Patient Real Time Referral Process

The Condition and Complex Case Management Programs are voluntary services provided to eligible patients enrolled in Valley Health Plan. Patients who do not wish to participate in the programs can opt out of the programs at any time.

Eligible patients are identified and stratified by chronic condition risk levels using historical claims data. If you have a patient who has not yet been identified but you think could benefit from the Condition or Complex Case Management Programs, you may refer that patient by calling 1.855-624-5223 (toll-free), option 3, or by completing the enclosed Real Time Referral form and faxing it to 1.800.542.8074 (secure fax line).

Please note that eligibility will need to be confirmed before your patient is able to participate in either program. If your patient meets the eligibility requirements, one of our care management staff will look to support your patient in the program.

Real Time Referral Form Instructions

1. Please specify the primary condition for your patient. If you are requesting complex case management support, please include additional information so we may better address your patient’s needs.
2. Please include as much information as possible for your patient so they can be contacted by the care management staff.
3. Please include your complete contact information, including the name of the person submitting the form, so we may contact your team with any questions.

Please make a copy of the blank form so you may continue to refer patients as you deem appropriate. Once complete, please fax the form to 1.800.542.8074 (secure fax line). No cover page is needed.

Thank you for your continued support.