



Tailored Care Management External Clinical Consultation Request

This form allows provider-based Tailored Care Management (TCM) entities to request a virtual clinical consultation with Vaya Health (Vaya). Complete the fields below and email your request to SNStaffing@vayahealth.com.

Please note: A representative of your organizations's TCM clinical staff or medical team is required to request and attend the consultation.

Consultations are held via Microsoft Teams, with the option for participation online or by telephone. Vaya will send an invitation once the consultation has been scheduled. If you have questions, please email SNStaffing@vayahealth.com.

TCM Provider Information

1. TCM provider organization: _____

2. Name and credentials of practitioner submitting request: _____

3. Email address: _____ 4. Phone number: _____

Request Information

5. Submission date: _____

6. Is your consultation request related to a specific Vaya member? Yes No (skip to #11)

7. Member name: _____

8. Date of birth: _____ 9. Medicaid ID #: _____

10. Member current clinical presentation:

11. Specific consultation question:

12. Discipline requested for consultation (check all that apply):

MD to MD Clinical pharmacist Registered nurse

Other (please specify): _____