



# Quick Reference Guide

Main Office: One Washington Park  
Suite 1405  
Newark, NJ 07102  
1-866-889-2523  
www.healthfirstnj.org

Princeton Office:  
821 Alexander Road,  
Suite 140,  
Princeton, NJ

Important Contact Information	Provider Services	Member Services	Claims	Medical Management
www.healthfirstnj.org	<ul style="list-style-type: none"> <li>Verify member eligibility</li> <li>Search for providers</li> <li>Submit claims</li> <li>Check authorization status</li> <li>Review claim status</li> <li>View member rosters</li> </ul>			
Scheduling Member Appointments	<ul style="list-style-type: none"> <li>Emergency Care: Immediately upon presentation</li> <li>Urgent medical care (Medicare): Within 1 hour</li> <li>Urgent medical care (NJ FamilyCare/Medicaid): Within 24 hours</li> <li>Non-urgent "sick visits": Within 72 hours</li> <li>Routine appointments (Medicare): Within 2 weeks</li> <li>Routine appointments (NJ FamilyCare/Medicaid): Within 28 days</li> <li>New patient (adult): Within 180 days</li> <li>New patient (child): Within 90 days</li> </ul>			
Enrollment	<ul style="list-style-type: none"> <li>Medicare - call <b>1-877-GO4-HFNJ</b> to schedule an appointment with a Medicare Sales Representative.</li> <li>NJ FamilyCare/Medicaid - call the NJ Health Benefits Coordinator at <b>1-800-701-0710</b> to enroll.</li> <li>Please contact your network representative for more information or call Provider Services at <b>1-866-889-2523</b>.</li> </ul>			
Transportation	<ul style="list-style-type: none"> <li>All members are eligible for emergency ambulance transportation benefits. To obtain emergency transportation to the nearest emergency facility when there is a life-threatening situation, dial 911.</li> <li>Medicare members are NO LONGER eligible for transportation by car to provider locations.</li> </ul>			
Care Management	<p>Proactive and comprehensive care management and outreach is available for members diagnosed with high-risk conditions, illnesses, special situations and needs. Programs include:</p> <ul style="list-style-type: none"> <li>- Chronic Care Improvement Program (CCIP)‡</li> <li>- Congestive Heart Failure (CHF)</li> <li>- Chronic Obstructive Pulmonary Disease (COPD)†</li> <li>- Special Needs Program†</li> <li>- Diabetes</li> <li>- Domestic Violence</li> <li>- Asthma</li> <li>- HIV</li> <li>- Healthy Mom / Healthy Baby Program</li> <li>- Behavioral Healthcare</li> <li>- Hypertension†</li> <li>- Lead†</li> </ul>			
Health Promotion Programs	<ul style="list-style-type: none"> <li>Diabetes Control for Life</li> <li>Heartwise</li> <li>Healthy Teenst</li> <li>Immuni-Kidst</li> <li>Healthfirst Advantage (Adult Prevention Program)</li> <li>Women's Health</li> </ul>			
Ancillary Authorizations	<ul style="list-style-type: none"> <li>Chiropractic services – ASH: 1-800-972-4226</li> <li>Routine Vision/Glasses – Davis Vision: 1-800-773-2847</li> <li>Pharmacy services – Express Scripts: 1-800-417-8164</li> <li>Dental Services – DentaQuest: 1-800-341-8478</li> <li>Specialty pharmacy – CuraScript: 1-866-848-9870</li> <li>Outpatient Radiology Authorizations - CareCore 1-877-773-6964</li> </ul>			
Notification Requirements	<p><b>All Emergent Admissions:</b> ‡ • Called in no later than 1 business day after admission</p> <p><b>Dialysis</b> - Notification preferred</p> <p>• Newborns: Next business day following birth</p>			

† NJ FamilyCare/Medicaid Only    ‡ Medicare Only  
\*Available with or without Healthbuddy

