

Community-Based Care Coordination Fact Sheet

Ten Facts Providers Need to Know about Community-Based Care Coordination

1. There is no cost to you or your patients for care coordination.
2. Care coordinators do not interfere with your patient care and are not a replacement for their own provider.
3. Care coordinators are registered nurses, nurse practitioners, physician assistants, or other qualified professionals who follow the care plans established by the patient's provider.
4. Care coordinators identify and work with patients who have multiple chronic conditions and who are at high risk for readmission and/or frequent use of the emergency department.
5. Community-based care coordination is provided to all providers and social service resources for patients identified.
6. Care coordinators have frequent contact with patients to check on individual needs relating to the quality of their health, care needs, and lifestyle issues.
7. Care coordinators find ways to "connect the dots" for patients with multiple providers and community resource needs.

Care coordinators:

- Help patients prepare for visits with providers
 - Ensure providers share information about patients in transitions of care
 - Proactively manage patient care needs, such as obtaining transportation and nutrition support
 - Monitor reminder systems for patients, such as taking medications, keeping scheduled appointments, obtaining applicable preventive care services, etc.
 - Provide patients and their family/caregivers health education and supplemental discharge instructions
 - Aid in medication reconciliation in transitions of care
 - Monitor physiological and psychological signs for needed interventions
 - Help patients or family members/caregivers maintain a personal health record
8. Care coordination empowers patients and their family/caregivers to be engaged as part of the Patient Care Team and to participate in shared decision making.
 9. The goal of community-based care coordination is to improve the quality, cost, and experience of care for patients, and to develop lasting self-management skills.
 10. Community-based care coordination is an important way to help providers succeed under advanced payment models, such as shared savings arrangements with an insurer.

Your care coordinator is: _____

Please contact him/her at: _____

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For support using the toolkit

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