BlueCross BlueShield of Illinois

Case Management (CM) Workflow

Triggers (referrals) for CM:

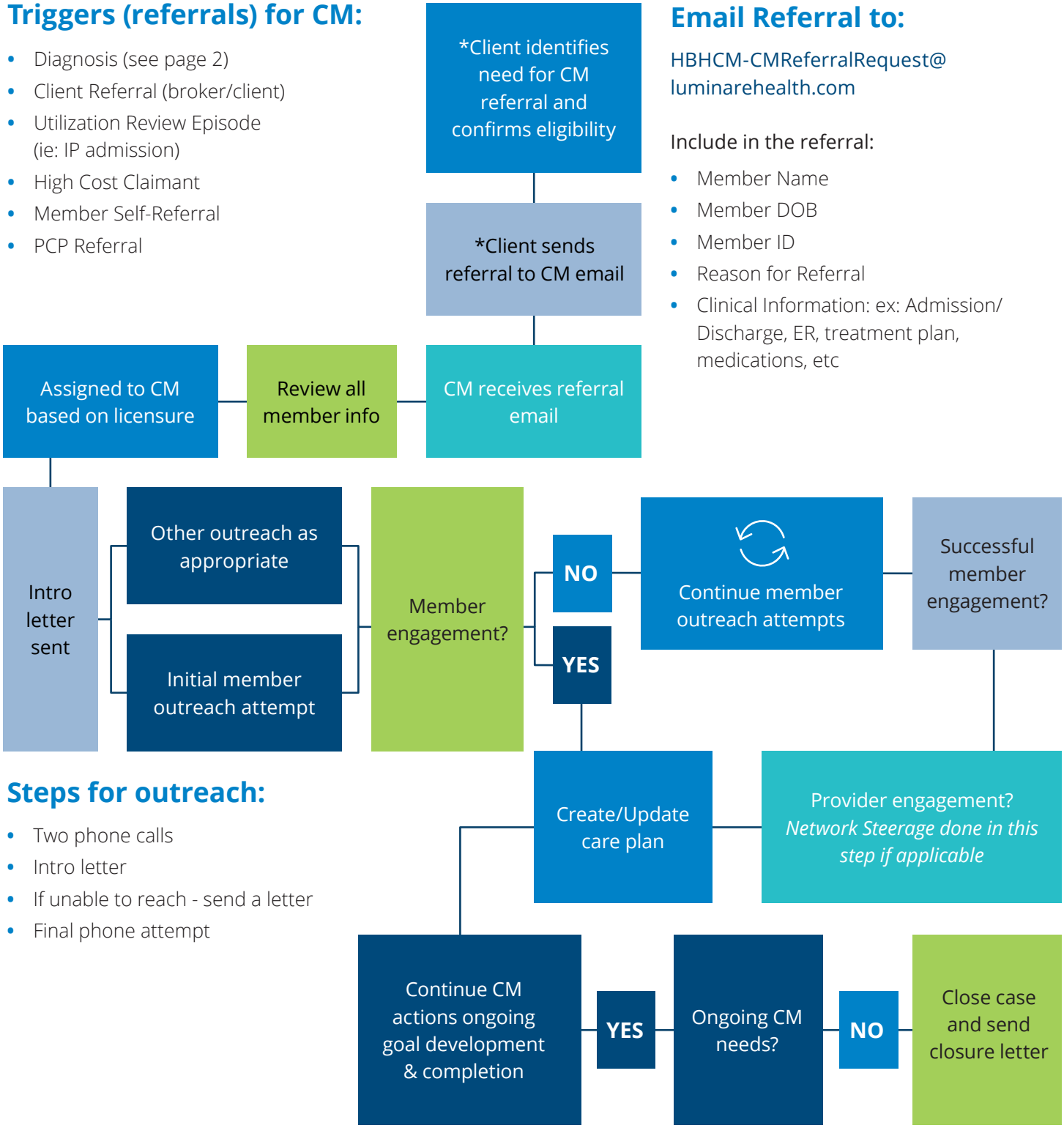
- Diagnosis (see page 2)
- Client Referral (broker/client)
- Utilization Review Episode (ie: IP admission)
- High Cost Claimant
- Member Self-Referral
- PCP Referral

Email Referral to:

