WHITNEY M. YOUNG, JR. HEALTH SERVICES, INC.
JOB DESCRIPTION

TITLE: CARE COORDINATOR I – Family Practice

GENERAL RESPONSIBILITIES:
The Medical Home Care Coordinator I – Family Practice serves as an integral part of the Practice Team conducting pre-visit planning, population management activities, referral and transition of care coordination and by providing general support to the Family Practice Team.

SPECIFIC RESPONSIBILITIES:

PRE-VISIT PLANNING:

- Working with the care coordination team and utilizing internal and external data sources, identifies and contacts patients identified through various practice protocols and initiatives (i.e. chronic illnesses such as diabetes and hypertension, established patients [CPE, follow-up and/or episodic] and new patients).
  - Contacts patients prior to a visit reviewing the appropriate pre-visit template with them and informs patients of needed documents both clinical and non-clinical.
  - For new patients gathers appropriate documentation as available (i.e. medical record from previous PCP, Discharge/ER notes from hospitals).

- Prepare Information and Participate in Team Huddles:
  - Review provider’s schedules and compile list of patients to be reviewed at the huddle per protocol.
  - Print the i2i visit summaries for established patients identified above and scrub for gaps in care (i.e. immunizations, required lab work, paps and mammograms, colonoscopy).
  - If lab/diagnostic imaging or specialist referral (internal or external) is noted on the visit summary, obtain results if not in EMR.
  - Obtain reports if hospital admission or Emergency Department Follow-Up is indicated in the REASON section of the appointment screen.
  - Obtains documents from any other sources identified through the visit summary or by the care coordination team that will enhance the effectiveness of the visit.

- Enter data into i2iTracks per established protocols.

REFERRAL, DIAGNOSTIC IMAGING AND TRANSITION COORDINATION

Appropriate and timely scheduling and tracking of recommended diagnostic interventions is a
fundamental component of Care Coordination. The Care Coordinator-I has a vital role in the management of specialist referrals and diagnostic imaging ordered by the medical team.

**Internal and External Specialist Referrals**

**Specialist Appointments:**
- Schedule appointments with indicated specialist.
- Per referral guidelines, provide appropriate clinical information to specialists.

**Patient Contacts:**
- Notify patients of the details and expectations for the visit (date, time, if special instructions are indicated).
- Ensure complete and accurate registration, including patient demographic and current insurance information.
- In select cases, remind patients of scheduled appointments via mail or phone.

**Follow-up and Tracking:**
- Follow-up on no-show patients at the specialist’s practice.
- Ensure that referrals are addressed in a timely manner.
- Maintain ongoing tracking and appropriate documentation on referrals.

**Management of Provider Schedules:** *
- For designated providers, manage the appointment schedules completely to include scheduling of appointments, confirmation calls, follow-up for no shows.

**Prior Authorizations:**
- For designated providers, contact review organizations and insurance companies to ensure prior approval requirements are met. Present necessary medical information such as history, diagnosis and prognosis.

**POPULATION MANAGEMENT**

As necessary, in collaboration with the clinical and care coordination teams, utilizing multiple tools, including eCW, i2iTracks and insurance carrier gap lists, identifies patients in need of care and proactively contacts and schedules appointments for the Internal Medicine and Family Practice patients.

**GENERAL RESPONSIBILITIES**

- Involved in Department Performance Improvement Initiatives.
- Demonstrates excellence in both internal and external customer service.
- Understands and is able to effectively communicate HIPAA compliance, corporate
Ensures and/or remains in compliance with local, state, and federal regulations.

Adheres to the National Patient Safety Goals as defined by the Joint Commission on Accreditation of Healthcare Organizations and the Whitney M. Young Jr. Health Services.

Completes other duties as assigned.

**QUALIFICATIONS:**
Associates Degree and one year’s experience in a health care setting OR High School Graduate and five years’ experience in a health care setting.

**REPORTING/SUPERVISORY RELATIONSHIPS:**
Reports to: Director of Albany Medical Practice
Supervises: N/A
Classification: Non-Exempt

I have read the above job description and understand the roles and responsibilities associated with the position.

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A signed copy of this job description will be provided to human resources for the employee’s personnel file.

*NOTE: For Management of Provider Schedules Drs. Kaw, Kriss and Pradhan at 9/2012.*