



MARISOL VEGA

BSN, RN, CCM

Certified Case Manager with 7 years coordinating care for medically complex adults across acute, post-acute, and ambulatory settings. Skilled at building discharge plans that hold up at home, with a focus on reducing 30-day readmissions and closing gaps for patients with limited support. Comfortable working alongside hospitalists, social workers, and payer UM teams.

CONTACT INFORMATION

 (860) 412-7783

 marisol.vega@email.com

 Hartford, CT

KEY SKILLS

- Discharge planning and care transitions
- InterQual and MCG criteria
- Utilization review
- OASIS-D assessments
- Motivational interviewing
- Epic and Allscripts EMR
- Medicare, Medicaid, and commercial payer rules
- Heart failure and COPD care pathways
- Spanish (conversational)

PROFESSIONAL EXPERIENCE

2021 - Present

RN Case Manager | Riverbend Health System, Hartford, CT

- Carry a daily census of 18 to 22 patients on a 32-bed medical-surgical unit, leading rounds with the hospitalist team and flagging anticipated barriers to discharge by day two
- Cut 30-day readmissions on heart failure patients from 21.4% to 13.8% over four quarters by piloting a follow-up call workflow within 48 hours of discharge
- Coordinate SNF, home health, and DME placements; negotiate authorization with commercial payers and Medicaid MCOs when standard criteria are not met
- Mentor two newly hired case managers, including ride-alongs for community visits and walkthroughs of InterQual criteria

2019 - 2021

Case Manager | Connecticut Valley Home Health, West Hartford, CT

- Managed a panel of 60 to 75 home health patients across 4 zip codes, conducting telephonic and in-home assessments using OASIS-D
- Built individualized care plans for patients with CHF, COPD, and post-surgical wounds; coordinated PT, OT, and MSW visits within plan-of-care frequencies
- Reduced unplanned ER visits in the CHF cohort by roughly one-third over 9 months by adding daily weight logs and pharmacist medication reviews
- Liaised with primary care offices to resolve medication discrepancies, escalating 8 to 10 cases per week for prescriber review

2017 - 2019

Staff RN, Telemetry | St. Anselm Hospital, New Britain, CT

- Provided direct care to 5 to 6 cardiac patients per shift, including post-PCI and CABG recovery
- Served on the unit-based readmissions committee, contributing to a teach-back discharge script later adopted house-wide
- Precepted three new graduate nurses through 10-week orientation

EDUCATION

Bachelor of Science in Nursing, University of Connecticut, 2017

Certified Case Manager (CCM), Commission for Case Manager Certification, 2022

Registered Nurse, Connecticut License #RN-148293, active