



NaviNet User Guide

Guidelines for accessing the NaviNet portal, member eligibility, care gaps and more.



NaviNet User Guide

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Section 1: Overview

What is NaviNet?

NaviNet is an easy-to-use, free Web portal that links providers with health plans, including Select Health. With a single login and password, you can review real-time patient information, such as eligibility, benefits and claims status, from several different health plans.

What Are Some of the Features?

In addition to checking eligibility and claims status, you can also receive clinical alerts (care gaps; see section 4) and clinical summaries (see section 5) through NaviNet. These clinical features help you to better manage the care of your patients. For additional information on available features please contact your provider representative.

How Can You Sign Up?

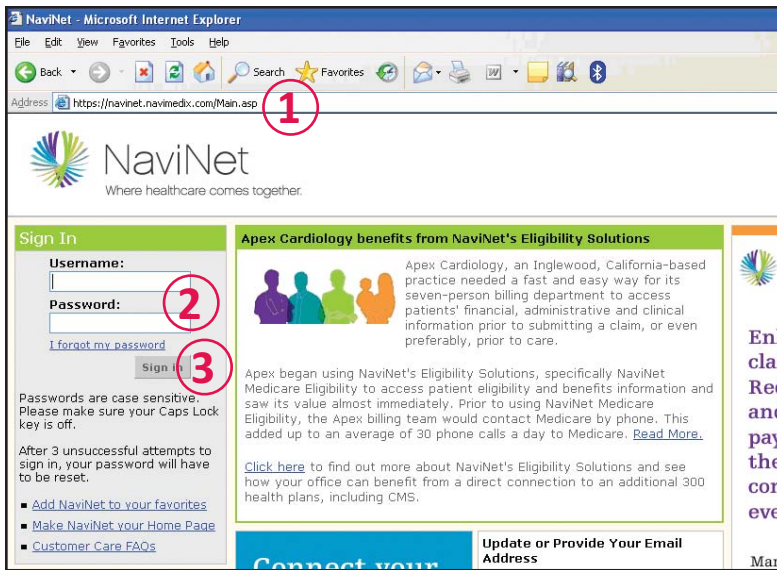
Visit NaviNet at <https://navinet.navimedix.com>. Click on the “Sign Up Now” link to begin the enrollment process.

Need Technical Support?

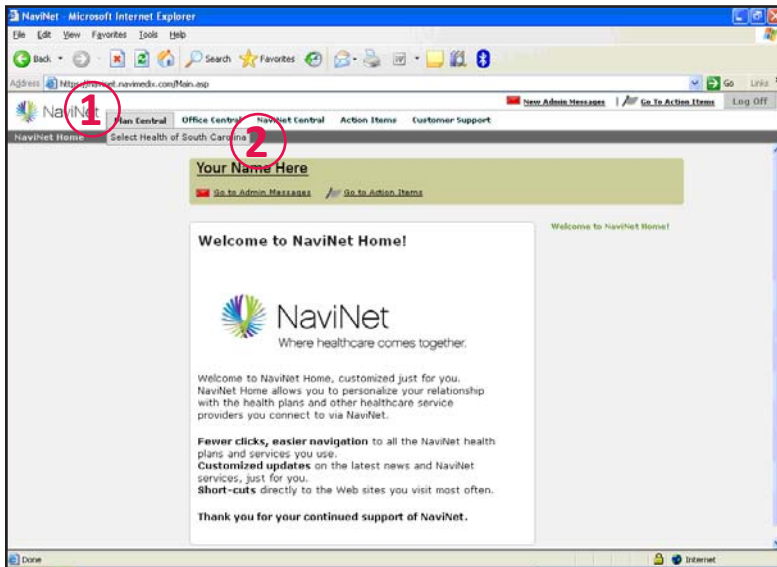
Call NaviNet Customer Care at 1.888.482.8057, and a representative will help you.



Section 2: Logging In

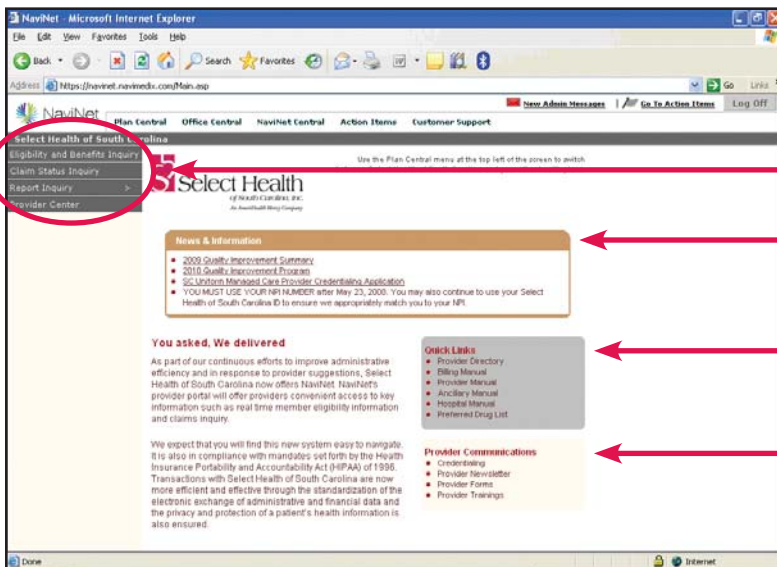


1. Access the NaviNet website: <https://navinet.navimedix.com>
2. Type in username and password
3. Click the "Sign In" button



This is the Welcome page.

