NAVINET CARE GAPS RESPONSE FORM

User Guide

AmeriHealth Caritas®
Care is the heart of our work

November 2025

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OVERVIEW

The Care Gaps Response Form functionality allows providers using the NaviNet portal to enter Care Gap resolution data online. This data will be captured and stored along with any supporting documentation. Providers will be able to retrieve and report on specific Care Gap changes. Verified Care Gap resolution updates will be applied in real-time within NaviNet to prevent Care Gaps from continuing to appear as alerts.

Before You Begin

1. NaviNet Permissions - Contact your NaviNet Security Officer to confirm proper access and to enable Document Exchange.
2. Filter by Providers for Optimum Access.

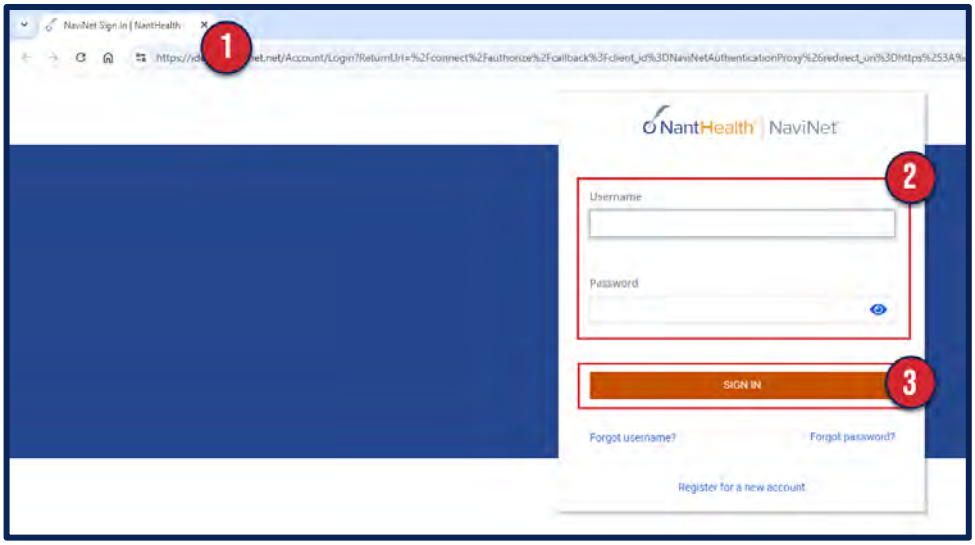
You can view and access documents submitted by all providers associated with your office, or you can specify a list of providers whose documents you prefer to see. You can save this list of providers to be used by default anytime you access the Patient or Practice Document dashboards. To learn more about your access options, please log into NaviNet and visit the NantHealth Help Center.

ACCESSING CARE GAP RESPONSE FORMS

NaviNet

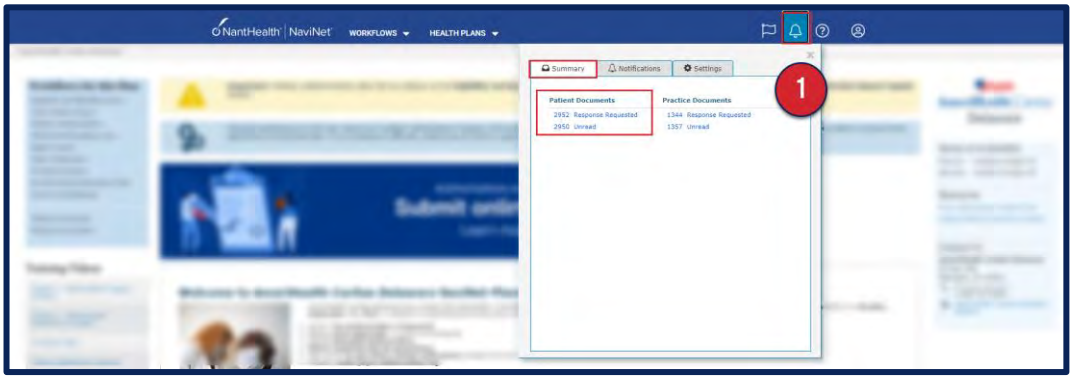
To view and access the Care Gap Response Forms, first log into NaviNet:

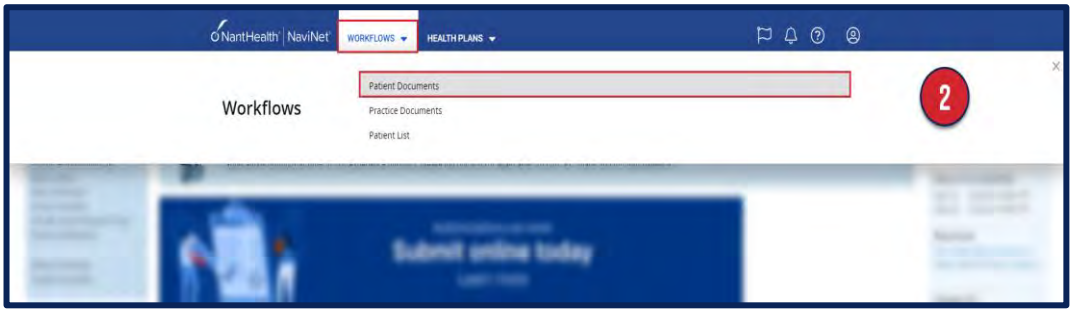
1. Go to https://navinet.navimedix.com.
2. Enter your **Username and Password**.
3. Click **Sign In**.



Once you are successfully logged into NaviNet, there are various ways you can access unresolved Care Gap Response Forms:

- **Option 1**: Summary tab, within the Activity Menu
  - Click on ***Response Requested*** or ***Unread.***
- **Option 2:** Patient Documents Workflow
  - Select ***Patient Documents*** from the Workflows menu.



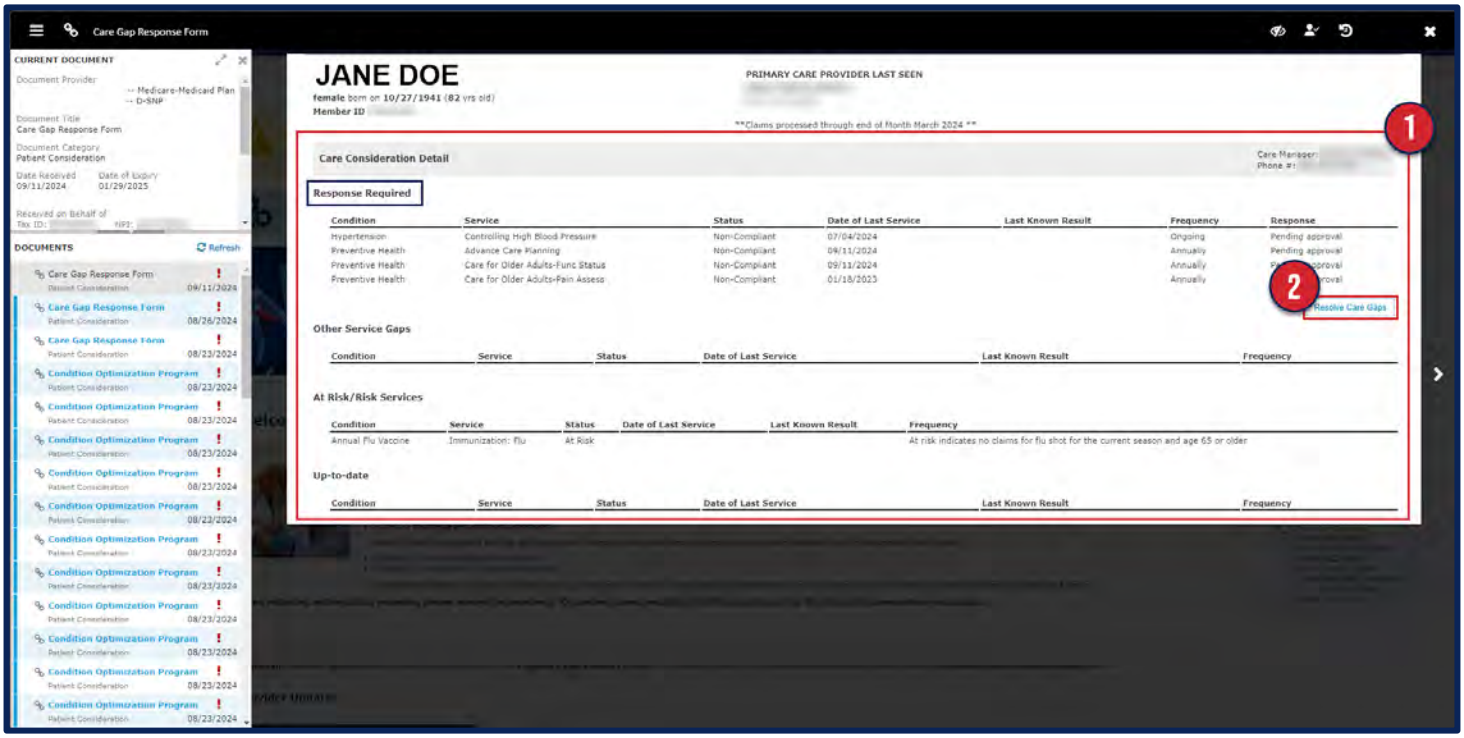


ACCESSING CARE GAP RESPONSE FORMS CONT'D.

Option 1: Summary tab, within the Activity Menu

If you access the Care Gap Response Form from the Activity menu:

1. The Care Consideration Detail screen will display within the Document Viewer. You can see detailed information on the Care Gaps.
    - By default, the Care Consideration Detail screen will display for the first member on the list.
2. After reviewing the Care Consideration Detail screen, click Resolve Care Gaps to work on the actionable items under Response Required.

