

Outpatient Referral Clinical Services Nurse

We specialize in managing independent groups of physicians with both commercial and senior managed care (HMO) patients. Our company is built on more than 100 years of collective experience in the managed care (healthcare) industry providing personalized care and exceptional service. We're conveniently located in North County San Diego bordering Oceanside and Vista.

Our Clinical Services team supports the health care services for all of our IPAs. If you are skilled, confident and adaptable, we have an excellent opportunity for a full-time RN Clinical Services Nurse who will actively participate in the discharge planning process and provide exceptional care for members who require case management. Case Management is a collaborative process which assesses, plans, implements, coordinates, monitors and evaluates individual's health needs through communication and available resources to promote quality cost effective outcomes.

We seek the following qualifications (* = essential functions):

- Current RN license in the state of California.
- Successful completion of a nursing program as is generally acquired by 2-3 years or greater of experience as a case manager in a Managed Care Environment.
- Requires prior Case Management experience preferably with catastrophic cases.
- Solid computer experience, particularly Microsoft Word, Excel and the ability to learn new software applications quickly.
- Excellent written and verbal communication skills.
- Able to successfully work independently, effectively problem solve and possess critical thinking skills.
- Must possess professional demeanor and the ability to contribute to a positive work environment.
- Demonstrate extensive knowledge of health plan guidelines and regulatory standards such as Medicare, TitleXXII, and Medi-Cal*.

Key Responsibilities Include:

- Review pre-service referral requests using appropriate criteria
- Lead the pre-service coordinator team by collaborating and providing education to them.
- To facilitate services at the appropriate Health Plan center of excellence.
- To utilize the Case Management functions: assessor; planner; facilitator; advocate.
- To utilize the most cost effective case rates and contracts.

- To review and process clinical information in accordance with regulatory mandates to facilitate patient healthcare and services, across the continuum of care.
- To perform catastrophic case management as appropriate to the patient's medical condition and healthcare needs utilizing the standards of practice for Case Management.
- To interface professionally and courteously with all internal staff and external customers to ensure appropriate exchange of information.
- To prepare and participate in health plan audits onsite as required.
- To actively participate in Utilization Management Committees in regard to Case Presentations and problem solving.
- To actively participate in the discharge planning process.
- To monitor and participate in the SNP/Duals program and CMC Program
- To ensure all members are living in the least restrictive environment
- To follow the UM/QI/CM/SNP/CMC program descriptions

At Physicians DataTrust you'll enjoy a rewarding career with our growing company and progressive, friendly work environment while receiving a generous portfolio of benefits including medical, dental, vision, life insurance, 401k with company match, (FSA) Healthcare Flexible Spending Account, paid sick time, holidays and vacation. Compensation for this position is dependent upon experience.

For consideration please submit your cover letter and resume to jobs@pdtrust.com. Please indicate "**Outpatient Referral Clinical Services Nurse**" in the subject line.

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