



Eligibility

Care Coordination for Children (CC4C) is a program offered at no charge for children birth to 5 years old that are determined to be high risk and qualify for services.

- Children identified with special health care needs (having or increased risk of having chronic physical, behavioral, or emotional conditions)
- Children that require health related services of a type and amount beyond that required by children generally
- Children in foster care families
- Children with chronic medical conditions
- Children who are in short or long term stressful situations
- Children referred by the child's doctor or any other community agencies

Contact Information

CC4C Services are provided or assured by local health departments in partnership with Community Care of North Carolina and NC Division of Medical Assistance.

Alexander County Health Department
338 1st Ave. SW, Taylorsville, NC 28681

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CCNC CC4C

Working Together
as a Team
to make sure our
Children
are covered



Care Coordination for Children (CC4C)

CC4C is a new program partnering with community care networks to improve the health of your child by linking you to effective services that will meet the needs of your child and family.

This program:

- Identifies programs, services, and resources that meet a family or child's needs in most cases
- Provide your family with a care manager
- Offers encouragement and support



Program

What can the CC4C manager do?

- Help address child/family needs, concerns, goals, and questions
- Work with you to be sure you have a medical home (doctor) for your child, and to support you in building a strong link with them
- Work with every health care provider that your child sees to ensure he/she gets the best treatment
- Offer referrals to other community agencies to address your family's needs, concerns, and goals
- Offer information on health, and family topics including child growth and development
- Support you in being your child's best advocate and recognize you as the expert on your child.



CC4C Outcomes

- Increase the rate of first doctor's visit within one month of discharge from NICU
- Improved quality of care and Medicaid cost savings by decreasing the number of hospital admissions, readmissions, and emergency department visits
- Increase the number of infants less than one year of age referred to Early Intervention.
- Increase the number of children who have a medical home including:
 - Children with special care needs
 - Children in foster care
- Identify children in short or long term stressful situations

