



CARES: Consulting A Recuperating Employee (for/from) Surgery

Below are processes/protocols put in place to ensure a focused coordination of treatment, return to work and utilization review, through nurse case management involvement at the time of a surgical procedure request or authorization. The outstanding goal is that of expedited appropriate treatment and ancillary services associated to surgery, a focus on return to work as well as assuring that the patient's demographics are understood and managed proactively. These services should be targeted specific to this task assignment, typically lasting no more than 3-4 weeks.

Process:

Upon approval of surgery the telephonic nurse case manager shall contact the provider, patient, ancillary services and claims adjuster to identify and coordinate the following both pre and post-operatively.

- **Patient Demographics**
 - Marital/Relationship Status
 - Children/Ages
 - Family/Friend Support
 - Home accessibility
 - Vehicle – automatic or stick
 - Comorbidities/non-industrial etc.
 - Red Flags that may impede recovery
- **Surgical Information**
 - Surgical Procedure
 - Primary Care Physician
 - Physician performing surgery
 - Date of Surgery
 - Where will the procedure be performed (ASC Facility, Hospital)
 - Duration of facility stay
- **Post-Operative Status/Return to Work**
 - Physical limitations/Work Restrictions (clarified/defined)
 - Discussion of RTW participation with patient
 - Wound Care
 - Ability to drive/mobility
 - Abilities with ADL's

75 Iron Point Circle, Suite 200 • Folsom, CA 95630 • 916.850.7300 • FAX 916.850.7800 • www.csac-eia.org

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➤ **Ancillary Services related to Procedure (Channel to Preferred Providers)**

- Pharmacy/Medications
 - Current Medications?
 - Preferred Pharmacy/Phone/Location
- Durable Medical Equipment
- Physical Medicine (PT/OT)

Depending upon the complexity or circumstances of the surgical procedure, the examiner may assign a field nurse case manager to be present at the surgical facility, primarily to coordinate immediate post-operative care needs.

Identification and notice of a claim postured for CARES Intervention will be the responsibility of the claims adjuster upon authorization of surgery. Referral shall be made to the nurse for intervention and tracking should be captured for later review of program impact.

The use of a nurse case manager for this program is not a replacement for ongoing nurse case management services that are needed for other claims specific tasks.