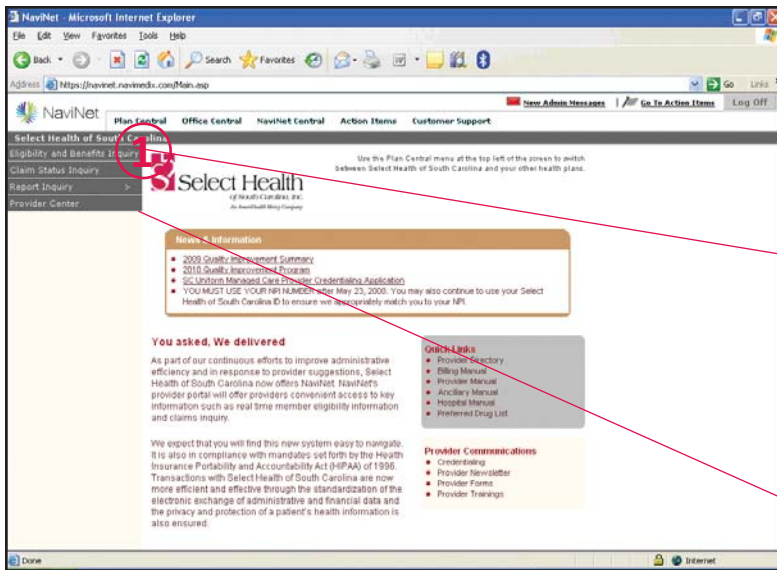
1. From the navigation bar at the top, click on Plan Central.
2. Then click on Select Health of South Carolina from the drop-down menu.



This is the Plan Central page.

- Inquiry and Report Menu
- News and Information
- Quick Links
- Provider Communications

Section 3: Eligibility and Benefits



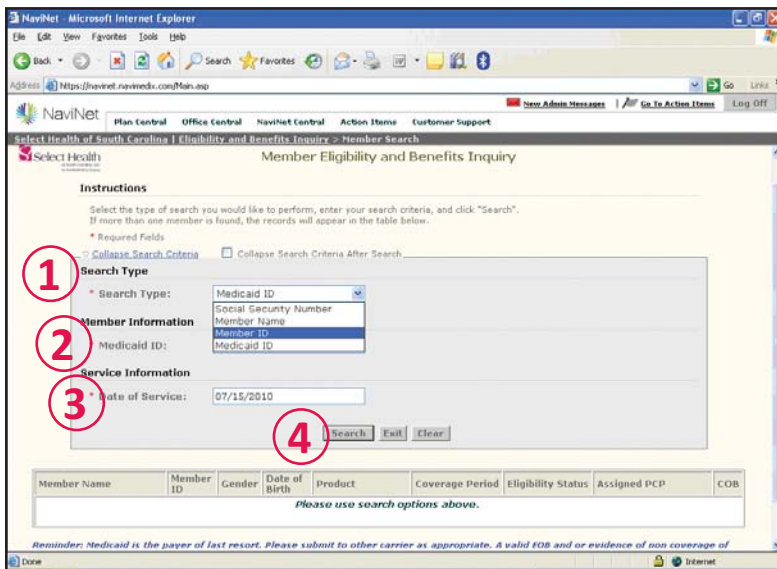
1. From the Plan Central page, select “Eligibility and Benefits Inquiry” from the left menu.

Eligibility and Benefits Inquiry

Claim Status Inquiry

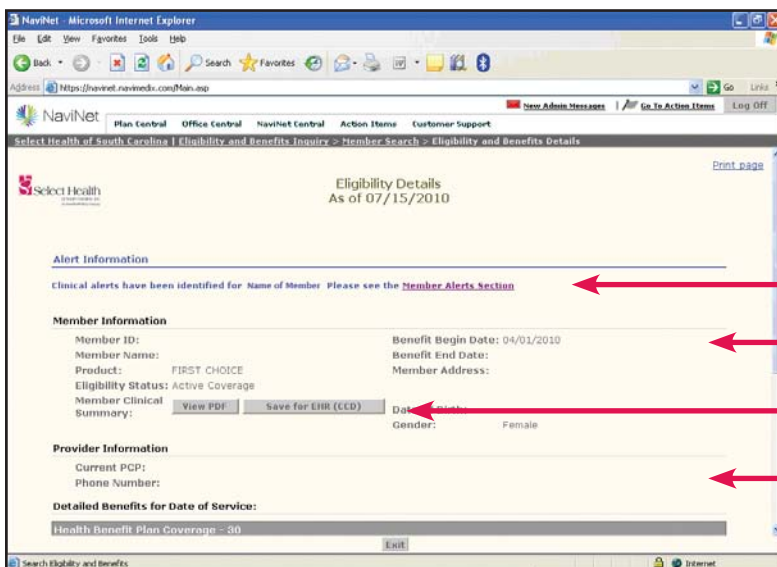
Report Inquiry

Provider Center



This is the Eligibility and Benefits Inquiry search page.

1. Select type of search (by Social Security number, member name, member ID or Medicaid ID).
2. Enter the member’s information that you chose to search by.
3. Fill in the date of service.
4. Click on the “Search” button.



