



How to Make a Referral

NuQuest is pleased to introduce **Connect**® our secure online system for making referrals, uploading documents, viewing reports and tracking the status of existing referrals.

Referrals for Medicare Set-Aside and Professional Administration services, can be made via **Connect**® 24 hours a day, 7 days a week.

Referrals can also be made via phone, fax or mail. Our experienced service staff is available to provide referral assistance Monday through Friday, 8 am to 7 pm EST, by dialing 866-858-7161 and selecting option 2.

Connect® Online Referral Process

To begin the online referral process, visit www.mynuquest.com and click on the **Connect**® logo in the upper right hand corner.

Signing In

- Current users can sign-in with their existing User ID and Password
- New users must register before signing in by providing basic contact information and selecting a User ID and Password

Making a New Referral

After signing in, a new referral can be made by following the steps below

- Select the 'New Referral' tab on the top of the page
- Choose the service you would like completed by selecting the box next to the appropriate service name
- Fill in the required fields noted with an asterisk and select 'Submit' at the bottom of the page
- The Thank You page will appear to confirm that your referral was made successfully

Methods of Forwarding Required Information to NuQuest

Documents can be forwarded to NuQuest/Bridge Pointe using any of the following methods

- Upload Documents directly to NuQuest by selecting the 'Upload Documents' link located throughout the online referral application
- Mail documents to P.O. Box 915619, Longwood, FL 32791
- Fax documents to 407-389-0299
- Onsite Copy Service – ask your NuQuest representative if this service is available in your area

Necessary Information for Service Completion

In order to complete a requested service the following documents should be forwarded to NuQuest

- All Medical records for the last 2 years of treatment (if treatment was limited, last 5 years) as well as medical records for any major surgeries, physician depositions, any IMEs, or AMEs
- Medical claims and indemnity payment history for the last 2 years of medical treatment/receipt of indemnity benefits (if treatment was limited, last 5 years)
- Last 2 years of prescription drug history or pharmacy bills

CMS Approval of a MSA Allocation

- Proposed settlement paperwork that includes the following:
 - Breakdown of the MSA amount from the total future medical funds
 - Method of funding the MSA account (Annuity vs. single lump sum or combination)
 - Method of administering the MSA Account (Professional vs. Self Administration)

Submission of \$0 MSA to CMS for Approval

- A signed and dated letter on the carrier's or defense attorney's letterhead noting that no payments for indemnity or medical treatment have been made
- Medical claims and indemnity payment history
- Notice of denial
- All Medical records for the last 2 years of treatment (if treatment was limited, last 5 years) as well as all IMEs, QMEs or AMEs
- Letter from defense explaining the claim and the basis for denial

Medicare Conditional Payment Investigation

- Medical records for the last 2 years of treatment (if treatment was limited, last 5 years)

Medicare Conditional Payment Claim Negotiation

- Medical records for the last 2 years of treatment (if treatment was limited, last 5 years)
- Medical payment history which should correspond with the medical records

NuQuest
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