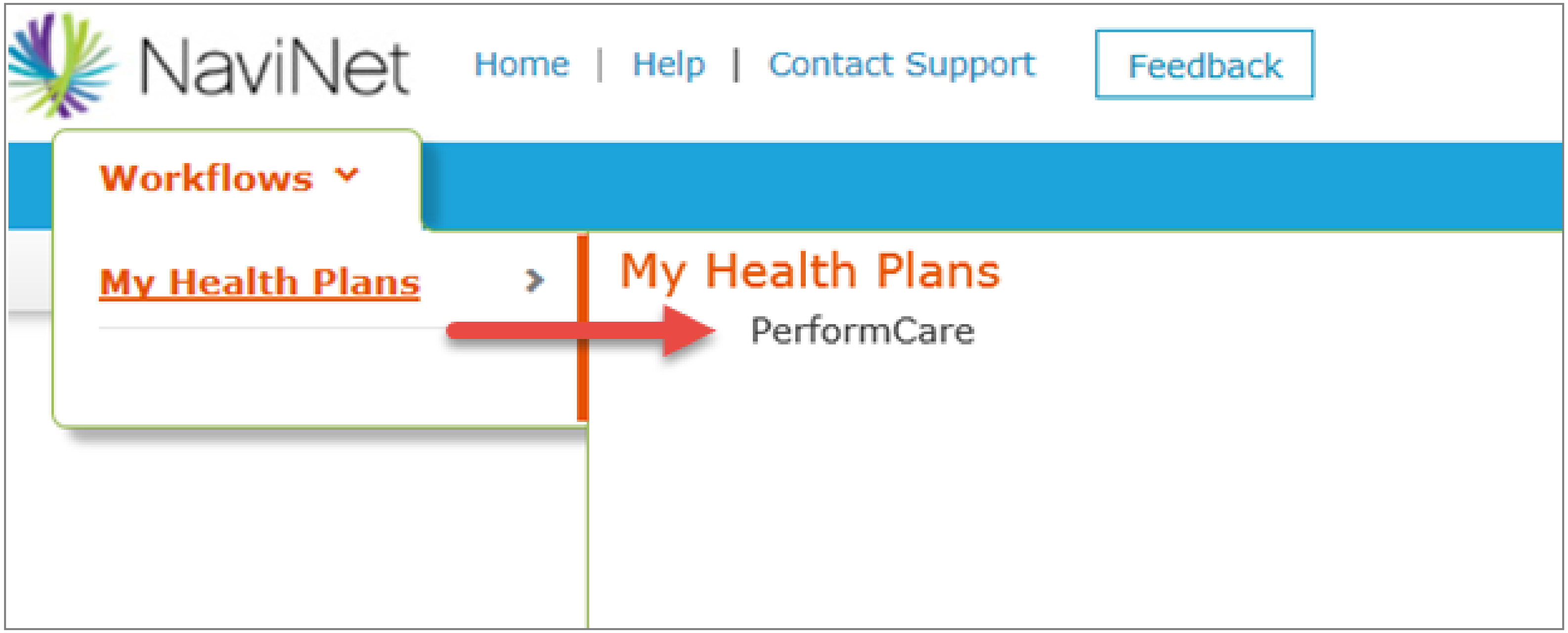
NaviNet
Transaction User Guide

Health Plan/NaviNet/Providers

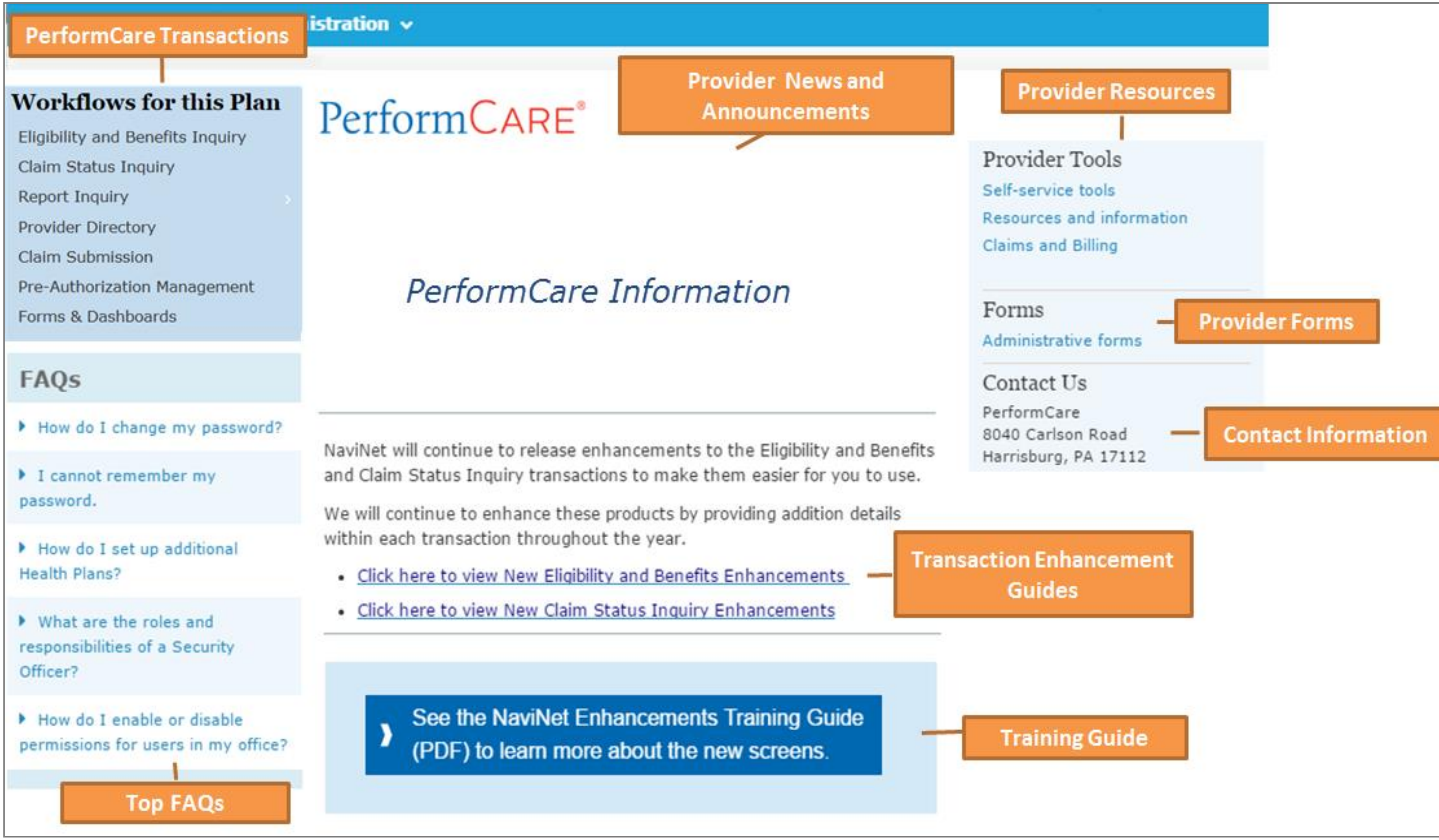
Transactions

- Eligibility and Benefits
- Claim Status Inquiry
- Direct Link to Pre Authorization Management (Jiva)
- Direct Link to Claim Submission (Emdeon)
- Forms and Dashboards (Member Care Management)



PerformCare Plan Central Page

PerformCare Plan Central Page-Example: *Pending Final Screen Shot*



Workflows for this Plan

Eligibility and Benefits Inquiry

Claim Status Inquiry

Claim Submission

Provider Directory

Pre-Authorization Management

Forms & Dashboards

Eligibility and Benefits

Eligibility & Benefits Search Screen

Eligibility and Benefits: Patient Search

Medicaid is the payer of last resort. Please submit to other carrier as appropriate. A valid EOB and or evidence of non coverage of services from primary carriers must be submitted with the claim submission to be considered for payment.

