



GREGORY HALVERSON

RN, MSN, ACM

Case management leader with 18 years of progressive experience across acute care, managed care, and ACO operations. Built and led teams of 25+ case managers and social workers, with accountability for length of stay, readmissions, and observation-to-inpatient conversion. MSN with informatics focus.

CONTACT INFORMATION

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 Albuquerque, NM 12345

EDUCATION

Master of Science in Nursing,
Informatics Focus, University of New
Mexico, 2014

Bachelor of Science in Nursing, New
Mexico State University, 2007

Registered Nurse (RN), New Mexico
Board of Nursing, License #RN-NM-
148293

Accredited Case Manager (ACM),
American Case Management
Association, 2013

Lean Six Sigma Green Belt, Institute
for Healthcare Improvement, 2018

KEY SKILLS

- Department leadership and budget ownership (\$3M+)
- Length of stay and throughput optimization
- Utilization review and MCG/InterQual criteria
- Readmission reduction and transitions of care
- Value-based care and ACO operations
- CMS shared savings and quality measure reporting
- Risk stratification and population health analytics
- Payer contract negotiation support

PROFESSIONAL EXPERIENCE

Director of Case Management | 2020 - Present

Sandia Mesa Medical Center, Albuquerque, NM

- Lead a department of 28 RN case managers, 9 social workers, and 4 utilization review specialists across a 412-bed acute care hospital
- Reduced average length of stay from 5.1 to 4.3 days over 30 months while holding readmission rate flat, contributing roughly \$4.2M in annualized capacity gains
- Restructured weekend coverage and added a discharge lounge, dropping after-3pm discharges from 62% to 41% of the daily total
- Own department budget of \$3.8M and present quarterly to the CFO and CMO on productivity, denial trends, and staffing
- Sit on the system's value-based care steering committee, representing case management in payer contract negotiations

Manager, Care Coordination | 2016 - 2020

Mountain West ACO, Santa Fe, NM

- Built a chronic care management program for 6,800 attributed Medicare lives from the ground up, hiring 12 staff and selecting the care management platform
- Hit Year 2 shared savings of \$7.6M against a \$4.1M target, with case management cited in the CMS audit narrative
- Designed risk stratification logic that the ACO still uses, segmenting patients into four tiers with matched touch frequencies
- Reported quarterly to the ACO board on quality measures, total cost of care, and patient experience

Lead RN Case Manager | 2012 - 2016

Cerros Verdes Regional Hospital, Las Cruces, NM

- Anchored case management coverage for a 24-bed ICU and 36-bed step-down unit
- Led the rollout of MCG criteria, training 19 staff and standing up weekly inter-rater reliability checks
- Cut commercial payer denials on observation stays by about 28% over the rollout year
- Co-chaired the hospital's throughput committee with the CMO

RN Case Manager | 2007 - 2012

Pecos Valley Hospital, Roswell, NM

- Covered medical-surgical and orthopedic units with a typical census of 20 patients

- Denial management and appeals strategy
- Epic and care management platform implementation
- Interdisciplinary team building and staff development
- Regulatory compliance (CMS Conditions of Participation, TJC)
- Served as Epic super-user during the 2010 implementation, building 30+ training scenarios for the case management team
- Recognized as Case Manager of the Year in 2011 by the regional ACMA chapter