

Workers Compensation RN Field Case Manager Registered Nurse Greenville, NC

AETNA

Raleigh, NC 27614

Click: [Apply Now](#)

JOIN OUR GROWING TEAM

Are you tired of bedside nursing?

Are you looking to get away from 12-hour hospital shifts while continuing to utilize your RN expertise to impact the lives of patients in your local community?

We are seeking self-motivated, energetic, detail oriented, highly organized, tech-savvy Registered Nurses to join our Workers' Compensation Field Case Management team. This opportunity offers a competitive salary, full benefits, and a performance-based bonus paid out on a monthly or quarterly basis. Our organization promotes autonomy through a Monday-Friday working schedule, paid holidays, and flexibility as you coordinate the care of your members.

TERRITORY GREENVILLE, NC and surrounding areas up to a 2 hours drive.

The Case Manager uses a collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs through communication and available resources to promote quality, cost effective outcomes.

All employees are expected to embody our values of Excellence, Integrity, Caring and Inspiration in all that they do as an employee. The overall responsibility of the Field Case Manager is to ensure the injured worker receives the best possible care in a timely and efficient manner towards full rehabilitation and return to work. Please note that we do offer mileage reimbursement for local travel.

As a Workers' Compensation Field Case Manager, you will be offered:

- Autonomy
- Productivity incentives
- Monday-Friday schedule
- Reimbursement for mileage, tolls, parking, licensure and certification
- Laptop, iPhone & printer/fax/scanner all in one.

All major holidays are paid time off, vacation and sick time off is accrued. Full benefits offered including 401(k) and many corporate discounts available. Employees are reimbursed for fees to maintain licensure as well as free CEU's to maintain licensure. Continuing Education credits are available/provided for RN and a various industry certifications too. Work from home with in-state travel. In addition to annual salary, position has potential for a monthly monetary bonus.

Benefit eligibility may vary by position. Review the benefits associated with this position.

68420

Fundamental Components:

Acts as a liaison with member/client /family, employer, provider(s), insurance companies, and healthcare personnel as appropriate. Implements and coordinates all case management activities relating to catastrophic cases and chronically ill members/clients across the continuum of care that can include consultant referrals, home care visits, the use of community resources, and alternative levels of care. Interacts with members/clients telephonically or in person. May be required to meet with members/clients in their homes, work-sites, or physician's office to provide ongoing case management services. Assesses and analyzes injured, acute, or chronically ill members/clients medical and/or vocational status; develops a plan of care to facilitate the member/client's appropriate condition management to optimize wellness and medical outcomes, aid timely return to work or optimal functioning, and determination of eligibility for benefits as appropriate. Communicates with member/client and other stakeholders as appropriate (e.g., medical providers, attorneys, employers and insurance carriers) telephonically or in person. Prepares all required documentation of case work activities as appropriate. Interacts and consults with internal multidisciplinary team as indicated to help member/client maximize best health outcomes. May make outreach to treating physician or specialists concerning course of care and treatment as appropriate. Provides educational and prevention information for best medical outcomes. Applies all laws and regulations that apply to the provision of rehabilitation services; applies all special instructions required by individual insurance carriers and referral sources. Testifies as required to substantiate any relevant case work or reports. Conducts an evaluation of members/clients' needs and benefit plan eligibility and facilitates integrative functions using clinical tools and information/data. Utilizes case management processes in compliance with regulatory and company policies and procedures. Facilitates appropriate condition management, optimize overall wellness and medical outcomes, appropriate and timely return to baseline, and optimal function or return to work. Develops a proactive course of action to address issues presented to enhance the short and long-term outcomes, as well as opportunities to enhance a member's/client's overall wellness through integration. Monitors member/client progress toward desired outcomes through assessment and

evaluation.

Background Experience:

5 years clinical practice experience (required for NCM role only). (Neuro, Ortho, Rehab, Occupational)
3 years case management experience preferred
Effective computer skills including navigating multiple systems and keyboarding
Job-specific technical knowledge, (e.g., knowledge of workers compensation and disability industry for workers' compensation case managers or case management).
Ability to travel within a designated geographic area for in-person case management activities
Excellent analytical and problem solving skills
Bilingual preferred Spanish
Proficiency with standard corporate software applications, including MS Word, Excel, Outlook and PowerPoint, as well as some special proprietary applications.
Ability to work independently (may require working from home).
Knowledge of laws and regulations governing delivery of rehabilitation services.
Effective communications, organizational, and interpersonal skills.

CERTIFICATION

Additional national professional certification (CRC, CDMS, CRRN, COHN, or CCM) is preferred, but not required. Certified Case Manager is preferred.

LICENSE

Registered Nurse with active NC state license in good standing in the state where job duties are performed is required

EDUCATION

Bachelor degree in a closely-related field, or an equivalent combination of formal education and recent, related experience; preference will be given to applicants with a Master's degree

Additional Job Information:

Case Manager works independently both in the home office environment as well as traveling in the field and making visits. The Case Manager sets their own schedule and works independently to reach the goals and the objectives set forth for the job and caseload. Other field Case Managers and the Manager are available for assistance and provide some team work to the position. This is a fast paced environment where the Case Manager can make a difference and each day has new challenges

Required Skills:

Service - Case Administration

Desired Skills:

General Business - Communicating for Impact, Service - Case Administration

Education:

Nursing - Certified Case Manager (CCM), Nursing - Certified Disability Management Specialist (CDMS), Nursing - Certified Occupational Health Nurse, Nursing - CRRN - Certified Rehabilitation Registered, Nursing - Registered Nurse

Potential Telework Position:

Yes

Percent of Travel Required:

50 - 75%

EEO Statement:

Aetna is an Equal Opportunity, Affirmative Action Employer

Benefit Eligibility:

Benefit eligibility may vary by position.