Exploring nurse case manager practice

As healthcare delivery evolves, the case manager role expands.

By Anne Llewellyn, MS, BHSA, RN-BC, CCM, CRRN

According to surveys conducted by the Healthcare Access and Quality Index and the World Health Organization, the United States ranks consistently lower than other countries in many health outcomes measures. Quality and cost gaps are increasing in many key areas, and lack of access to services and resources limits the ability to use traditional healthcare delivery and payer systems. Case management is seen as a solution to address these issues.

The Case Management Society of America (CMSA) defines case management as a collaborative process of assessing, planning, facilitating, coordinating, evaluating, and advocating for options and services to meet an individual’s and family’s comprehensive health needs and promoting patient safety, care quality, and cost-effective outcomes. Case management offers a variety of career opportunities for nurses.

What case managers do

As political and healthcare leaders struggle to address healthcare challenges, nurse case managers work to:
- improve care delivery within a broad healthcare system
- collaborate with the healthcare team to identify, address, and break down barriers that interfere in care progress and negatively affect outcomes
- coordinate care and safe transitions to appropriate, cost-effective levels of care
- develop patient-centric care plans to meet individual and family needs
- proactively follow up with and re-evaluate individ-

Fast facts

Consider these facts gleaned from the 2018 Case Management Salary & Trends Survey as you think about whether case management is the right career move for you:

- Most case managers (71%) hold a bachelor’s, master’s, or doctoral degree.
- Well over half (65%) of case managers earn $70,000 or more per year, with nearly one-fifth (18%) of those case managers earning at least $100,000 annually.
- Many case managers (31%) work in acute care hospitals, 27% in managed care/group health, and 11% in managed care/workers’ comp.
- 92% are pleased with their role.
uals and families to ensure the care plan’s effectiveness
- educate and empower individuals and families about diseases, health conditions, and needed care measures to reduce unnecessary complications
- gain patient buy-in and locate resources to meet individual and family needs.

Nursing opportunities
Case management is a multidisciplinary practice, but according to a 2018 Case Management Salary & Trends Survey, most case managers are nurses. Nurses are well suited to this role because case management functions closely follow the nursing process—assess, plan, implement, and evaluate. Case management broadens this framework and incorporates additional components, such as identifying and screening individuals at risk for medical, behavioral, and social issues and ensuring access to safe, quality, cost-effective healthcare services at the right time in the least restrictive setting.

As case managers, nurses have an opportunity to move beyond the bedside and influence care decisions to ensure they meet individual patient needs. Nurses work with the healthcare team to recognize challenges, create plans to overcome barriers, offer resources and tools, and advocate for patients and families. They also educate and empower patients to be active participants in their own healthcare, and they take a holistic view that encompasses behavioral challenges that impact individual patient health.

Nurse case managers are viewed by providers and payers as key influencers on behalf of those at risk as a result of complex medical and behavioral health issues. They work closely with patients and the healthcare team to improve care coordination and to identify resources to meet individual patients’ needs as they transition across the care continuum. As the United States moves to a healthcare system where providers and organizations are reimbursed for quality (value) versus quantity, nurse case managers are viewed as indispensable members of the healthcare team. They seek increased quality and value of care in every sector of the healthcare system, and as healthcare transitions to providing more care outside of traditional-based settings, case management will follow. (See Fast facts.)

Becoming a nurse case manager
Breaking into the case management field can be challenging. Few formal training programs currently exist, although as the practice matures, schools are adding case management as a focus for master’s of nursing programs. If you choose to pursue the career through formal education, look for programs taught by case management leaders. However, also keep in mind that most nurses learn on the job. National organizations such as CMSA and the American Nurses Association provide networking opportunities for nurses to learn more about case management at the local and national level.

Case management standards of practice, developed by CMSA, guide those entering the field, helping them learn about the role, function, and scope of practice. National certifications are available and provide nurses an opportunity to demonstrate their competence to employers, patients and families, and the healthcare profession. (See Resources.)

Moving beyond the bedside
Case management is a fulfilling career for nurses who want to maintain patient contact as they move beyond bedside care. It offers opportunities to work as a patient and family advocate and positively influence care outcomes. (Visit americannursetoday.com/?p=58286 to read stories from two nurse case managers.)

