



REFERRAL COORDINATOR JOB ANNOUNCEMENT

Santa Cruz Community Health (SCCH) is a multi-site, Federally Qualified Health Center (FQHC) serving Santa Cruz County residents. SCCH began as a women's health collective in 1974 with the mission to improve the health of our patients and the community and advocate the feminist goals of social, political, and economic equality. Now, nearly 50 years later, we serve that same mission at our three clinic sites: the Santa Cruz Women's Health Center in downtown Santa Cruz serving women and children; the Live Oak Health Center serving everyone; and the Santa Cruz Mountain Health Center providing appropriate and expanded access to care for our patients in the San Lorenzo Valley.

Driven by our commitment to health care as a human right, SCCH is a leading non-profit provider offering comprehensive health services to our patients, regardless of their ability to pay. We have been recognized in the community as a leader in delivering high-quality, innovative care, and we are active in local, state, and national advocacy work that empowers our patients and community to be healthy, happy, and successful.

SCCH has a diverse patient population and an engaging and friendly work environment. Our caring and committed staff works as a team to fulfill our mission so that all our patients have access to quality, whole-person health care.

POSITION SUMMARY:

The Referral Coordinator (RC) serves as a day-to-day resource for the medical team for the facilitation of specialty referrals for SCCH patients. The RC works as an educator, health care resource, patient advocate and ensures patient care is coordinated and managed appropriately. The RC works with the medical team liaison to improve health outcomes of patients by processing referrals to specialty care providers, maintaining up to date lists for specialists and develops relationships with outside specialty offices. RC will communicate and document coordination of care with patients and keep PCP informed of any barriers that can interfere with quality care. RC ensures specialty referrals reports are received by patient PCP, all in support of the Patient Centered Medical Home (PCMH) model. The RC will track all referrals in patients' electronic health record and work closely and proactively with clinical staff to ensure patients referrals are effectively managed from start to finish. The RC ensures that specialty referrals are a positive experience for all SCCH patients and adheres to clinical policies. The RC is an exemplary model, for both staff and patients, of professionalism, respect, customer service, compassion, and the values of equity and inclusion as expressed by our organization's mission.

Classification: Full-Time, Hourly, Non-Exempt
Reports to: Clinic Manager, Site Operations Director
Hours: Varies; Days, Evenings, and Possible Saturday Shifts

Location: Clinic, In-Person
Pay Range: \$26.00 – \$30.90 per hour, DOE
Language Requirement: None; Bilingual English/Spanish Preferred



BENEFITS:

Our benefits package is available to staff working at least 20 hours per week. Paid time off and paid holidays accrue from date of hire. Employer subsidized group health, dental, vision and life insurance plans the first of the month after 30 days of employment. Automatic 2% enrollment in an Employer sponsored 401K plan with a 2% retirement match.

CORE JOB RESPONSIBILITIES :

ESSENTIAL FUNCTIONS INCLUDE BUT ARE NOT LIMITED TO:

REFERRAL WORKFLOWS :

- Receives referrals, completes medical prior authorization, scheduling, tracking and follow-up, and responds to medical team that referral has been received and will be addressed in timely manner per SCCH policies.
- Makes urgent/stat specialty appointments for patients.
- Ensures that patients have all necessary information for their specialty referral.
- Faxes and/or sends medical records to various specialist offices for processing and confirms receipt.
- Obtains outstanding consult notes from specialist offices in a timely manner, or as needed as requested by the provider, includes accessing records from provider portals.
- Tracks outstanding referrals in EHR.
- Identifies, tracks, and resolves on-going problems with the authorization process.
- Supports Team Based Care with regular, ongoing communication with medical team about outstanding referrals for each Care Team.
- Completes and closes all assigned referrals assigned to the Referral department and works as a team to assist other referral specialists as needed.
- Supports and assists with standardization of organizational policies.
- Participates in the design and implementation of new workflows.
- Works on special projects as assigned by Operations Department.
- Ensures protection of individually identifiable health information per HIPAA regulations.
- Trains clinical support staff as needed regarding referral processes and workflows

PATIENT INTERACTIONS & SUPPORT:

- Ensures patient is aware of referral information, appointment, preparation, serves as patient advocator and resource as needed.
- Reviews details and expectations about referral with patients.
- Provides regular updates to all involved with individual referrals – patient, and/or patient parent/guardian, etc.
- Serves as system navigator and single point of contact for patients (including patients' parents/guardians) regarding their specialty referrals.
- Provides all necessary and appropriate documentation on open referrals to ensure patient centered care and quality outcomes.
- Assumes an advocate role on the patient's behalf with insurance carrier to ensure approval of



necessary supplies/services for the patient in a timely fashion.

- Identifies and utilizes cultural and community resources on behalf of patients.

INTERNAL RELATIONSHIPS & COMMUNICATION:

- Reports on all outstanding referrals to direct supervisor at regular time intervals, as specified by supervisor.
- Collaborates with QI (Quality Improvement) department to develop and maintain tracking systems.
- Maintains ongoing tracking and appropriate documentation on referrals to promote team awareness and ensure patient service and safety.
- Participates in Access to Care meetings and reports to Medical Assistant Manager and/or Site Operations Director on issues of concern related to this program or to specialty access overall.
- Supports process standardization and improvement activities through use of evidence-based systems' change practices (e.g., PDSA cycles), working with QI department and organization leadership.
- Attends and/or prepares for meetings, participates in organization committees; supports and participates in staff training.
- Demonstrates responsibility and accountability for our practice.
- Able to work independently and anticipate patient and clinic needs.
- Share knowledge in a constructive manner.
- Seeks to improve skills and knowledge and meet job related goals.
- Other administrative duties and tasks as assigned by supervisor and/or manager.

EXTERNAL RELATIONSHIPS & COMMUNICATION:

- Establishes and maintains relationships with community specialty providers and their office staff.
- Works as a liaison between SCCH and outside health centers and individual provider offices.
- Efficiently obtains patient consult notes and reports from specialist offices.

QUALIFICATIONS:

MINIMUM QUALIFICATIONS

- Two years' experience in a healthcare setting
- High School Diploma
- Able to read and write consistent with job requirements, cognitive skills as related to the position
- Proficient interpersonal relations and communication skills
- Experience working in a highly service-oriented environment in which metrics and measurement tools are leveraged to achieve and assess results
- Experience working with multiple healthcare service lines

PREFERRED QUALIFICATIONS:

- Bilingual in English and Spanish
- Experience working with under-resourced populations



- Training and/or certification as a Medical Assistant
- Knowledge of standard healthcare practice policies and procedures
- Knowledge of Microsoft Office software products
- Ability to work with practice management and EMR systems
- Knowledge of health insurance plans
- Knowledge of healthcare terminology, procedures, and practice
- Knowledge of HIPAA regulations

SANTA CRUZ COMMUNITY HEALTH IS AN EQUAL OPPORTUNITY EMPLOYER (W/M/V/D)