

## Noël Nelson, RN, CCM

### Summary

An accomplished Registered Nurse with many years of clinical and managerial experience with an extensive background in a variety of care settings; including Case Management, NICU, pediatric ICU, Acute Rehabilitation and oncology. I have demonstrated success in managing people and challenging cases with competence, compassion, and a calm demeanor, while adhering to standardized care guidelines. Technically savvy with a passion for collaboration and continuous improvement of processes to ensure positive outcomes for patients and providers.

### Professional Experience

March 2018 – June 2020

Prominence Health Plan

Reno, Nevada

#### **Clinical Manager, Health Services**

Manage fourteen employees, both clinical and non-clinical staff.

Developed policies and procedures for the Medicare Advantage UM product.

Launched the Inpatient UM process. Reviewing and managing length of stay for inpatient, skilled nursing facility, Acute Rehabilitation and Long Term Acute Care admissions. Review and determine the appropriate level of care and submit records to the Medical Director for review for possible denials when medical necessity criteria is not met.

Developed site of care initiative, working with surgeons and Ambulatory Surgery Centers to decrease outpatient hospital utilization. To incentivize members, the benefit structure was adjusted to a zero copay for ASC, while the outpatient hospital copay remained the same.

Participated in the Centers for Medicare and Medicaid Services Utilization Management audit. Developed corrective action plans when necessary as well as providing rebuttals for findings.

Oriented and trained new employees hired for the Medicare Advantage UM program. Support the Transitional Care Nurses with regards to discharge planning. Work collaboratively with the Care Coordination team ensuring the needs of our members are met.

January 2015 – June 2017

Dignity Health – Sequoia Hospital

Redwood City, California

### **Director, Care Coordination**

Managing 18 employees in Care Coordination.

Ensuring compliance with CMS regulatory requirements to avoid improper billing, so that Dignity Health remains in compliance with their Corporate Integrity Agreement.

Develop competencies specific to roles in Care Coordination to standardize processes across Dignity Health.

Prepared for and participated in The Joint Commission Accreditation Survey in 2016.

Ensure that the discharge planning program is in compliance with CMS Conditions of Participation.

December 2012- November 2013

Mills-Peninsula Health Services

Burlingame, California

### **Interim Director of Case Management**

Managing 25 employees in Case Management, Clinical Documentation Improvement and Palliative Care.

Ensured departmental compliance with CMS Conditions of Participation and The Joint Commission. Brought the department through accreditation with The Joint Commission in January 2013.

Involved in multiple committees: Magnet™, Nursing Management Council, Utilization Management Committee, Kaizen Lean Implementation, Transitions of Care with readmission review, Patient Flow Committee, Voice of the Patient, CHF Core Measures, and Orders/Class Reconciliation.

Work collaboratively with the Medical Director to ensure the patient is in the right place at the right time thereby decreasing length of stay.

May 2012- September 2012

WellPoint/Anthem Blue Cross

Newbury Park, California

### **Case Manager**

Performed Case Management services for the Aged, Blind and Disabled population with WellPoint's State Sponsored Business.

May 2010- May 2012

Mills-Peninsula Health Services

Burlingame, California

### **Case Manager**

Performs discharge planning for patients admitted to the Hematology/Oncology unit.

Ensures appropriate referrals to Social Work, community resources and state or county programs.

Utilize InterQual® criteria to determine the level of care and length of stay.

Works with the attending physicians to ensure timely transition to the appropriate level of care.

Involved with the CMTI project (Case Management Transformation Initiative), which involved re-organizing the Case Management department and re-writing job descriptions.

November 2009-May 2011  
Kaiser Permanente  
**Patient Care Coordinator**

San Francisco, California

Performs discharge planning for Maternal Child Health; this includes Pediatrics, Neonatal Intensive Care, Labor and Delivery, Antepartum and Postpartum units.

Utilize InterQual® criteria to determine the level of care and length of stay.

Work closely with the Hospital Based physicians to facilitate timely transition to the appropriate level of care.

Ensure that referrals are made to community, state or federal programs, i.e.: Medi-Cal, CCS, Regional Centers, and/or Healthy Families.

September 2003 – November 2009  
Alere®

Upper Saddle River, New Jersey

### **Care Support Manager**

Supervisor for 8-10 FT RN Complex Care Managers and Catastrophic Care Managers who managed cases across the entire lifespan, for patients who are chronically ill or have multiple, end-stage co-morbidities

Provide clinical direction and performance management for Care Managers

Review Complex and Catastrophic cases with Medical Directors to ensure appropriate levels of care and effective symptom management

Interface with Blue Shield of California and various IPAs and Medical Groups to ensure cost effective and quality assured utilization of services

Provide Blue Shield of California with in-patient reviews utilizing InterQual® criteria to ensure medical necessity for levels of care

1999 - 2003  
Pacific Partners Management Services  
**Utilization Management Nurse**

Foster City, CA

Performed utilization review for multiple facilities  
Provided utilization reports to health plans  
Managed Transplant and Quality Assurance Programs

### **Education**

Associate of Science in Nursing: City College of San Francisco  
Master of Science in Nursing: Walden University

### **Computer Skills**

Microsoft Products: Windows, Word, PowerPoint, Publisher, Excel, Outlook. Other platforms: EPIC, Cerner, Midas/IQ, Milliman

### **Licensure and Professional Memberships**

Registered Nurse California # 398194  
Registered Nurse Nevada # RN93096  
Certified Case Manager #000083627  
Previous Co-Chair on the ACMA Health Policy Committee  
Member CMSA  
Lean Six Sigma Green Belt