You may enter the member ID #, contract #, social security #, Medicaid ID #, Medicare ID # or HICN # in the Member ID field.

Search by Member ID

Member ID

OR

Search by Name

Last Name

First Name

Date of Birth

mm/dd/yyyy

Date Of Service

02/01/2016

Search

Search by:
- Member ID

OR

Search by:
- Member Last Name
- Member First Name
- Member Date of Birth

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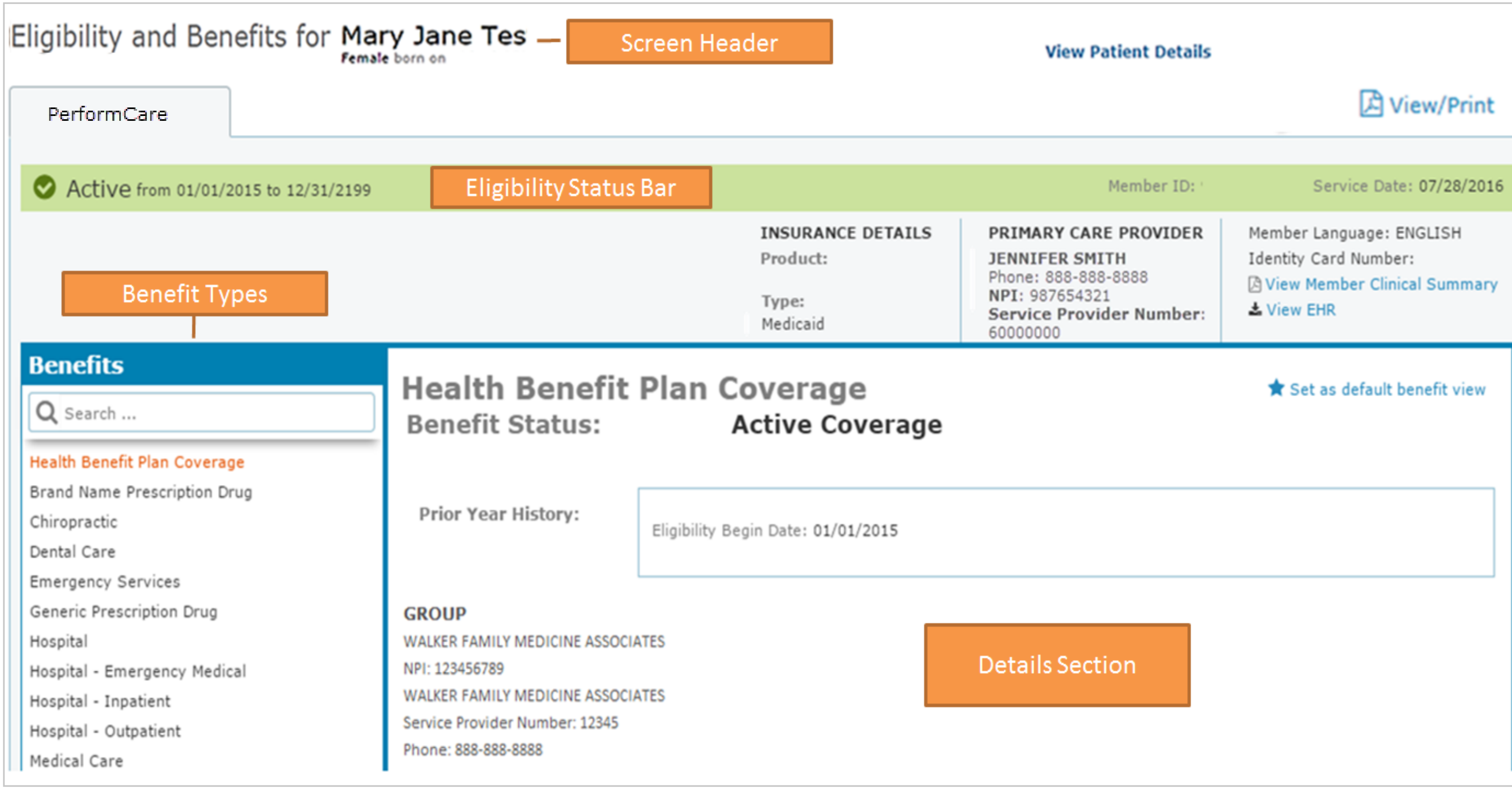
Eligibility & Benefits Result Details

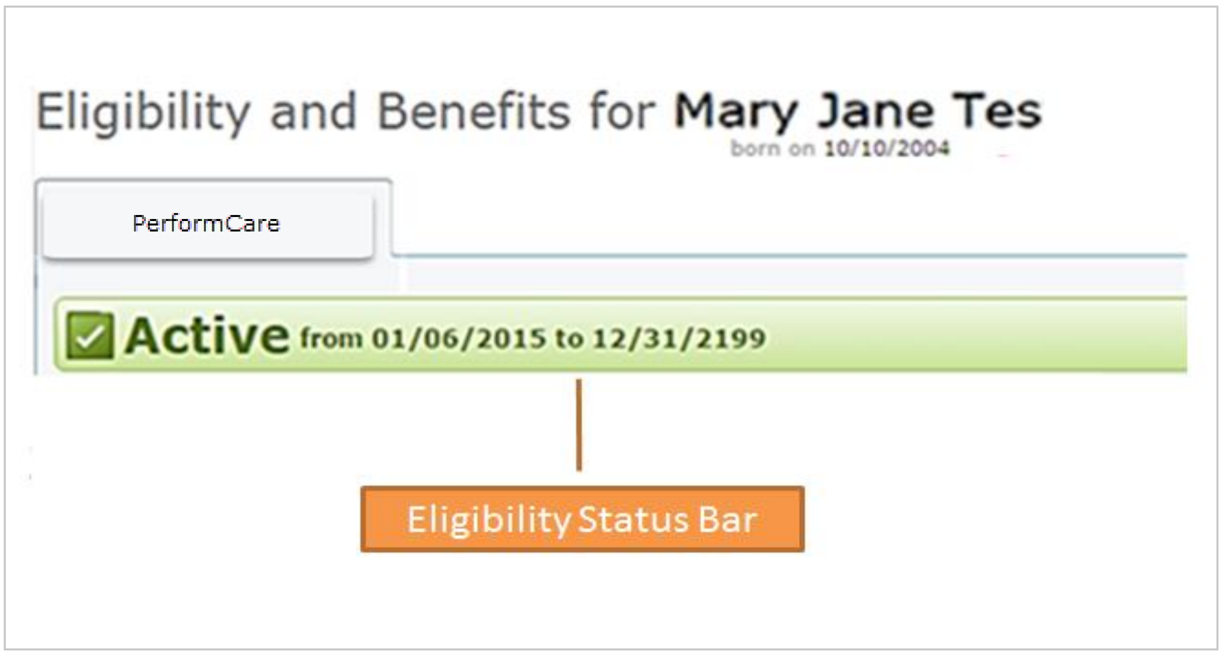


Eligibility & Benefits Result Details

Eligibility & Benefits Result Details

Eligibility Status Bar

- Prominently displays the most valuable information to the user. The overall coverage status of the patient appears in large font to allow the user to find status quickly. In the following example, the user has an active status. The eligibility date (start date or range) is shown to the right of the eligibility status.



Eligibility & Benefits Result Details

Benefit Types

- Displays a list of services supported by the health plan. Choosing any other service on the list displays benefit details for the patient for that service in the Details section to the right of the menu.

Detail Section

- Shows all benefit details for the currently selected service type. The header displays the name of the service selected in the Benefit Types menu.

