



Example of RN-Case Management Job Description

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Our innovative and growing company is hiring for a rn-case management. If you are looking for an exciting place to work, please take a look at the list of qualifications below.

Responsibilities for rn-case management

- The Director will provide leadership, communication, and supervision to the department staff to ensure company and facility strategy is operationalized and adherence to applicable policies
- Evaluating patient care data to ensure that care is provided in accordance with clinical guidelines and organizational standards
- Seeking treatments that balance clinical and financial concerns with the family's needs and the patient's quality of life
- Manage department operations to assure effective throughput and reimbursement for services provided
- Lead the implementation and oversight of the hospital Utilization Management Plan using data to drive hospital utilization performance improvement
- Ensure medical necessity review processes are completed accurately and in compliance with CMS regulations and Tenet policy
- Ensure timely and effective patient transition and planning to support efficient patient throughput
- Implement and monitor processes to prevent payer disputes
- Develop and provide physician education and feedback on hospital utilization
- Ensure compliance with state and federal regulations and TJC accreditation standards

Qualifications for rn-case management

- Critical Care or Emergency department experience
- Proficiency in the daily use of standard office equipment such as computer, phone, fax, pager, copier and skill in utilizing Microsoft Word and Outlook tools
- Significant knowledge and understanding of availability of community and post-acute resources and related payer requirements
- 2 years Director or Supervisor experience preferred