



RN Care Manager Job Posting

Kalos Health is a regional nonprofit Health Insurance Company that provides health insurance coverage through Kalos Health Managed Long Term Care (MLTC) Plan. The Care Manager coordinates the care and service of selected member populations across the continuum of illness. They will service to promote effective utilization and monitor health care resources within their group of members.

Responsibilities

- Work with the Medical Director, Quality Assurance, Interdisciplinary team and Director of Clinical Operations to assess, plan, implement, coordinate, monitor, and evaluate services and outcomes to maximize the health, well-being and satisfaction of all members under their purview.
- In conjunctions with the PCP and member, complete a comprehensive assessment and develop a care plan utilizing clinical expertise to evaluate the members need for alternative services. Assess short-term and long-term needs and establish case management objectives.
- Manage a mean of 65-100 active cases based on case intensity and acuity. Handle more complex or delicate members and work with interdisciplinary team to effectively manage these cases.
- Interact continuously with member, family, physician(s), other providers and the Kalos interdisciplinary team utilizing clinical knowledge and expertise to determine medical history, current status and identification/facilitation of member needs. Assess the options for are including use of benefits and community resources to update the care plan.
- Utilize clinical knowledge and expertise to determine medical history and current status. Assesses the options for care including use of benefits and community resources to meet member's needs reflective in the plan of care.
- Act as liaison and member advocate between the member/family, physician and facilities/agencies.
- Maintain accurate records of case management activities in the electronic health record using clinical guidelines. Coordinates community resources with emphasis on medical behavioral and social services.
- Report critical incidents and information regarding quality of care issues.
- Participate in regularly scheduled chart audits.
- Primary clinical contact for in-network providers (i.e. answering questions).
- Maintain compliance set forth by Director of Clinical Operations and Quality Manager.
- Participate in on-call, after hours' coverage.

Qualifications/Requirements

- Current NY State RN licensure, CCM certification preferred.
- 5+years clinical experience, preferably in home health, physician's office or public health.
- 2 years' current case management or managed care experience preferred.
- Experience and knowledge with electronic health record software preferred.
- Bilingual skills a plus.
- Demonstrative effective communication methods to assist in training and to relate effectively to reams and management.
- Ability to work independently, handle multiple assignments and prioritize workload.
- Demonstrates high level time management and priority setting, ability to adapt to changing priorities.
- Strong oral and written communication skills.
- Ability to create, review and interpret treatment plans.
- Demonstrate negotiation skills.
- Demonstrate collegiality and teamwork and fosters same within their team.
- Able to effectively demonstrate critical thinking skills.

Kalos Health offers outstanding benefits, including:

- 19 days of paid time off in your first year
- Health insurance starting on your first day
- Inexpensive insurance options for medical, dental and vision
- Retirement plan
- And Much More!!

We offer the opportunity to be part of a very dedicated organization that cares for others. If you enjoy working in healthcare and being part of a great team, we invite you to join us. Please apply online at www.kaloshealth.org. EOE