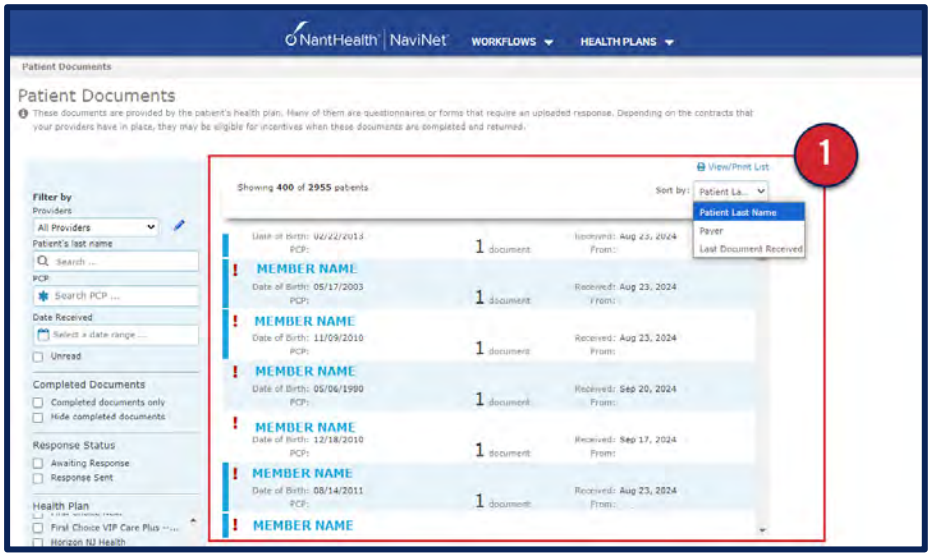


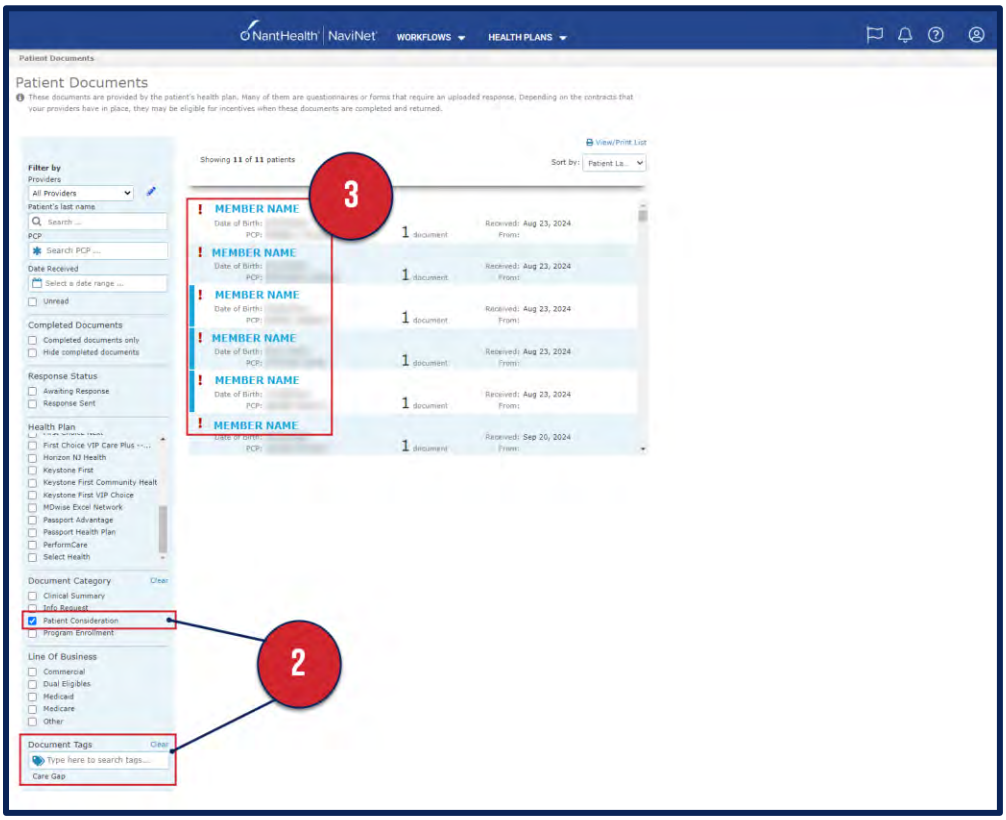
ACCESSING CARE GAP RESPONSE FORMS CONT'D.

Option 2: Patient Documents Workflow

If you access the Care Gap Response Form from the Patient Documents Workflow:

1. The Patient Documents screen will display a list of members.
   - You can sort the list by Patient's Last Name (default), Payer, or Last Document Received.
2. Filter the list by either checking off the *Patient Consideration* under Document Category and typing in *Care Gap* in the Document Tags field.
3. Select any member name to open the Care Consideration Detail screen for that member.

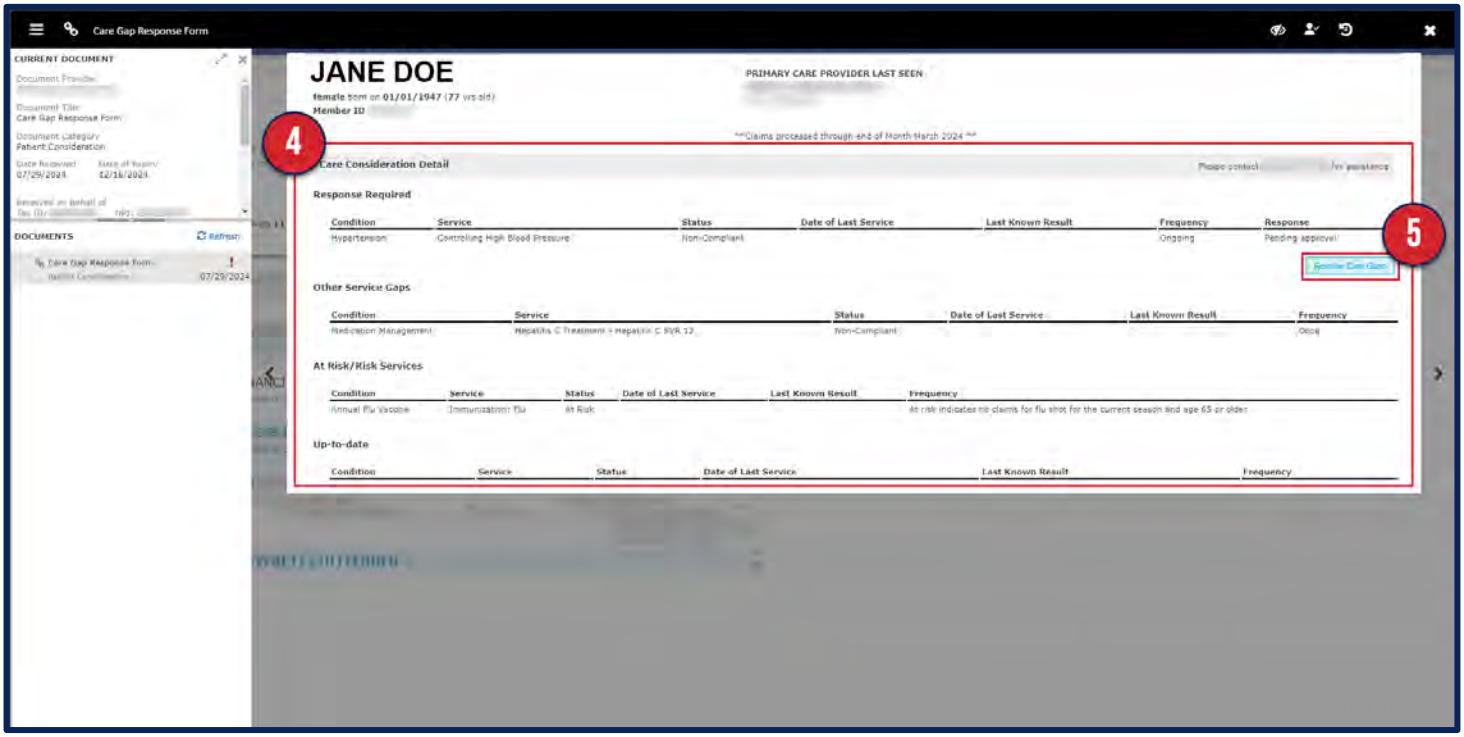




ACCESSING CARE GAP RESPONSE FORMS CONT'D.

Option 2: Patient Documents Workflow Cont'd.

4. The Care Consideration Detail screen will display all the Care Gaps for the selected patient as of the last month's load. You can see the patient's information, PCP information, and Care Manager's name and number.
    - If no Care Manager is assigned to the member, you will see a phone number to call to participate in the "Let Us Know program" and receive support with reaching the member.
5. Respond to all the Care Gaps listed in the Response Required section by clicking Resolve Care Gaps.

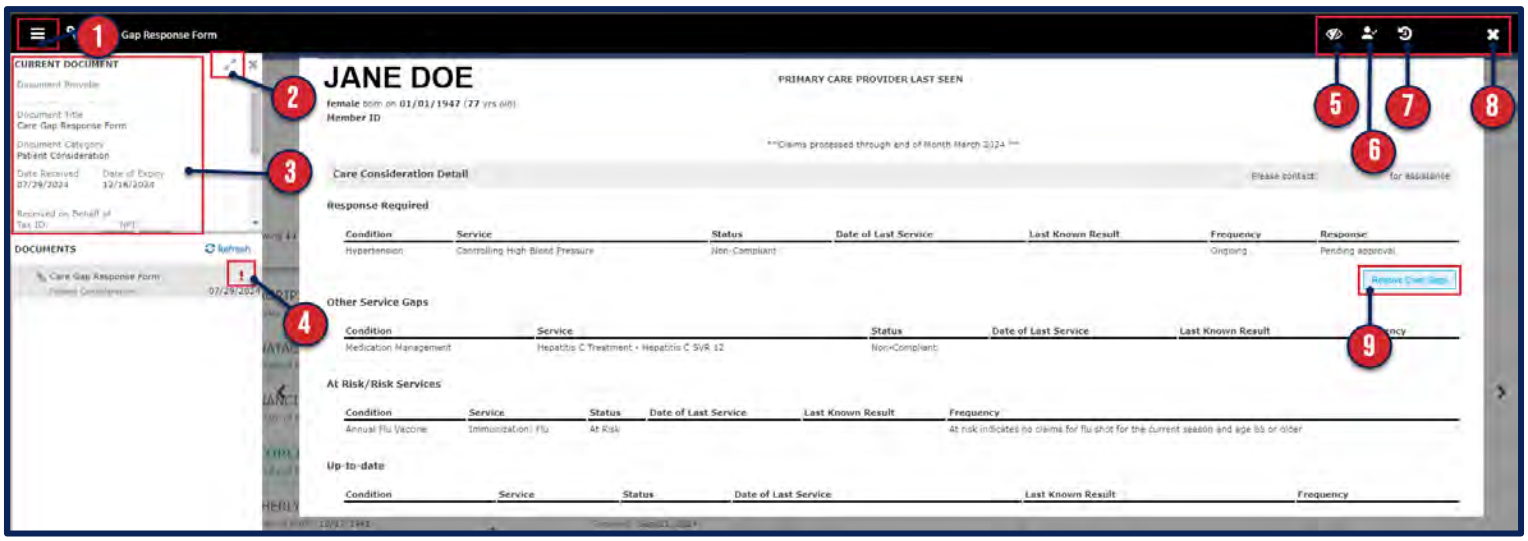


Document Viewer

When you access the care gap notifications, the system displays the member's Care Consideration Detail screen in the document viewer.

Use the toolbar at the top of the screen to take any of the following actions:

1. **Menu** – allows you to toggle to view in full-screen.
2. **Show all document details** – allows you to expand hidden information in the Current Document field.
3. **Current Document** – allows you to view information about the member such as:
   - Health Plan that sent the document
   - Document title
   - Document category
   - Line of business
   - Document name
   - Received and expiry dates
   - Documentation routing
   - Tag information
4. **Red Exclamation** – Signifies Response requested.
5. **Mark Unread** – allows you to mark the current document as unread.
6. **Set Completed Flag** – allows you to mark the current document as completed.
7. **History** – allows you to view the document history, including when the office received the document, and when a user read or downloaded it.
8. **Close** – allows you to close the current document.
9. **Resolve Care Gaps** – this will open the Care Gap Response Form in a new window.



