



**HEALTH CENTER
PARTNERS**
of Southern California

A Family of Companies



JOB DESCRIPTION

JOB TITLE:	Social Care Manager LVN			COMPANY:	IHP
REPORTS TO:	Director of Clinical Strategy				
DIRECT REPORTS:	N/A				
STATUS:	Exempt	FULL-TIME	WORK COMP CLASS:	8810	
OUTSIDE TRAVEL:	50%	WORK SCHEDULE: 7-7/M-F	WORK CONDITIONS:	Home Office/In-Field	
This job description is intended to be a general statement about this job and is not to be considered a detailed assignment. It may be modified at any time, with or without advance notice, to meet the needs of the organization.					

JOB SUMMARY

Under the direction of the RN Social Case Manager, the position is responsible for facilitating and coordinating care management services to the network that include care coordination and facilitation activities that promote the quality and cost of care. The position is responsible for executing the interventions outlined in the care plan to help patients navigate the social barriers to achieving diligent care. This plan will work closely with the Health Care Liaisons to ensure that the plan of care is executed, and patients receive the right care at the right time with the right outcome and right patient experience.

The position will focus on the Enhanced Care Management patient population (ECM). The Enhanced Care Management program (ECM) is a new statewide Medi-Cal benefit available to eligible members with complex needs, including access to a support team that provide comprehensive care management and coordinate health and health-related care and services.

ESSENTIAL JOB FUNCTIONS

Case Management

- Engage with ECM patients to coordinate care plans that ensure equitable access to quality care for clinical and non-clinical services (community-based services).

- Facilitate and coordinate care needs for identified in plan of care that promote quality and controls cost.
- Work closely with the RN Social Case Manager to report barriers to care and implementation of interventions outlined in the plan of care.
- Work with the Health Care Liaisons to support goals and coordination of services.
- Engage with managed care payers, health center teams, and community-based organizations to ensure patient-centered care and communication.
- Follow up on client referrals to ensure that patients can access and receive necessary services in a timely manner.
- Coordinate and provide care that is safe, timely, effective, efficient, equitable, and client centered.
- Document patient activity in designated tools.

Utilization Management

- Conduct outreach calls to patients post discharge to coordinate follow up and deploy re admission prevention strategies.
- Assist with outreach to high ER utilizers to help steer to least costly alternatives for care.
- Coordinate referral documentation and care needs from primary care clinicians.
- Identify alternative care options for patients to address social barriers and ensure updates to care plans.

Other

- Develop relationships with team members (network, payers, and health centers) and create tools to ensure strong teams and processes are in place for success.
- Meet annual goals outlined by leadership that align with the network strategic plan.
- Establish and maintain collaborative working relationships with community resources.
- Actively participate in staff meetings and training.
- Perform other duties as assigned.

QUALIFICATIONS

Education/Experience

- LVN California license required.
- Bi-lingual preferred.
- Must have 2-3 years clinical experience: 3+ years preferred.
- Working knowledge of regional health disparities and social determinants of health.
- Working knowledge of Medi-Cal regulations and community-based organization services.
- Must have strong interpersonal skills to work effectively internally and externally and across all levels in an organization.
- Working knowledge of relevant computer systems and software.

Skills

- Must have excellent written and verbal communication skills.

- Must possess valid driver's license, insurance, and own transportation for use in work, and be flexible with working some evenings and weekends within a 40-hour workweek.
- Must have strong interpersonal skills to work effectively internally and externally and across all levels in an organization.
- Working knowledge of relevant computer systems and software.

Geographical Location, Standard Business Hours, and Travel Requirements

- Located in the assigned territory no more than a 60-minute radius to a major U.S. airport.
- Business hours are generally 8:00-5:00 PST.
- A minimum of 5% travel is required for staff development purposes.
- Must reside in San Diego County.
- Must be willing to travel, as needed.

Physical Requirements

- Ability to sit or stand for long periods of time
- Ability to reach, bend and stoop
- Physical ability to lift and carry up to 20 lbs.

HIPAA/COMPLIANCE

- Maintain privacy of all patients, employees and volunteer information and access such information only on as need to know basis for business purposes.
- Comply with all regulations regarding corporate integrity and security obligations. Report Unethical, fraudulent, or unlawful behavior or activity.
- Upon hire and annually attend HCP's HIPAA training and sign HCP's Confidentiality & Non-Disclosure Agreement and HIPAA Privacy Acknowledgment
- Upon hire and annually read and acknowledge understanding of HCP's HIPAA Security Policies and Procedures
- Adhere to HCP's HIPAA Security Policies and Procedures and report all security incidents to HCP's Privacy & Security Officer

I acknowledge that I have read and understand this job description. My signature below certifies that I am able to perform the essential duties and responsibilities of this position. I have also discussed any accommodations that I feel I might need to allow me to perform these essential functions. Additionally, I agree to abide by the policies and procedures established by Health Center Partners of Southern California.

Signature

Date

Employee Name (please print)