(Insert Practice Logo/address)

(Insert Photo of Care Manager)

(Insert Name of Practice)

Care Management

Your doctor would like you to work with(insert care	team member
Name), to assist with your health.	
(insert care manager name), an be reach	ed
at Please tell the person answering that you would	like to speak to
(insert care team member name)	
Our care management team partners with your doctor. The tea	am helps you
learn about the ways to take care of yourself so you can have the	he best health
possible. They do this by:	
	_
Calling you or seeing you at the doctor's office to check	on how you are
doing and answer any questions you may have.	
Helping you with your medications. They may answer quality	•
how often your medicines should be taken, or adjust you	ır medication
levels if you are having side effects.	
 Calling you after you get home from the hospital to see I 	now you are
doing.	
 Finding you additional help if you need it, answering any 	questions you
have, and finding help if you are having trouble paying f	or your medicine
 Helping you learn about your health problem and what y 	ou can do to feel
better.	
 Managing your care with other team members - such 	
as (Insert as appropriate: Registered D	ietitian, Social
Worker, Pharmacist_) - who can also help you achieve be	tter health.