

Case Scenario

Example of a most complex patient:

A morbidly obese male (BMI > 40) with uncontrolled diabetes; congestive heart failure; asthma; depression and homelessness. He requires transportation services for his visits to the health center; is poorly compliant with his medications and frequently no show to see his provider.

However, he has numerous Emergency Room visits with acute exacerbations of his many problems.



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“You have seven patients: a dyslexic, an insomniac, one with depression, one with allergies, a manic, a hypochondriac, and one with an inferiority complex.”

Highly Complex Patients

- Consume more resources
- Take more time to manage effectively
- Require support
- Contribute to physician frustration



***Our Solution: “E Ola Pono” –
Living a Balanced, Healthy Life***



Patient-Centered Health Care Home Integrated Team Approach Which Includes:

- The Patient
- Primary Care Providers
- Intake Coordinators
- Service Coordinators
- Registered Dietitians
- Medical Assistants
- Receptionists
- Other Providers, including Behavioral Health and Substance Abuse Treatment



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Intake Coordinators work alongside the primary care providers and assist with:

- Medication refills
- Lab results
- Answering health questions and concerns
- Form completion
- Referrals



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Service Coordinators provide:

- Health Education and Information
- Crisis Stabilization
- Supportive Counseling
- Resource Information
- Hospital discharge follow-up arrangement
- Obtaining health insurance assistance
- Advanced Health Care Directives completion





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