

Care Management Referral Form

General Information About Care Management

Care Management services are offered at **no cost to you or Zing members**.

Zing Health's Care Management Team wants to **help our members reach their best possible health** by offering the following:

- A Health Risk Assessment (HRA) to give us a better understanding of their health care needs
- Self-education materials so they can learn more about their health condition(s).
- Help with access to community-based resources
- Help when the member is discharged from the hospital to get the support that they need to go home safely or to a lower level of care.
- Creation of an Individualized Care Plan to help them decide what goals they are ready to tackle and assist them to meet those goals.

Zing Health's Care Management Services Team is made up of registered nurses (RNs), Doctors, Pharmacists, and care coordinators. The care team will be able to answer questions health questions, help find a doctor or specialist, and create a plan of care to make sure they get the right medical services.

SUBMITTING THE COMPLETED REQUEST

If you are interested in one of the programs above for one or more of your Zing Health members, please complete the Care Management Referral Form for each and send to the contact below:

Care Management Referral

Email: caremgmt@myzinghealth.com

If you have a question or just want to talk to a member of the Care Management Services Team, please contact Customer Service toll free at 866-946-4458 (TTY: 711). Hours are 8:00 a.m. to 8:00 p.m. Monday – Friday from April 1 – September 30 and, 8:00 a.m. to 8:00 p.m. seven days a week (except Thanksgiving and Christmas Day) from October 1 – March 31.

CARE MANAGEMENT (CM) REFERRAL FORM

REFERRED BY

Date:

Name:

Phone Number:

Fax:

E-mail:

MEMBER INFORMATION

Name:

Member ID#

Phone:

DOB:

Address:

PROVIDER INFORMATION

PCP Name:

Phone /Fax:

Specialist Name

Phone/Fax:

REFERRAL REASON

Referral Reason:(please be specific)