



**POSITION DESCRIPTION 2009  
DRAFT**

**Job Title:** RN Clinical Liaison  
**Department:** TX Health Services  
**Reports To:** Susan Berry, RN  
**FLSA Status:**  
**Approved Date:**

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**POSITION RESPONSIBILITIES:**

1. Primary point of contact with IPA clinical team including but limited to IPA medical director and IPA case manager
2. Collaborates with IPA Medical Director, Texas Medical Director and Corporate Health Services on cases requiring complex care planning
3. Acts as liaison between the IPA, contracted providers, corporate health services and members
4. Performs case reviews and conducts discharge planning upon request of corporate health services
5. Monitors, evaluates and reports utilization data to the IPA leadership and makes recommendations for improvement
6. Hospital, SNF on boarding meetings ( Case Management Departments) initial then quarterly and prn
7. DME/Home Health (high volume) initial on boarding and prn
8. Continuous evaluation of facilities -ancillaries in terms of quality, efficiency and partnership
9. Develop relationships with high volume and or high utilization physicians
10. Offer UR- discharge planning liaison support to high volume, (tier one-tier two) and or high utilization physicians
11. UR performance review with high volume and or high utilization PCPS based on their panels compared with peers. Continuous monitoring of performance.
12. Onsite discharge planning for readmission avoidance for complex cases upon request from Health Services
13. Identify members with multiple admissions for intensive care planning in collaboration with concurrent review team and case management
14. Monthly utilization reporting to tier one tier two physicians
15. Monthly Joint Operations Meeting with IPA's
16. Short Term Intensive Case Management for complex cases post hospital and or SNF

17. Monitors, evaluates and reports utilization data to the IPA leadership and makes recommendations for improvement
18. Identify and encourage the use of preferred providers
19. Identify and report quality concerns
20. Performs concurrent, prospective and retrospective review upon request from UR supervisor/manager
21. Conducts discharge planning upon request and through collaborating with the utilization management department
22. Other duties as requested by Texas Health Services Director

### **QUALIFICATIONS:**

#### **Education:**

Texas licensed Registered Nurse  
BSN preferred

### **KNOWLEDGE, SKILLS AND ABILITIES:**

- Recent utilization management experience
- 5 years + clinical experience: ICU experience a plus, case management a plus
- Knowledge of community resources
- Thorough knowledge of the managed care industry, Medicare Advantage preferred
- Demonstrated ability to build strong relationships and influence others
- Ability to embrace change and respond quickly
- Demonstrated ability to take initiative and work autonomously
- Strong interpersonal skills: excellent verbal, written and presentation skills are required
- Positive attitude and strong work ethic
- Ability to travel within designated area
- Bilingual preferred