1.3 Develop mechanisms for leveraging the expertise of relevant nursing organizations in care coordination and care management. Care coordination and care management principles, approaches, and evidence should be used to create new cross-sector models for meeting social needs and addressing SDOH.

FUTURE OF NURSING™ Campaign for Action

1. Key Strategic Stakeholders	2. Top 3-5 Actions for 2021	3. Top 3-5 Actions for 2022
Nursing Organizations American Academy of Ambulatory Care Nursing; Association of Nurses in AIDS Care, Association of Public Health Nurses; Corrections nurses; Nursing specialties with experience in care coordination; Tri-Council for Nursing **Health Care Organizations** Health care organizations across continuum of care, including primary care and long-term care; Hospital associations; Payers **Non-profit Organizations** Community resources; Food banks; Workforce centers **Federal Government** Agencies controlling special funding streams for at-risk populations; Centers for Medicare and Medicaid Services; Payers; Regulatory compliance agencies **Education** Nurse educators	A. Use Ryan White model of HIV care as model to glean lessons and replicate; explore other existing funding streams for at-risk populations B. Unpack existing payer sources for care coordination that already exist C. Identify funders to support care coordination models D. Consider how American Nursing Association's "Pathways to Excellence" informs this work E. Identify and reach out to diverse stakeholders F. Build up momentum with community health workers, mental health workers and others who can inform the strategy G. Address DEI in care coordination to assure we engage broad communities	A. Bring stakeholders together to create strategy B. Research, leverage and replicate best practices and models for at-risk populations C. Establish incentives such as a certification designation/recognition for systems that implement value care management (similar to Magnet Recognition Program) D. Evaluate inclusiveness of regulations to break down silos for populations E. Develop communication strategy to increase awareness of what is already funded and possible and to promote adoption of new models

4. Success Indicators

- Increase in billing for care coordination (through fee-for-service billing but also other funding mechanisms)
- At-risk populations will have greater continuity of care
- Wider adoption of cross-sector models
- Use "Health Days" measure from the Centers for Disease Control and Prevention
- Long-term indicators of care continuity, reduced adverse events, health equity, lower emergency room visits and hospitalizations