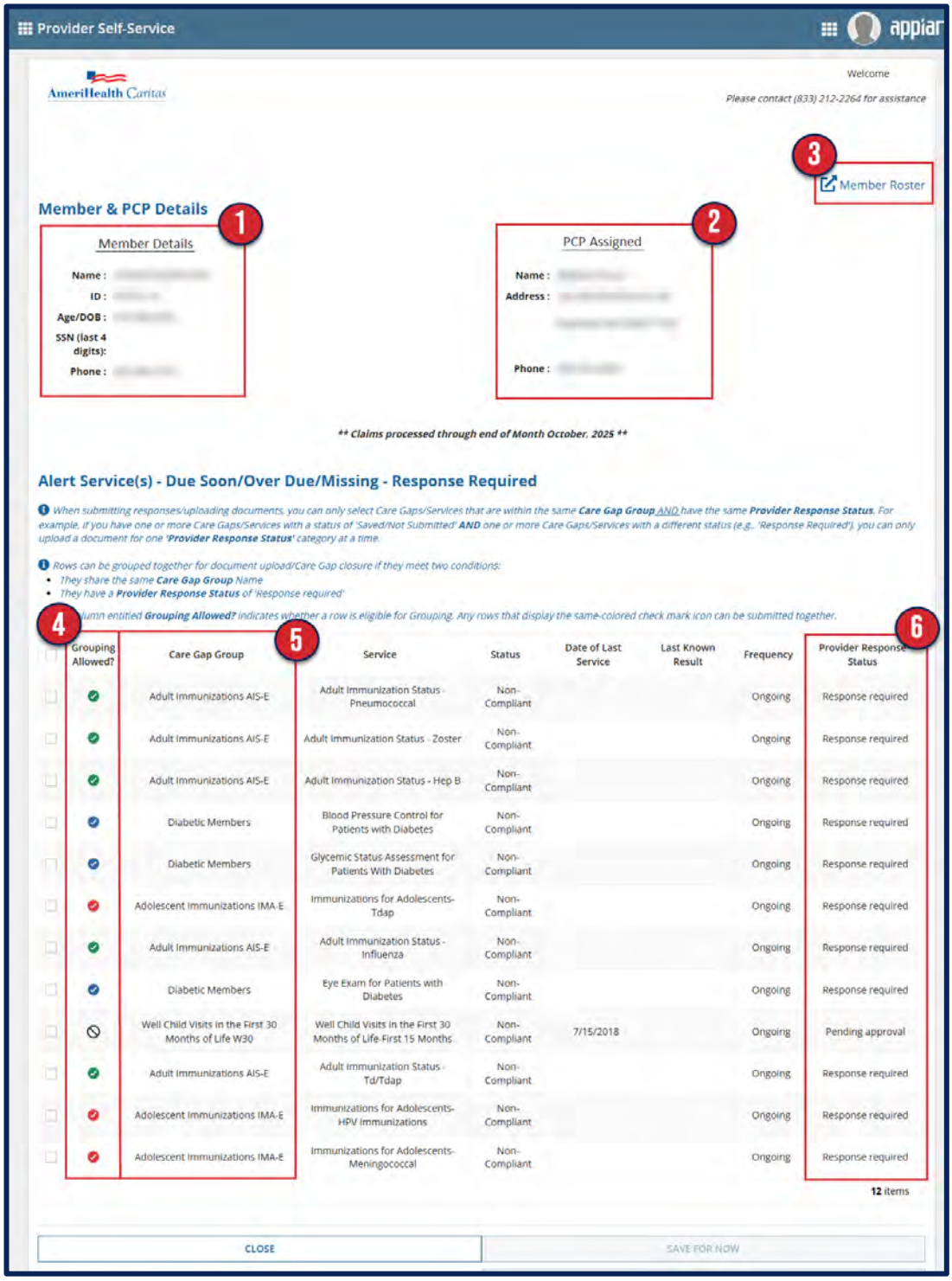
COMPLETING THE CARE GAP RESPONSE FORM

Provider Self-Service Window

Once the Resolve Care Gaps button is selected , the Care Gap Response Form opens in a new window.

In this window, you can see:

1. Member Details
2. PCP Assigned
3. Member Roster link
4. Grouping Allowed Color Indicator – Indicates which Care Gaps can be grouped together.
5. Care Gap Group – Indicates the name of the Care Gap/HEDIS measure.
6. The Care Gap's Provider Response Status



There are four major Care Gap Groupings:

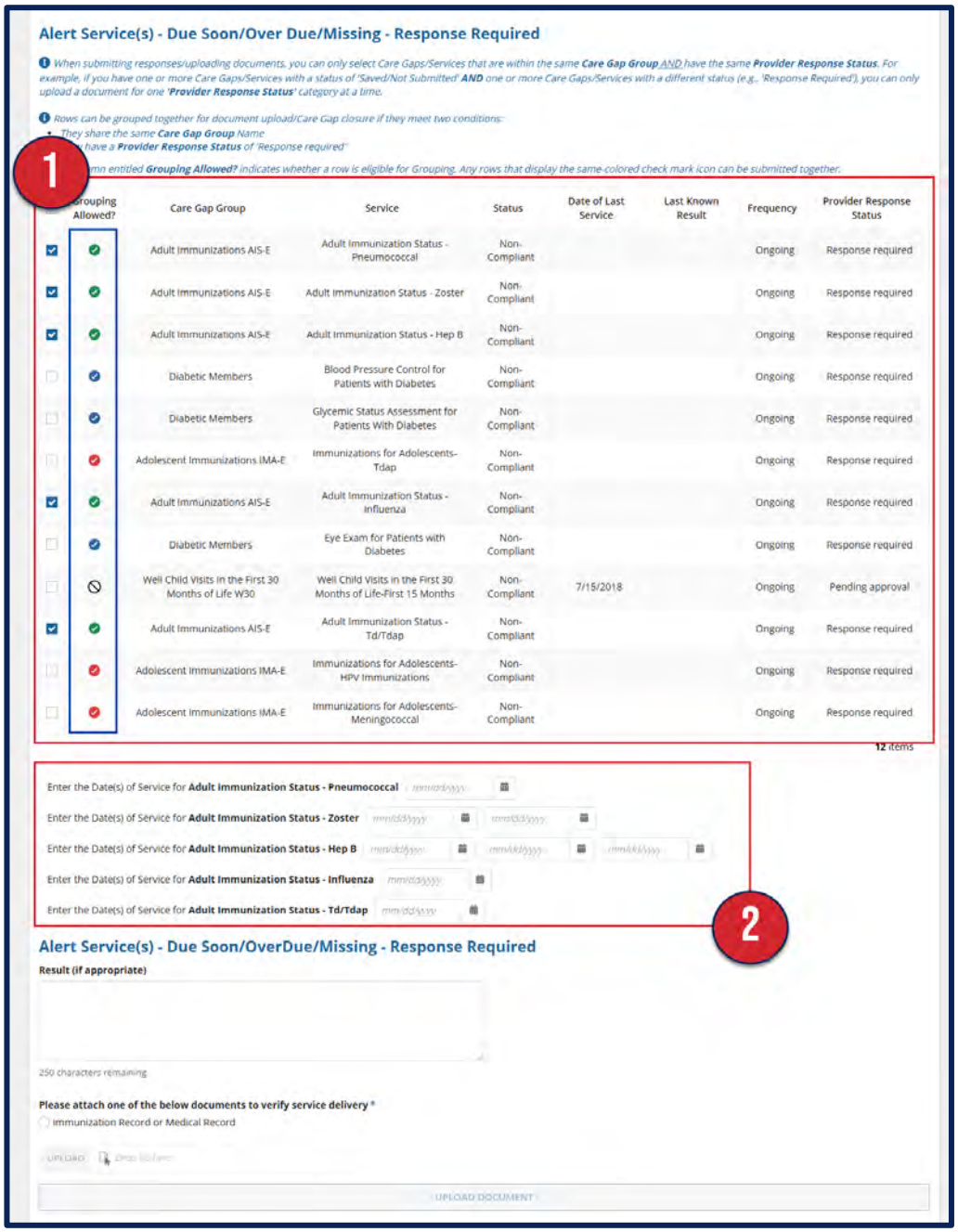
- Child and Adolescent Immunizations
- Care of Older Adults
- Transition of Care
- Well Care Visits

COMPLETING THE CARE GAP RESPONSE FORM CONT'D.

Provider Self-Service Window Cont'd.

To complete the Care Gap Response Form

1. Select the **Care Gap(s).**
   - Rows can be grouped together for document upload/Care Gap closure if they share the same **color icon**, same **Care Gap Group Name**, and have a Provider Response Status of **'Response required'**.
   - Depending on the Care Gap type, you will be prompted to verify service delivery or request an exclusion.
2. Enter the **date(s) complete** to confirm the service delivery.
   - All Date(s) of Service need to be entered, or the form will be sent back by the reviewer as unresolved.

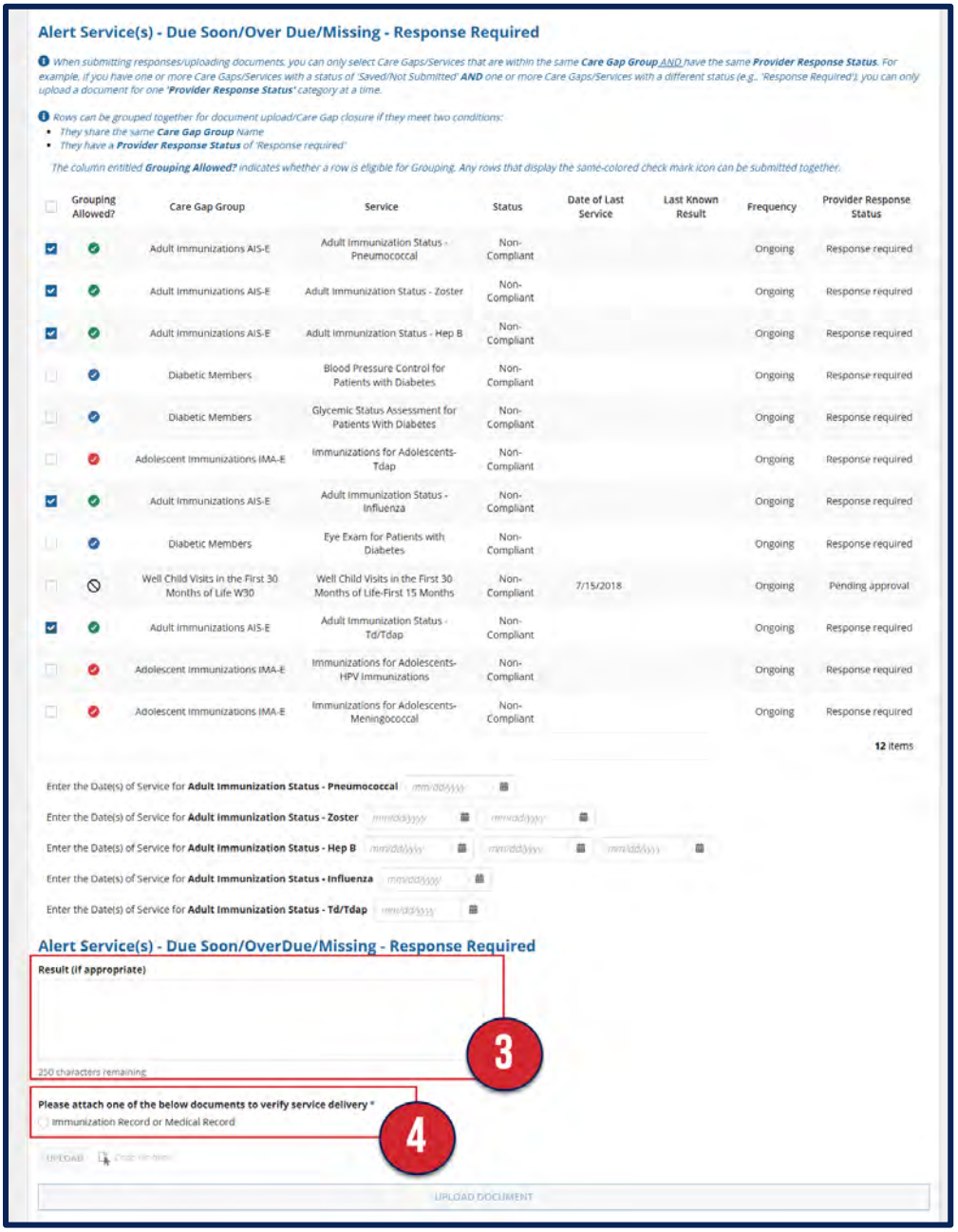


COMPLETING THE CARE GAP RESPONSE FORM CONT'D.

