

March 2025



### **New/Updated Payment Policies**

The [Claim Submission Policy](#) has been updated with information added to page 4 regarding Timely Filing & the EDI Claim Rejection Report.

Effective May 1, 2025, the [Habilitation Services Policy](#) is effective for our Commercial line of business.

Please [click here](#) to review all of our payment policies. If you have any questions, please reach out to your provider operations manager.

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### **Member Eligibility Verification**

Network Health issues all members a Member ID card to assist our provider partners with verifying eligibility and benefits. If the member does not have their Member ID card with them at their appointment, eligibility and benefits may be verified via our secure provider portal, or the provider may use real-time eligibility verification through their preferred clearinghouse. It is the sole responsibility of the provider to verify this information prior to the member receiving care.

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### **Provider Portal Information**

Registered providers have access to view patient eligibility, check status of claims, submit online authorizations and more. Registration is now available for both contracted

and non-contracted providers. [Sign up now.](#)

[Here is a video on how to navigate the portal](#)

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### **Appointment Access Requirements**

As a reminder, as part of our NCQA accreditation, our providers must meet the following appointment access times in order for us to maintain our accreditation. Here are the appointment access standards that must be met.

#### **For Primary Care Services**

1. Regular or routine care within 60 days of request
2. Urgent care appointment within 48 hours of request

#### **For Specialist Services**

1. Care within 30 days of the request
2. Non-life threatening, urgent appointment within 48 hours of request

#### **For Behavioral Health Services**

1. Non-life-threatening emergency within 6 hours of request
2. Urgent care appointment within 48 hours of request
3. Initial visit for routine care within 10 business days of request
4. Follow up appointment for a routine care visit within 30 days of request

Additionally, you must have an answering service, on-call provider, or message to direct patients to the emergency room for after-hours calls.

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