

24-Hour Nurse Advice Line

Why worry if you don't have to?

Waking up with a fever at 2 a.m.

A cough that won't go away.

A sharp pain in your side.

If you're concerned, advice is just a phone call away.

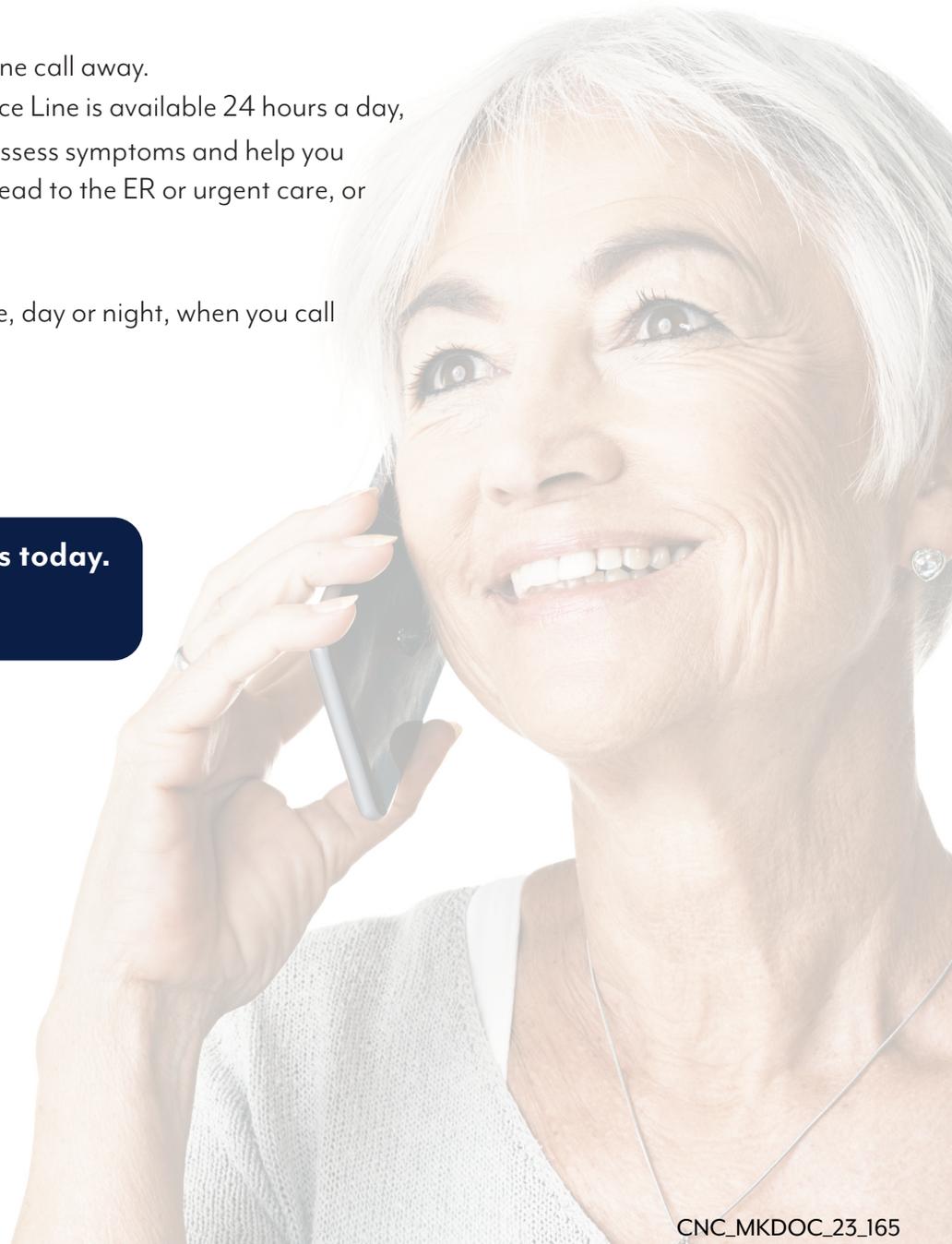
Care N' Care (HMO/PPO) Nurse Advice Line is available 24 hours a day, 365 days a year to answer questions, assess symptoms and help you decide if you should call your doctor, head to the ER or urgent care, or treat your concerns at home.

Registered nurses are available anytime, day or night, when you call our Nurse Advice Line.

It's peace of mind—at no cost to you.

Add us to your phone contacts today.

844-209-3635



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24-Hour Nurse Advice Line FAQ's

When can a member call?

A member can call the Nurse Advice line 24/7 for services.

Can another person call on the member's behalf?

Yes, you can make the phone call. However, we will only provide services for active members of Care N Care. Per HIPAA, The RN will still ask to speak with the member that is experiencing the illness to evaluate the symptoms. The only situations in this will not occur are if a family member is calling in on behalf of the member and the member is in an emergency medical state where they are unable to communicate their health concerns to the nurse themselves.

Will the nurse be able to provide in-network providers if needed?

Yes, we have the provider search tool that is located on the cnhealthplan.com website. The RN will help search for a contracted network provider or hospital upon request from the member or if additional services are needed.

Are virtual services available?

The Care Net program does not offer virtual services at this time. This service is free of charge to CNC members.

Are nurses available or will I need to leave a message for a callback? How long before I should expect a callback?

A Care Coordinator will answer all calls and process the intake of the member. Depending on the symptoms provided by the member, we would complete one of two processes. If the symptoms are emergency symptoms per Schmidt Thompson guidelines, the Care Coordinator would connect the member with the nurse during the initial call. If the symptoms provided by the member are not deemed urgent per the Schmidt Thompson guidelines, the Care Coordinator would place the member's information in a nurse queue for a callback. Nurse Callback average wait times are 20 minutes or less. During peak seasons of COVID and Flu, the call-back times could be longer, however, each member's file is prioritized based on the symptoms and urgency. The lead RN will review the nurse queue during her shift and prioritize based on urgency. If a Care Coordinator does send the member's information to the nurse queue for a callback, we do have scripting in place to advise the caller that if the symptoms worsen or change before they receive the call from our RN, they should call us back to notify us.

Is there a limit to how many times a member can utilize the service?

The service can be used as many times as needed for any medical needs that require Nurse Advice.

Is there a supervising physician overseeing the services?

CareNet does not use the advice of an MD or DO. The Nurse Advice Line is not intended to replace the advice of a doctor. The Nurses follow the Schmidt Thompson guidelines built into our software when processing a telehealth assessment. The software provides guidance on the level of care depending on the member's responses to the RNs questions

Will the nurse be able to prescribe medication if needed?

CareNet nurses do not have the ability to prescribe medications. The Nurse Advice Line is not intended to replace the advice of a doctor. This can only be done by the member reaching out to their PCP or by visiting an ER/UCC center.

Will anyone follow up with members after utilizing the service? If so, how many days after?

CareNet does not complete a follow-up with the member. Most Health plans implement their own satisfaction services to follow up with members.

If determined a TRUE emergency will the nurse call 911?

If it is a true emergency, the nurse would ask if the member is able to dial 911 on their own. However, if the RN determines that this process would compromise patient safety, the RN will conference 911 with the member. If the RN does conference with 911, he/she will stay on the line with the member until she is sure medical services have been dispatched to the location.