This is the Eligibility Details page. This page gives you clinical alerts, member information and PCP information.

Clinical Alerts (see section 4)

Member Information

Member Clinical Summary (see section 5)

PCP Information

Section 3: Eligibility and Benefits

When you scroll down on the Eligibility Details page you also see plan coverage status and eligibility history.

- Plan Coverage
- Eligibility History
- Care Gap Alert

Use the menu in the upper left corner to begin a new search or start a different inquiry. Do not use the back button on your browser.

Use drop-down menu to navigate to a new inquiry.



Section 4: Care Gaps (also called Clinical Alerts)

The screenshot shows the NaviNet interface with a red arrow pointing to a 'View' button next to the text 'Care gap for Member Name'.

The Care Gap Alert allows the provider to find missing recommended services before a member comes in for a visit.

You can download the member's care gap by clicking on the "View" button. A PDF will open in another window.

Care Gap Alert

MEMBER CAREGAP
Important Clinical Information -
 Print this document and place it at the front of the Member's Medical Record for review by a healthcare professional.

For Member:
 Name:
 ID #:
 Age/DOB:
 Phone:

PCP Information:
 Name:
 Address:
 Phone:

Overdue or Missing Service(s)

Condition	Service Due	1. Last Service	2. Status	3. Rule or Frequency
PREVENTIVE HEALTH SCREENS	CERVICAL CANCER SCREEN		Missing	ONCE PER YEAR
DIABETES	MICROALBUMIN TEST		Missing	ONCE PER YEAR
PREVENTIVE HEALTH SCREENS	BREAST CANCER SCREEN		Missing	ONCE PER YEAR

Here is a sample Care Gap report. Please refer to Section 7 on Reports for more options.

The screenshot shows the NaviNet navigation menu with a green arrow pointing to the 'Eligibility and Benefits Inquiry' option.

Use the menu in the upper left corner to begin a new search or start a different inquiry. Do not use the back button on your browser.

Use drop-down menu to navigate to a new inquiry.

Section 5: Member Clinical Summary

Eligibility Details
As of 07/15/2010

Alert Information
Clinical alerts have been identified for Name of Member. Please see the [Member Alerts Section](#).

Member Information
Member ID: [redacted] Benefit Begin Date: 04/01/2010
Member Name: [redacted] Benefit End Date: [redacted]
Product: FIRST CHOICE Member Address: [redacted]
Eligibility Status: Active Coverage
Member Clinical Summary: [View PDF](#) [Save for EHR \(LCO\)](#) [Clinical Member Summary](#)
Date of Birth: [redacted] Gender: Female

Provider Information
Current PCP: [redacted]
Phone Number: [redacted]

Detailed Benefits for Date of Service:
Health Benefit Plan Coverage - 30

The Member Clinical Summary report allows our providers to view facts about our members, such as general information, medications filled within the past 6 months, chronic conditions, gaps in care, ER visits, inpatient admissions and office visits.

Clinical Member Summary

MEMBER CLINICAL SUMMARY
Date of Report : 07/15/2010
Member : [redacted]

Member Information
Name: [redacted]
Address: [redacted]
Address2: [redacted]
City/ST/Zip: [redacted]
Phone: [redacted]
Gender: [redacted]
DOB: [redacted]
Member ID: [redacted]

PCP Information
Provider Name: [redacted]
Address1: [redacted]
Address2: [redacted]
City/ST/Zip: [redacted]
Phone: [redacted]

Medications (within past 6 months)

Fill Date	Name & Strength	Days Supply	Prescriber Name	Pharmacy Name
7/6/2010	DIOVAN 180 MG TABLET	30	[redacted]	BI LO PHARMACY #273
7/6/2010	HYDROCODONE-APAP 10-500 TABLET	30	[redacted]	BI LO PHARMACY #273
6/19/2010	METFORMIN HCL 1,000 MG TABLET	30	[redacted]	BI LO PHARMACY #273
6/19/2010	LEVOTHYROXINE 25 MCG TABLET	30	[redacted]	BI LO PHARMACY #273

Here is a sample Member Clinical Summary report. Please refer to Section 7 on Reports for more options.

NaviNet - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites

Address: https://navinet.navimedix.com/Main.asp

NaviNet Plan Central Office Central NaviNet Central

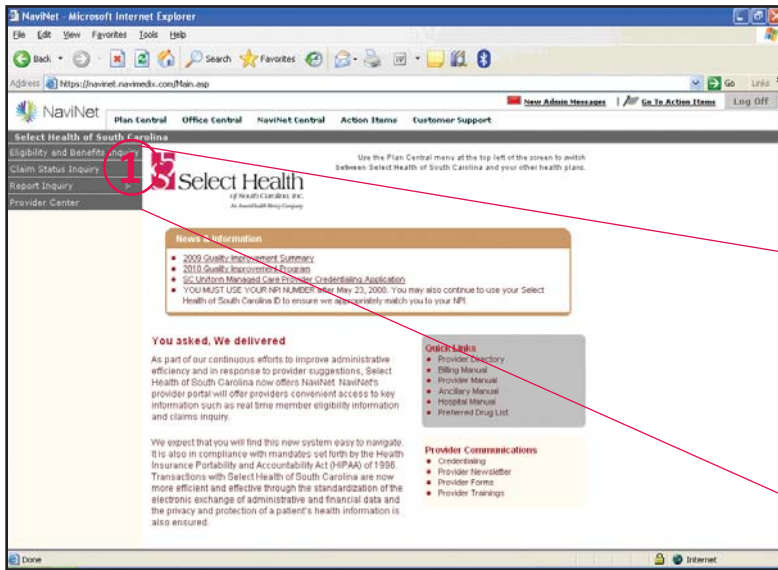
Select Health of South Carolina | Eligibility and Benefits Inquiry