Default View

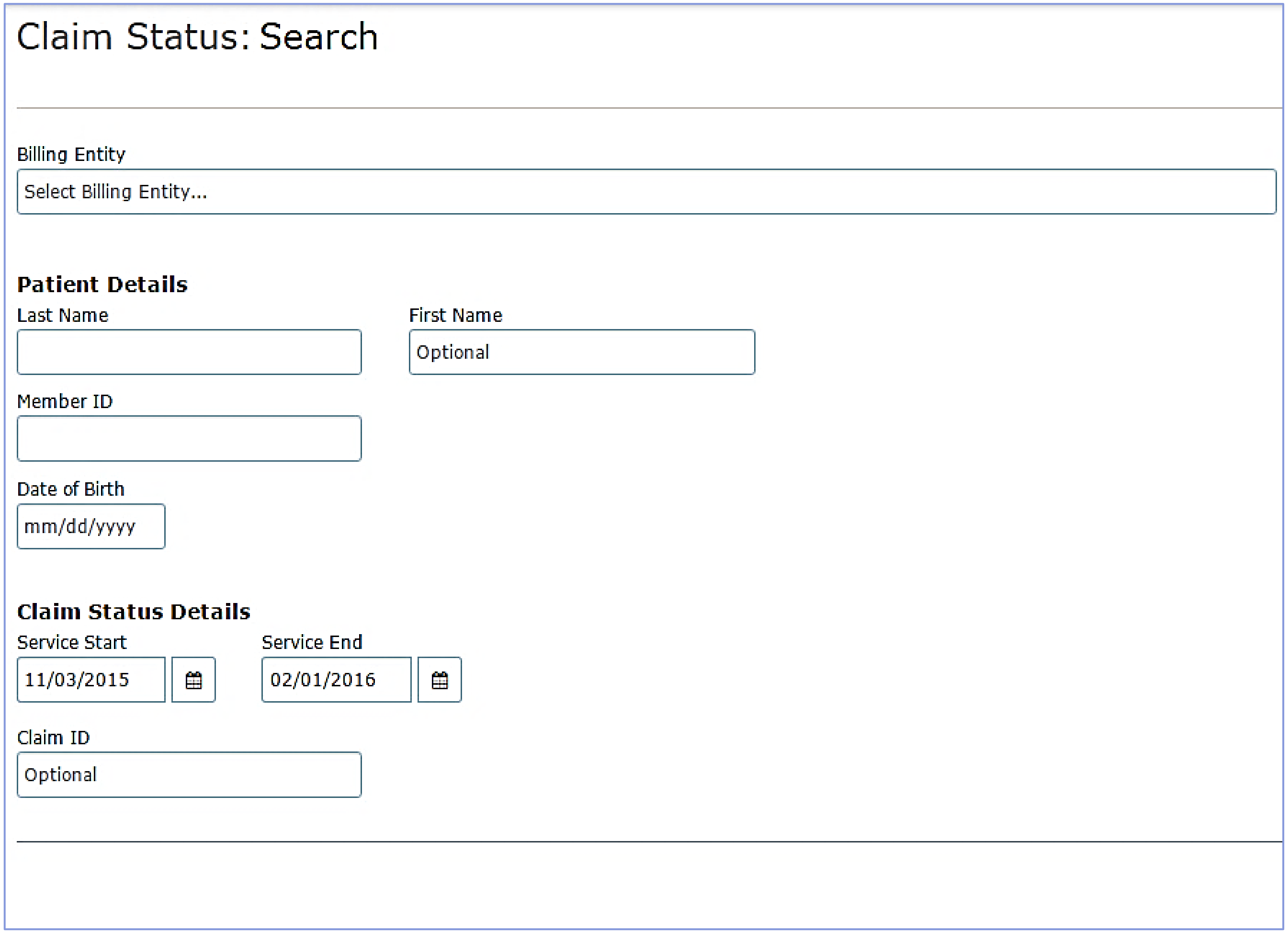
- The purpose of this feature is to immediately show the benefit details used the most. Users can set a different default for each health plan
- Each user in the office can set their own default. This selection is at the user level, not the office level.

Workflows for this Plan

- Eligibility and Benefits Inquiry
- Claim Status Inquiry
- Claim Submission
- Provider Directory
- Pre-Authorization Management
- Forms & Dashboards

Claim Status Inquiry

Claim Status Inquiry Search


Claim Status: Search

Billing Entity

Select Billing Entity...

Patient Details

Last Name

First Name

Optional

Member ID

Date of Birth

mm/dd/yyyy

Claim Status Details

Service Start

11/03/2015

Service End

02/01/2016

Claim ID

Optional

Required Search Fields

- Billing Entity
- Patient Last Name
- Member ID
- Date of Birth
- Claim Service start date
- Claim Service End Date

Optional Search Fields

- Patient First Name
- Claim ID

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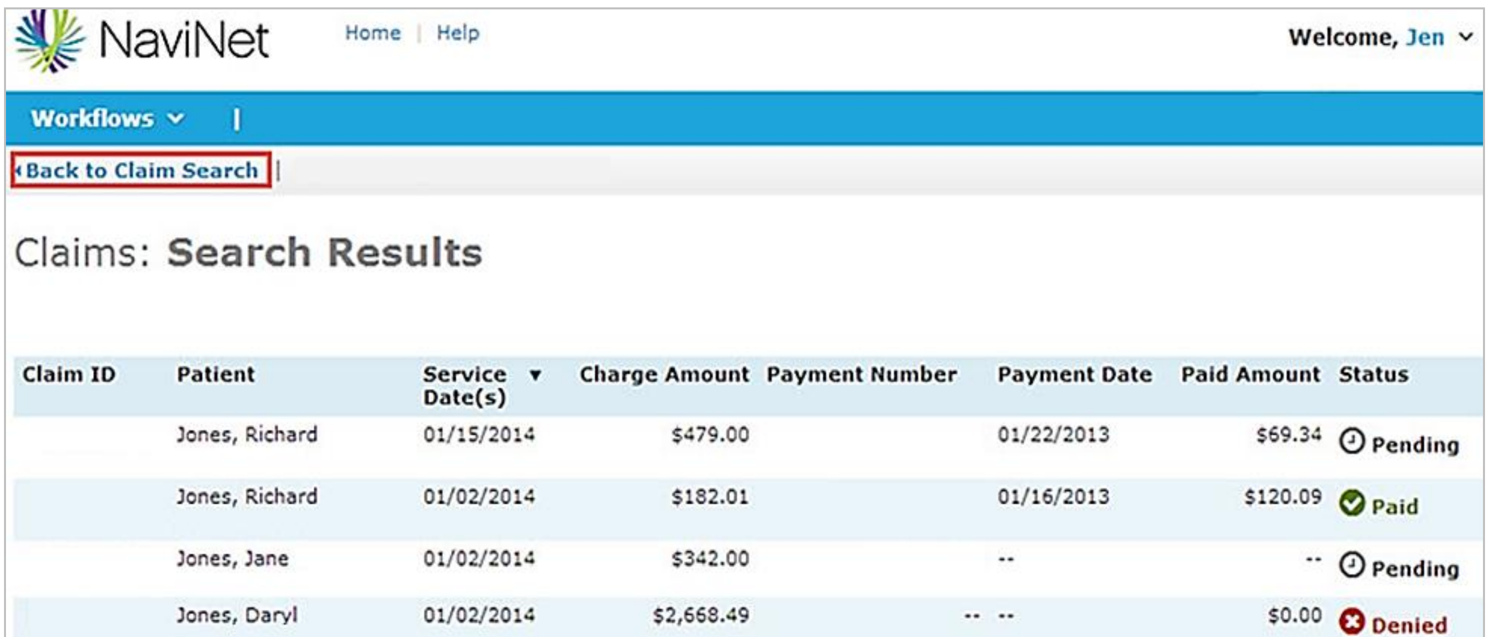
Claim Status Inquiry Search Results Screen

Multiple Claims

- If multiple claims are returned in the health plan response, the user can select the appropriate claim on the Claims Search Results screen.