Provider Self-Service Window Cont'd.

To complete the Care Gap Response Form

3. Add the **Result**, if appropriate (this field is not mandatory).
4. Verify the service delivery by **attaching one of the documents listed.**
    - The list may vary depending on the Care Gap Type.



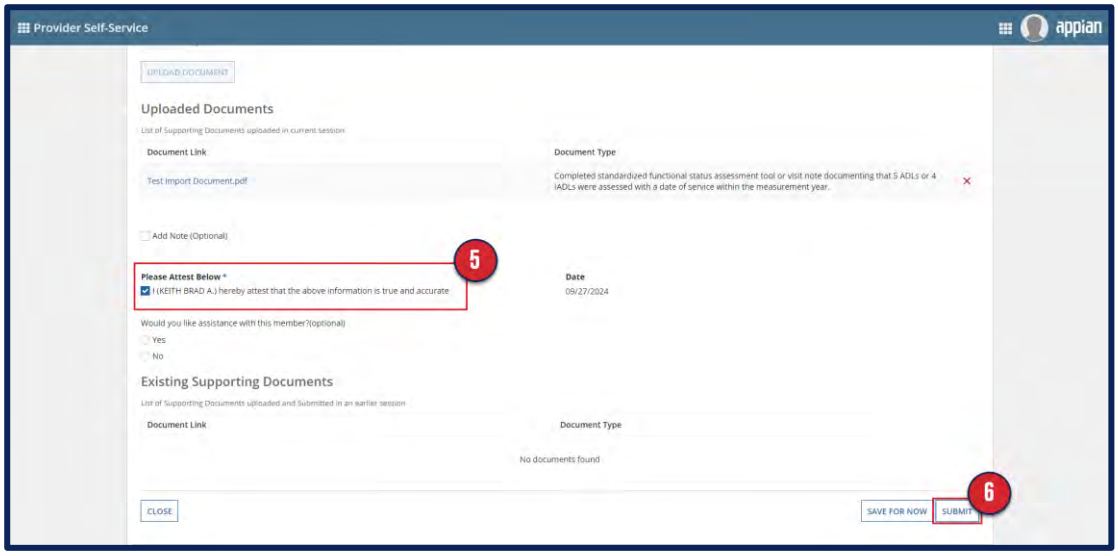
Note:

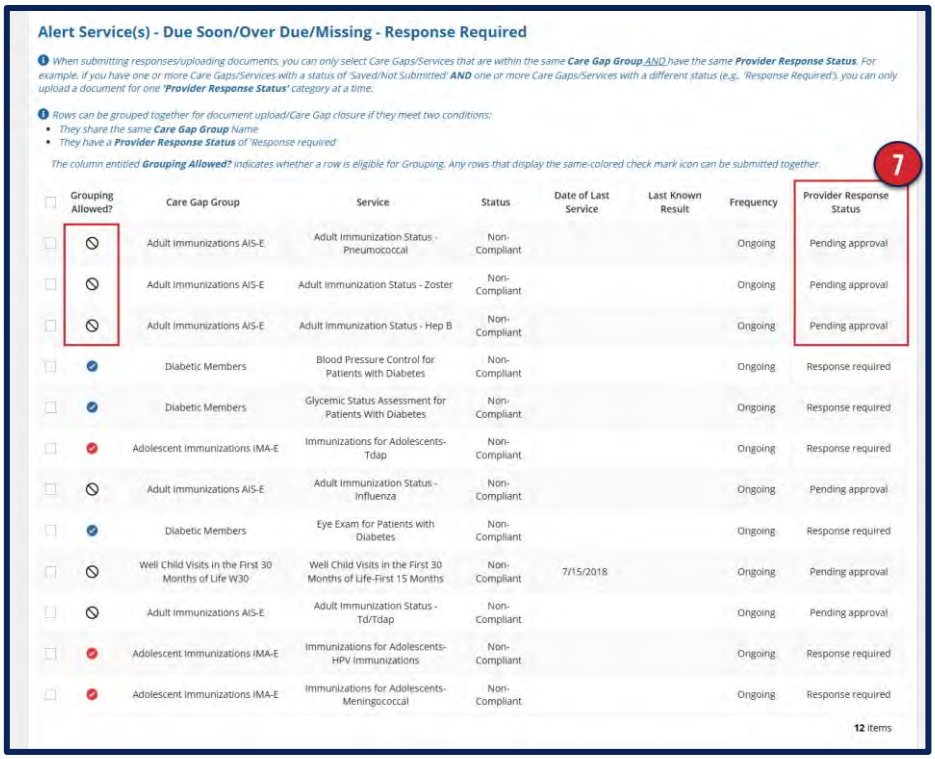
- You may attach a maximum of two documents.
- The size of each document must be 3 megabytes (3 MB) or less.
- Accepted file formats are .jpg, .pdf, and .doc.

COMPLETING THE CARE GAP RESPONSE FORM CONT'D.

Provider Self-Service Window Cont'd.

5. Select the **Attest Below box** to attest all the information on the form is true and accurate prior to submitting.
6. Click **Submit.**
7. Once the Care Gap(s) form is submitted, the Provider Response Status will now display Pending Approval, and the icon will change.



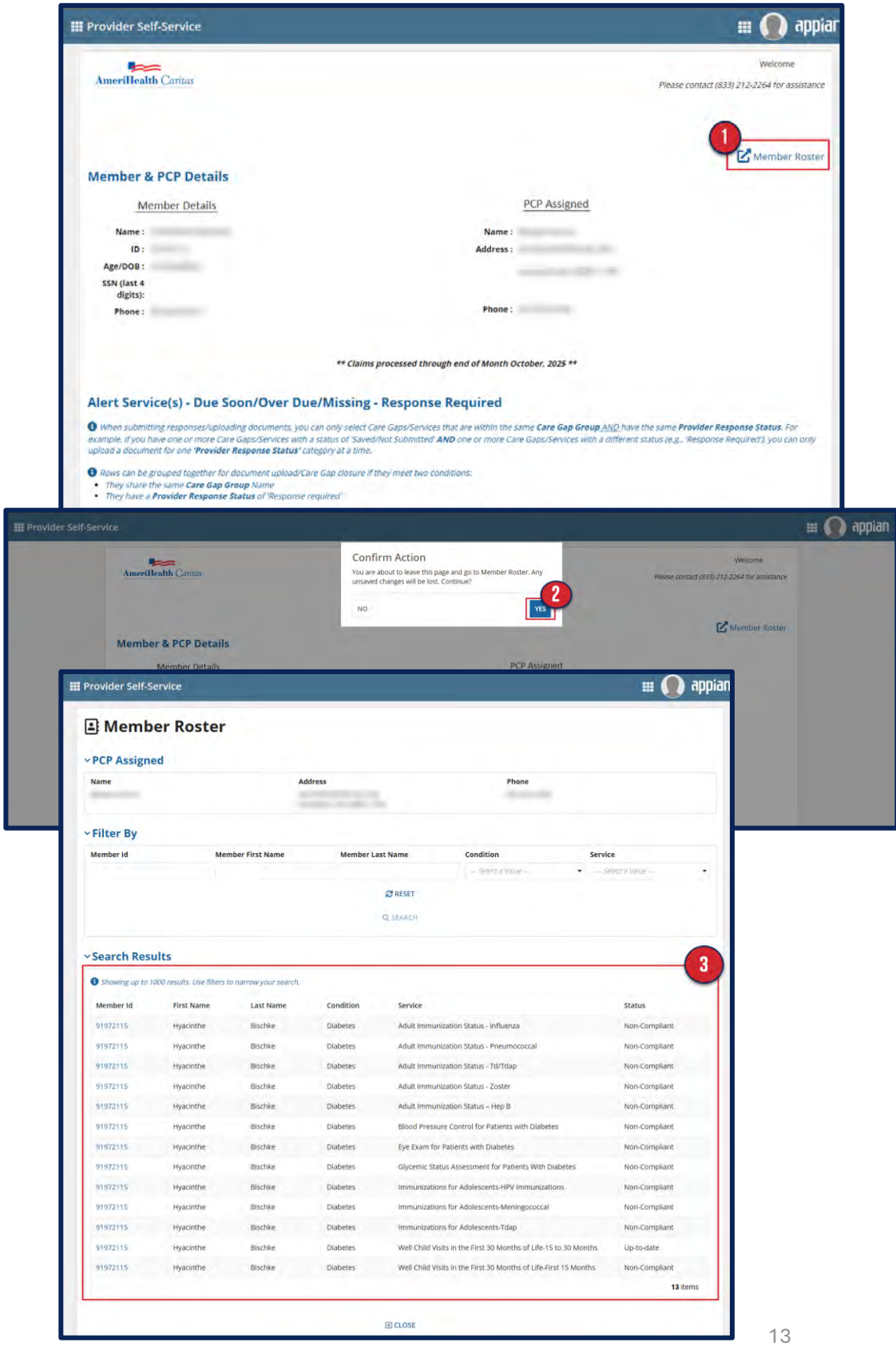


COMPLETING THE CARE GAP RESPONSE FORM CONT'D.

Member Roster

Once the Care Gap form(s) are submitted, the provider can perform a new search through the Member Roster link on the response form.

1. Click the **Member Roster** link.
2. Click **Yes** on the Confirm Action pop-up.
3. A list of the provider's members with unresolved car gaps will appear.
4. Select the **appropriate member** to resolve the member's care gap(s).



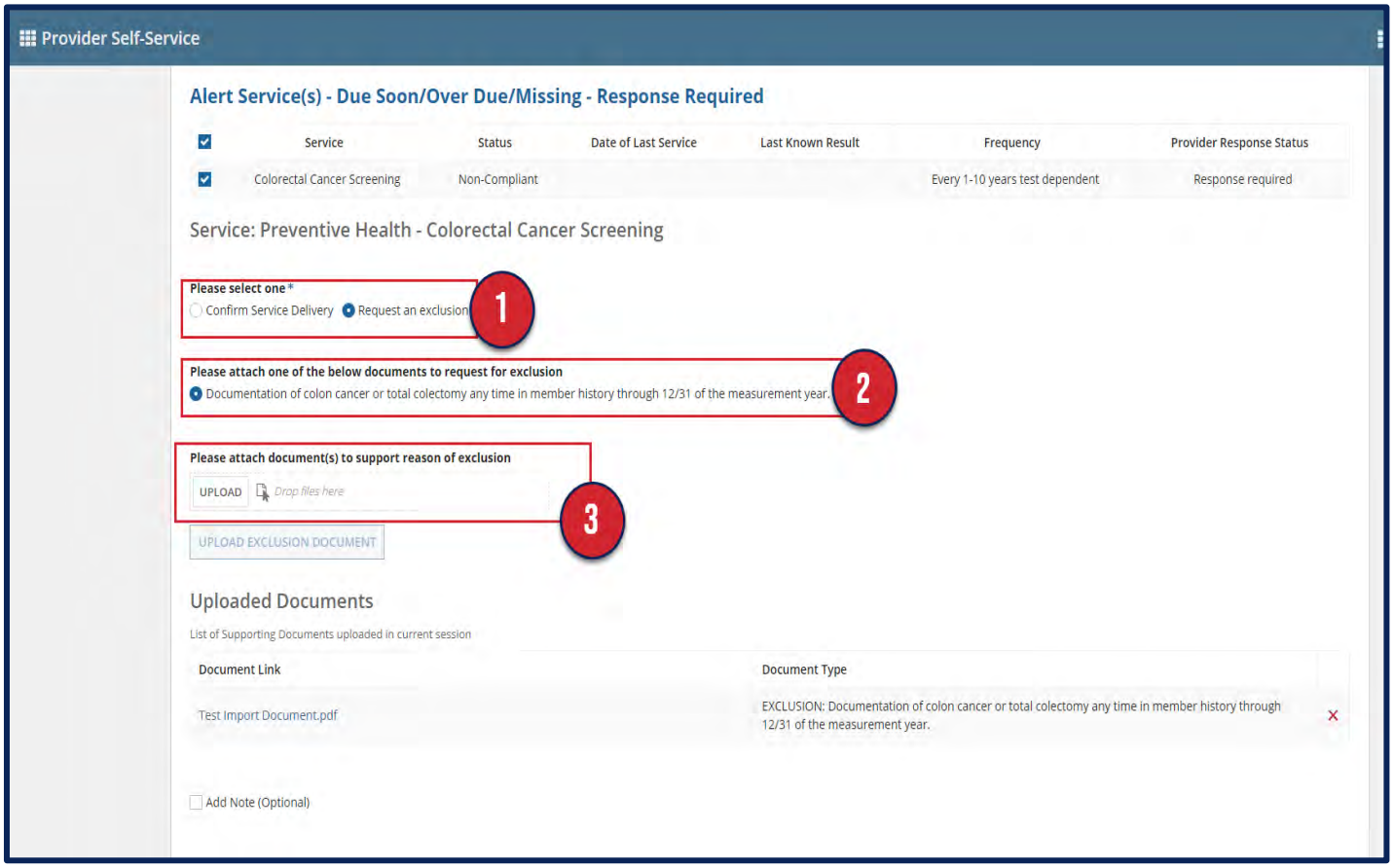
COMPLETING THE CARE GAP RESPONSE FORM CONT'D.

