



Horizon Blue Cross Blue Shield of New Jersey



Horizon Behavioral HealthSM Provider Frequently Asked Questions (FAQ)

This FAQ document will continue to be reviewed and updated frequently in order to provide the most current and pertinent information.

GENERAL IMPLEMENTATION TRANSITION QUESTIONS

Q. When will ValueOptions[®] begin to administer the behavioral health benefits for Horizon Behavioral HealthSM?

- A. Effective July 1, 2014, ValueOptions will administer the behavioral health benefits for Horizon Blue Cross Blue Shield of New Jersey's (BCBSNJ) behavioral health program, Horizon Behavioral Health.

Q. How do I contact Horizon Behavioral Health and/or ValueOptions on and after July 1, 2014?

- A. Although the phone numbers to contact Horizon Behavioral Health remain unchanged, there are some additional methods available to providers to contact Horizon Behavioral Health. Please refer to the following :

Inquiry Type	Contact Method
Provider Relations, Credentialing and Contracting Questions	Phone: 1-800-397-1630 (8 am - 8 pm ET Monday – Friday) E-mail: horizonbehavioralhealthproviderrelations@valueoptions.com
Authorizations and Care Management (Requests and Status Checks)	Phone: 1-800-626-2212 or 1-800-991-5579 (for NJ State Health Benefits Program) ProviderConnect SM
ProviderConnect Technical Questions/EDI Help Desk	Phone: 1-888-247-9311 (8 am - 6 pm ET Monday – Friday)
NaviNet [®]	Phone: 1-888-482-8057 or NaviNet.net
Complaints, appeals and/or general inquiries	Phone: 1-800-626-2212 or 1-800-991-5579 (for NJ State Health Benefits Program)

ELECTRONIC REQUIREMENTS

Q. Am I required to complete all transactions electronically with Horizon Behavioral Health?

- A. Providers are required to electronically conduct the following routine transactions upon joining Horizon BCBSNJ:
- Verification of eligibility inquiries
 - Submission of authorization requests
 - Submission of claims (note: paper claims and claims with support/clinical documents may also be submitted)
 - Electronic fund transfer

Q. What online solutions are available to complete these routine transactions with Horizon Behavioral Health?

- A. The following table lists the available online solutions by provider transaction type:

Transaction	NaviNet	ProviderConnect®
Claim Submission *	X	
View Member Benefit Information	X	
Verify Member Eligibility	X	X
Access and Print Forms	X	X
Download and Print Authorization Letters		X
Request and View Authorizations		X
Access to Message Center to Submit Customer Services Inquiries		X
Submit Recredentialing Applications		X

* Acute care facilities should submit claims only through a clearinghouse.



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AUTHORIZATIONS

Q. What is the process to obtain or request authorizations?

- A. The preferred method for providers to obtain or request authorizations is through ProviderConnect. However, providers can also have the option to complete this transaction by phone by calling 1-800-626-2212 or 1-800-991-5579 for NJ State Health Benefits Program (SHBP).

Providers should use *OnTrack* to assist them in outpatient management. *OnTrack* is accessible from ProviderConnect. Outpatient providers will be contacted if treatment planning information is required.

Urgent and emergent authorizations or facility/Higher Level of Care can be requested or reviewed 24/7.

Q. Will I receive authorization letters in the mail?

- A. Authorization letters will be available on ProviderConnect. To receive a letter by mail, please contact 1-800-626-2212 or 1-800-991-5579 for NJ State Health Benefits Program (SHBP).

Q. Are authorizations required for all services?

- A. Preauthorization of inpatient services is preferred, but please check the member's benefit plan for specific requirements.

Q. If a member does not require authorization with Horizon, will it be required with ValueOptions?

- A. Authorization requirements depend on the member's benefit plan. Please refer to NaviNet to view the requirements of a member's benefit plan.

Q. Is the process to request an Applied Behavior Analysis (ABA) authorization different than the information provided above?