Single Claim

- If only one claim is returned in the response, the user is taken directly to the Claim Details screen.



NaviNet

Home | Help

Welcome, Jen

Workflows

Back to Claim Search

Claims: **Search Results**

Claim ID	Patient	Service Date(s)	Charge Amount	Payment Number	Payment Date	Paid Amount	Status
	Jones, Richard	01/15/2014	$479.00		01/22/2013	$69.34	Pending
	Jones, Richard	01/02/2014	$182.01		01/16/2013	$120.09	Paid
	Jones, Jane	01/02/2014	$342.00		--	--	Pending
	Jones, Daryl	01/02/2014	$2,668.49	--	--	$0.00	Denied

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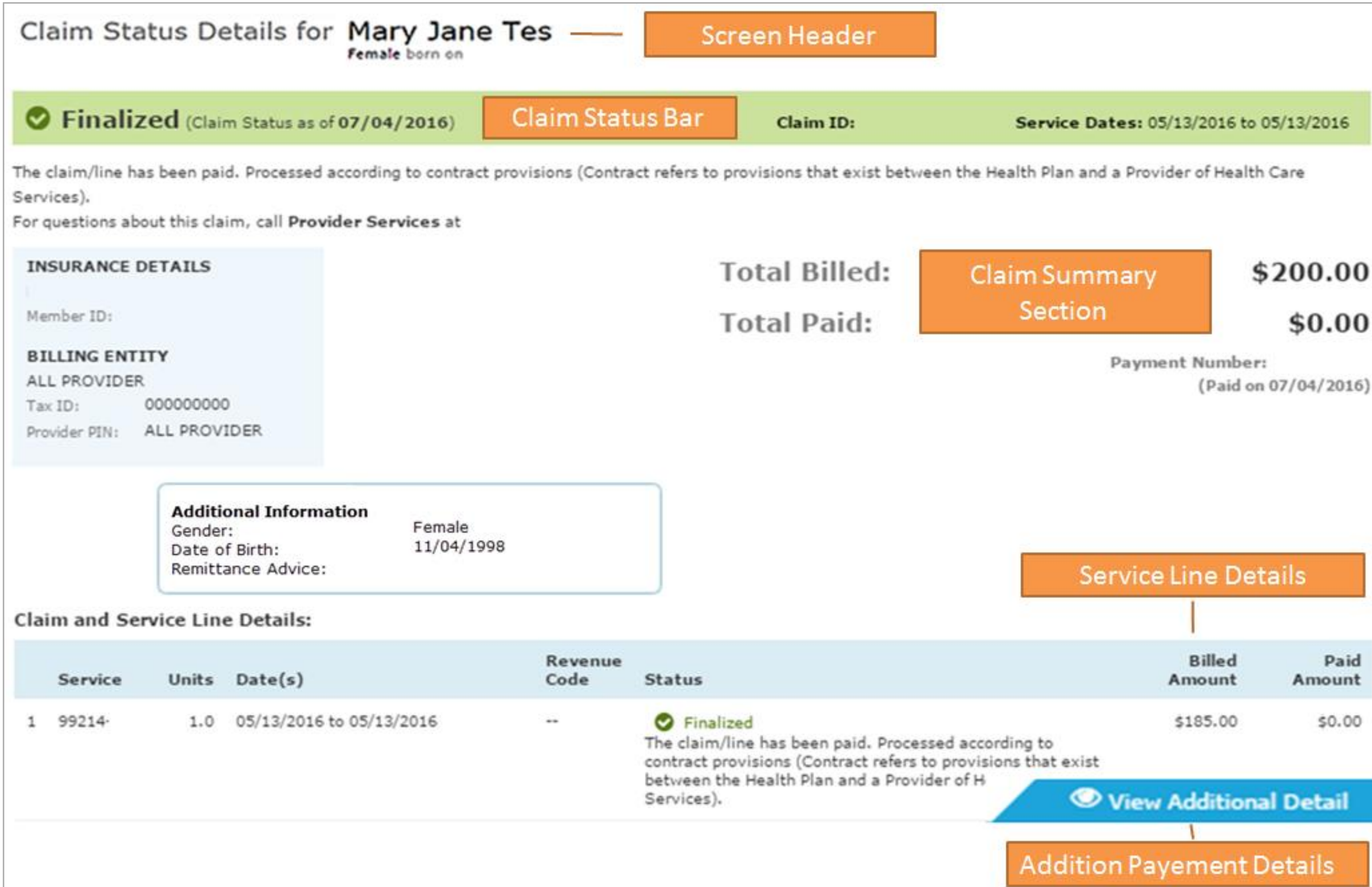
Claim Status Inquiry Result Details



Claim Status Details for **Mary Jane Tes**
Female born on

Screen Header

Finalized (Claim Status as of **07/04/2016**)

Claim Status Bar

Claim ID:

Service Dates: 05/13/2016 to 05/13/2016

The claim/line has been paid. Processed according to contract provisions (Contract refers to provisions that exist between the Health Plan and a Provider of Health Care Services).

For questions about this claim, call **Provider Services** at

INSURANCE DETAILS

Member ID:

BILLING ENTITY

ALL PROVIDER

Tax ID: 000000000

Provider PIN: ALL PROVIDER

Total Billed: **$200.00**

Total Paid: **$0.00**

Claim Summary Section

Payment Number:

(Paid on 07/04/2016)

Additional Information

Gender:	Female
Date of Birth:	11/04/1998
Remittance Advice:	

Service Line Details

Claim and Service Line Details:

	Service	Units	Date(s)	Revenue Code	Status	Billed Amount	Paid Amount
1	99214	1.0	05/13/2016 to 05/13/2016	--	Finalized The claim/line has been paid. Processed according to contract provisions (Contract refers to provisions that exist between the Health Plan and a Provider of H Services).	$185.00	$0.00

View Additional Detail

Addition Payement Details

Claim Status Inquiry Result Details

Screen Header

- The Screen header shows the Patient's name and date of birth for the claim. This key information is displayed prominently at the top of the application to help users confirm that they are looking at details for the correct patient.

Claim Status Bar

- Displays current claim status. Users look for the overall claim status and status details as the first and most important information on the page.

Claims Summary Section

- Displays the most important details of the claim, including the total charge from the provider and the amount paid by the health plan. The NaviNet Claims Status application presents this information to users in a prominent and highly visible way.

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Claim Status Inquiry Result Details

Service Line Details

Claim and Service Line Details:

	Service	Units	Date(s)	Revenue Code	Status	Billed Amount	Paid Amount
1	99214	1.0	05/13/2016 to 05/13/2016	--	Finalized The claim/line has been paid. Processed according to contract provisions (Contract refers to provisions that exist between the Health Plan and a Provider of H Services).	$185.00	$0.00

View Additional Detail

Service Line - Additional Detail

Line Number: 1
Service: Finalized

Modifier:	25	Allowed Amt:	
Cat Cd:		Copay Amt:	$0.00
CAP:	Y	COB Amt:	$0.00
DRG:	--	Deduct Amt:	$0.00
NDC Cd:	--	WithHold Amt:	$0.00
NDC Units:	--	Remark Cd:	PXN
NDC UM:	--	Diag Cd:	
POS:		DX Pointers:	1,2,3

Claim Category

F1 Finalized/Payment-The claim/line has been paid.

Claim Status

107 Processed according to contract provisions (Contract refers to provisions that exist between the Health Plan and a Provider of Health Care Services)

Remark Code

Service Line Details

- Displays the details of the individual claim service line. Users look for the overall claim status and status details as the first and most important information on the page.

