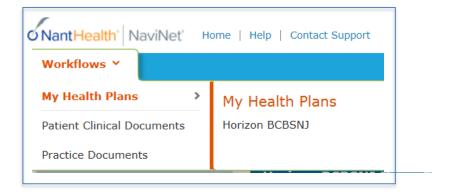


Utilization Management Request Tool Appeal Denial

December 2018

How to access

 Sign on to NaviNet and select Horizon BCBSNJ from the My Health Plans menu.

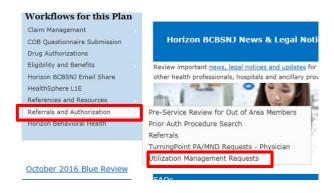


When submitting a request for a Horizon BCBSNJ member please select the Horizon BCBSNJ option. Request for BCBSNJ members can not be submitted using the NJ Health option.

How to access

- If you are new to NaviNet for Horizon BCBSNJ, you must share your email using the Horizon BCBSNJ Email Share transaction. Please enter your email address in all lower case and click Submit.
- Once completed, please log out of NaviNet and log back in again. You will then be able to access the appropriate transactions.

Mouse over Referrals and Authorization.



Select
Utilization
Management
Requests.

Main Menu

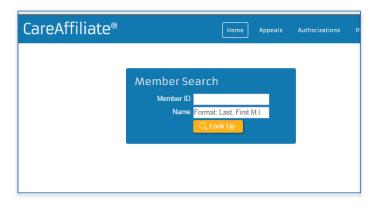
- A variety of actions can be performed from the Main Menu:
 - Request an authorization or referral
 - Check the status of an authorization or referral



A session is limited to 30 minutes. A message will appear that the session is about to close. Incomplete requests cannot be saved.

Identifying the Member

- It is recommended that you search for a member by using the member's Horizon BCBSNJ ID number.
 - By member ID type: Click on the Lookup icon Q to open the Member ID search dialog box and select
 Member ID type.
 - By member's name: Member ID type must be set to None. Enter member's Name and DOB.





Member ID (continued)

Member search option - only one is required.



- Member ID type:
 - Select CCID (customer card ID)for Horizon BCBSNJ.
 - Select FEP for FEP members.
 - Select HNJH ID for Horizon NJ Health.

Member name:

Member ID Type must be (None)

- You can enter a partial name with the wildcard asterisk (*).
- Minimum number of characters in Last Name field before wildcard is four.
- Minimum number of characters in First Name field before wildcard is three.

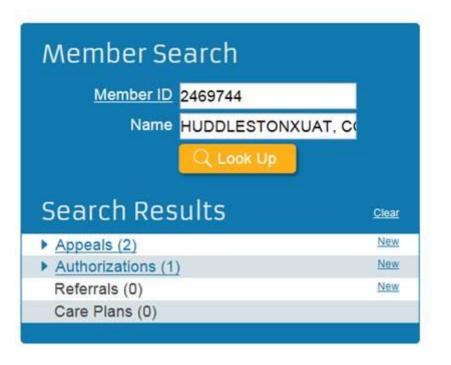


Birth Date:

- You can also enter the DOB with the members name.

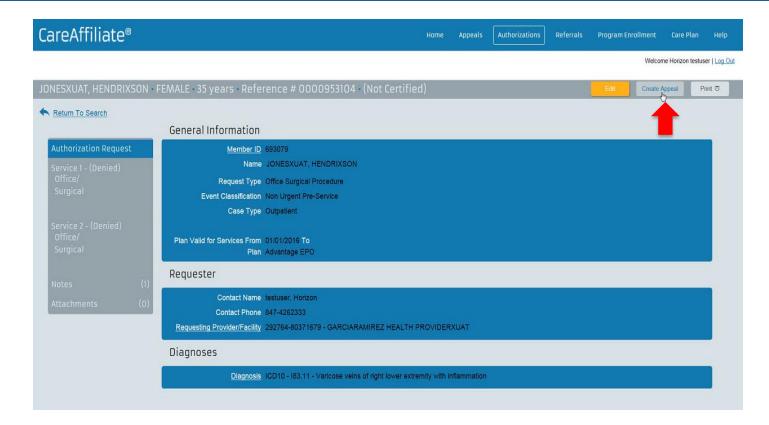
Member Search Screen

From here user can see all results for individual member.



