situations, decision-making skills, and professional development through participation in continuing education.
- Demonstrates knowledge of Population Health Management, Patient Center Medical Home Concepts (PCMH), CPC, UDS and HEDIS.
- Willingness to learn, embrace change and have a positive attitude.

Experience, education/training, and licensure:

- Licensed Practical Nurse (LPN) licensed by the State of Ohio minimum, License Registered Nurse (RN) preferred.
- Current Basic Life Support certification.
- Minimum of 3 years' experience of:
    - Working in clinical out-patient settings such as hospital, nursing facility, or home health, or primary care office.
    - Working with diverse population groups.
    - Care Coordination and/or Case Management experience.
    - Working with Electronic Health/Medical Records.
    - Proficiency with standard computer software; e.g.; Word, Excel, etc.
    - Excellent oral and written communication skills.

PHYSICAL REQUIREMENTS & ENVIRONMENTAL CONDITIONS:

Must be able to push, pull and assist in lifting up to 50 lbs. May be exposed to loud noises. Must be able to stand and sit for extended periods of time, stoop, bend, reach, show manual dexterity, and clearly communicate with office personnel and external customers. May be exposed to blood and bodily fluids.

Employee	Date
Supervisor	Date
Chief Executive Officer	Date

This job description is intended to indicate the basic nature of the position(s) allocated to this class and examples of typical duties that may be assigned. It does not imply that all positions within this class will perform all of the duties listed, nor does it attempt to list all possible duties that may be assigned.

This job description does not constitute an employment agreement between the employer and employee and is subject to revision by the employer as the needs of the employer change and/or requirements of the job-related duties expand or are updated.