# Mayra Medrano

#### Registered Nurse/Case Manager

Westlake Village, CA 91362 mayramedranorn@gmail.com +1 310 904 2528

- To independently utilize the nursing process to safely, therapeutically, and efficiently care for a group of patients based on policies and procedures.
- To deliver individualized quality patient care through a coordinated team approach with physicians, staff, other departments and the patient's family.
- To comply with the California Standards of Nursing Practice.

Willing to relocate: Anywhere

### Work Experience

### **Utilization Management/Nurse Case Manager**

Change Health Care

November 2019 to Present

Perform concurrent reviews of inpatient requests

- Determine if patient treatment is consistent with the overall symptoms and diagnoses
- Create detailed patient status reports and evaluate findings
- Utilize CMS, NCD/LCD, and HP guidelines for proper and timely determinations
- Utilize various EHR and UM programs systems including but not limited to Cerner, E-Z cap, Quick cap, and Meditech
- Develop treatment and discharge plans that include patient and facility expectancies
- Collaborate with clinical staff and discharge planning team to coordinate patient care
- Communicate pre-arranged discharge plans to facilitate optimal treatment
- Identify potential care management beneficiaries and provide referrals
- Collaborate with Medical Director to review and issue denials
- Collaborate with hospital case management staff to manage patient care
- Collaborate with participating health plans to coordinate both inpatient and post discharge care

#### **Utilization Management Nurse**

Clinicas del Camino Real Inc May 2019 to November 2019

Conduct medical necessity reviews on incoming Pre-Service/Prior-Authorization, Retrospective and Post Claims reviews on Urgent/Expedited and Routine/Standard referrals/authorizations requests in compliance with any Federal, State, Health Plan, Accreditation (URAC, NCQA) requirements.

- Request the pertinent clinical records to make a sound determination and follows the standard outreach attempts (3 attempts on different dates and times) and methods (at least two methods, oral or written) set by the Federal, State, Health Plan and Accreditation standards.
- Document on the Medical Management System in a timely manner, all supporting clinical information, outreach attempts (if applicable) and criteria used to make a determination.
- Taking into account the member's eligibility, benefits and network before making any determination.
- Gather and submit all requests that do not meet medical necessity criteria/guidelines to the UM

Medical Director for second level review and determination.

- Ensure that all notification (oral or written) standards are met are in line with the Federal, State, Health Plan, and Accreditation standards. Member letter should be in lay prudent person's language (6th grade level) and would include the necessary appeal rights on denial notifications.
- Identify and refer any potential quality of care or care delay issues to both the Medical Director and the Quality department as appropriate.

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- Monitor, track, and report any trending inappropriate referrals/authorization to the UM Medical Director and/or the UM Manager.
- Ensure that all Out of Network (OON) services are steered to the network providers if access to care is available. Any OON request should be reviewed and approved by the UM Medical Director and has corresponding Letter of Agreement (LOA) or Special Pricing Agreement (SPA) in place.
- Appropriately utilizes contracted providers, vendors, facilities based upon contractual requirements noted on the Division of Financial Responsibility and risk arrangements with the members Health Plan.
- Demonstrate appropriate use, interpretation and documentation of clinical criteria in the review process such as National Coverage Determination (NCD), Local Coverage Articles (LCA), Local Coverage Determination (LCD), California Coverage Determinations, Health Plan Medical Coverage Policies, MCG, NCCN etc.

#### **Registered Nurse/Supervisor**

Moorpark Family Medical Clinic August 2013 to September 2018

Manage staff of 7 medical assistants, 1 LVN, and 1 phlebotomist during daily patient care procedures and physician's schedule

- Manage daily nursing schedule
- Manage clinic pharmacy (perform inventory and proper storage of all supplies and medications including state funded vaccines)
- Perform and manage monthly clinic safety and compliance audits
- Manage clinic CHDP/VFC vaccination and fluoride program for children
- Perform patient phone triages
- Collaborate with physicians and other clinic staff in coordinating safe and appropriate patient care
- Perform translation Spanish/English for physicians and other non-bilingual staff

#### **Full Time Registered Nurse/Physician Substitute**

Grifols (Biomat USA)

December 2012 to August 2013

Completion of 150+ hours of individualized and specialized training with head physician at Frederick, Maryland Biomat location

- Responsible for determining donor suitability and ensuring donor safety and the safety of the plasma product
- Perform physical exams and focused assessments on incoming donors to determine plasma donor suitability
- Review a variety of medical conditions, medications, and assessment findings to ensure safety of the donor and plasma product

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- Respond to and manage adverse reactions on donor floor, treat patient per SOP guidelines including but not limited to:
- o Starting IV infusions
- o Administering IV saline bolus
- o Directing phlebotomy staff on continuation or discontinuation of plasmapheresis
- o Documentation of adverse event per company protocol
- o Follow up with center physician regarding donor suitability
- Assess and determine suitability of incoming lab results
- Counsel donors with reactive viral test results, including Hepatitis, HIV, and Syphilis
- Perform donor teaching regarding the plasmapheresis process, including possible adverse reactions
- Perform daily initial screening process for returning donors
- Oversee technicians performing donor screening process and address any questions or concerns regarding donor suitability
- Trained in FDA regulated Standard Operating Procedures
- Trained in overseeing specialty programs such as Anti-D and Hepatitis B antibody programs

#### **Full Time Registered Nurse**

Lindora Medical Weight Loss Clinic October 2012 to December 2012

Conduct patient bariatric counseling sessions, monitor and chart patient progress, consult prospective patients regarding program details and prices, administer B12/B-Complex IM injections, take and monitor blood pressures, record and monitor daily blood sugars, counsel patients regarding appetite suppressants, process sales transactions for product and programs services, perform clinic opening and closing procedures

Walter Reed Army Medical Center - Washington, DC June 2000 to July 2001

Conduct intake interviews for new patients, administer and score a series of memory, personality and intelligence testing

#### Education

#### **Associates Degree of Applied Science in Nursing**

San Antonio College School of Nursing - San Antonio, TX August 2010 to May 2012

#### **Diploma in Medical**

Bryman College - Gardena, CA June 2002 to February 2003

#### **Diploma**

Academy of Health Services - San Antonio, TX January 2000 to June 2000

#### **Diploma in Medical Specialist**

Academy of Health Services - San Antonio, TX October 1999 to January 2000

### **High School Diploma**

Gahr High School - Cerritos, CA September 1994 to June 1998

#### Skills

- Utilization Management
- · Case Management
- EMR Systems
- Triage
- Cerner
- Intake Experience
- Intake Experience
- Nursing

## Military Service

**Branch: United States Army** 

Rank: E-4

## Certifications and Licenses

### RN

## **BLS Certification**