- A. The process to request an ABA authorization is via phone and through use of a specific ABA treatment planning form. Providers should call 1-800-626-2212 or 1-800-991-5579 for NJ State Health Benefits Program (SHBP) for more information.

Q. How long does it take to get authorization status for inpatient level of care?

- A. Providers can access authorization information on ProviderConnect within 24-48 hours of a decision. Providers will be notified verbally by phone and via ProviderConnect.

CARE MANAGEMENT

Q. Who do I contact with any care management inquiry?



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- A. For all care management inquiries, contact 1-800-626-2212 or 1-800-991-5579 for NJ State Health Benefits Program (SHBP). Licensed care management staff is available 24 hours a day/seven days a week for referral and Higher Level of Care (HLOC) requests.

Q. How will the transition of care work from Magellan to ValueOptions?

- A. Magellan will continue to manage all members in Inpatient, Inpatient Detox, Inpatient Rehab and Residential Treatment Center until such time as the member steps down to the next level of care. Members should all have discharge plans in place at time of step down.

All members in Partial Hospital (PHP) and Intensive Outpatient (IOP) will have end dates of June 30, 2014 from Magellan. Horizon Behavioral health will be outreaching to PHP and IOP programs the week of June 23, 2014 and July 1, 2014 for concurrent review.

Members currently engaged in ICM with Magellan will be transitioned to ValueOptions for ongoing support.

ABA authorization given by Magellan with end dates past July 1, 2014 will continue to be paid. Providers should contact ValueOptions two weeks prior to the end date of authorization.

PROVIDERCONNECTSM AND NAVINET[®]

Q. What is ProviderConnect?

- A. ProviderConnect is ValueOptions' secure and HIPAA-compliant provider portal that enables in network providers to conduct online authorizations and other related transactions accurately and efficiently.

Q. Will I be able to submit claims through ProviderConnect?

- A. No, claim submission and viewing member benefit information is not available for Horizon Behavioral Health providers through ProviderConnect. Claims should be submitted using NaviNet. Please refer to the chart above to view the functionalities available through ProviderConnect and NaviNet.

Q. How do I register for ProviderConnect?

- A. New and current ProviderConnect users need to fax a completed [Account Request form](#) to 1-866-698-6032. Providers who already have a ProviderConnect account need to submit a new form to request an additional login id to access Horizon member information. Horizon providers need to mark the box for Horizon Behavioral Health Authorizations.

Registering for ProviderConnect requires a provider id. If you do not know their Provider ID, contact the Provider Services Line at 1-800-397-1630, 8 a.m. – 8 p.m., Monday through Friday.

Q. Will each of our providers in our facility be required to have an individual login to access ProviderConnect?



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A. It is recommended that each user have his/her own login, and password and that logins and passwords are not shared.

Q. If I am not in network provider, will I still be able to access and use ProviderConnect?

A. If you are not an in network provider, you will not be able to submit authorization requests via ProviderConnect. All other functionality should be available.

Q. What types of ProviderConnect training are available?

A. There are numerous training resources on ProviderConnect available in the [Provider section of Valueoptions.com](#). These resources include a free online demonstration, user guides, video tutorials and a listing of upcoming webinars. Additionally, customized training is available for you and/or your office.

Q. Is there training available on NaviNet?

A. Yes, Horizon BCBSNJ offers numerous upcoming webinars to participating physicians, health care professionals, office staff and billing offices which provide information on Navinet, as well as new Horizon BCBSNJ products, access standards and additional resources. Visit HorizonBlue.com/providers for more information.

Q. What browsers are compatible with ProviderConnect and NaviNet?

A. ProviderConnect supports Internet Explorer, Safari, Firefox and Chrome. NaviNet supports Internet Explorer 7 or greater, Safari 5 or greater and Firebox 5 or greater. At this time, NaviNet does not support Macintosh computers, although it is working on a solution to support them later this year.

