

Standard Job Description

Job Code:	6795
Grade:	FE
HCWR:	Ν

Job Title Community Based Nurse Care Coordinator Department Cook County Health

Job Summary

The Community Based Nurse Care Coordinator (CBNCC) supports the provision of care coordination in a manner that recognizes the Enrollee and the medical home care teams as essential partners in the Enrollee's care. These services are offered at the Enrollee's home, physician appointments, and/or other health care facilities. The CBNCC may work independently or in collaboration with a Community Based Social Worker Care Coordinator if the Enrollee is determined to be socially complex. Makes assessment of potential barriers that impede care or unaddressed complex health needs. Collaborates with Enrollee and medical home care team to develop and implement a plan that mitigates barriers and links Enrollees of any risk level to appropriate resources. The CBNCC works across sites of care and with multiple disciplines to achieve the desired outcomes for the Enrollee.

Typical Duties

- Manages care according to care coordination protocols, policies, procedures, and Enrollee condition.
- Assists patients/Enrollees, their support persons, providers, and vendors in facilitating optimum covered health care and services.
- Interfaces with care teams to ensure the application of care coordination protocols for screening assessment and care planning.
- Identifies patient care issues, develops an approach to resolve issues appropriately or escalates to the Manager of Complex Care Coordination.
- Provides clinical expertise to care teams when necessary to support coordination of care.
- In cooperation with appropriate Quality personnel, participates in the development of quality metrics and means of data collection.
- Participates in interdisciplinary care teams.
- Performs medication reconciliation.
- Prepares reports as requested.
- Supports implementation of new workflows to bring health care utilization and cost in alignment with departmental policies and procedures.
- Represents department in committees, workgroups as requested.
- Travels to Enrollees home or sites of care.
- Performs other duties as assigned.

Minimum Qualifications

- Bachelor's degree from an accredited college or university
- Licensed as a Registered Professional Nurse in the State of Illinois
- Minimum one (1) year of work experience with responsibilities for care coordination across multiple healthcare settings and providers
- One (1) year of experience in utilization management or case management
- One (1) year of experience in ambulatory nursing, home health or public/community health



Minimum Qualifications

 Valid Driver's license and mandatory vehicle insurance or other dependable means of transportation

Preferred Qualifications

- Master's degree in Nursing, Public Health, or Business from an accredited college or university
- Prior experience using Milliman or InterQual criteria sets and an understanding of clinical algorithms
- Experience working with the patient centered medical home model of care delivery
- Two (2) years of work experience in acute care setting

Knowledge, Skills, Abilities and Other Characteristics

- Knowledge of Medicare, Medicaid, and Third-Party Payer review requirements
- Knowledge of social determinants of health and interventions to provide effective health care to persons living in poverty
- Strong interpersonal skills with the ability to establish strong working relationships and to communicate, effectively with leadership team, patients/members, primary care site leaders, physicians and clinicians, behavioral health team members and other care providers
- Strong written and verbal communication skills
- Proficiency with Microsoft Office Suite products (Word, Excel, PowerPoint and Outlook)
- Ability to work in a team based environment
- Ability to communicate in a confidential and HIPAA compliant manner
- Ability to maintain appropriate professional boundaries with all staff, trainees, and patients at all times
- Ability to demonstrate respect and sensitivity for cultural diversity patients and coworkers
- Ability to work autonomously and consult appropriately
- Ability to develop and execute patient care plans and advocate effectively for member/patient needs to achieve optimal health outcomes
- Ability to appropriately manage and rank competing priorities and complete both patient/member care plans and other assignments within appropriate time frames
- Prior experience creating and implementing plans of care for complex patients
- Prior experience working with medically underserved populations

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.