YOU NEED TO REFER A SOONER CARE CHOICE MEMBER TO THE OSU HEALTH ACCESS NETWORK CASE MANAGEMENT PROGRAM VIA THE EPIC PLATFORM?

EPIC REFERRAL PROCESS FLOW

1. Enter “Priority” as the Routine status, “Consult Advice and Opinion” as the Type, and “Internal” as the Class type.
2. List the Department in which the Referral is being sent and the name of the Provider requesting HAN services.
3. Select OSUCHS Health Access Network as the “Department”, then select “Accept and Proceed”.
4. Please provide chief patient complaints under in the field titled “Diagnoses” and the reason for the referral to the HAN in the field titled “Procedures”.
5. The HAN Does not need any additional information after this point so you can continue to scroll through the remaining screens and select submit to send the referral to the HAN internally via the EPIC system.

You can also refer Sooner Care Choice members to our program by calling our office directly at 918-561-1155 or by faxing a Provider Referral Form to 918-561-1218. Please visit our website to access our referral form and additional information about our Case Management Program at https://osuhan.com.
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