# **Medicare Advantage Provider Newsletter**



# Q1 2023 Provider Newsletter

### **Health Coaching Programs**

Aspirus Health Plan offers health coaching programs to promote healthy living for members living with diabetes and heart failure. Our health coaches partner with and meet the member where they are at on their health journey.

Health coaches help guide members to define their vision for change and set SMART goals. They collaborate with members to explore barriers to making changes and empower them in taking small and manageable steps to improve their selfmanagement. Members are given resources and will work with their coach to create the best path for change.

### Interactive Voice Recorded or Text Message Diabetes Education

#### Diabetes Program

Members are identified to receive automated phone calls, with an option to opt-in to text messages, if they have a diagnosis of diabetes. Phone calls and texts occur either weekly or monthly. The outreach is from "Mary Beth," the automated attendant, who provides education and helpful tips for self-management of diabetes. Members are asked diabetes-related questions during each outreach and the member's response may alert a health coach for follow-up. Members needing additional support are offered diabetes health coaching. This program is available in both English and Spanish.

### **Contact Us**

If you have a member that could benefit from this program or have further questions, please reach out to our Disease Management team. You can also find more information on the Aspirus Health Plan website <u>here</u> under Disease Management Program & Referrals.

• Disease Management Fax: 715-787-7320

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#### Aspirus Health Plan's Provider Website

https://www.aspirushealthplan.com/medicare/providers/

Aspirus Health Plan's Provider Assistance Center 715-631-7412 or 1-855-931-4851 toll free

Contact Provider News providernewsMA@aspirushealthplan.com

Aspirus Health Plan has partnered with UCare, based out of Minnesota, as the administrator for our Medicare Advantage Plan.



- Disease Management Voicemail: 715-631-7443
  - Press option #3 and again press option #3 to access the Disease Management Voicemail
- Disease Management Email: <u>DiseaseManagementMA@AspirusHealthPlan.com</u>
- Disease Management Referral Form: Aspirus Disease Management

### Skilled Nursing Facility Services Mileage Requirement Updated

On Jan. 1, 2023, Aspirus Health Plan released its Medicare Advantage Provider Manual. Providers are expected to review the entire Provider Manual to updates that could impact interactions with Aspirus Health Plan and our members.

One change that was made to the Provider Manual was in the Skilled Nursing Facility Services chapter. Previously, there had been a requirement that when hospitals transferred Medicare members to a skilled nursing facility, it needed to be within 50 miles. That mileage requirement has been removed.

Please refer to the Aspirus Health Plan Provider Manual for details on this and other updates.

# **Provider Portal Tips and Tricks**

The Aspirus Health Plan Provider Portal allows providers to search multiple years of claims information. To return quicker results and prevent searches from timing out, it is recommended that Portal Users utilize one of the following criteria when searching for claims:

- 1. Member Name The name entered in the name field should not contain any punctuation (i.e., Smith John should be entered and not Smith, John).
- 2. Claim # and Member Name
- 3. Claim # and Member ID
- 4. Claim # and Begin and End Date
- 5. Member Name and Member ID
- 6. Member Name and Begin and End Date
- 7. Member ID and Begin and End Date

Watch for additional tips and tricks for using Aspirus Health Plan's Provider Portal in upcoming newsletters.

### **One Pass Fitness Program**

One Pass is a complete fitness solution for body and mind, available to Aspirus Health Plan Medicare Advantage members at no additional cost. Members have access to more than 23,000 participating fitness locations nationwide, plus:

- More than 32,000 on-demand and live-streaming fitness classes.
- Workout builders to create their own workouts, it walks them through each exercise.
- A home fitness kit available to members who are physically unable to visit or who reside at least 15 miles away from a participating fitness location.
- Personalized, online brain training program to help improve memory, attention and focus.
- More than 30,000 social activities, community classes and events available for online or in-person participation.



Members can go to <u>medicare.aspirushealthplan.com/AHP\_onepass</u> to find participating fitness locations and learn more.

# **Documentation Improvement: Back to the Basics**

Start the new year off right, make a resolution to improve documentation and start with the basics.

Documentation improvement begins with a solid foundation - a strong understanding of the basic guidelines. Fundamental elements such as date of service, provider signature, provider credentials and orders for services have become standard in most practices and fully supported by electronic medical records.

Beyond those base elements, the following is essential to documentation:

- Sufficient documentation to validate that the services provided were "reasonable and necessary" and substantiate the level of service billed.
- Assessment of each diagnosis.
- Clear and complete plan of care to treat condition.
- Documented information accurately represents the patient's medical status, including chronic conditions affecting current care.
- Each date of service stands independent of the complete medical record, no references to previous documentation. Needed information is restated within the current date of service.

Documentation must support the submitted claim. The evidence to uphold the services and diagnoses on the claim is the provider's responsibility.

Reference: Noridian Healthcare Solutions. "Documentation Guidelines for Medicare Services." *Noridian Medicare*, 31 Oct. 2022, <u>med.noridianmedicare.com/web/jeb/cert-reviews/mr/documentation-guidelines-for-medicare-services</u>

# **Medical Necessity Guidelines**

Medical necessity guidelines are available when coverage requires determination of medical necessity for certain clinical procedures (procedure, therapy, diagnostic test, medical device, etc.). The updated utilization management criteria memo is now available on our website <a href="https://medicare.aspirushealthplan.com/providers/">https://medicare.aspirushealthplan.com/providers/</a> under Prior Authorization and Notification Requirements and Referrals.

# Providers Asked to Verify That They are Using Correct Payer ID for Medicare Advantage Claims

The Aspirus Health Plan Medicare Advantage Payer ID is 36483 for claims submissions. Providers are responsible for confirming with their clearinghouse that the correct Payer ID is being used to submit Medicare Advantage claims to Aspirus Health Plan. If you have questions about Electronic Data Interchange (EDI) transactions, please email <u>EDIsupportMA@aspirushealthplan.com</u>.

# **Ensuring Accurate Member ID Information**

Accurate member information is key to smoother claim submissions. Providers should ask for a current member insurance card each time a member presents for services. This lets you update information in your electronic records system, which can reduce rejected claim submissions or



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delayed claims processing. The Aspirus Health Plan member ID number should be submitted on the claim exactly as provided. No digits should be added or excluded.

Please note that all Aspirus Health Plan members have their own unique member ID numbers (9-digit number beginning with a 4). Maintaining current insurance information for members is imperative to successful and timely claims processing. Wrong member information can cause suspected fraudulent claims investigations and HIPAA violations, so please remember to verify that the information on the claim submission matches the information of the member receiving the service (name, member ID#, birth date, address, etc.).

# **Member Rights and Responsibilities**

Aspirus Health Plan takes member rights and responsibilities seriously. Members and providers can access these rights and responsibilities in the member's Evidence of Coverage or Member Contract, or in the Member Rights and Responsibilities section of the Aspirus Health Plan Provider Manual.

- Find the Evidence of Coverage by Medicare Advantage health plan on the <u>Member Resources</u> page of the Aspirus Health Plan website.
- Find the current Aspirus Health Plan Medicare Advantage Provider Manual on the Provider Website.

