

Presbyterian Care Coordination FAQs



 **PRESBYTERIAN**
Health Plan, Inc.

1 What is care coordination?

Care coordination facilitates the integration of physical health, behavioral health and long-term care services into a seamless and coordinated system of care. It also assists providers with the coordination of care and services for their patients with acute and chronic health conditions.

2 How does care coordination benefit my patients?

Care coordination helps members manage their health in the least restrictive and most cost-effective setting to promote safe and healthy lifestyles.

3 How are providers involved in the member's care coordination?

Providers are an integrated part of the member's Interdisciplinary Care Planning Team (ICPT). Care coordinators collaborate with providers to meet the diverse and holistic needs of members across domains of healthcare.

4 What occurs as part of the care coordination process?

If a member wants to receive care coordination services, then they will complete a Health Risk Assessment (HRA) to identify their healthcare needs. Then the member will be assigned to a care coordinator who will complete a Comprehensive Needs Assessment (CNA) with the member to learn more about their health. Together, they will create a comprehensive care plan to work toward the member's health goals.

5 Can care coordination assist with medical transportation?

Yes, care coordination can assist with coordinating in-state and approved out-of-state medical transportation.

- In-state medical transportation can be arranged through Secure Medical Transportation or Mileage Reimbursement to and from medical appointments, as available
- Out-of-state medical transportation can be arranged through the Presbyterian Transportation team for approved medical appointments

6 How frequently do care coordinators have contact with Presbyterian members?

Care coordinators regularly conduct outreach to members depending on the complexity of their needs and whether the CNA identifies them as Level 2 or Level 3 members.

- Level 2 members are contacted at least once per quarter
- Level 3 members are contacted at least once per month

Members also can contact their care coordinators more frequently, as needed.

7 Who may be a good candidate for care coordination?

Members who meet one of the following criteria may be good candidates for care coordination:

- Have complex and chronic health conditions
- Require more education and support in managing their illness
- Experience social factors impeding their health outcomes
- Need help coordinating covered medically-necessary services on their plan
- Require assistance with their Activities of Daily Living (ADL)

8 How do I refer my patient to care coordination?

To refer your patient to care coordination, please complete the [Care Coordination Referral form](#) and send it to Presbyterian using one of the following methods:

- **Fax:** (505) 843-3150
- **Phone:** 1-866-672-1242 or (505) 923-8858
- **Email:** PHPreferral@phs.org

The [Care Coordination Referral form](#) can also be accessed by visiting www.phs.org/tools-resources/member/health-wellness-information/Pages/default.aspx.