- Go to Select Health of South Carolina
- Eligibility and Benefits Inquiry
- Claim Status Inquiry
- Report Inquiry
- Provider Center

Use drop-down menu to navigate to a new inquiry.

Use the menu in the upper left corner to begin a new search or start a different inquiry. Do not use the back button on your browser.

Section 6: Claim Status



1. From the Plan Central page, select “Claim Status Inquiry” from the left menu. See detail below.

Eligibility and Benefits Inquiry
Claim Status Inquiry
 Report Inquiry
 Provider Center

The screenshot shows the 'Claim Status Inquiry' search page. It includes a search form with the following fields and steps:

- 1** Search Type: A dropdown menu set to 'Medicaid ID'.
- 2** Provider Information: A dropdown menu for 'Group Name - PIN / NPI'.
- 3** Member Information: A text input field for 'Medicaid ID'.
- 4** Claim Information: Two text input fields for 'Service Start Date' (01/15/2010) and 'Service End Date' (07/15/2010).
- 5** Search: A button labeled 'Search'.

This is the Claim Status Inquiry search page.

1. Select type of search (by Social Security number, member name, member ID or Medicaid ID).
2. Select the group name (Provider name is not required).
3. Fill in the member’s information for the type of search you chose (in #1).
4. Enter the start and end service dates.
5. Click on the “Search” button.

Scroll Down

The screenshot shows the results of a search. It includes a table with the following columns: Claim Number, Member ID, Member Name, Date of Birth, Gender, Service Date Range, Total Amount Billed, Total Amount Paid, Claim Status, Remark Code, ERA, and Select. The table contains several rows of data, all with 'Finalized' status.

Claim Number	Member ID	Member Name	Date of Birth	Gender	Service Date Range	Total Amount Billed	Total Amount Paid	Claim Status	Remark Code	ERA	Select
				Female	01/27/2010-01/27/2010			Finalized		ERA	Select
				Female	02/12/2010-02/12/2010			Finalized		ERA	Select
				Female	02/26/2010-02/26/2010			Finalized		ERA	Select
				Female	03/05/2010-03/05/2010			Finalized		ERA	Select
				Female	03/23/2010-03/23/2010			Finalized		ERA	Select
				Female	04/23/2010-04/23/2010			Finalized		ERA	Select
				Female	05/25/2010-05/25/2010			Finalized		ERA	Select
				Female	06/18/2010-06/18/2010			Finalized		ERA	Select

The Claim Status search results will appear at the bottom of the page. This page gives you claim numbers, member information, service dates, amounts billed, amounts paid and the option to see the Online Remittance Advice.

Section 6: Claim Status

Claim Information

* Service Start Date: 01/01/2010 Service End Date: 07/15/2010
 Claim Number:

Search Exit Clear

Claim Number	Member ID	Member Name	Date of Birth	Gender	Service Date Range	Total Amount Billed	Total Amount Paid	Claim Status	Remark Code	
				Female	01/27/2010-01/27/2010			Finalized	ERA	Select
				Female	02/12/2010-02/12/2010			Finalized	ERA	Select
				Female	02/26/2010-02/26/2010			Finalized	ERA	Select
				Female	03/05/2010-03/05/2010			Finalized	ERA	Select
				Female	03/23/2010-03/23/2010			Finalized	ERA	Select
				Female	04/23/2010-04/23/2010			Finalized	ERA	Select
				Female	05/25/2010-05/25/2010			Finalized	ERA	Select
				Female	06/18/2010-06/18/2010			Finalized	ERA	Select

Online Remittance Advice will be available for claims paid on or after 4/5/2004.

GO TO 1

Click "ERA" on the Claim Status Results page to see a PDF of the Online Remittance Advice.

Claim Status	Remark Code		
Finalized		ERA	Select
Finalized		ERA	Select
Finalized		ERA	Select

https://docs.healthclaimonline.com/get_document.adc?cl=5508_02BRHJ1GHepH1OKpRWARVJHmIGRX5h8Hb - ...

