



Continuity of care transition assistance form

If you have planned surgery, testing or ongoing treatment after September 1, 2023, complete the form below and mail it to Aetna®. You can use the envelope provided. A nurse case manager will reach out to you to ensure a smooth transition to your new Aetna Medicare Advantage PPO plan.

If you have:

Planned surgery or hospitalization after September 1, 2023

- a) Name of procedure _____
- b) Date _____
- c) Facility _____
- d) Physician name and phone number _____

Planned testing after September 1, 2023

- a) Name of procedure/test _____
- b) Physician name and phone number _____

Ongoing complex medical treatment (for example, chemotherapy, radiation, dialysis, follow-up from surgery)

- a) Current treatment _____
- b) Physician name and phone number _____

Ongoing home health care (HCC)

- a) Type of HHC _____

Request to speak to a nurse case manager for coaching and support to improve health

Ongoing prescription specialty medicine

- a) Name of medication _____
- b) Ordering physician and phone number _____

Member/alternate contact/provider information and contact authorization (please print)

Member's name Birth date

Address City State ZIP

Home phone Cell phone

Do we have permission to call and text? Yes No

Alternate contact person/provider name (if applicable)

Address City State ZIP

Do we have permission to leave your alternative contact person/provider a detailed message? Yes No

Appointment of Representative form and Third Party Administrator form provided? Yes No

Individual who helped complete this form

Relationship to member

[CONY.AetnaMedicare.com](https://www.CONY.AetnaMedicare.com)