Additional Payment Details

- Displays the allowed amount, amount applied to member responsibility and explanation of benefits description according to each line item.

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Provider Directory

Workflows for this Plan

Eligibility and Benefits Inquiry

Claim Status Inquiry

Claim Submission

Provider Directory

Pre-Authorization Management

Forms & Dashboards

Provider Directory-Direct Link to Provider Directory

Find a Provider

Provider Type: All ▼ Provider name, specialty, facility, medical condition, or k **Search**

Your location:

Search Help

Advanced Search

Workflows for this Plan

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Provider Directory Tools

You can use Find a Provider to find doctors, hospitals, and other health care providers, such as urgent care centers, vision, and medical supply providers. If you know the name, type it in the search box. You can also search by the kind of care you need, such as ear nose and throat, skin, maternity, and urgent care.

- About this information
- Medical Terms

Members:

If you have questions about how to use this directory or want provider information, including a doctor's:

- Education
- Medical school training
- Residency completed
- Race and/or ethnicity
- Language services available at the practice location

Call Member Services at .

Providers:

If you have questions, call Provider Services at .

If you notice any errors in the directory, please fax, on practice letterhead, the information as it should appear to the attention of Provider Services at .

Workflows for this Plan

- Eligibility and Benefits Inquiry
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- Forms & Dashboards

Pre-Authorization Management

Direct Link to JIVA

Pre-Authorization Management

You will need Internet Explorer 10 or 11, or Firefox 26 in order to access the Jiva 5.6 provider portal.

Workflows for this Plan

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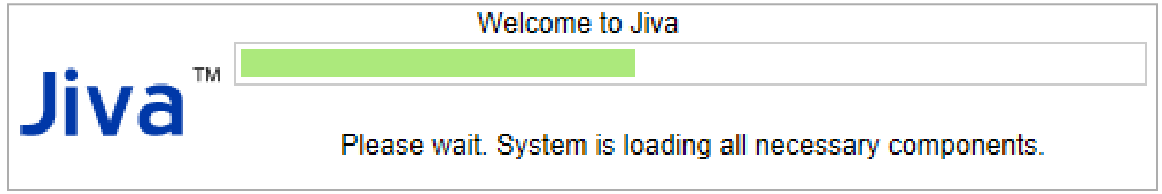

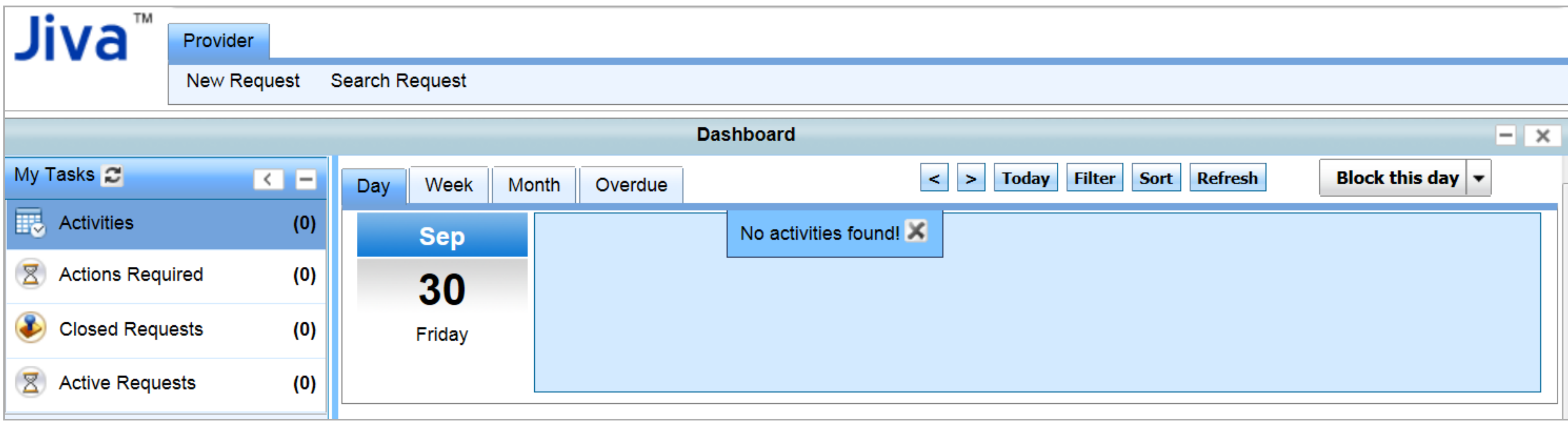

Workflows for this Plan

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Claim Submission

Direct Link to Emdeon

Claim Submission
Support is provided by Emdeon 1-877-363-3666

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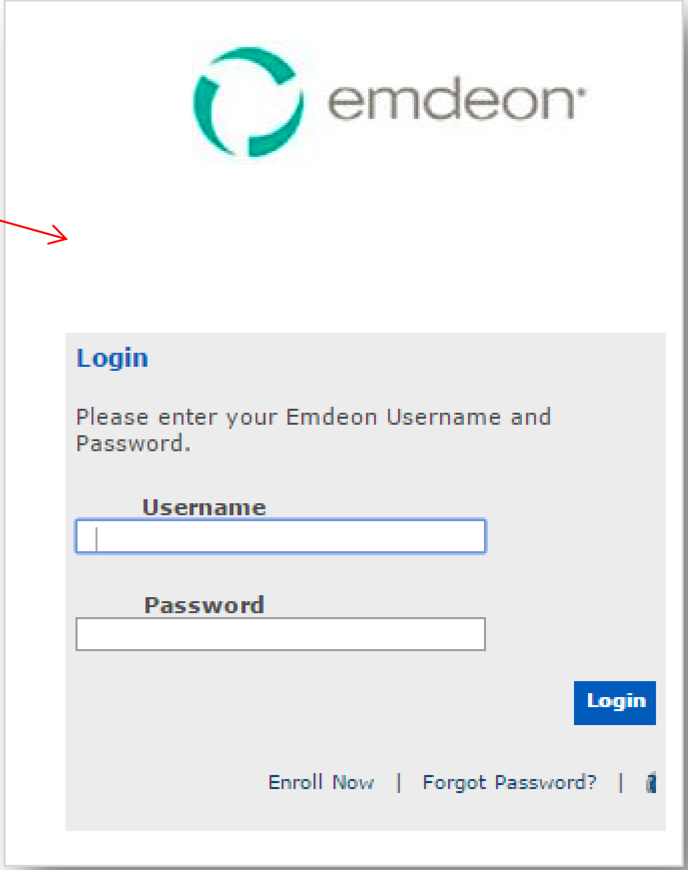

Workflows for this Plan

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Forms & Dashboards

Member Care Management

Forms & Dashboards (Member Care Management)

*Must use Internet Explorer to access Forms & Dashboards. *Pop Up Blocker must be Disabled**

Administrative Financial Clinical

Member Care Management

Member Care Plan

This care plan was developed with the support of care coordinators to help members improve their personal health. Members, Providers and Care partners have specific roles to help members move forward with their care plan.

- View Care Plan

Member Health Action Plan

This health action plan was developed by the member. It is intended to identify personal health care goals. Members, Providers and Care partners may have specific roles to help members move forward with their health action plan.

