

Standard Job Description

Job Code: <u>6522</u> Grade: <u>23</u> HCWR: <u>N</u>

Job Title Manager of Care Management, CountyCare Department Health Plan Services

This position is exempt from Career Service under the CCH Personnel Rules.

Job Summary

Oversees the care management models utilized by CountyCare to: ensure appropriate support and continuity for all members' physical and behavioral health services, achieve members' health goals, improve population health and meet managed care requirements. Integrates multiple vendors' and providers' care management models into a cohesive approach. Commits to strong person-centered care and service orientation. Works independently and as a collaborative member of the CountyCare administrative team and with all levels of the Cook County Health (CCH). Responsibilities require travel between work sites throughout Cook County including community agencies, network providers, government, and other agency offices.

General Administrative Responsibilities

Collective Bargaining

- Review applicable Collective Bargaining Agreements and consult with Labor Relations to generate management proposals
- Participate in collective bargaining negotiations, caucus discussions and working meetings

Discipline

- Document, recommend and effectuate discipline at all levels
- Work closely with labor relations and/or labor counsel to effectuate and enforce applicable Collective Bargaining Agreements
- Initiate, authorize and complete disciplinary action pursuant to CCH system rules, policies, procedures and provision of applicable collective bargaining agreements

Supervision

- Direct and effectuate CCH management policies and practices
- Access and proficiently navigate CCH records system to obtain and review information necessary to execute provisions of applicable collective bargaining agreements



General Administrative Responsibilities

Management

- Contribute to the management of CCH staff and CCH' systemic development and success
- Discuss and develop CCH system policies and procedures
- Consistently use independent judgment to identify operational staffing issues and needs and perform the following functions as necessary; hire, transfer, suspend, layoff, recall, promote, discharge, assign, direct or discipline employees pursuant to applicable Collective Bargaining Agreements
- Work with Labor Relations to discern past practice when necessary

Typical Duties

- Develops program description work plans and annual program goals for care management, for approval by CountyCare leadership and oversight committees. Ensures that plans and program goals reflect the needs of CountyCare membership and a clear and cohesive care management strategy promoting cost-efficiency and quality of care goals and strategic directions of CountyCare and CCHHS, including NCQA health plan accreditation
- Analyzes data and conducts annual evaluation of work plan to identify program successes as well as barriers/impediments to achieving performance benchmarks
- Spots trends, identifies opportunities, and assess financial impact
- Prepares reports for various audiences, makes, and implements recommendations for improvement
- Develops, organizes, and manages processes to comply with regulatory requirements and vendor agreements as well as promote seamless member transitions and best practices
- Researches, develops, and implements care management interventions that will increase use of health care, improve health, and mitigate the burden of illness for CountyCare members
- Collaborates and coordinates people and systems to leverage CountyCare and CCHHS resources
- Foster strong relationships with diverse stakeholders from all community sectors
- Engages contracted/delegated care management entities and medical management staff, vendors, behavioral and physical health providers, and social services to assure integration of direct health care services
- Provides oversight of vendors including facilitation of vendor meetings, monitoring of key performance indicators and collateral outcomes
- Covers CCHHS CountyCare Clinical Case Manager duties as needed to support individuals who contact CountyCare and link them to care providers/care managers
- Facilitates and promotes timely problem identification, analysis, and resolution
- Travels to work sites throughout Cook County including Federally Qualified Health Centers, hospitals, regulatory and State agency offices

Minimum Qualifications

• Master's degree OR other higher-level degree in Social Work, Nursing, Psychology, Medicine, Osteopathy, Public Health, or Juris Doctorate



Minimum Qualifications

- Current, unrestricted licensure/certification as required by field of specialty in Illinois
- Five (5) years of total professional experience in healthcare
- Two (2) years of experience in care coordination/case management as a Nurse or Social Worker
- Experience conducting research and/or program evaluation
- Must be able to travel to work sites throughout Cook County including Federally Qualified Health Centers, hospitals, regulatory and State agency offices

Preferred Qualifications

- Case management, disease management and/or utilization management within a managed care organization (MCO) preferably a Medicaid MCO
- Experience implementing integrated Behavioral/Physical Health, patient-centered medical home, and/or care management models
- Experience with diverse populations and improving cultural competence

Knowledge, Skills, Abilities and Other Characteristics

- Knowledge of trends in healthcare, managed care, Patient Centered Medical Home
- implementation, Medicaid, case management, medical management, and quality improvement
- Understanding of government and industry managed care goals and requirements
- Excellent verbal and written communication skills necessary to communicate care management goals and concepts with all levels of staff
- Excellent program development, management, and leadership skills
- Strong interpersonal skills to build relationships with employees at all levels of the organization/partners organizations including negotiation, team building and project management
- Demonstrate analytical and organizational, critical thinking skills to implement and evaluation programs and resource allocation to meet program requirements and achieve program goals
- Demonstrate attention to detail, accuracy, and precision
- Ability to facilitate and promotes timely problem identification, analysis, and resolution.
- Ability to conduct activities in accordance with CCHHS privacy policies and ensure confidentiality requirements
- Ability to prioritize, plan, and organize projects and tasks to meet deadlines in a fast paced and stressful environment
- Ability to function autonomously and as a team member in a multidisciplinary team
- Must be able to travel to work sites throughout Cook County including Federally Qualified Health Centers, hospitals, regulatory and State agency offices



Physical and Environmental Demands

This position is functioning within a healthcare environment. The incumbent is responsible for adherence to all hospital and department specific safety requirements. This includes but is not limited to the following policies and procedures: complying with Personal Protective Equipment requirements, hand washing and sanitizing practices, complying with department specific engineering and work practice controls and any other work area safety precautions as specified by hospital wide policy and departmental procedures.

The above statements are intended to describe the general nature and level of work being performed by people assigned to this classification. They are not intended to be construed as an exhaustive list of all responsibilities, duties and skills required of the personnel so classified.

For purposes of the American with Disabilities Act, "Typical Duties" are essential job functions.