<p><b>Pre-Authorization Guidelines</b></p> <p>(Please note: Additional Ancillary Authorizations on the first page)</p>	<p>Acupuncture  Acute Rehabilitation Admissions  Air Ambulance  All Out-of-Network Services (except Anesthesia)  All Cosmetic Surgery  All Elective Admissions to a Hospital  All Procedures Done in an Ambulatory Surgery Setting†  Inpatient Behavioral Health Services  Outpatient BH Services ‡: ECT, neurophysiological testing, PHP, Intensive Outpatient Treatment and Day Treatment.  All other outpatient services do not require authorization.‡  Behavioral Health Services for DDD Memberst  • Behavioral Health Services for Non-DDD members is the responsibility of the State's NJ FamilyCare/Medicaid program. Please call <b>NJ Mental Health Cares at 1-866-202-4357</b>.  Carotid Stenting‡  DME - Authorization not required for diabetic and wound supplies.  EMG/Nerve Conduction Studies</p>	<p>Hearing Aidst  Home Health Services  Hospice  Medical Day Care  Outpatient Radiology, CT, PET Scans, MRA/MRI (Please contact CareCore National at <b>1-877-773-6964</b>)  Pain Management Services  Personal Care Assistance (PCA)  Physical Therapy (PT), Occupational Therapy (OT), Speech Therapy (ST), Outpatient Rehabilitation  Private Duty Nursing†  • Covered for EPSDT-age children and NJ FamilyCare/Medicaid D members, regardless of age, when authorized by Healthfirst NJ.  Podiatry‡ - Hammertoe and Bunionectomy surgery  Skilled Nursing Facility Admissions  Transplants  Must be performed in a Medicare Certified Facility for Medicare Members:  • Bariatric Surgery  • Carotid Stenting  • Lung Volume Reduction Surgery  • Transplants</p>
	<ul style="list-style-type: none"> <li>• For pre-authorization or to notify Healthfirst of an admission, contact Medical Management</li> <li>• Written formal referrals are not required for Healthfirst members to receive care from in-network specialists</li> <li>• Specialty medications, such as oral or injectable medications for cancer, hepatitis and rheumatoid arthritis, etc., must be obtained from CuraScript</li> <li>• Benefits are determined by the member's eligibility</li> <li>• Pre-authorization is not a guarantee of payment</li> <li>• Policies are subject to change</li> </ul>	
<p><b>Claims Guidelines</b></p>	<p><b>Timely Filing:</b> Submit claims within 180 days of the date of service. (<i>One(1) calendar year for out-of-network Medicare claims</i>)</p> <p><b>Claims Processing</b> at <a href="http://www.healthfirstnj.org/providerservices">www.healthfirstnj.org/providerservices</a></p> <ul style="list-style-type: none"> <li>• Review claims status</li> <li>• Submit electronic claims with your NPI</li> <li>• Include the Healthfirst Payer ID Number 80141 on each claim</li> <li>• Sign up for EFT/ERA to receive claim payments and remittance advices electronically</li> </ul> <p><b>Appeals:</b>  Requests must be made in writing with supporting documentation. Submit a <b>Health Care Provider Application to Appeal a Claims Determination form</b> within 90 calendar days of receipt of Healthfirst NJ's determination that is the basis of the appeal; or within 90 calendar days of Healthfirst NJ's missed due date for the claim determination, including at providers option, a claim that has been pended.  Requests are accepted online at <a href="http://www.healthfirstnj.org/providerservices">www.healthfirstnj.org/providerservices</a> or sent to:  <b>Healthfirst NJ Provider Payment Dispute Unit, P.O. Box 958437, Lake Mary, FL 32795-8437</b></p>	

† NJ FamilyCare/Medicaid Only      ‡ Medicare Only

Healthfirst NJ (Healthfirst Health Plan of New Jersey, Inc.) and Healthfirst in New York (Managed Health, Inc. and Healthfirst PHSP, Inc.) each maintain separate provider networks. Members must see providers in their health plan's network for services to be considered in-network. Services rendered without prior authorization by providers or facilities outside of the network designated by the member's health plan are considered out-of-network and shall be the member's financial responsibility (excludes emergent and urgent care).