

Community Health Plan of Washington Care Management Referrals

Community Health Plan of Washington (CHPW) offers free programs to members with complex health conditions. You play an important role in connecting members with these valuable services. CHPW offers the following Care Management programs to assist our members:

Case Management

Assists members with multiple chronic conditions and/ or frequent use of the emergency room and /or hospital. Our case managers coordinate care, manage transitions between levels of care, and work collaboratively with all providers to identify the best care plan possible. Areas of focus include addressing member's psychosocial barriers to health condition improvement, medication compliance, and member goals resulting in decreased emergency room and hospital utilization.

Transition of Care

Assists members to ensure care is uninterrupted when moving between care settings or to the home. Care settings may include hospitals, mental health facilities, substance use treatment facilities, skilled nursing facilities, long-term care facilities, rehabilitation facilities, and correctional facilities. Areas of focus include coordination of services, reviewing discharge plans, and possibly connecting members to longer-term care management programs.

Population Health

Helps members at risk for or diagnosed with adult and pediatric asthma, diabetes, and COPD. Health Coaches provide education, coaching, and support to members to help them understand and manage their conditions.

Care Coordination & Community Linkages

Assists members by addressing social determinants that have an impact on member health. Provides care coordination and referral services to members requiring navigation assistance and access to plan and community based benefits and resources.