Requesting an Exclusion

The provider can request an exclusion for Care Gaps such as Breast Cancer screening, Cervical Cancer screening, and Chlamydia screening in women.

If you are reviewing one of these Care Gaps and need to request an exclusion:

1. Click on **Request an exclusion.**
2. The form will populate with the documentation needed based on the selected Care Gap.
3. Attach the **supporting documentation.**



COMPLETING THE CARE GAP RESPONSE FORM CONT'D.

Reviewing the Status of a Care Gap

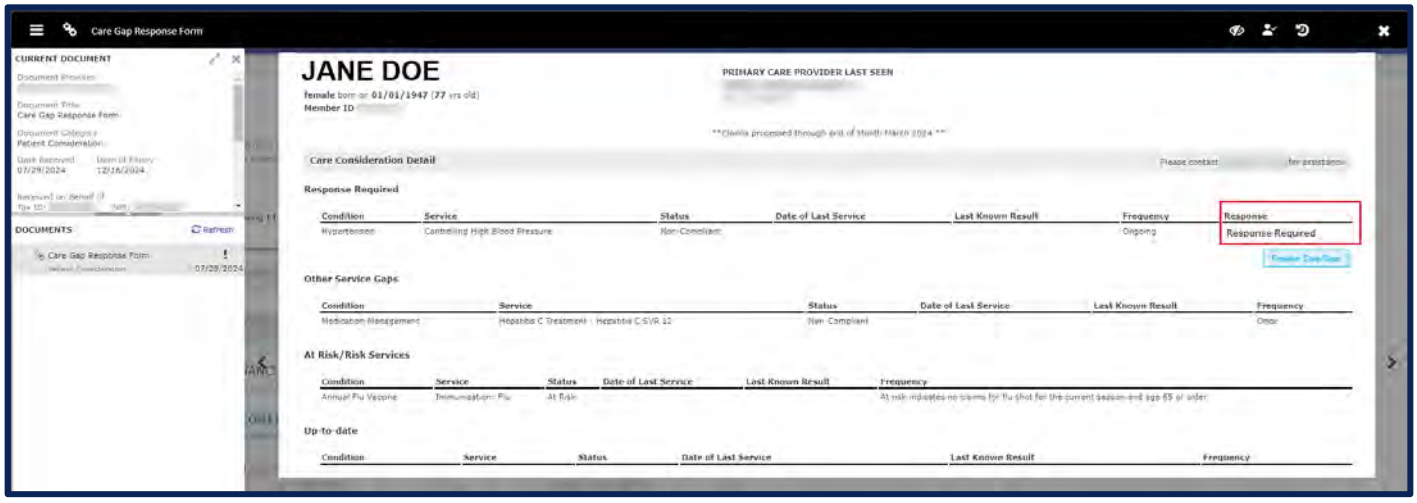
Once you have submitted the Care Gap Response Form, a Quality Reviewer from our team will review the information provided and based on the attached documentation, return a status of *Approved* or *Rejected*.

Once the Care Gap Response has been approved, the record or alert will no longer appear in your queue. Any approved record will move to the "up-to-date" section in the Care Consideration Screen for that member, while rejected responses will show Rejected in the Response column.

The Care Gap status can be reviewed in the Response column of the Care Consideration Detail screen.

This field will display one of the following:

- Saved/not submitted: You have saved your response but did not submit it yet.
- Submitted: You have completed all necessary steps and submitted the information.
- Response Required: You have not yet responded to the Care Gap.
- Rejected: Your response has been rejected by the Quality Reviewer.

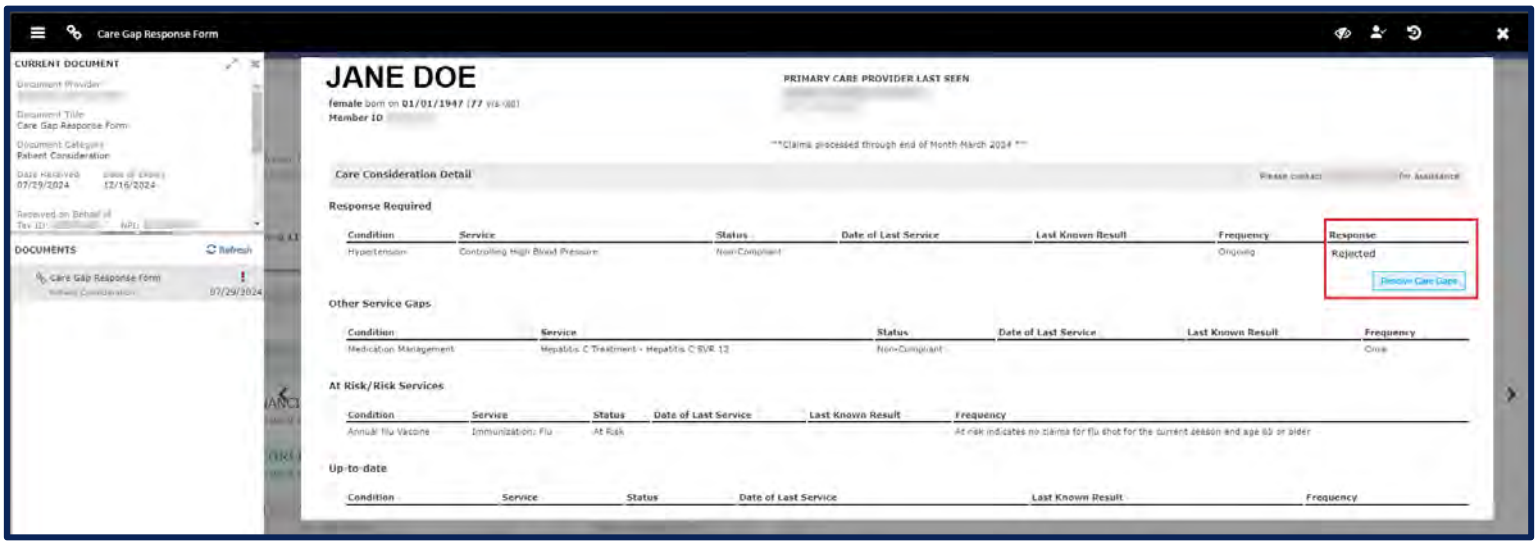


COMPLETING THE CARE GAP RESPONSE FORM CONT'D.

Reviewing the Status of a Care Gap Cont'd.

If your Care Gap Response is rejected:

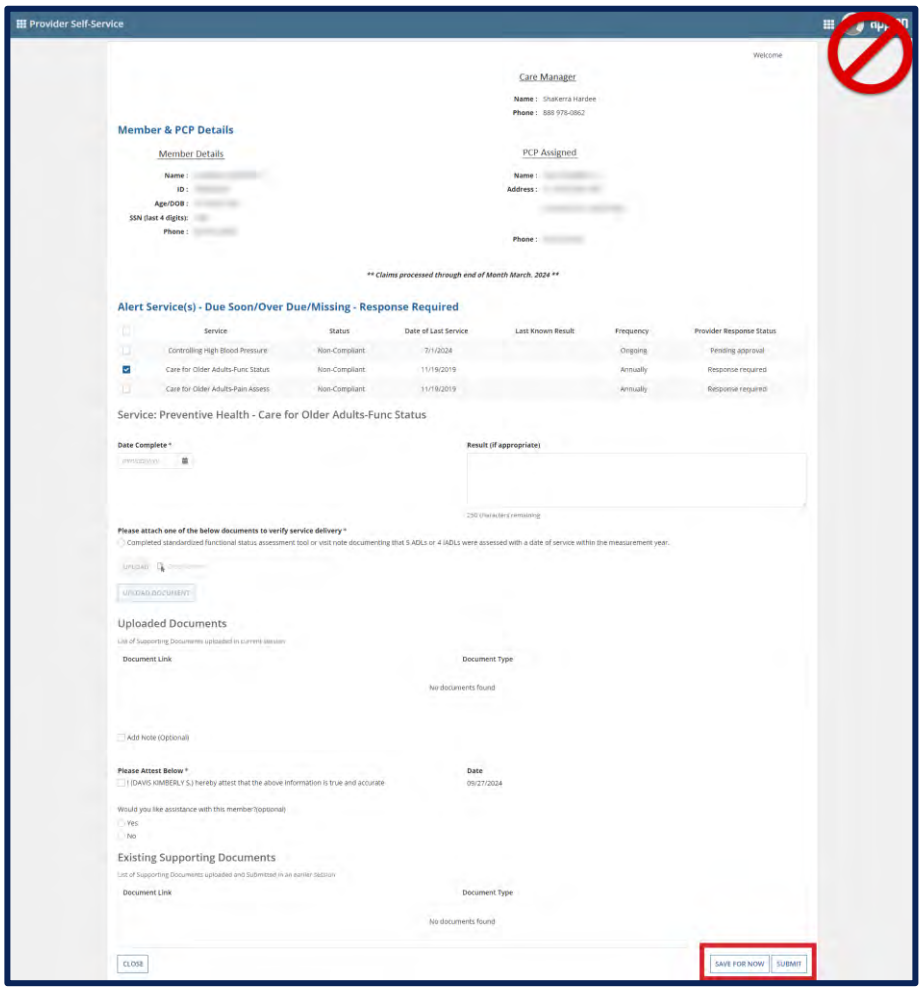
1. You will see a new alert in the Activity tab in NaviNet.
2. On the Care Consideration Detail screen for that patient, the status in the Response column is Rejected.
3. Once in the Care Gap Response Form, select the rejected Care Gap and read the Quality Reviewer's notes before resubmitting your response.
4. The notes grid in the form will include all previous comments related to the Care Gap from both you and the Quality Reviewer.
5. You can click Resolve Care Gaps to work that Care Gap again.
6. The Care Gap will not be removed from your list until approved by the Quality Reviewer.



