Position/Job Title: Population Health Nurse
Reports to: Associate Manager, Population Health Services
Approved/Revised Date: 11/14/2016
Job Code: 310
Pay Class: Professional Licensed

Summary:
The Population Health Nurse is responsible for the implementation of IHP’s Population Health services program with diverse job functions designed to meet specific contractual and program related requirements. This role focuses on improving the health status and care for individuals with chronic conditions; potentially complex medical, mental health, and psychosocial issues; and implementing the utilization review, clinical review plan approvals, discharge planning, and transitional case management processes for individuals covered by health plans who have delegated the responsibility to IHP and for other contracted entities.

Essential Functions:

Care and Condition Management:
1. Carries out transitional care management program.
2. Conducts chronic condition management for individuals with target chronic conditions.
3. Conducts outreach through face to face follow-up, by telephone, secure e-mail, or postal mail with goal of engaging enrollee.
4. Assesses individual needs and develops plans to address needs/issues related to condition(s) and/or overall health.
5. Actively participates with community-based initiatives related to care management and transitions of care.
6. Conducts patient education regarding condition and symptom management, red flag warning signs, the importance of adhering to medications and evidence-based guidelines, and refers to customer-sponsored or community support programs.
7. Establishes self-management goal(s) with patients using self-management support concepts and motivational interviewing techniques.

Utilization Management:
8. Using the nursing process, conducts prospective, concurrent, and retrospective review activities for uncomplicated and complex cases for healthcare facilities.
9. Coordinates and communicates with health plans as appropriate.
10. Carries out transitional case management program for uncomplicated and complex cases through avoidance of hospitalization or facilitating the timely discharge of hospitalized members including discharge planning.
11. Communicates with facilities on a daily basis to obtain utilization review reports and makes determinations regarding appropriateness of admission, length of stay, and case management needs.
12. Receives referrals from primary care physician offices that require plan approval, reviews and investigates medical information received, and determines whether coverage is available using health plan certificates of coverage and medical policy.
13. Makes a determination regarding coverage of benefits within NCQA, Department of Labor, and IHP time frames.
14. Determines appropriate level of care in accordance with health plan medical policies and notifies the provider of the final determination.

Additional Responsibilities/Duties:
(The following examples are intended to be descriptive but not restrictive.)

1. Applies the principles of the nursing process to care and condition management of individuals with chronic conditions and those needing transitional care coordination.
2. Assists in provider and office staff education regarding Population Health initiatives.
3. Assists with preparation of materials required for NCQA and health plan oversight visits.
4. Conducts audits and studies as directed. Prepares reports associated with same.
5. Communicates regularly with physician office staff in evaluating requests for benefit determination.
6. Conducts Patient Satisfaction Surveys in accordance with IHP, NCQA, and health plan guidelines.
7. Identifies opportunities for continuous improvement, develops related plans of action, and implements process and documentation improvements.
8. Maintains a working knowledge of applicable Federal, State and local laws and regulations, IHP’s Compliance Program & Code of Conduct, ERISA, HIPAA privacy, transaction and code set requirements, as well as other policies and procedures, in order to ensure adherence in a manner that reflects honest, ethical and professional behavior.
9. Demonstrates commitment to providing outstanding customer service in a manner that is reflective of our mission, values, and customer service standards.
10. Performs related duties as assigned.

Education/Experience (Minimum Requirements):
Registered Nurse and Bachelor’s degree in nursing.
Certified Case Management or Chronic Care Nurse preferred. Certified health coach, or commitment to successfully complete within six months of employment.

Specific Knowledge, Skills, Licenses, Certifications, Etc:
Experience:
Three years clinical nursing experience in acute care setting. Additional experience in ambulatory care, home health, physician practice, utilization management, or other community setting preferred.

Skills:
Ability to communicate orally and in writing clearly and assertively.
Ability to analyze, plan, think critically and problem-solve effectively.
Ability to organize, prioritize, and be flexible.
Ability to work within a variety of teams.
Strong attention to detail
Demonstrate and maintain high level of accuracy.
Proven customer relations skills.
Licensure: RN with current Michigan license in good standing.

Comments: Travel will be required in this position. Evenings, weekends, and/or holidays will be required to accommodate program commitments.

The above statements are intended to describe the general nature and levels of the work performed and are not exhaustive lists of all duties, responsibilities, knowledge, skills, and abilities and working conditions associated with the job. As changes occur IHP reserves the right to modify the above description.