

## APPENDIX F. EXAMPLES OF COMMUNITY-BASED CARE TRANSITION PROGRAM WITH LTPAC/LTSS PARTICIPATION

**TABLE F-1. Examples of Community-Based Care Transition Programs with LTPAC or LTSS Participation**

ACO	Service Area	LTPAC/LTSS Provider Type
Aging & Long-Term Care of Eastern Washington	Eastern Washington	In-Home Services
Southeast Washington Aging & Long-Term Care	Southeast Washington	In-Home Care, ADC, HCRR
Eddy Visiting Nurse Association	Upstate New York	HHA
Advanced Care Transitions (ACT)	Marin County, California	Long-Term Care Ombudsman, In-Home Support Service
Community SeniorServ	Southern California	Meals on Wheels, Senior Lunch Program, Adult Day Services
Jewish Home for the Aging Geriatric Services Inc.	San Fernando Valley, California	Rehabilitative Services, Independent Living Facilities, ALF, SNFs, Dining & Nutrition at Home, Hospice Care, Senior Centers
Los Angeles Mid-City Integrated Care Collaborative	Los Angeles, California	SNFs, Rehabilitation Centers, CBOs
Catholic Health Care Transitions Services, Inc.	Southeast, Florida	HHA, SNF
Osceola-St. Cloud Community-Based Care Transitions Coalition	Osceola-St. Cloud, Florida	SNF
Elder Options	Mid-Florida	HHA, SNF
AgeOptions (with Rush University Medical Center [RUMC] Care Transitions Program)	Cook County, Illinois	LTSS, HHA, SNF
Southern Alabama Regional Council on Aging (SARCOA)	Southern Alabama	In-Home Service, Independent Living, ALF, SNFs
Top of Alabama Regional Council of Governments (TARCOG)	Northern Alabama	HCBS
Community Connections' Aging & Disability Resources	Pierce County, Washington	Long-Term Care Ombudsman, Adult Day Services, In-Home Support Services, Nutrition Services & Senior Centers
Eastern Virginia Care Transitions Partnership	Eastern Virginia	ADC, Home Care/Personal Care, Meals on Wheels
Appalachian Community Transitions (ACTion) Project	Southwestern Virginia	Adult Day Health Care, SNF, Meal Services, Home Care Services
Lower Rio Grande Valley Development Council	Lower Rio Grande Valley, Texas	Long-Term Care Ombudsman Program, Community Assistance
El Paso, Texas Aging & Disability Resource Center (ADRC)	Far West Region, Texas	Senior Care Services, Hospice Care
Deep East Texas Council of Governments (DETOG) on Aging (AAA)	Eastern Texas	ADC, Home-Delivered Meals
Central Texas Aging & Disability Resource Center (ADRC)	Central Texas	Home Services, ADC, Home-Delivered Meals

<b>TABLE F-1 (continued)</b>		
<b>ACO</b>	<b>Service Area</b>	<b>LTPAC/LTSS Provider Type</b>
Care Connection Aging & Disability Resource Center (ADRC) (Care Connection)	West of Houston, Texas	Age Well Live Well--Fitness Programs, Fall Prevention, Medication Management, Healthy Living Series, Hospice Care, HHA, Meals on Wheels, Senior Services
Area Agency on Aging (AAA) of Southeast Texas	Southeast Texas	Home-Delivered Meals, Transportation Services, Long-Term Care Ombudsman Program, Benefits Counseling Program
Chattanooga Regional Medicare Community-Based Care Transitions Program (CCTP)	Southeast Tennessee	CHOICE Program (in-home services), Congregate Meal Programs, Home-Delivered Meal Services, Homemaker Services, Nutrition Transportation, Senior Centers
Carelink, Inc.	Providence, Rhode Island	Home Services, SNF
Upstate Care Transitions Coalition	Appalachia Area, South Carolina	Counseling & Support Groups, Mobility Assistance Programs, ALF, HHA, NHs, Rehabilitation Centers
York County Area Agency on Aging (AAA)	Central Pennsylvania & Northern Maryland	ADC, Nutrition Services, Personal Care Services, Senior Centers, Transportation Services
Carondelet Chronic Care Navigation Program	Southern Arizona	Hospice & Palliative Care
Area Agency on Aging (AAA), Region One	Maricopa County, Arizona	Home-Delivered Meals, Independent Living Facilities, 24hr Senior Help Line
Sun Health	Northwest Area of Maricopa County, Arizona	SNFs, Independent Living Facilities, ALF, Rehabilitation Centers
CareLink	Central Arkansas	Meals on Wheels, Home Care, Medication Prescription Drug Counseling, Senior Center
San Diego Care Transitions Partnership	San Diego, California	Transportation Services, Personal Assistance, Laundry Services, Protective Support
<b>SOURCE:</b> Descriptions of CCTP projects from CMS Innovations web site: <a href="http://innovation.cms.gov/initiatives/CCTP/CCTP-Site-Summaries.html">http://innovation.cms.gov/initiatives/CCTP/CCTP-Site-Summaries.html</a> .		