IMPORTANT NOTES

Care Gap Response Form

- Once the Care Gap Response Form has been completed, you can choose to Submit or Save for now. Responses saved for now will remain active for 30 days only.
- Avoid clicking on the Appian logo on the Care Gap Response Form as this will cause the screen to auto-refresh.
- When the Care Gap Response Form remains inactive for more than 60 minutes, a pop-up warning will appear to notify you that your session is about to expire. To remain active, select Resume within 5 minutes of the notification to continue to work the Care Gaps.
- The form will time-out within 5 minutes if you do not click Resume. The log in screen below will appear once you have timed out. You will need to close this window and instead log into NaviNet.

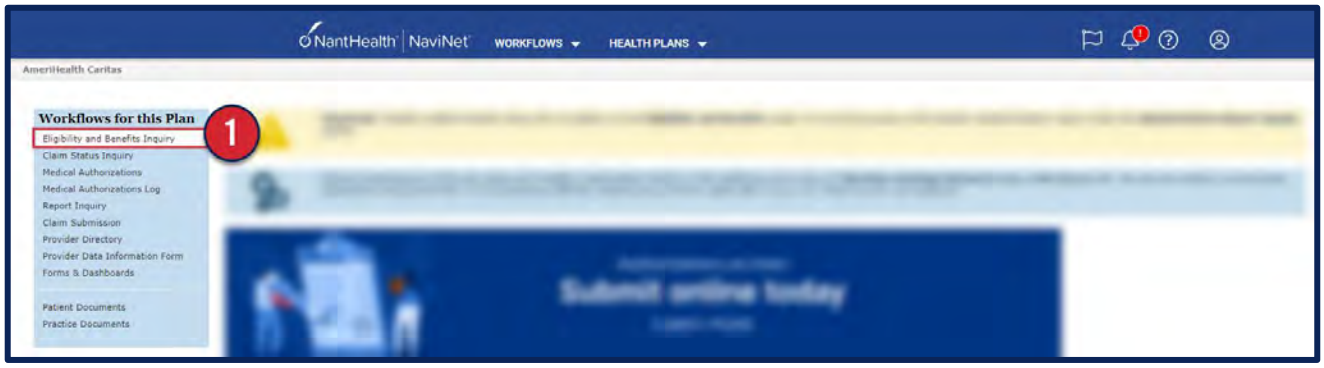


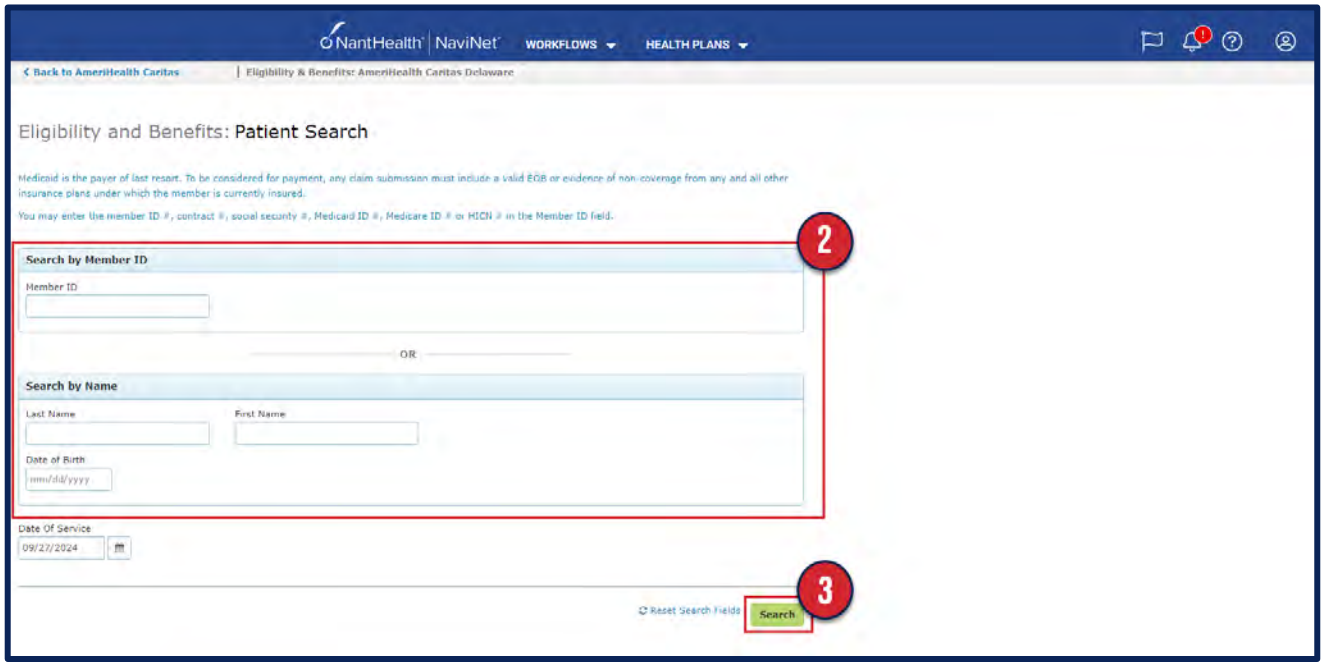
ACCESSING CARE GAP INFORMATION

Access Care Gap Information via Eligibility and Benefits Inquiry

Alert-related information on a member will be available to the PCP via the Eligibility and Benefits Inquiry.

1. Click on **Eligibility and Benefits Inquiry** from the Workflows for this Plan menu.
2. Enter the **Member ID or Member Name**.
3. Click **Search**.



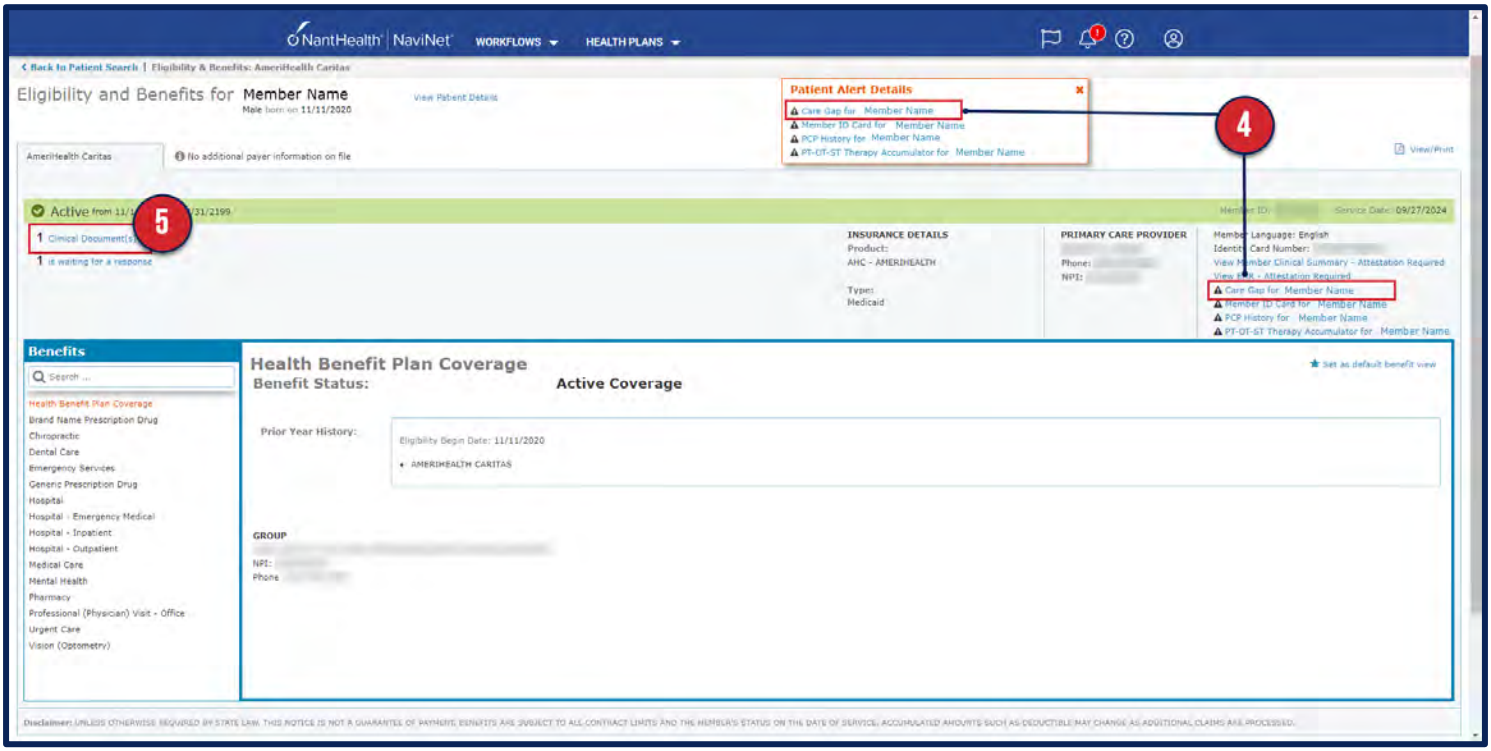


ACCESSING CARE GAP INFORMATION CONT'D.

Access Care Gap Information via Eligibility and Benefits Inquiry Cont'd.

The resulting Patient Details screen will display a Care Gap Alert noted as a Critical Quality Incentive for that member in the Patient Alert Details.

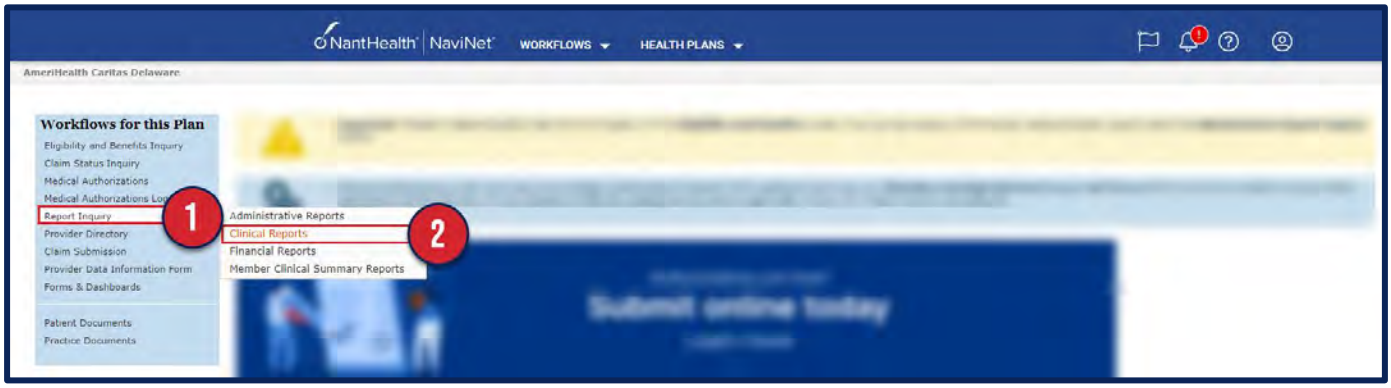
4. Click the **alert.**
    - A read-only version of the Care Gap worksheet will appear.
    - The write and fax functionality will not be available on this worksheet.
5. Click on **Clinical Documents** to address any Care Gaps for that member.
    - This link will open the Care Consideration Detail screen for that member.
    - Due to the amount of data located under the Care Consideration Detail, this link may take some time to appear.

