

REFERRAL FORM FOR CASE MANAGEMENT



Why Sign Up for Case Management?

Case Management is a no-cost service within our Care Management department that provides personalized support through a dedicated case manager. You will be connected to a case manager who works with you to help manage complex health needs, recover after a hospital stay, understand new diagnoses, and address challenges such as medications, appointments, or daily living needs. The goal is to help you stay informed, supported, and confident in your care.

Request a Case Management Referral

Please complete the form below if you would like help from our Care Management team. A case manager will review your request and contact you to discuss next steps.

Member Information

Full Name _____

Date of Birth _____

Member ID (if available) _____

Phone Number _____

Preferred Time to Call _____

Email Address (optional) _____

Reason for Referral (check all that apply)

- Managing multiple health conditions
- Recent hospital or emergency room visit
- Help with medications
- Difficulty keeping appointments
- Need help with daily activities or support at home
- New diagnosis or change in health status
- Other (brief description) _____

Additional Information (optional)

Tell us anything else you'd like us to know about your health or support needs.

Consent

By submitting this form, you agree to be contacted by our Care Management team to discuss support options available to you.

[Submit Referral](#)