1 / 5 78.8% Find

Select Health
 P.O. Box 40849
 Charleston, SC 29423-0849

Return Service Requested
 102 0.7130 AT 0.354 3-DIGIT 2%
 Provider name and address here 2

For further inquiries on this remittance advice contact: Select Health of South Carolina Airport Business Center
 200 Stevens Drive
 Philadelphia, PA 19113
 or call 1 (800) 575-0418

Payee ID:
 Tax ID:
 NPI #:
 Check No.:
 Check Ref. ID:
 Payment Date:

Remittance Advice

Provider ID:		NPI #:		Member ID:		Patient ID:					
Provider Name:		Member Name:		Claim ID:							
Date of Service	Proc/Rev DRG Code	Mod	Description	Qty	Charged Amount	Allowed Amount	OIC	Coins	COB	Amount Paid	Adj/ Den
01/27/10-01/27/10			Office or other outpatient	001				0.00	0.00	0.00	
					Prior Payment				0.00		
Claim Total					\$5.00	60.04	0.00	0.00	0.00	0.00	60.04

Provider ID:		NPI #:		Member ID:		Patient ID:					
Provider Name:		Member Name:		Claim ID:							
Date of Service	Proc/Rev DRG Code	Mod	Description	Qty	Charged Amount	Allowed Amount	OIC	Coins	COB	Amount Paid	Adj/ Den
01/29/10-01/29/10			Office or other outpatient	001				0.00	0.00	0.00	
					Prior Payment				0.00		
Claim Total					\$5.00	60.04	0.00	0.00	0.00	0.00	60.04

Done Unknown Zone

This is an Online Remittance Advice, found by clicking on the "ERA" button at the end of the row on the claim status results page.

Section 6: Claim Status

Claim Information

Service Start Date: 01/01/2010 Service End Date: 07/15/2010
 Claim Number:

Claim Number	Member ID	Member Name	Date of Birth	Gender	Service Date Range	Total Amount Billed	Total Amount Paid	Claim Status	Remark Code	
				Female	01/27/2010-01/27/2010			Finalized	ERA	Select
				Female	02/12/2010-02/12/2010			Finalized	ERA	Select
				Female	02/24/2010-02/24/2010			Finalized	ERA	Select
				Female	03/05/2010-03/05/2010			Finalized	ERA	Select
				Female	03/23/2010-03/23/2010			Finalized	ERA	Select
				Female	04/23/2010-04/23/2010			Finalized	ERA	Select
				Female	05/05/2010-05/05/2010			Finalized	ERA	Select
				Female	06/18/2010-06/18/2010			Finalized	ERA	Select

Online Remittance Advice will be available for claims paid on or after 4/5/2004.

[Go to 1](#)

Click "Select" on the Claim Status Results page to see claim status details.

Claim Status	Remark Code		
Finalized		ERA	Select
Finalized		ERA	Select
Finalized		ERA	Select

NaviNet - Microsoft Internet Explorer

Address: https://navinet.navimedsc.com/Plan.asp

Plan Central Office Central NaviNet Central Action Items Customer Support

Select Health of South Carolina | Claim Status Inquiry > Claim Search > Claim Status Details

Claim Detail
As of 07/15/2010

Member Information
 Member Name: _____ Date Of Birth: _____
 Member ID: _____ Gender: Female

Provider Information
 Servicing Provider ID: _____ Servicing Provider Name: _____

Claim Detail
 Claim Number: _____
 Service Date Range: 01/27/2010-01/27/2010 Status Date: 02/06/2010
 Total Amount Billed: _____ Category Code: E1
 Total Amount Paid: _____ Status Code: 107
 Paid Date: 02/08/2010
 Check Number: _____
 Medical Record Number: _____

Date From	Date To	Procedure Cd	Modifiers	Units	Claim Status	Category Cd	Revenue Cd	CAP
Charged Amt	Paid Amt	Allowed Amt	Copy Amt	COB Amt	Deductible Amt	Withhold Amt	Remark Cd	DRG
1	\$95.00	\$60.04	\$60.04	\$ 0.00	\$ 0.00	\$ 0.00		

Claim Category	Claim Category Description
F1	Finalized/Payment - The claim/line has been paid.
Claim Status	Claim Status Description
107	Processed according to contract/plan provisions.
Remark Code	Remark Code Description

The Paid Date field represents the date the claim updated to Accounts Payable. Please allow 2 business days for check processing.

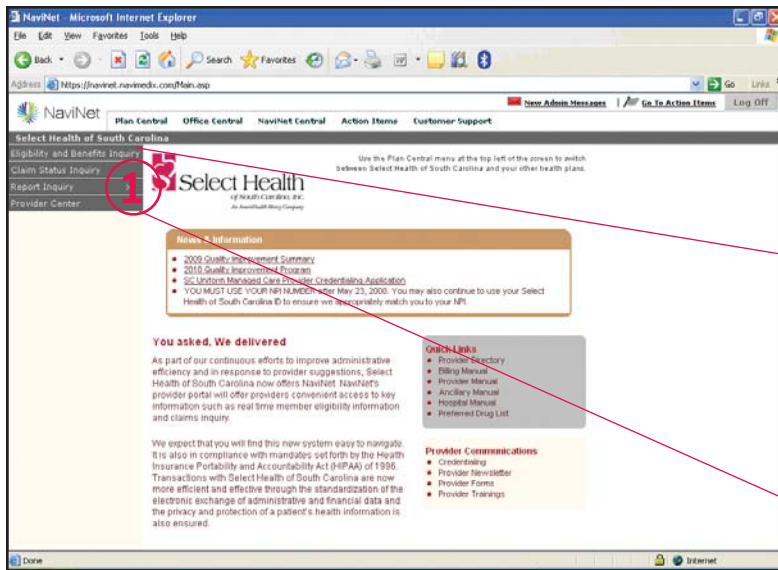
[Go to top](#)

This is the Claim Details page. You can get here by clicking the "Select" button on the Claim Status Results page.

