

PROVIDER Update



Health Net®

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Provider Appeals Information and Documentation Requirements

Health Net of California, Inc., Health Net Community Solutions, Inc. and Health Net Life Insurance Company (Health Net) are sending a reminder to participating providers about the necessary information and documentation to include when submitting an appeal.

OVERVIEW

Providers should use the Provider Dispute Resolution Request form for appeals. If a dispute is for multiple, substantially similar claims, the Provider Dispute Resolution Request spreadsheet (page two of the request form) should also be submitted with the request form. The provider dispute must include:

- Provider's name
- Provider tax identification (ID) number or National Provider Identifier (NPI)
- Contact information, including telephone number
- Original claim number

Health Net does not charge providers of service who submit disputes to the Health Net Provider Appeals Unit or the Health Net Medi-Cal Appeals Unit for processing provider disputes and does not discriminate or retaliate against a participating provider who uses the provider dispute process.

SHARED RISK PROVIDERS

Providers participating through a Health Net participating physician group (PPG):

- Cannot be charged a processing fee when utilizing the PPG's provider dispute process.
- Must submit disputes to the PPG that processed the claim.
- For inpatient hospital stays, submit documentation for the entire inpatient stay (including the date of service under appeal) to the PPG that processed the claim.

INFORMATION NEEDED

If the dispute is regarding a claim or a request for reimbursement of an overpayment of a claim, the dispute must include:

- Clear identification of the disputed item.
- Date(s) of service.
- Clear explanation about why the provider believes the payment amount, request for additional information, request for reimbursement of an overpayment, or other action is incorrect.

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO/POS/HSP
- PPO
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
 - Kern
 - Los Angeles
 - Molina
 - Riverside
 - Sacramento
 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

PROVIDER SERVICES

provider_services@healthnet.com

EnhancedCare PPO (IFP)

1-844-463-8188

provider.healthnetcalifornia.com

EnhancedCare PPO (SBG)

1-844-463-8188

provider.healthnet.com

Health Net Employer Group HMO, POS, HSP, PPO, & EPO

1-800-641-7761

provider.healthnet.com

IFP – CommunityCare HMO, PPO,

PureCare HSP, PureCare One EPO

1-888-926-2164

provider.healthnetcalifornia.com

Medi-Cal – 1-800-675-6110

provider.healthnet.com

PROVIDER COMMUNICATIONS

provider.communications@

healthnet.com

fax 1-800-937-6086

- If the provider receives denials from both the at-risk hospital or PPG and Health Net, include a copy of the denials.

If the dispute is not about a claim, the provider must include a clear explanation of the reason for the dispute, including, if applicable, relevant references to the *Provider Participation Agreement (PPA)*.

Submit disputes to the Health Net Provider Appeals Unit (HMO, HSP, PPO, and EPO) or the Health Net Medi-Cal Provider Appeals Unit (Medi-Cal).

SUPPORTING DOCUMENTATION – NON-SHARED RISK PROVIDERS

When submitting documents for a provider appeal or Health Net requests documentation relating to an appeal, the provider should only include documents with the dates that are requested or are in dispute unless otherwise specified. Documentation for dates outside of the scope of the request or appeal should not be included. For example, a member has an inpatient hospital stay from January 1 to January 10 but services on January 8 and January 9 are in dispute. Only itemized documentation for January 8 and January 9 should be submitted. Documentation for the entire stay from January 1 to January 10 is not required.

ADDITIONAL INFORMATION

Additional information regarding appeals and dispute resolution is available on Health Net’s original provider website at provider.healthnet.com in the Provider Library under *Operations Manuals > Dispute Resolution, Organization Determinations and Appeals*. Individual Family Plan (IFP) providers must access the new provider website at provider.healthnetcalifornia.com > *Resources > Contractual > Go to the Provider Library > Operations Manuals > Dispute Resolution > Organization Determinations and Appeals*. The Provider Dispute Resolution Request form is also available in the Provider Library under *Forms > Provider Dispute Resolution Request – Commercial and Medi-Cal*.

If you have questions regarding the information contained in this update, contact the applicable Health Net Provider Services Center within 60 days at:

Line of Business	Telephone Number	Provider Portal	Email Address
ENHANCEDCARE PPO (IFP)	1-844-463-8188	provider.healthnetcalifornia.com	provider_services@healthnet.com
ENHANCEDCARE PPO (SBG)	1-844-463-8188	provider.healthnet.com	
HEALTH NET EMPLOYER GROUP HMO, POS, HSP, PPO, & EPO	1-800-641-7761	provider.healthnet.com	
IFP (COMMUNITYCARE HMO, PPO, PURECARE HSP, PURECARE ONE EPO)	1-888-926-2164	provider.healthnetcalifornia.com	
MEDI-CAL	1-800-675-6110	provider.healthnet.com	N/A