# Title Slide: One Care Implementation Council Presentation

November 12, 2019

Improving care for people with disabilities and chronic health needs

Commonwealth Care Alliance

# Slide 1: Agenda

* Care coordinator role partnering with members
	+ Educate on each step of care planning
	+ Prioritize life, relational, and wellness goals
	+ Support navigating service request processes
	+ Enhance member comfort level directing care planning
* Decision process for non-medical transportation
	+ Care coordinator role supporting community living and engagement
	+ Aligning with and supporting member goals

# Slide 2: Care Coordinator as Partner

* Clinical advocate who invests in and prioritizes building and nurturing trusting, long-term relationships with members
* Collaborates with members and the interdisciplinary care team for ongoing care plan review and update, including with change of status or urgent need
* Ensures members’ full understanding of treatment options based on their individualized care plans, benefit options, and internal and external resources
* Gathers crucial insight into the social and environmental factors that impact members’ health and well-being, which is shared across the team
* Uses training and knowledge of CCA benefits and what services and supports may be approved based on individual needs
* Engages utilization management as part of the interdisciplinary care team to ensure individualized care plans are enrollee-directed, equitable, and include the appropriate balance of covered and expanded services

# Slide 3: Care Partner Role Through Service Request Process

**Note:** this slide illustrates the service request process by showing the steps of the process with arrows in between each step indicating the flow of the process. Underneath these steps are the Care Partner and Care Plan which are always a part of the process.

**Service Request** 🡪 **Authorization Review** 🡪 **Service Determination** 🡪 **Decision Communication**

Care Partner Visibility Throughout the Process

Each Step Informed by Individualized Care Plan