This page shows more detailed information about the claim such as procedure codes, allowed amounts and remark code descriptions.

Use the "Exit" button or the menu at the top (both circled in green) to get back to the Plan Central page.

Section 7: Reports



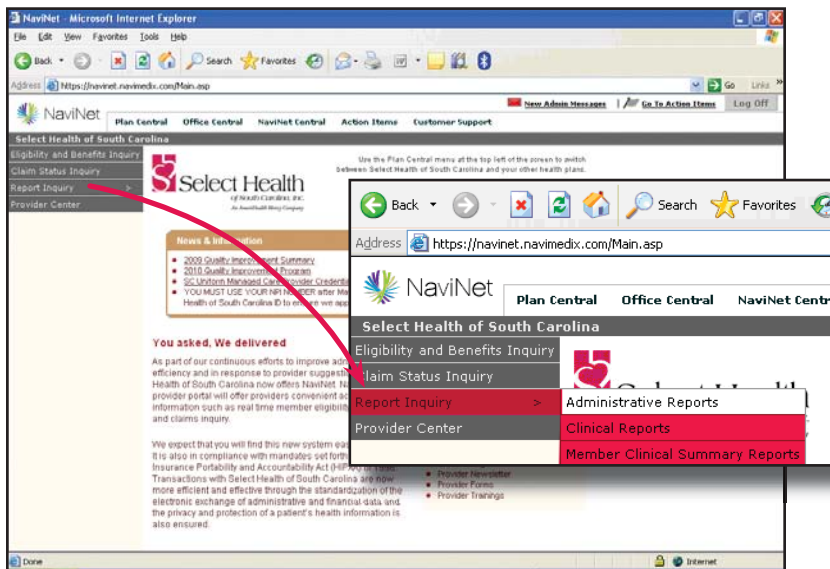
1. From the Plan Central page, select “Report Inquiry” from the left menu. See detail below.

Eligibility and Benefits Inquiry

Claim Status Inquiry

Report Inquiry

Provider Center



After clicking on Report Inquiry, select either Clinical Reports for a Care Gap Query or Member Clinical Summary Reports.

For a Clinical or Care Gap Report, see page 13.

For a Member Clinical Summary Report, see page 14.

The first time you request clinical information you will be directed to a User Clinical Access Confirmation Screen.



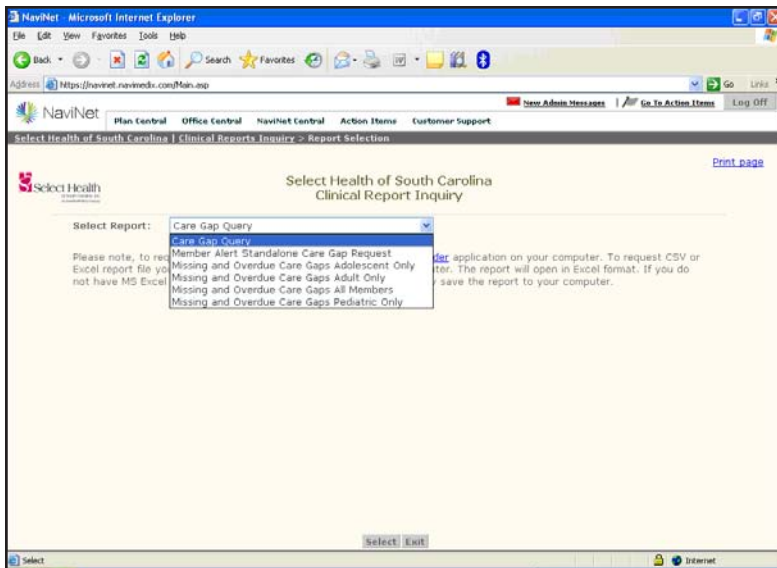
To proceed, you must confirm that you are eligible to view sensitive clinical data.

Yes gives you access to the reports and you will be taken to the report request screen. The system will record your answer and you will not be asked this question again.

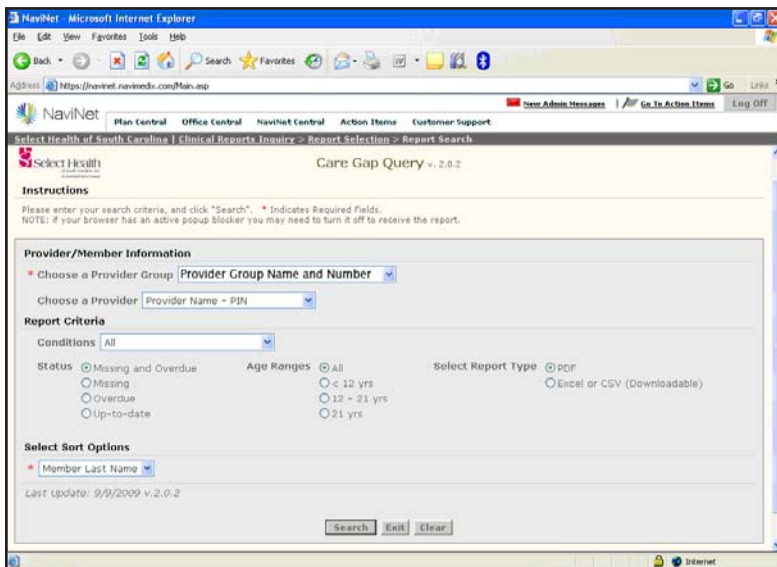
No restricts you from viewing any clinical reports or alerts and you will be returned to the previous screen.