- View Health Action Plan

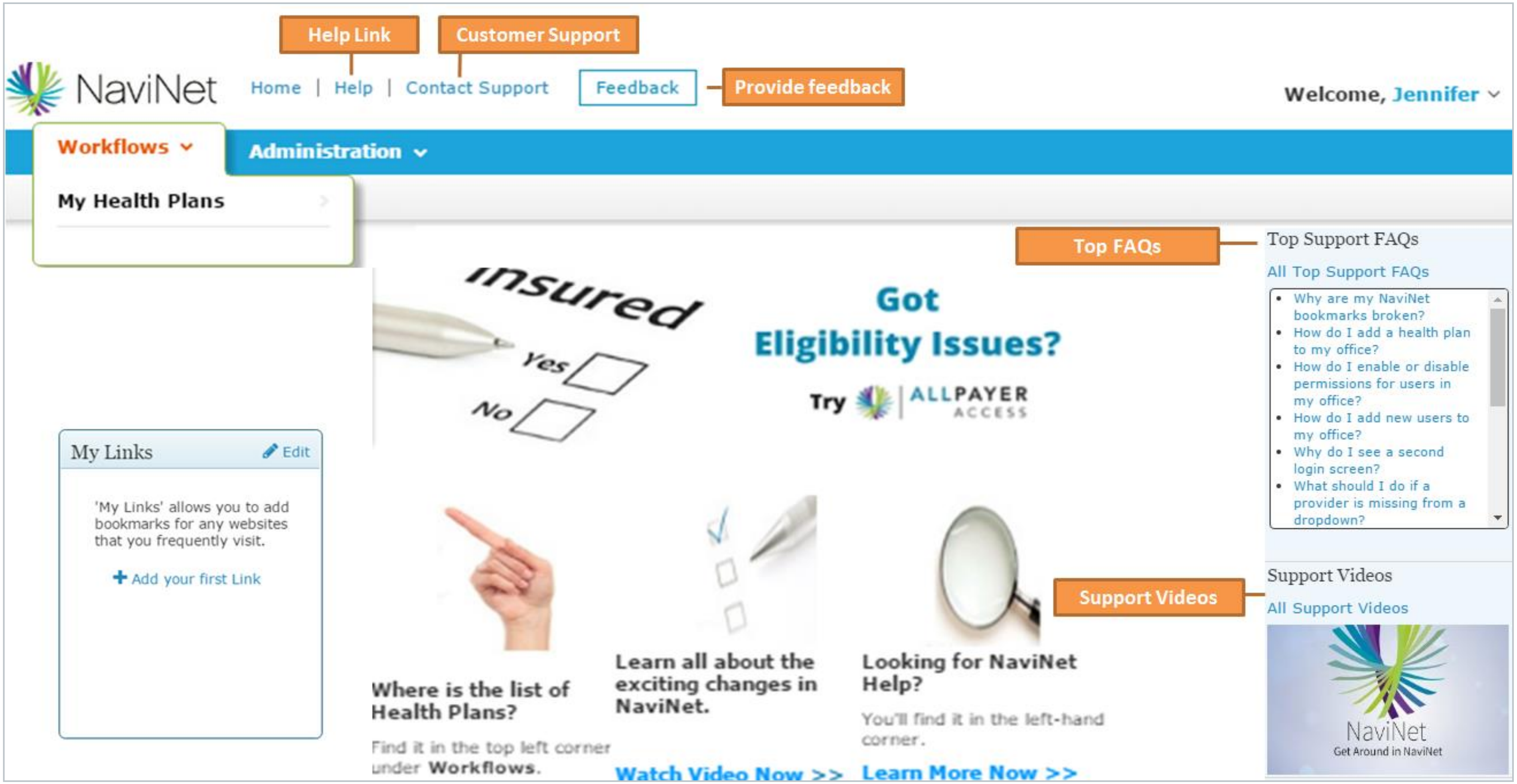
Primary Care Provider Risk Assessment

The PCP risk assessment was developed to aid the provider in identifying and managing the medical, cognitive and psychosocial needs of the member.