HBHCM-CMReferralRequest@luminarehealth.com

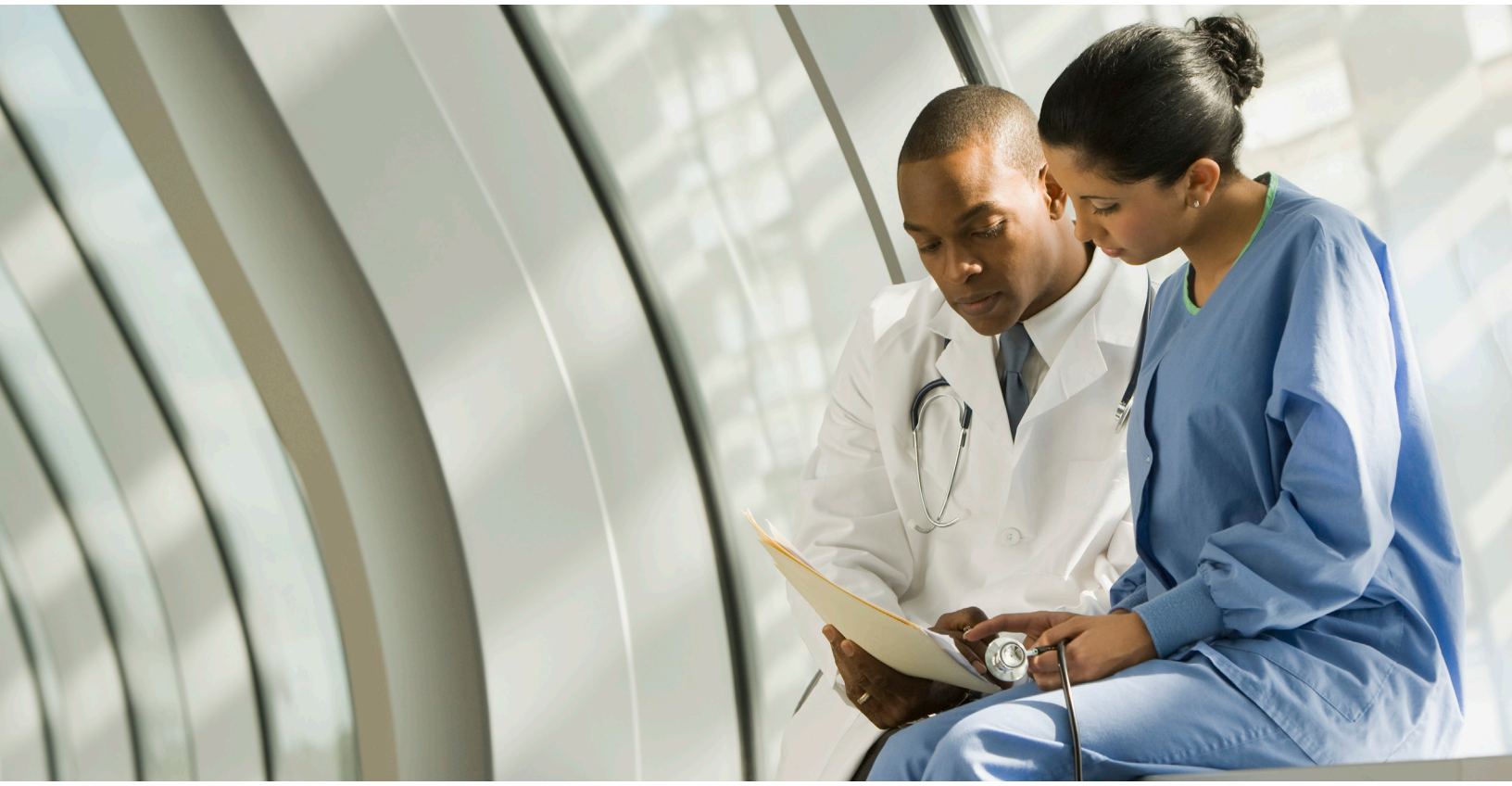
Include in the referral:

- Member Name
- Member DOB
- Member ID
- Reason for Referral
- Clinical Information: ex: Admission/ Discharge, ER, treatment plan, medications, etc



Steps for outreach:

- Two phone calls
- Intro letter
- If unable to reach - send a letter
- Final phone attempt



Luminare Health uses the below diagnosis codes for identifying Case Management needs. The list includes services for both adult and pediatric members and can be used as a trigger that represents an opportunity for Case Management intervention.

- Autoimmune Infections, Infectious Disease
- Limb Amputations
- Burns, Major 30% or greater surface of the body
- Cardiovascular Disease
- Cerebral Vascular Disease/Transient Ischemic Attack
- Potential High-Cost Claimant including but not limited to:
  - High-Risk Pregnancy
  - NICU Admission
  - Inpatient admissions/ICU for acute traumatic events
- Cancer/Blood Disorders
- Acute/Chronic Respiratory Conditions
- Chronic Kidney Disease
- Neuromuscular Conditions
- Gender Dysphoria
- Behavioral Health Treatment/Substance Use Disorder
- Transplant

Blue Cross and Blue Shield of Illinois reserves the right to modify this list at any time. This list is not inclusive and case management is available based on client/member needs.