CONTRACTING AND RECREDENTIALING/CREDENTIALING

Q. Is a provider considered In network with Horizon if he/she is in network with ValueOptions?

A. No, a provider must be contracted with Horizon BCBSNJ to see Horizon BCBSNJ members. To become a participating provider with Horizon, please contact ValueOptions at 1-800-397-1630 between 8 a.m.-8-p.m., Monday through Friday.

Q. Is a provider considered in network with ValueOptions if he/she is in network with Horizon BCBSNJ?

A. No. If you are not in the ValueOptions network and wish to be, please contact ValueOptions at 1-800-397-1630 between 8 a.m.-8-p.m., Monday through Friday.

Q. If I am an in network Provider with ValueOptions, can I see a member covered by Horizon BCBSNJ?

A. No, to see a member covered by Horizon BCBSNJ, you must be an in network provider with Horizon BCBSNJ.

Q. Who will now administer the recredentialing and credentialing processes?



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- A. ValueOptions will administer the recredentialing and credentialing processes for Horizon Behavioral Health. Horizon Behavioral Health providers with recredentialing due dates on or after July 1, 2014 are receiving recredentialing notices from ValueOptions. Notices were sent approximately 4-5 months prior to the renewal due date.

All providers with recredentialing due dates between January 1, 2014 and June 30, 2014 will or have received recredentialing information from Magellan, who will be completing recredentialing for these providers

Q. I am credentialed by both Horizon and ValueOptions. What will be my renewal date for recredentialing?

- A. If providers are credentialed by both Horizon and ValueOptions, the earliest recredentialing date will apply.

Q. I'm a practitioner. How do I complete the credentialing process?

- A. You can complete the credentialing process in one of three ways:
1. Complete an online universal credentialing application offered by Council for Affordable Quality Healthcare (CAQH) and give ValueOptions your identification number to access information
 2. Request and complete a ValueOptions paper application by calling the Provider Services Line at 1-800-397-1630 between 8 a.m.-8 p.m., Monday through Friday.
 3. Complete a New Jersey Universal Application

Q. How do we supply ValueOptions with the CAQH number to credential providers?

- A. If you have a CAQH number, we would like to document that number in our system. Please contact the ValueOptions Provider Services Line at 1-800-397-1630, 8 a.m. to 8 p.m. Monday through Friday, and provide us with your CAQH number. For more information on CAQH, refer to our [CAQH FAQ document](#).

Q. If a provider is credentialed with Horizon, but does not meet the three year licensure requirement of ValueOptions, will the provider be able to continue seeing their members?

- A. Yes, the provider will be able to continue seeing their members.

Q. If a provider is currently credentialed with both Horizon and Value Options, do we need to do anything?

- A. No.

CLAIMS AND BILLING



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Q. Do I submit claims to Horizon or ValueOptions?

- A. Ancillaries and professionals should submit claims electronically through NaviNet or through a clearinghouse to Horizon. Acute care facilities should submit claims only through a clearinghouse. Horizon will route behavioral health claims to ValueOptions. ValueOptions has a large claims team set up specifically to support and process behavioral health claims for Horizon.

Q. What is needed to submit a claim electronically?

- A. To submit a claim electronically, you will need Horizon's Payer ID (22099) and your NPI.

Q. Will claims continue to be accepted through clearinghouses?

- A. Yes, claims will continue to be accepted through clearinghouses. The Horizon Payer ID is 22099.

Q. Will paper claims be accepted?

- A. Although Electronic Claim Submission is strongly encouraged, behavioral health paper claims will be accepted and beginning July 1, 2014, should be sent to:

Horizon BCBSNJ
Horizon Behavioral Health
PO Box 10191
Newark, NJ 07101-3189

FEP Claims:
PO Box 656
Newark, NJ 07101-0656

BlueCard Claims:
PO Box 1301
Neptune, NJ 07754-1301