- View PCP Risk Assessment

Support Options

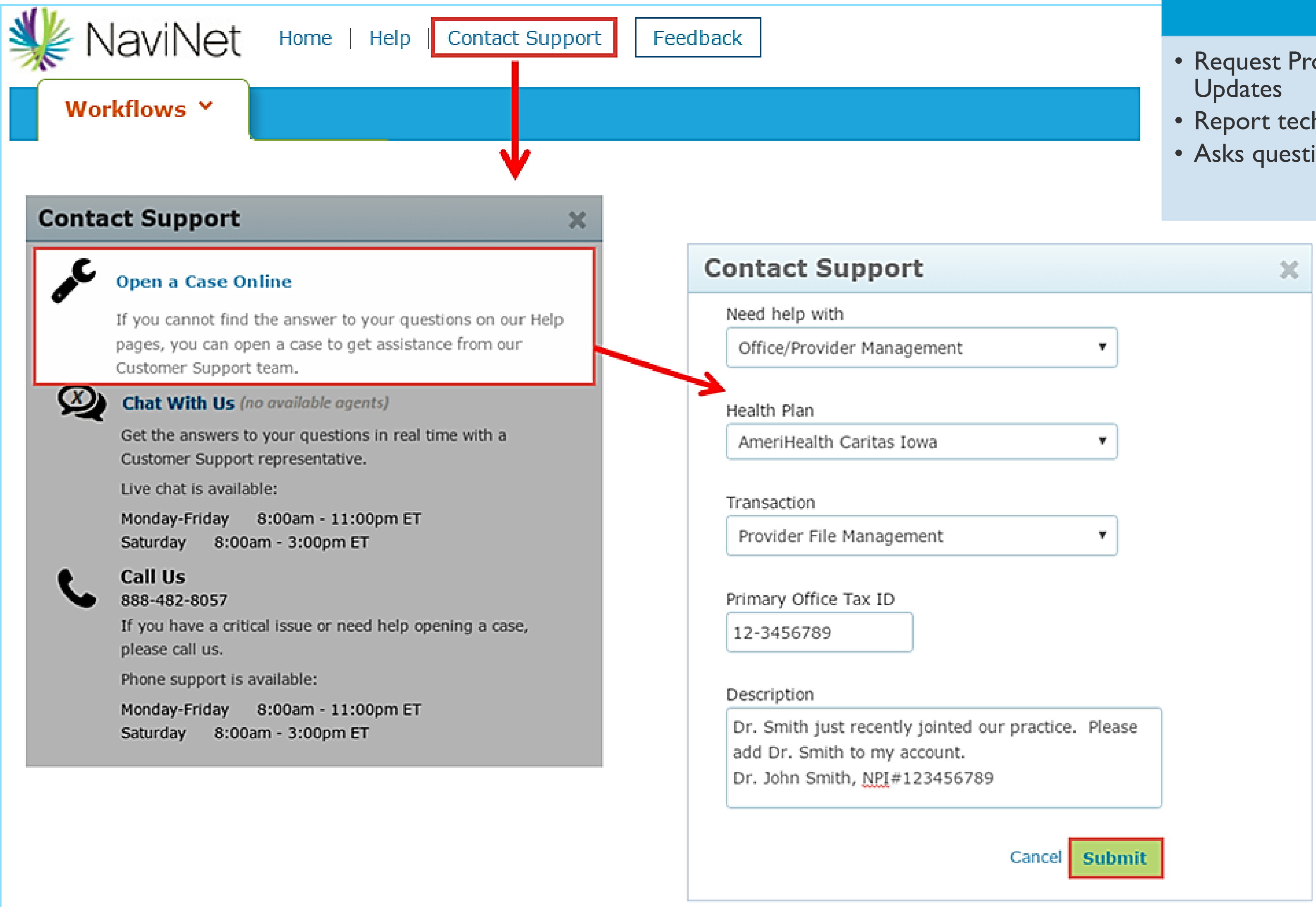
NaviNet Homepage



Contact Support

Open a Case Online

- Request Provider Data Updates
- Report technical issues
- Asks questions



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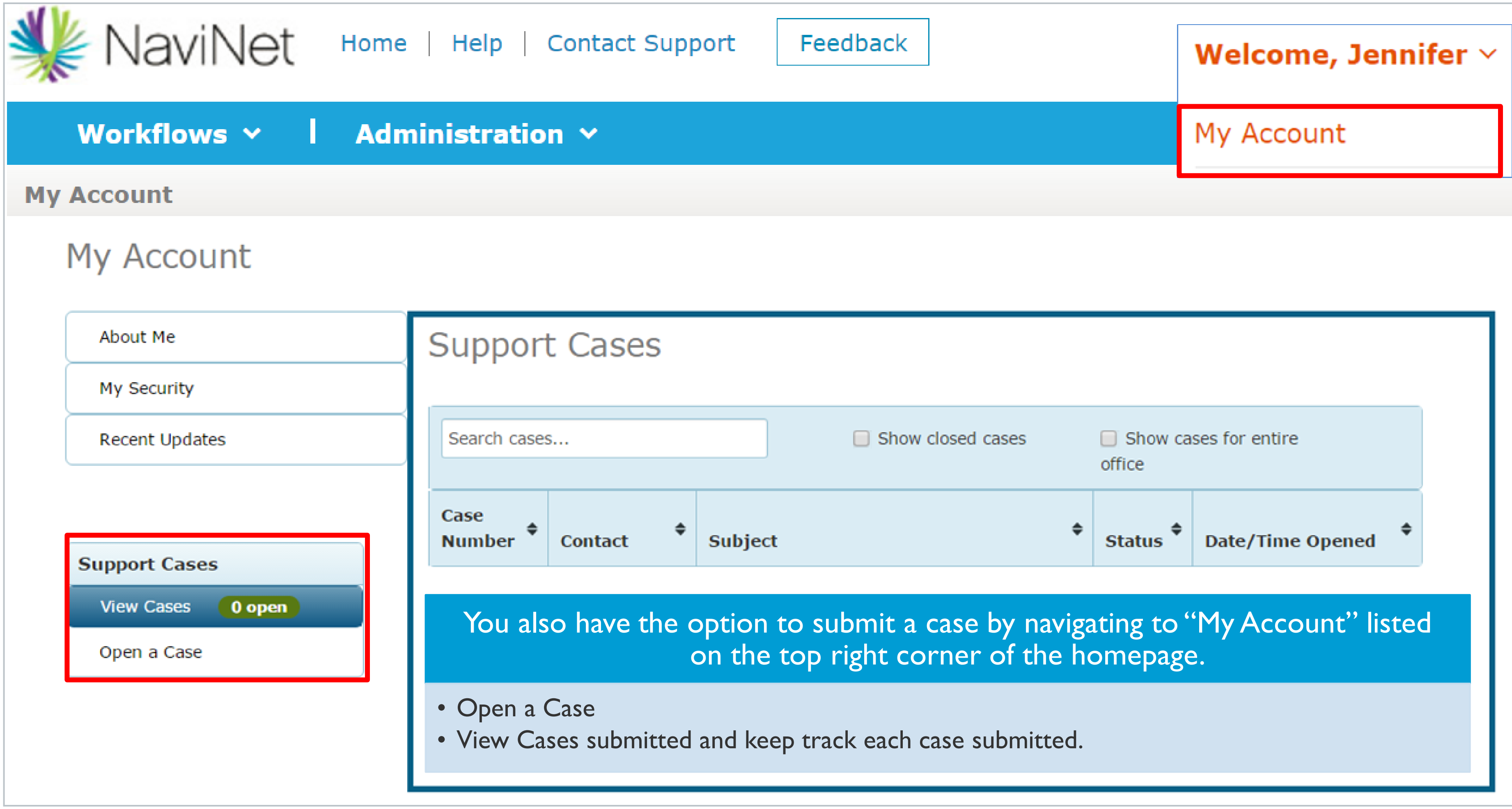
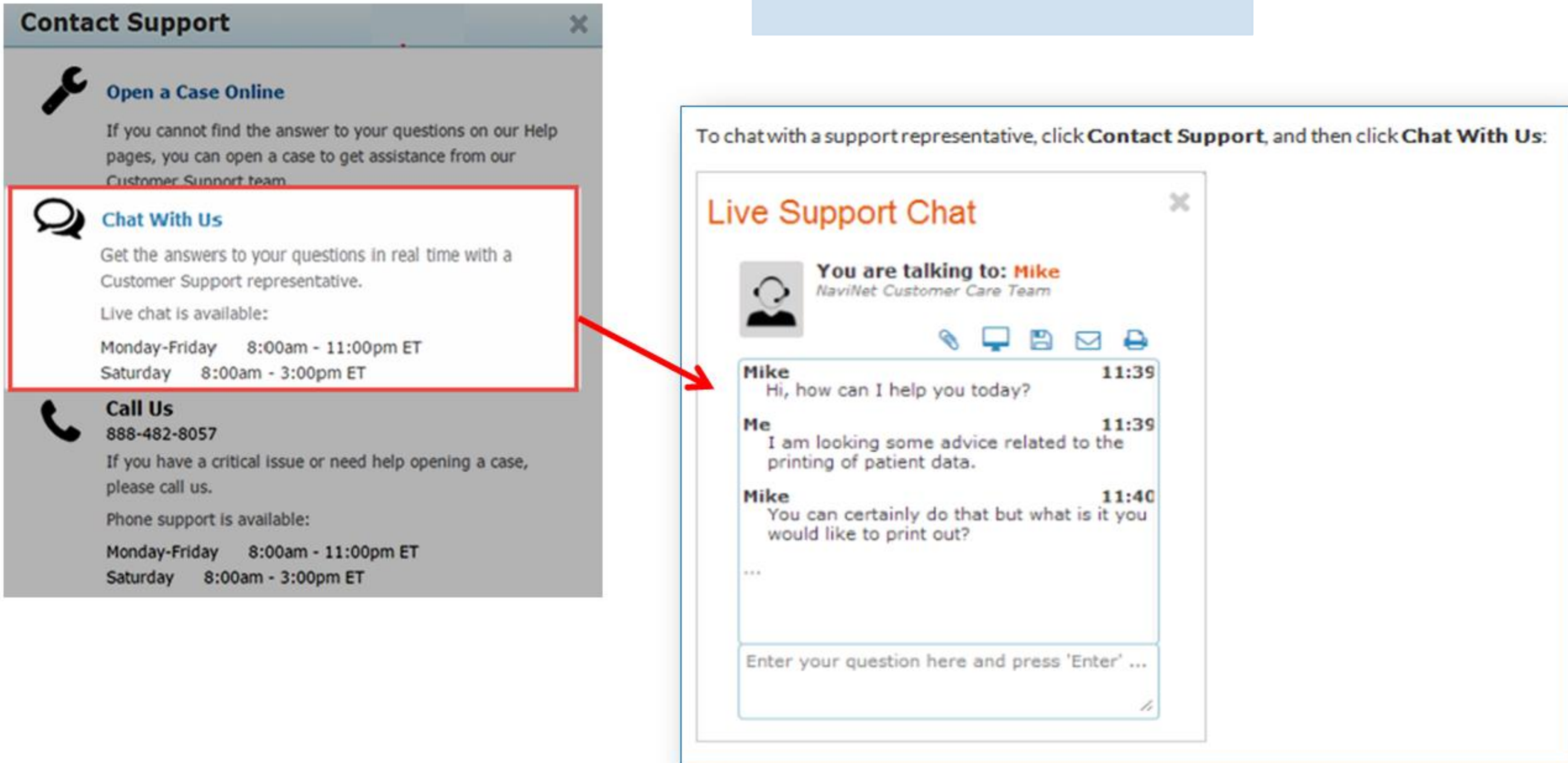
Keep track of your submitted cases



