

Introduction to Care Management

A care manager serves as a professional, personal advocate for a senior or disabled person while managing, rendering and referring various types of health and social care services for the person in order to:

- Meet long-term care needs;
- Improve quality of life; and
- Maintain the person's independence for as long as possible.

The care manager also serves as an experienced guide and resource for families of older adults or those with chronic diseases, coordinating health and psychological care with the most suitable combination of services such as housing, home care services, socialization programs, financial and legal planning.

Services begin with a comprehensive psycho-social assessment followed by a care plan tailored for an individual's specific circumstances. Based on the care manager's monitoring, the care plan is updated as necessary.

For whom are care management services appropriate?

- Adult children who live at a distance or are close by but would like assistance for an older family member;
- Older adults who have some current or predictable health issues and who wish to maintain independence living in their own home;
- A company whose employee is losing work time because of caregiving responsibilities;
- An attorney or trust officer who is managing the estate of an older adult;
- A physician who recommends in-home assistance or monitoring;
- A clergy who would like to arrange assistance for an older adult.



What sort of training is typical of a care manager?

The care manager is trained and experienced in any of several fields related to health and long-term care options, including, but not limited to:

- Nursing;
- Gerontology;
- Social work; or
- Psychology, with a specialized focus on issues related to aging and elder care.

How to benefit from using a care manager

Care management services are offered in a variety of settings. Care managers can serve the needs of their clients with the following services:

- Conduct care planning assessments to identify needs, problems and eligibility for assistance;
- Screen, arrange and monitor in-home help or other services;
- Serve as a valuable mediator between siblings or family members who cannot agree on the planning of care for their loved ones;
- Contain costs by avoiding inappropriate placements, duplication of services, and crisis intervention to avoid hospitalizations.
- Communicate and coordinate efforts across all medical and other care providers;
- In some instances,
 - Provide household and daily finance management and conservator or guardianship assistance;
 - Assist with moving an older person to or from a retirement complex, assisted care home, or nursing home;
 - Offer counseling and support.
- Liaison for families at a distance, reporting back with any adjustments in care or financial issues;
- Provide client and family education on management of diseases such as Alzheimer's, Parkinson's, MS, heart disease and diabetes;
- Provide information on costs, quality and availability of resources, and connect to specialists;

Payment

Payment for care management services is generally out of pocket, invoiced by the hour or by the project. Services are not covered by Medicaid, Medicare or by most private health insurance policies. However, some services may be billable to long-term care insurance.

To learn more about care management services, call **Continuum Care Management** today.

Sources: National Association of Professional Care Managers, Cress; Cathy Jo. Handbook of Care Management. Jones & Bartlett Publishers, 2010.