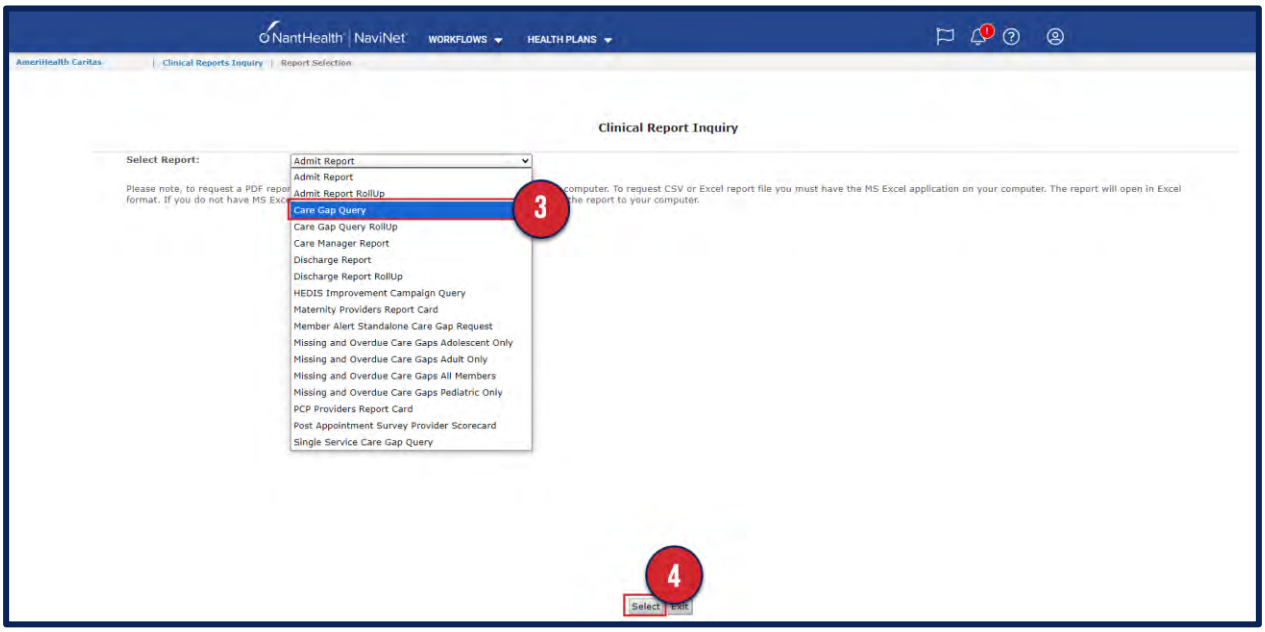


ACCESSING CARE GAP INFORMATION CONT'D.

Access Care Gap Information via Care Gap Query Reports

1. Click **Report Inquiry.**
2. Select **Clinical Reports.**
3. Select **Care Gap Query** from the drop-down.
4. Click **Select.**

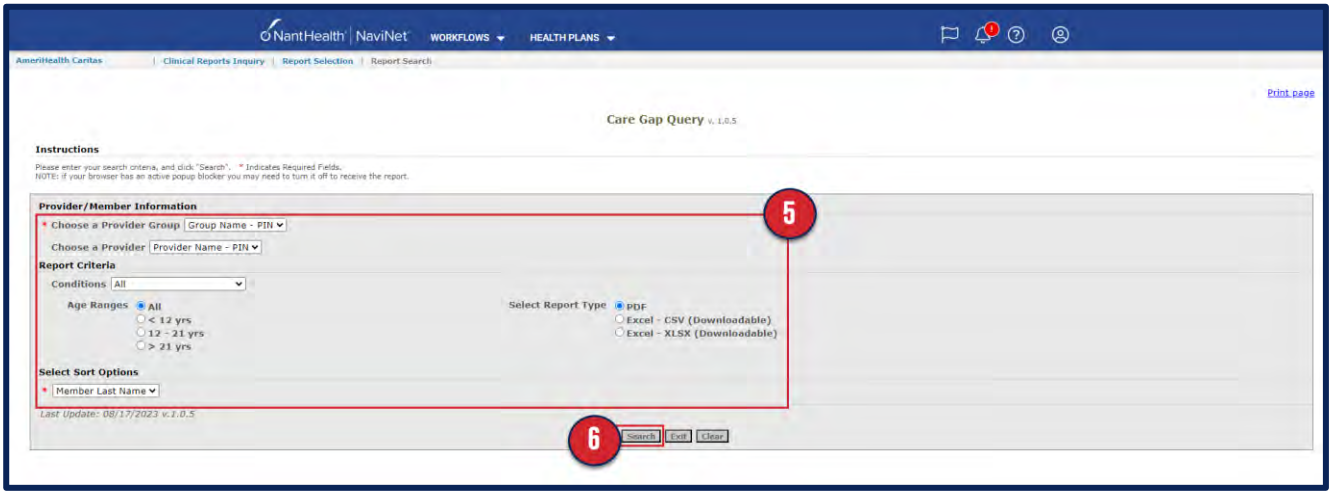


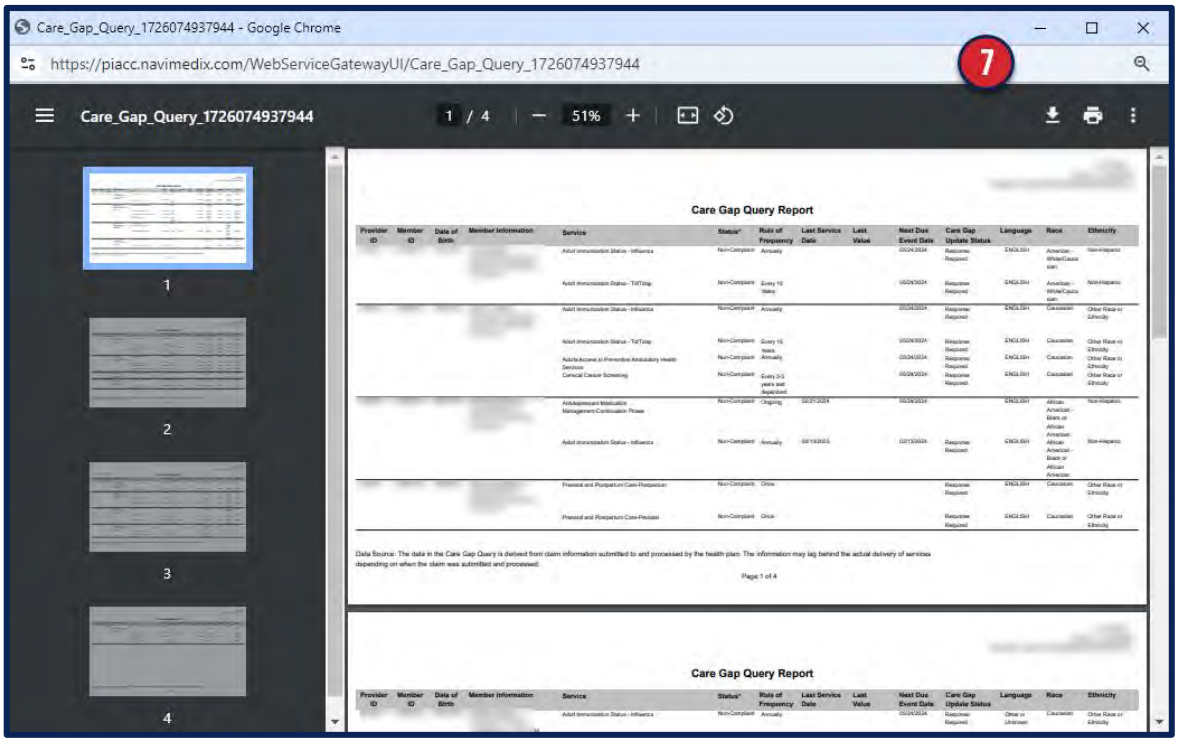


ACCESSING CARE GAP INFORMATION CONT'D.

Access Care Gap Information via Care Gap Query Reports Cont'd.

5. Select a **Provider Group** and all other applicable selections on the Care Gap Query screen.
6. Click **Search.**
7. The Care Gap Query Report will display all of that member's Care Gaps.





ACCESSING CARE GAP INFORMATION CONT'D.

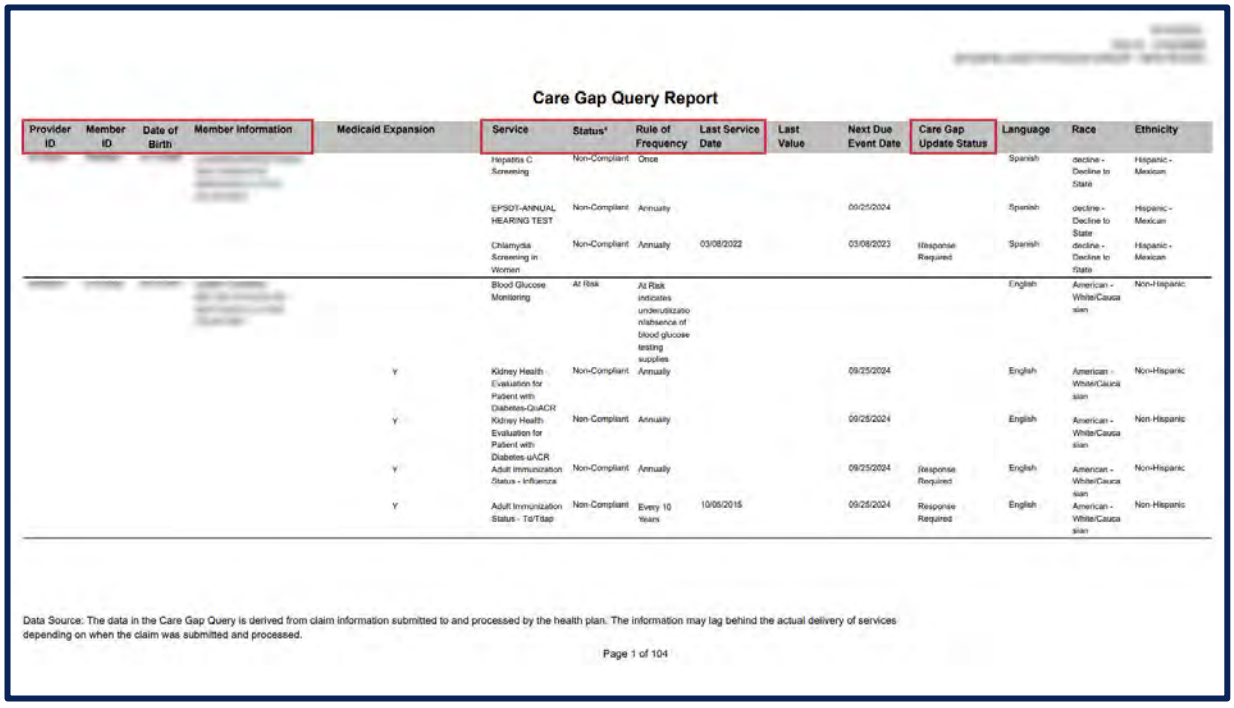
Important Notes:

The **Care Gap Query Report** displays the complete data set for Care Gaps by default. The following reports are sub-sets of the Care Gap Query Report (all of these reports are read-only):

- HEDIS Improvement Query
- Member Alert Standalone Care Gap Request
- Missing and Overdue Care Gaps Adolescents Only
- Missing and Overdue Care Gaps Adult Only
- Missing and Overdue Care Gaps All Members
- Missing and Overdue Care Gaps Pediatric Only
- Single Service Care Gap Query

Each of these reports displays the following columns:

- Provider ID
- Member ID
- Date of Birth
- Member Information
- Service
- Status
- Rule of Frequency
- Last Service Date
- Care Gap Update Status



Care Gap Query Report

Provider ID	Member ID	Date of Birth	Member Information	Medicaid Expansion	Service	Status*	Rule of Frequency	Last Service Date	Last Value	Next Due Event Date	Care Gap Update Status	Language	Race	Ethnicity
					Hepatitis C Screening	Non-Compliant	Once					Spanish	decline - Decline to State	Hispanic - Mexican
					EPSDT-ANNUAL HEARING TEST	Non-Compliant	Annually			09/25/2024		Spanish	decline - Decline to State	Hispanic - Mexican
					Chlamydia Screening in Women	Non-Compliant	Annually	03/08/2022		03/08/2023	Response Required	Spanish	decline - Decline to State	Hispanic - Mexican
					Blood Glucose Monitoring	At Risk	At Risk indicates underutilizatio n/absence of blood glucose testing supplies					English	American - White/Caucasian	Non-Hispanic
				Y	Kidney Health Evaluation for Patient with Diabetes-QuACR	Non-Compliant	Annually			09/25/2024		English	American - White/Caucasian	Non-Hispanic
				Y	Kidney Health Evaluation for Patient with Diabetes-qACR	Non-Compliant	Annually			09/25/2024		English	American - White/Caucasian	Non-Hispanic
				Y	Adult Immunization Status - Influenza	Non-Compliant	Annually			09/25/2024	Response Required	English	American - White/Caucasian	Non-Hispanic
				Y	Adult Immunization Status - Td/Tdap	Non-Compliant	Every 10 Years	10/05/2015		09/25/2024	Response Required	English	American - White/Caucasian	Non-Hispanic

Data Source: The data in the Care Gap Query is derived from claim information submitted to and processed by the health plan. The information may lag behind the actual delivery of services depending on when the claim was submitted and processed.