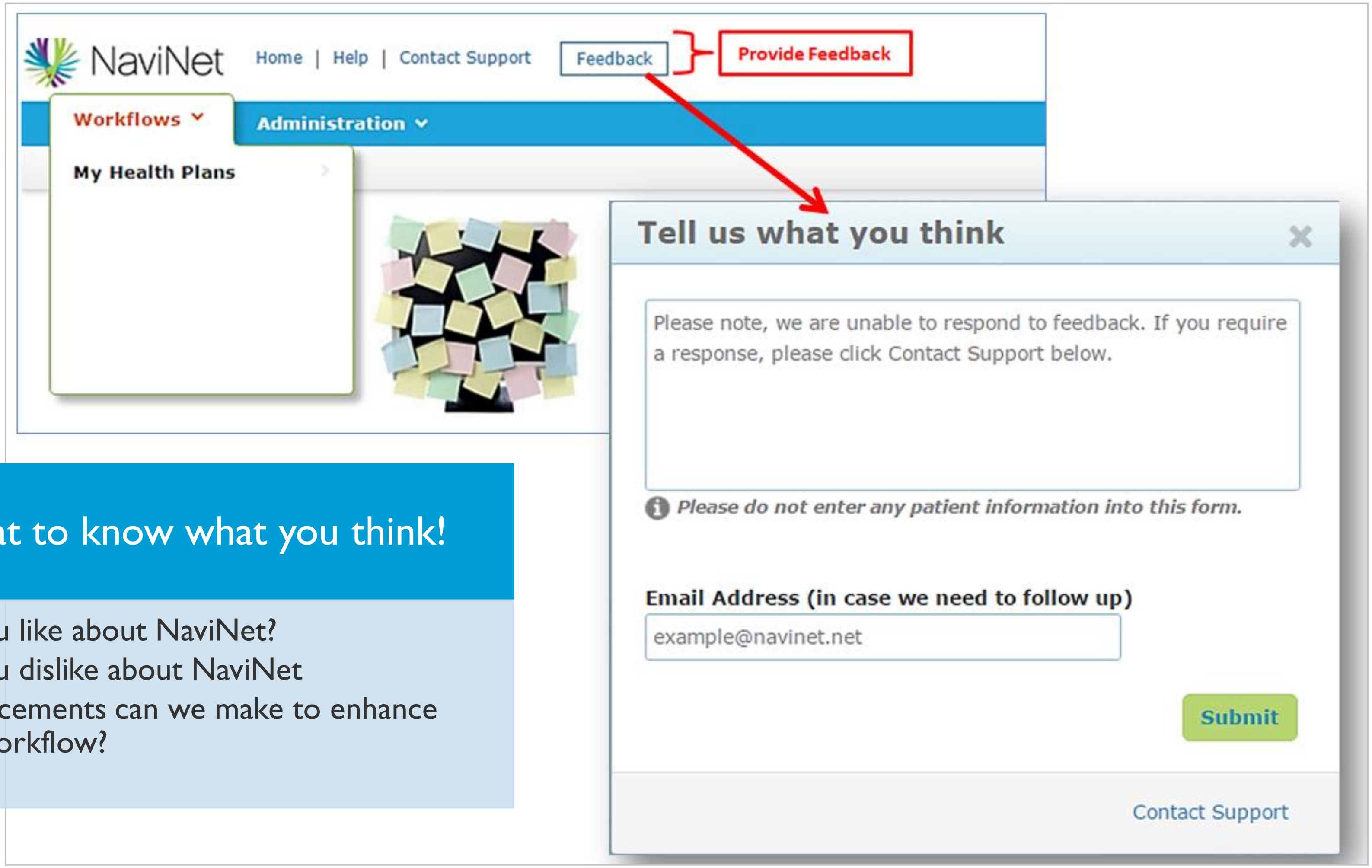
“Live Chat”

Chat With Us

- Offers immediate assistance



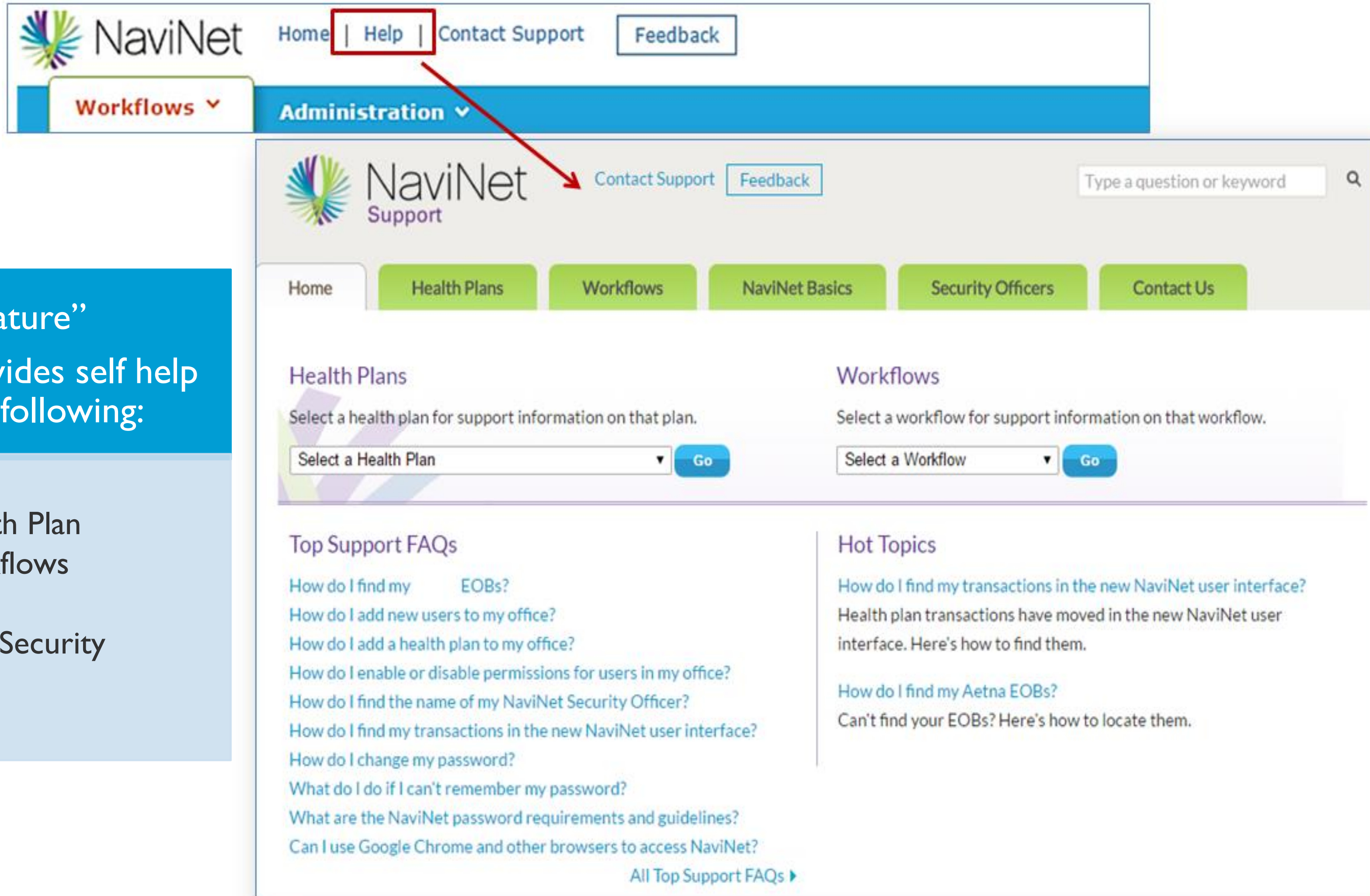
We want to know what YOU think…



We what to know what you think!

- What do you like about NaviNet?
- What do you dislike about NaviNet
- What enhancements can we make to enhance your daily workflow?

Help Feature



"Help Feature"

This feature provides self help tools for the following:

- According to Health Plan
- According to workflows
- NaviNet Basics
- Self Help tools for Security Officers

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Thank You