You may also be directed to a screen that lists your office security officer(s) and directs you to contact him/her to request access.

Section 7: Reports, Clinical Reports or Care Gap Queries



Choose “Care Gap Query” for the most options for searching.



Fill out the Care Gap Query form and click the “Search” button. (Only the Provider Group and Sort Options are required.)

You have the option of selecting a PDF or an Excel report but based on your computer security settings you may need to select PDF as the report type. The report will open up in a new window.

Provider ID	Member ID	Member Information	Date of Birth	Condition	Service	Status	Last Service Dt
200	Member ID #	Member Name	12/19/	DIABETES	MICROALBUMIN TEST	Missing	
		Address City, State Zip Phone number		DIABETES	EYE EXAM	Overdue	05/18/2007
200	Member ID #	Member Name	04/01/	PREVENTIVE HEALTH SCREENING	CERVICAL CANCER SCREEN	Missing	
		Address City, State Zip Phone number		PREVENTIVE HEALTH SCREENING	CERVICAL CANCER SCREEN	Missing	
200	Member ID #	Member Name Address City, State Zip Phone number	09/14/	PREVENTIVE HEALTH SCREENING	CERVICAL CANCER SCREEN	Overdue	10/26/2007
200	Member ID #	Member Name Address City, State Zip Phone number	12/15/	PREVENTIVE HEALTH SCREENING	CERVICAL CANCER SCREEN	Missing	
200	Member ID #	Member Name Address City, State Zip Phone number	08/19/	PREVENTIVE HEALTH SCREENING	BREAST CANCER SCREEN	Overdue	10/10/2008
200	Member ID #	Member Name Address City, State Zip Phone number	06/25/	ASTHMA	MEDICATION MANAGEMENT	Missing	

This query shows the members within your practice who fall into the categories that you specified in your search criteria.

Section 7: Reports, Member Clinical Summary Report

The screenshot shows the NaviNet Member Clinical Summary search form. The browser address bar shows <https://navinet.navimedix.com/Main.asp>. The page title is "Member Clinical Summary v. 2.2.1". The form includes the following fields and options:

- Instructions:** Please enter your search criteria, and click "Search". * Indicates Required Fields. NOTE: If your browser has an active popup blocker you may need to turn it off to receive the report.
- Patient Clinical Report:**
 - Choose a Provider Group:
 - Member ID:
 - Select Report Type:
 - View PDF
 - Save For EHR (CCD)
 - Search Time Frame:
 - 6 months
 - 24 months
- Last Update: 6/3/2010 v.2.2.1
- Buttons: Search, Exit, Clear

Fill out the form by choosing provider group, entering in the member's ID number and selecting time frame and the type of report you would like to receive. To get the results, click on "Search."

You have the option of selecting a PDF or an Electronic Health Record (EHR) report type but based on your computer security settings you may need to select PDF as the report type. If you select PDF, the report will open up in a new window. If you select save for EHR, it will download to your computer.

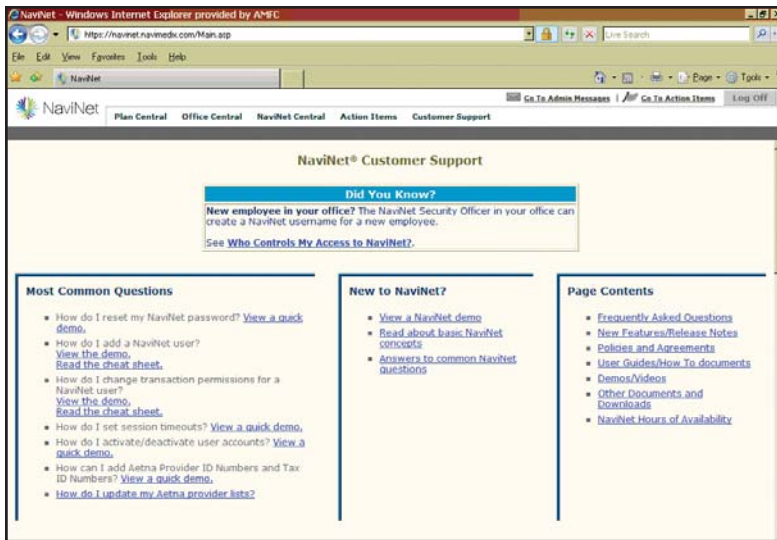
This is the Member Clinical Summary report. The report includes the member's information, PCP information, medications, chronic conditions, gaps in care, ER visits, inpatient admissions and office visits.

