



PROUDLY SERVING UTAH PUBLIC EMPLOYEES

560 East 200 South » Salt Lake City, UT » 84102-2004 » 801-366-7555 or 800-765-7347 » www.pehp.org

NURSE CARE MANAGER ASSIGNMENT REQUEST

If you need assistance with claims or understanding your healthcare benefits, please visit our website at www.pehp.org and log in to your "MyPEHP" account or contact PEHP Health Benefit Advisors at 801-366-7555 or toll free at 800-765-7347. Completed form can be submitted to PEHP via **fax** (801-366-7449), **mail** (Attn: PEHP Care Management, 560 E. 200 S., Salt Lake City, UT 84102), or **PEHP Message Center** available after accessing your secured "MyPEHP" account online.

Policy Holder/Subscriber Information

Insured/Subscriber's Name:	PEHP Subscriber ID #:	Employer Group:	PEHP Network: (please check)
			<input type="checkbox"/> Advantage <input type="checkbox"/> Advantage S <input type="checkbox"/> Capital <input type="checkbox"/> Preferred <input type="checkbox"/> Summit <input type="checkbox"/> Summit Exclusive

Patient Information

Date of Request:	Patient Name:	Patient DOB:	PEHP Patient ID #:

Reason for requesting to have a Nurse Care Manager assigned to you or your family member:

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Cell Phone:	Home Phone:	Work Phone:
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Mailing Address:	Home Email Address:	Work Email Address:

What is your preferred form of communication with your nurse care manager?

Email: Home Work PEHP Message Center

Phone: Cell Home Work

Mail: Home

Other (please specify): _____

Do you give permission to your nurse care manager to discuss your medical and/or financial/medical claims information with your spouse, family, and/or any other designated individual(s)? YES NO

If yes, please sign below and list individual(s) you have authorized to speak with your nurse care manager:

Name: _____	Relation: _____	Contact Info: _____
Name: _____	Relation: _____	Contact Info: _____
Name: _____	Relation: _____	Contact Info: _____
Name: _____	Relation: _____	Contact Info: _____

Member/Legal Guardian Name (please print):	Member/Legal Guardian Signature:	Date Signed:

How did you hear about PEHP's Care Management Department and availability of nurse care manager? (please check all that apply):

- Benefit Book Employer Group Human Resources Family/Friend Medical Provider PEHP Health Benefit Advisor
 PEHP Website Other (please specify): _____