

Case Management

Patients who are experiencing catastrophic and chronic injuries or illnesses are evaluated for case management services.

If your patient meets the following criteria, they should be screened for case management services:

- Members with **multiple admissions** (two or more hospitalizations) within six months.
- Members with **multiple emergency room (ER) visits** (three or more), or two hospital admissions, for the same condition within six months.
- Members with multiple ER visits (five or more) for multiple conditions within six months.
- Members who are eligible for public health programs.
- Members who are accepted into clinical trials.
- · Pregnant members with high-risk conditions.
- Members identified through the health risk questionnaire process.
- · Members referred from Health Net's Case Management Department.

Health Net* case managers, or delegated participating physician groups (PPGs), assure that potential medically catastrophic cases are managed in cooperation with the provider to achieve optimum care and coverage benefits for the member. Case managers provide assistance by working with members, caregivers, physicians and other members of the care team.

For additional information, reach out to our Case Management Department by **email at Case.Management.Referrals@healthnet.com** or by fax at 800-745-6955.



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