# LONG-TERM AND POST-ACUTE CARE PROVIDERS ENGAGED IN HEALTH INFORMATION EXCHANGE: Final Report

## Files Available for This Report

### MAIN REPORT

Executive Summary <http://aspe.hhs.gov/daltcp/reports/2013/HIEengagees.shtml>  
HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.pdf>

### APPENDIX A. SELECTED PROGRAMS AND INITIATIVES THAT SUPPORT CARE COORDINATION AND INFORMATION EXCHANGE FOR PERSONS RECEIVING LTPAC/LTSS

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendA>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageA.pdf>

### APPENDIX B. FRAMEWORK TO CHARACTERIZE HEALTH INFORMATION EXCHANGE TO SUPPORT CARE COORDINATION FOR PERSONS RECEIVING LTPAC/LTSS

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendB>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageB.pdf>

### APPENDIX C. ENVIRONMENTAL SCAN AND LITERATURE REVIEW SOURCES

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendC>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageC.pdf>

### APPENDIX D. PROMISING COMPONENTS AND INTERVENTIONS TO REDUCE READMISSIONS

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendD>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageD.pdf>

### APPENDIX E. SUMMARY OF LITERATURE ON HEALTH INFORMATION EXCHANGE OUTCOMES AND RELATED MEASURES

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendE>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageE.pdf>

**APPENDIX F. EXAMPLES OF COMMUNITY-BASED CARE TRANSITION PROGRAM WITH LTPAC/LTSS PARTICIPATION**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendF>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageF.pdf>

**APPENDIX G. HEALTH INFORMATION EXCHANGE INTERVENTIONS AND ACTIVITIES IDENTIFIED THAT SUPPORT CARE COORDINATION FOR PERSONS RECEIVING LTPAC/LTSS**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendG>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageG.pdf>

**APPENDIX H. SITE VISIT SUMMARY: RUSH UNIVERSITY MEDICAL CENTER, CARE TRANSITIONS PROGRAM, BRIDGE PROGRAM**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendH>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageH.pdf>

**APPENDIX I. SITE VISIT SUMMARY: BEACHWOOD HOMES**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendI>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageI.pdf>

**APPENDIX J. SITE VISIT SUMMARY: EASTERN MAINE HEALTH SYSTEM, EASTERN MAINE HOME CARE**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendJ>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageJ.pdf>

**APPENDIX K. SUMMARY OF INFORMATION ROUTINELY EXCHANGED BY THE THREE SITES VISITED, BY CARE COORDINATION FUNCTION**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendK>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageK.pdf>

**APPENDIX L. STANDARDS AVAILABLE TO SUPPORT HEALTH INFORMATION EXCHANGE OF LONG-TERM AND POST-ACUTE CARE DATA**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendL>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageL.pdf>

**APPENDIX M. GLOSSARY**

HTML <http://aspe.hhs.gov/daltcp/reports/2013/HIEengage.shtml#appendM>  
PDF <http://aspe.hhs.gov/daltcp/reports/2013/HIEengageM.pdf>