The screenshot shows the NaviNet Member Clinical Summary report. The browser address bar shows https://navinet.navimedix.com/WebServiceGatewayUI/Member_Clinical_Summary_1279220081159. The report title is "MEMBER CLINICAL SUMMARY" with a Date of Report of 07/15/2010. The report includes the following sections:

- Member Information:** Name, Address1, Address2, City/ST/Zip, Phone, Gender, DOB, Member ID.
- PCP Information:** Provider Name, Address1, Address2, City/ST/Zip, Phone.
- Medications (within past 6 months):**

Fill Date	Name & Strength	Days Supply	Prescriber Name	Pharmacy Name
7/9/2010	DIOVAN 180 MG TABLET	30		BI LO PHARMACY #273
7/6/2010	HYDROCODONE-APAP 10-500 TABLET	30		BI LO PHARMACY #273
6/19/2010	METFORMIN HCL 1,000 MG TABLET	30		BI LO PHARMACY #273
6/19/2010	LEVOTHYROXINE 25 MCG TABLET	30		BI LO PHARMACY #273

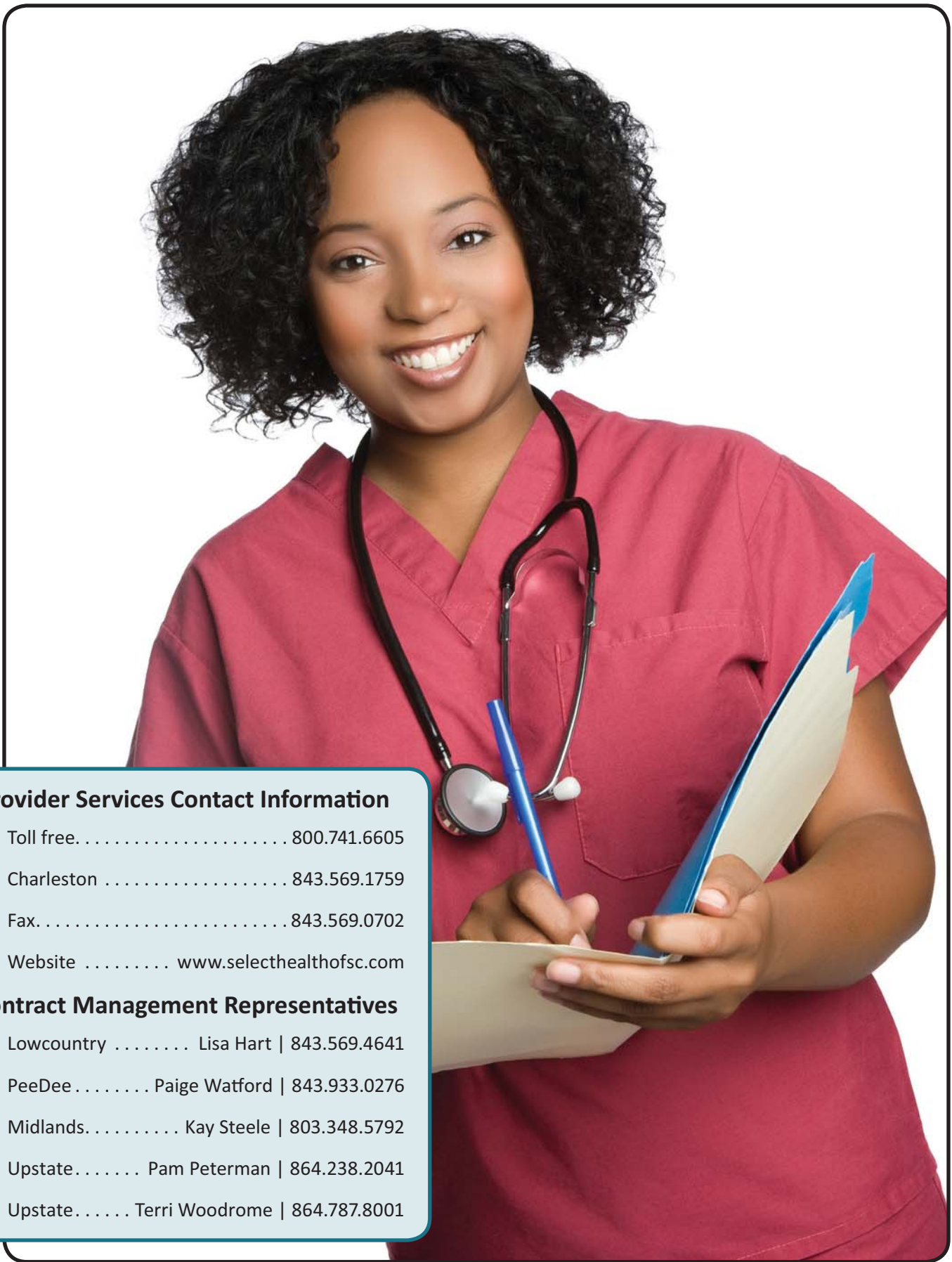
Section 8: Customer Care



This is the NaviNet Customer Support page. Customer Support offers many self-service assistance pages including demos and user guides.

Most questions can be answered here but if further assistance is needed, users may contact NaviNet Customer Care at 888.482.8057, Monday through Friday, 8:00 a.m. to 11:00 p.m., or Saturday, 8:00 a.m. to 3:00 p.m. (Eastern Time). For TDD/TTY services, please call 800.480.1419.





Provider Services Contact Information

Toll free. 800.741.6605
Charleston 843.569.1759
Fax. 843.569.0702
Website www.selecthealthofsc.com

Contract Management Representatives

Lowcountry Lisa Hart | 843.569.4641
PeeDee Paige Watford | 843.933.0276
Midlands. Kay Steele | 803.348.5792
Upstate. Pam Peterman | 864.238.2041
Upstate. Terri Woodrome | 864.787.8001