NW MOMENTUM HEALTH PARTNERS

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NWMHP's Care Management is the connection between you and your provider.

NW Momentum Health Partners (NWMHP) Accountable Care Organization (ACO) provides services and program to Medicare beneficiaries. Our Care Management team works with you and your provider to fill the gaps in the traditional Medicare system by offering a range of services that are designed to meet your individual needs.

NWMHP services are complimentary

Transitional Care Management (TCM)

NWMHP Care Navigators are able to assist you with care coordination after an emergency room visit, an inpatient hospital stay, or a skilled nursing facility (SNF) stay.

- Assistance with appointment scheduling
- Reviewing communication from your provider
- Identifying resources to overcome barriers in care. Such as: transportation, home assistance, access to medications & more

Comprehensive Care Management (CCM)

NWMHP Nurse Case Managers and Care Navigators work collaboratively with your provider to meet your health needs.

- Health education and advocacy
- Coaching for chronic health conditions
- Care coordination
- Care resources
- Support in continued wellness

Beneficiary Enhancements

For those who qualify, NWMHP offers special programs that assist in a range of areas such as transportation to medical appointments, meal assistance, home visits after an inpatient hospital stay, and admission to a SNF without a qualifying hospital stay.

Remote Patient Monitoring (RPM)

For those who qualify, NWMHP offers technology outside the traditional healthcare setting to support patients diagnosed with congestive heart failure (CHF) or chronic obstructive pulmonary disease (COPD).

learn more
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(360) 943-4337 option 4