

Decision Power®

Referral to Health Net Fax Form - Cal MediConnect

Decision Power[®] clinicians are available 24 hours a day, 365 days a year to provide education and support to Health Net Cal MediConnect Plan (Medicare-Medicaid Plan) members who have chronic conditions. To refer a patient to Health Net's Decision Power program, please complete this form and fax it to Decision Power at 1-800-451-4730. Note: Do not mail this completed form; fax only please.

Provider Information:

Name:	
Office telephone:	
Email address:	
Date of referral:	
Reason for referral:	

Member Information:

First and last name	Subscriber ID #	Gender	DOB	Telephone #	Program referred for

Referrals are accepted for the following:

Targeted disease management conditions (comorbidity must exist)*

- Coronary Artery Disease (CAD)
- Diabetes
- Heart Failure (HF)

Lifestyle Programs

• Quit For Life® (tobacco cessation)

Types of Support

- Adherence to treatment plan
- Gap closure
- High-risk chronic condition management
- Medication persistence

Note: This form should <u>not</u> be used to refer Medi-Cal members.

*For case management needs, please refer to the Healthcare Services Department Case Management Referral Form, available in the Forms section of the Provider Library on the Health Net provider website at provider.healthnet.com, and <u>fax to 1-800-745-6955</u>.

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