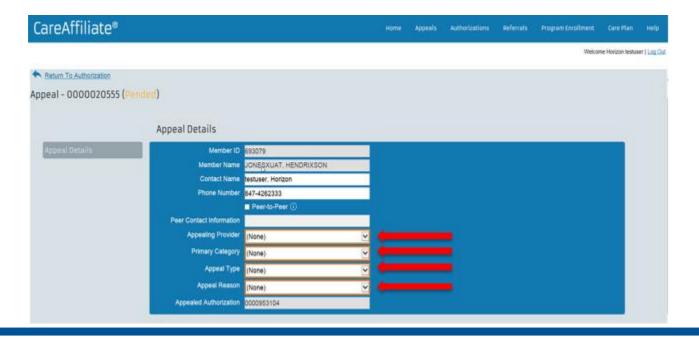
Authorization Request

- Click on the specific authorization that has been denied to view the General Information screen.
- Click on the Create Appeal button.



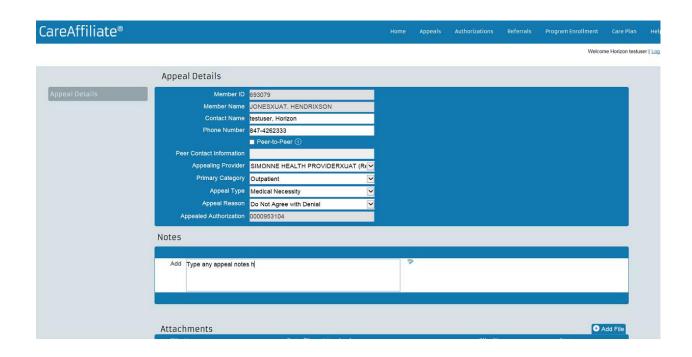
Appeal Details

 Complete the highlighted tabs by utilizing the dropdown arrow in each field.



Notes

- Utilize the Notes feature to submit an appeal or additional clinical information.
- Limited space is available.



Attachments

- Attachments work the same as they do with the prior authorization requests.
- Click Add File to open a browser dialog box and select file(s).
- A Description field is available for entering a description.
- Select Upload Files to upload the file.
- A status of Attached appears when files have been uploaded successfully.



Peer-to-Peer Requests

 Peer-to-Peer requests may be available.

 Click on the box next to Peer-to-Peer requests.



Peer-to-Peer Information



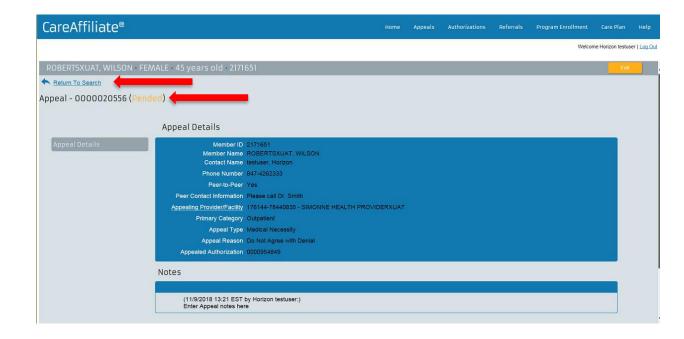
Peer-to-Peer Dialog Box



- Provide contact information in the dialog box.
 - Limited to 50 characters.
- Hit Submit and confirm with Yes.

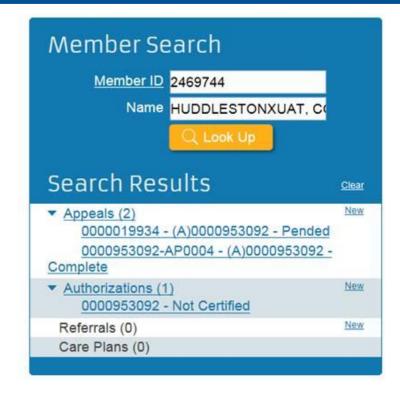
Return Button to Search

- The status on the example shows Pended.
- Click on Return to Search to return to the Search Results screen.



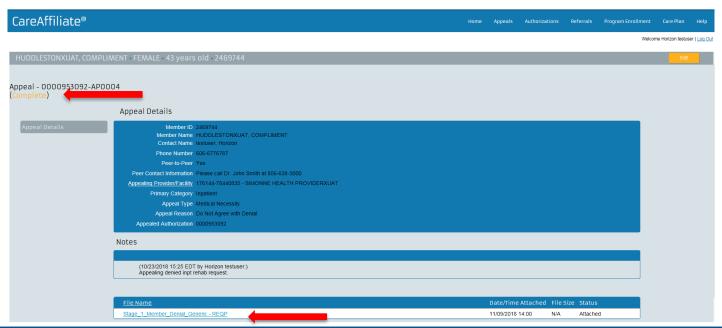
Search Results

- Once the appeal is submitted a new number will be generated.
- Best practice: Search by member in order to view the new number.



Completed Appeal

 The status at the top of the page indicates Complete and a copy of the appeal determination letter is attached at the bottom of the screen for the provider to retrieve.





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