# NAVINET

## NantHealth<sup>\*</sup> NaviNet<sup>\*</sup> Username Password 0 SIGN IN Forgot password? Forgot username? Register for a new account

## NAVINET

# For Cigna, and if the insurance does not pull up in Availity.

### Click on "My Health Plans" dropdown and search or select the insurance company.

NantHealth NaviNet works	LOWS 👻 HEALTH PLANS 👻 A	dministration 🗸	0 ¢ ¢			
<b>Q</b> [Type here to search for any plan रे <b>ू: Can't see the plan you want?</b> Use search to find your plan						
My Plans		AllPayer Plans				
1199SEIU	Highmark Blue Cross Blue Shield Delaware	Alameda Alliance for Health	HealthNet National			
AmeriHealth Caritas Louisiana	Highmark Blue Cross Blue Shield West Virginia	Aetna Better Health (CA)	HealthNet National			
AmeriHealth Caritas New Hampshire	Horizon BCBSNJ	Alameda Alliance Health Plan	HealthNet of California			
AmeriHealth Caritas PA Community HealthChoices	Horizon NJ Health	Blue Cross of California (Anthem)	Inland Empire Health			

Once the health plan comes up, select the "Eligibility and Benefits" in the Workflows for this Plan section on the left.



### NAVINET

Select Natera as the servicing provider, and enter the required information to search for the patient; member ID, DOB, name, Etc.

K Back to Cigna	Eligibility 8	Benefits: Cigna
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#### Eligibility and Benefits: Patient Search

Search by Member ID		
Member ID Date of Birth mm/dd/yyyy		
	OR	
Search by Name		
Last Name Date of Birth	First Name	
mm/dd/yyyy		
Date Of Service		
	C Reset Search Field Se	arch



1. Capture the lowest remaining deductible from Individual or Family under the Health Benefit Plan Coverage.

Use \$372.65 from the example below.

Deductible should be the same across all benefit types (Health Benefit Plan Coverage and Diagnostic Lab).

2. Select Diagnostic Lab if available. If not available, then select Hospital Outpatient to capture the co-insurance.

Use 10% coinsurance from the example



### **NAVINET SCENARIOS**

### **1. Policy is inactive**

Patients with inactive policies will show up in red/pink. You need to collect new/updated insurance information from the patient in order to run an estimate.



#### 2. Member information is incorrect

This rejection means some piece of patient information is incorrect, You need to confirm patient name, DOB, member ID, and/or insurance name

Eligibility and Benefits: Patient Search

- Subscriber / Insured Not Found. Please Correct and Resubmit.
- Invalid / Missing Subscriber / Insured Name. Please Correct and Resubmit.