

UNITED WAY CONSUMER INVESTMENT STRATEGIES FOR PERSONS WHO ARE CHRONICALLY ILL

Definition of consumer population:

Individuals diagnosed with a physical disease, impairment, or condition lasting three or more months.

Desired outcomes as a result of investing in services for this population:

- Reduction of the incidence of chronic illness in the population at large;
- Reduction of racial and ethnic disparities in access to treatment for chronic conditions;
- Increased coordination of care and services across the continuum of disease progression: acute, chronic, and terminal.

United Way's Chronically Ill Investment Strategies:

- A) **Consumer group-relevant interventions** targeting young adults and families throughout the Life Trajectory that prevent, minimize and/or delay the onset/impact of chronic diseases or impairments caused by risky behavior choices, ethnic/racial factors, genetic conditions and financial barriers. Interventions can occur throughout the Life Trajectory and might include: group relevant information/education opportunities, testing/screening and multiple individual/group related activities. Special consideration given to collaborative programs that focus on the individual and cross disease specific boundaries.
- B) **Care/service coordination management/navigation models and services** for the chronically ill who have financial and other access barriers to these types of episodic or longer term services. This would include programs that might impact all age ranges and chronic illnesses. Special consideration given to collaborative models and services that cross disease specific boundaries.
- C) **Home-based services** for the Chronically Ill who would not otherwise have access to these services via public (Medicare/Medicaid) or private funding and who might also have other financial and cultural barriers to accessing this service. The services should focus on preventing and/or mitigating the effects of a crisis event, allow the chronically ill to reside in home/community settings. The services may include, but should be beyond traditional, post acute, home health care. Special consideration given to collaborative/innovative programs.
- D) **Medical expense assistance** for the Chronically Ill that leverages United Way grant funding to increase access to services. This resource multiplier could include, but not limited to: timely transportation to treatment, expanding medication and medical supply availability and assisting in determining benefit eligibility.