



What LifeSpan Does

Experts on Aging

- Support family/loved ones who are dealing with chronic illness
 - Start with in-home evaluation/record review & construct Plan of Care ("life plan") to address issues/problems that are noted or likely to occur.
 - Medication review (most elderly people are overmedicated. This leads to lower quality of life/falls/hospitalizations (there is a 10% chance of an adverse drug event in the elderly population for each medication that they are prescribing/taking on a regular basis!))
 - Advise caregiver as to ways to take care of self, and be available to them to coach/support them as the Plan of Care unfolds
- Advocate for acutely ill/injured clients in hospital, rehab or nursing home settings
 - Starts with initial evaluation at bedside
 - Includes care coordination
 - Handling care transitions (70% of the events that lead to patient injury are the result of poor transitions/handoffs between care sites/providers)
 - Advocate for patient to insurance carrier, including insurance appeals for denial of care
- Partner with Elder and Estate Attorneys to predict future care needs, risk management, access to entitlements (e.g., Medicaid, Veterans Benefits)
- Care Coordination
 - Refer/Recommend facilities and providers, and assist in negotiating the cost of post-acute care (subacute rehab), nursing home/skilled care facilities, home health agencies
 - Recommend ancillary providers: specialty physicians, medical equipment providers, contractors for home modification, daily money managers, certified senior real estate providers, senior move-management specialists, etc.

LifeSpan Care Management, LLC

Health Coordination & Advocacy

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- Communicate between health providers and families
- Obtain/review and share medical records as appropriate to the Plan of Care needs
- Assessment of dementia to sort out issues related to the need for guardianship
 - Assist in finding physicians to determine dementia and the documentation to support such a finding
 - Work with guardians and temporary court appointed guardians regarding care coordination and carrying out the Plan of Care
- Assist clients to “Age In Place” by setting up technology enabled in-home monitoring of blood pressure, body weight, etc., and medication adherence
- Research and make recommendations for alternative care providers, where requested and appropriate, e.g., cranial-sacral therapy, chiropractic, Energy Medicine, EFT/Emotional Freedom Technique Consult as expert witnesses to malpractice and personal injury attorneys regarding breaches in the standard of care rendered, determinations of negligence for nursing care, future costs of care that will support a Life Care Plan.
- Provide professional training to Registered Nurses and Medical Case Managers upon request

Catastrophic Illness, and the Care of Children

- Assessment of the treatment plan: appropriateness, costs, efficacy
- Advocacy for client and family: attend doctor appointments, care conferences, interface with social workers, medical records professionals, attorneys.
- Coordinate care: assure that appointments are made at client’s convenience, make sure records are available for physician review, facilitate communication among health providers and family members, arrange for transportation
- Manage out-of-pocket costs: negotiate prices, arrange for benefits approval
- Quality-control: make sure services of various providers meets the client’s needs and the standard of care
- Insurance appeals: evaluate likelihood of a successful appeal, draft documents to advocate for client, obtain letters of medical necessity by doctors, support attorney efforts in legal hearings, act as an expert witness in appeal hearings.

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