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Case managers share their stories

To help you better understand the role nurses play in case management, two nurse case managers explain their roles as American Nurses Credentialing Center board-certified nurse case managers.

Elaine A. Bruner, MSN, RN-BC
My transition to acute care [hospital] case management evolved from my position as a home health agency liaison. I had wanted to explore case management to employ my graduate work and extensive knowledge of community resources. In 1993, I began my case management career in a community hospital, where my orientation was on-the-job and shadowing an experienced staff member. Fast forward 10 years: I am the senior case manager in a medical-cardiac intensive care unit with a caseload of 38 beds. When asked what this job entails, I summarize it in three phrases: case coordination, resource utilization, and financial management. The case management role supports cost-effective outcomes through transitions of care [TOC] that are appropriate, safe, and in the least-restrictive setting. Some may recognize this process and call it discharge planning, but TOC encompasses a global perspective of the patient's needs.

To execute an appropriate transition, you must be knowledgeable about the resources needed to meet patient and family needs as well as the extensive collaboration with the interdisciplinary team. These resources may extend beyond the local community. For example, I experienced an influx of post-acute providers, medical equipment vendors, and home health agencies after Hurricane Katrina in 2005. Due to the hospital's location and its status as a level I trauma center, my caseload was 50% uninsured or underinsured. The financial management aspect included not only communicating with health plans to authorize continued services but also connecting uninsured patients to possible funding sources such as Medicaid.

Case management is a value-added position vs. an expense to a hospital. The case manager supports cost-effective outcomes through patient-centered care, including decreasing readmissions. In addition, the case manager is a “systems thinker” who offers a broad perspective across the healthcare continuum. And due to the dynamic nature of healthcare delivery, our knowledge of legislation, technology, and the evolving healthcare redesign is invaluable to our employer.

I would encourage nurses who are invested in lifelong learning, want to be an “influencer” in healthcare delivery, and want to be an advocate for patients/families/caregivers to consider the acute care nurse case manager role.

Elaine A. Bruner has over 15 years of case management experience with roles in acute and ambulatory care. She’s the 2008 Award of Service Excellence recipient from the Case Management Society of America. You can contact Elaine at Millereli2@aol.com.

Carol King, MSN, RN-BC
Case managers are born, not made. While that is indeed the case concerning the heart and soul of a true case manager, the path to case management has traditionally been a long and winding road. I took my first managed care organization [MCO] position in 1995 as a utilization review [UR] RN. At that time, I had close to 19 years of nursing experience in obstetrics, home health, and inpatient psych. I completed a master’s of nursing program in 1994; the MCO role was my move out of a hands-on caregiving role. I far preferred the case manager role over UR and was soon providing telephonic case management services to transplant candidates. I loved the advocacy aspect and have fond memories of individuals who passed through my case load.

I would say all my positions have been on-the-job training with mentoring provided by fellow case managers. Working with a skilled case manager is an amazing experience; it’s humbling, and the learning curve can be daunting. By now I’ve had my share of being a mentor too, and I enjoy sharing my love of case management with others. Along the way I know I’ve helped many patients and families survive an increasingly dysfunctional healthcare system. These were win-win scenarios—I helped them survive and thrive, they helped me realize how much I have to give.

Over the years, I’ve provided telephonic case management services on the payer side for MCOs, third-party administrators, and most recently, to veterans through a VA-contracted organization. Along the way, I’ve worked as a case manager in acute care and subacute and acute care rehab settings. Lots of different jobs, lots of new experiences and challenges, which totally suits my personality. If my hair is not on fire, I am not happy. I retired from full-time employment January 2019, and I’m still finding my way through this time of transition. I am currently teaching an online case management exam prep course and plan to provide patient advocacy services with a small group of patient advocates in the Phoenix area.

In the past 10 years, I have been active in my professional organization, Case Management Society of America. I had the privilege of serving on the national board and currently serve on the board of my local Phoenix chapter. It’s been personally rewarding, and my current career opportunities have all stemmed from my commitment to this organization and the amazing case managers I’ve met along the way. I love case management and highly recommend it as a nursing specialty.

Carol King is an experienced case manager living in Arizona.