American Health
American Health Holding Inc

CASE MANAGEMENT

Our clinical experts provide support for you and your family during times of need

Your plan offers Case Management services, a program that is URAC-accredited through American Health, that is designed to improve the quality of patient care while maximizing cost savings. Case Management is a confidential service that is available at no cost to you if you have an illness or injury that is difficult, long-term or costly.

Our case managers are specially trained registered nurses and licensed social workers. They will work closely with you, your family and your providers to help ensure that you receive appropriate care. Your case manager can answer your questions and will help you understand your treatment and options for your care.

Our experienced clinicians:

- Complete telephonic assessments that assist in determining the your needs and requirements
- Review treatment plans for medical necessity and standards of care
- Help you and your family understand what to expect during the course of treatment
- Supply education materials about treatment options
- Assist you and your family in understanding available benefits

If you think you may benefit from Case Management, please call:

1.800.641.3224

Program Highlights

Comprehensive approach to patient-focused support

Personal support for you and your family during a serious injury or illness

Education on your healthcare, home care needs, treatments, lifestyle changes, etc.

A case manager tofacilitate communication between you and your doctor and hospital

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UTILIZATION MANAGEMENT

Medical necessity review provides you and your family with confidential care at your convenience

American Health's URAC-accredited Utilization Management program provides medical necessity reviews that ensure you and your family receive appropriate care. Why do some medical procedures, like hospital admissions or surgeries, require precertification? This is done to ensure that you and anyone else covered under your benefit plan will receive medical care that is necessary and appropriate. It also helps determine if you may benefit from Case Management.

When you have a medical procedure that requires precertification, you or your doctor will call to provide pertaining information about the procedure. A registered nurse then reviews all the information and will work with your doctor to make sure that your care is being provided appropriately and, if you are in the hospital, that you are released at the right time.

All admission evaluations and reviews are conducted by registered nurses with an average of 10 or more years of clinical experience or by board-certified physician reviewers. The review is supported by American Health's state-of-the-art proprietary software, iSuite, that facilitates all steps in the utilization review process and automatically makes referrals to Case Management.

Your provider will often handle your precertification, but as an active participant in your health care you can call us to begin the process:

(800) 641 5566

urac ACCREDITED Health Utilization Management Expires 11/01/2026

urac ACCREDITED Case Management Expires 11/01/2026

urac ACCREDITED Disease Management Expires 11/01/2026

Program Highlights

Facilitation of all steps in the utilization review process, from initial provider or patient contact through criteria application, evaluation and recommendation

Services guided by American Health's Total Quality Management program, which sets the highest priority on timeliness, accuracy, quality of care and cost-effectiveness

Cases are continually monitored to ensure quality and appropriateness of care.

Utilization Management reports benchmarked using MedInsight from Milliman, Inc.