Job Title
Manager of Complex Care Coordination

Department
Ambulatory Care Coordination

Job Summary
The Manager of Complex Care Coordination is responsible for managing and leading a multidisciplinary care team composed of social workers, nurses and community health workers to provide effective, efficient care coordination. Leads the day to day activities of the care coordinators, including scheduling, case assignment, mentoring and problem solving. Collaborates with the Director of Complex Care Coordination to identify improvement opportunities, create efficient processes and leverage resources appropriately, while supporting Cook County Health & Hospitals System (CCHHS). Works with Enrollees, Physicians and Administrative staff to identify ways to improve integration with the medical home teams for medically/socially or behaviorally complex to maintain levels of wellness for the maternal child health population or those with mild chronic disease.

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

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 meeting

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 CCHHS system rules, policies, procedures and provision of applicable collective bargaining agreements

Supervision
- Direct and effectuate CCHHS management policies practices
- Access and proficiently navigate CCHHS records system to obtain and review information necessary to execute provisions of applicable collective bargaining agreements
General Administrative Responsibilities continued

Management
- Contribute to the management of CCHHS staff and CHHSS' systemic development and success
- Discuss and develop CCHHS system policy and procedure
- 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
- Manages caseloads and assigns cases in Complex Care and/or Community Risk Reduction in accordance with departmental policy and procedure. Monitors workloads to assure a distribution that is accordance with contractual requirements.
- Develops processes to facilitate and support to provide Enrollee education.
- Ensures work is completed in a timely manner and addresses issues with work completion.
- Collaborates with the care team to continuously improve the process of assessment, planning, facilitation, care coordination, and evaluation; conducts care team meetings as needed to address concerns or needs.
- Develops and implements process to successfully on-board staff members and support tenured staff members during times of transition such as changes in policy and procedures or workflow modifications.
- Develops systems to monitor staff performance and provide timely, relevant feedback to staff.
- Adheres to contractual obligations to reporting key events and requests for response according to contractual requirement or accreditation standards.
- Reviews team performance regarding key performance indicators, develops approaches to assure team achieves targets.
- Facilitates staff staying up to date with changes in regulations, accreditation requirements and best practices in care coordination.
- Analyzes data supporting trends in patient care and develops process improvement initiatives as needed.
- Works collaboratively with departments throughout CCHHS to support achievement of organizational/departmental goals.
- Supports incorporation of the Care Coordination participant and care teams in workflow design.
- Supports resource utilization in a manner that is consistent with budget and resource targets.
- Supports care coordination quality improvement efforts.
- Supports readiness activities for National Committee for Quality Assurance (NCQA) accreditation.
- Travels to the home of Enrollees or their sites of care to conduct supervision visits.
- Performs all other duties as assigned.
Reporting Relationships
Reports to the Director of Complex Care Coordination

Minimum Qualifications
- Bachelor's degree in Nursing from an accredited college or university AND a Licensed Registered Professional Nurse in the State of Illinois
  OR
  Licensed Clinical Social Worker in the State of Illinois
- Three (3) years of care coordination work experience for an insurance company, on behalf of an insurance company, multi-specialty physician group, or Federal Qualified Health Centers
- Two (2) years of work experience in a culturally diverse, underserved populations
- One (1) year of supervisory work experience with a multi-disciplinary team.
- Prior case management software work experience i.e. Cerner, Midas, etc.
- Valid Illinois Driver's license and mandatory vehicle insurance as required in the State of Illinois (in accordance with the Code of Ordinances of Cook County, Illinois codified through Ordinance No. 16-0692, enacted February 10, 2016 (Supp. No. 32) § Sec. 2-673)

Preferred Qualifications
- Master's degree in Healthcare or Business Administration from an accredited college or university

Knowledge, Skills, Abilities and Other Characteristics
- In-depth knowledge of insurance concepts, managed care and Medicaid/Medicare
- Knowledge of SharePoint software
- Knowledge of Microsoft Office
- Excellent verbal and written communication skills necessary to communicate with all levels of staff and a patient population composed of diverse cultures and age groups
- Ability to assess, problem solve and make decisions on available data
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.

Approval: 

[Signature]
Mary Sajdak
Senior Director of Integrated Care

Date: 10. 2. 2010

Approval: 

[Signature]
Gladys Lopez
Chief of Human Resources

Date: 

Job Code: 6808
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Initials: MS