Care Coordination

Elise Lamarra, Chief Operating Officer

elamarra@flcpartners.org ♦ 215.628.8964

Friends Life Care Partners





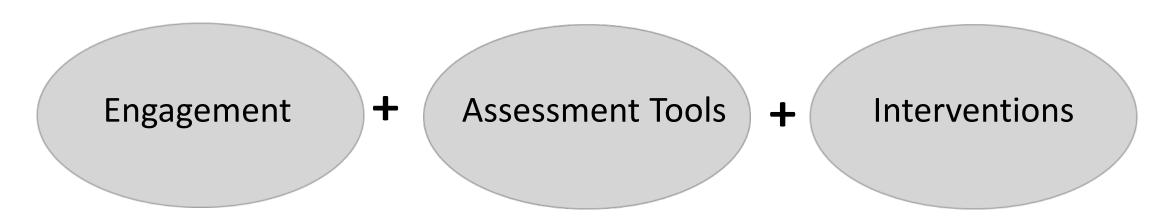
Friends Life Care: Operations

Care Coordination

Care Coordinators become the trusted partner of our members as they age.

They are coaches, educators, caretakers, surrogate family members, health care professionals and *gatekeepers*.

Friends Life Care: Care Coordination



Thriving in Place as they Age in Place

Friends Life Care: Operations

Care Coordination

- 1. Multi-disciplinary
- 2. Wellness, At Risk and Care Coordinators
- 3. Objectivity & consistency
- 4. Data tracking
- 5. Contact schedule
- 6. Highly personalized approach

Friends Life Care: Operations

Care Coordination

- 1. 12 assessment tools (combination of standardized tools and proprietary assessments developed by Friends Life Care)
- 2. FLC-CATS technology

Risk Stratification

Friends Life Care Membership

	NUMBER	PERCENTAGE
WELL	1,917	74.8%
AT RISK	494	19.2%
HOME CARE	120	4.7%
ASSISTED LIVING	21	0.8%
NURSING HOME	12	0.5%
TOTAL	2,564	100%

CARE COORDINATION

Wellness Initiatives

Wellness

Goal: Help members attain and maintain a state of health and well-being.

Wellness Initiatives





Vitality • Independence • Growth • Resilience

VigR® <u>IS</u> the difference

- 1. Proactive, research-based model designed to help members improve and extend their mental and physical health and resilience
- 2. Primary assessment tool: UMatter Wellness Assessment
- 3. Workshops
- 4. Webinars
- 5. Blog Articles
- 6. Meet a Member Series

Members at Risk

Goal: Prevent or delay change in functional status

- 1. Assessment to identify risk factors
- 2. Increased Care Coordination engagement and monitoring
- 3. Referrals to Community resources to mitigate risk

Members at Risk

Four Evidence Based Prevention Programs

Goal: Prevent or delay physical/cognitive/medical decline

- 1. Fall Risk Reduction Program
- 2. Cognitive Assessment/Memory Enhancement Program
- 3. Medication Management Program
- 4. Stroke Prevention Program

Fall Risk Reduction Program

- 1. Annually assess members beginning at the age of 70, using a specially designed tool
- 2. Coordinate physical and occupational therapy for in-home strength and balance training
- 3. Perform Home Safety Evaluations and arrange for environmental adaptations as necessary

Fall Risk Reduction Program (continued)

- 4. Screen and refer for assistance with Medication Management
- Install wireless sensor-based emergency response and activity monitoring system

CARE COORDINATION CCaH Providers Forum

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Members In Care

- 1. Goals
 - a. Provide quality care and oversight
 - b. Return to independence if possible
- 2. Assessments to determine type and amount of care needed
- Arrangements for care delivery
- 4. Payment for care up to limits established by member
- 5. Oversight of quality of care

FLC-CATS Database

- 1. Medical history
- 2. Medications
- 3. Environmental factors
- 4. Lifestyle factors
- 5. Care plans
- 6. Assessment tools
- 7. Member billing
- 8. Provider payment

Monitoring and Maintaining Quality

- 1. Service Provider Network Quality Credentialing
- 2. Member Satisfaction Surveys
- 3. Concern/complaint log and tracking
- 4. Direct feedback from members

CARE COORDINATION