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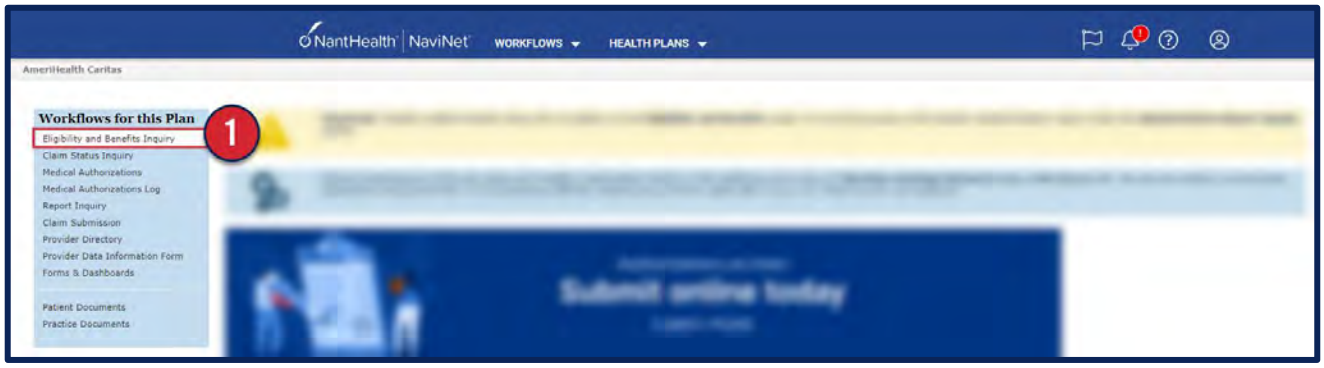
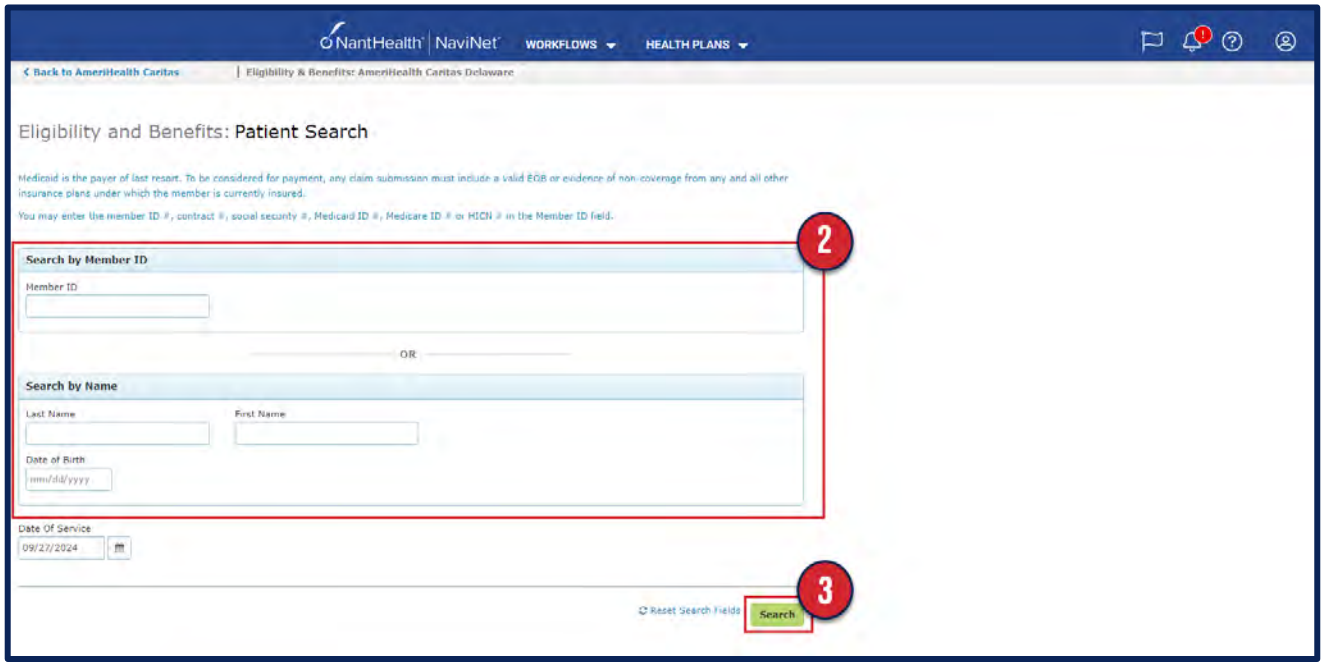
ACCESSING CARE GAP INFORMATION

Access Care Gap Information via Member Clinical Summary Report

Alert-related information on a member will be available to the PCP via the Eligibility and Benefits Inquiry.

1. Click on **Eligibility and Benefits Inquiry** from the Workflows for this Plan menu.
2. Enter the **Member ID or Member Name.**
3. Click **Search.**

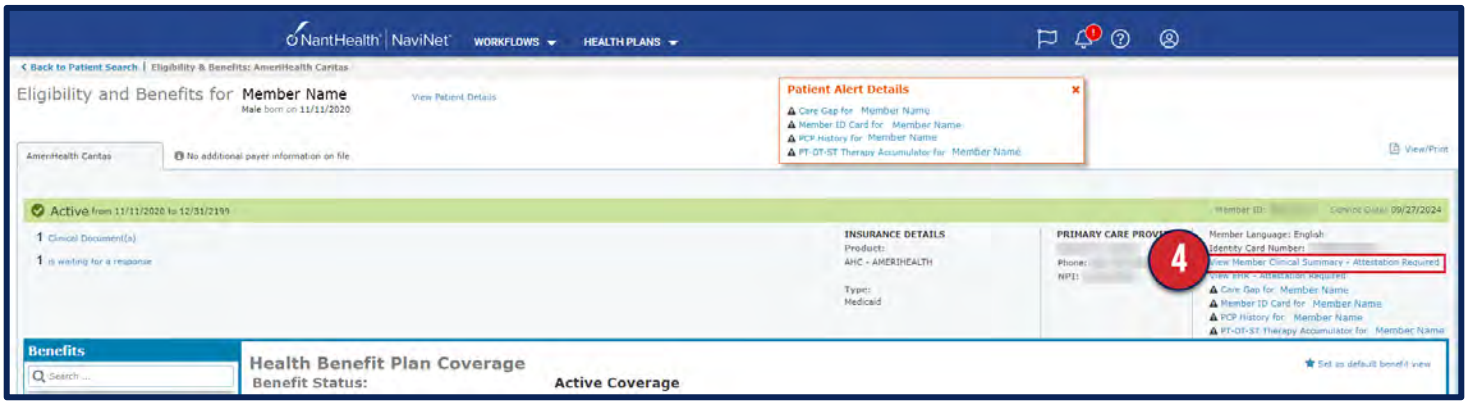


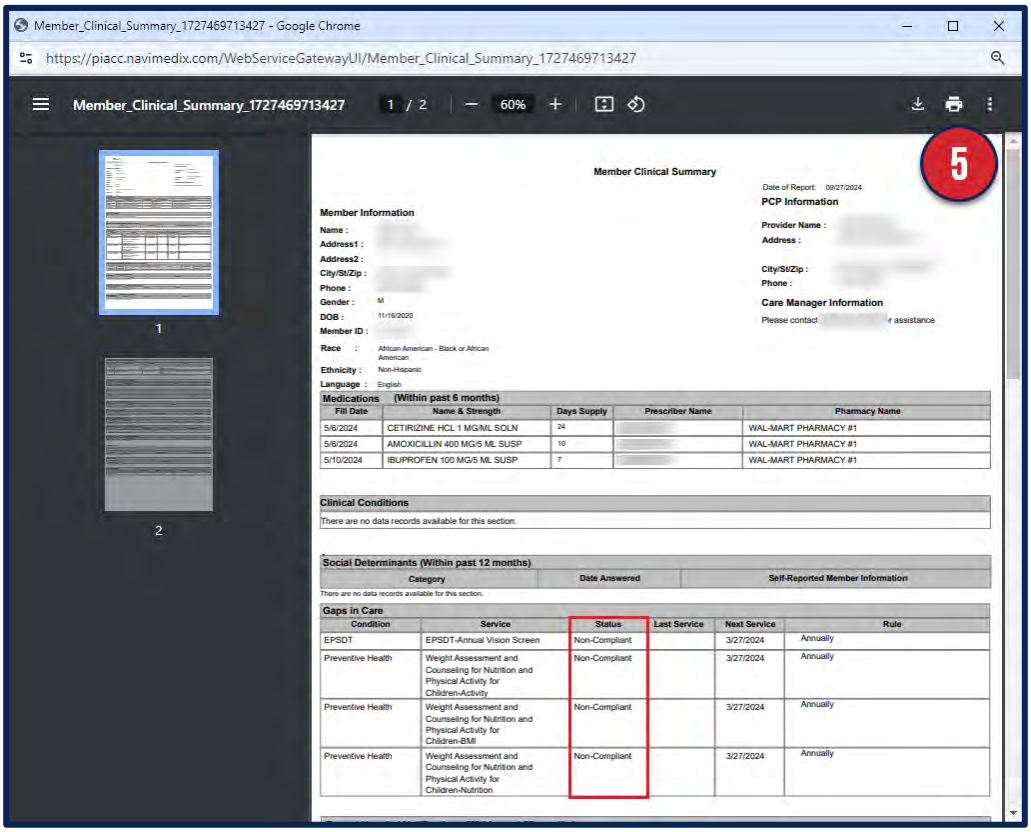


ACCESSING CARE GAP INFORMATION

Access Care Gap Information via Member Clinical Summary Report Cont'd.

4. The patient Details screen will display. Click on **View Member Clinical Summary.**
5. The Member Clinical Summary will show Care Gap statuses as compliant and non-compliant.





Note: Perform RX care gaps will show additional statuses of Up-to-date, Series Incomplete, or Missing.