

Medicare Advantage Provider Newsletter



Q4 2023 Provider Newsletter

Aspirus Health Plan Medicare Advantage Provider Manual Updated

Aspirus Health Plan has updated the following chapters of the [Medicare Advantage Provider Manual](#): Health Promotion Programs and Mental Health and Substance Use Disorder. Specific updates are called out in the Q4 Appendix.

Update to 2023 Authorization and Notification Grids

The 2023 authorization and notification grids have been updated to reflect a change in the pharmacy contact information. The updated grids are now available on our website at www.aspirushealthplan.com/medicare/providers/, under the Prior Authorization & Notification Requirements and Referrals section.

2024 Authorization and Notification Grids Now Available

Aspirus Health Plan's 2024 authorization and notification requirements are now available on our website at www.aspirushealthplan.com/medicare/providers/, under the Prior Authorization & Notification Requirements and Referrals section, with subsections for Medical Services, Mental Health and Substance Use Disorder Services and Medical Injectable Drugs.

2024 Pharmacy Benefits and New Pharmacy Benefit Manager

Beginning January 1, 2024, Aspirus Health Plan Medicare Advantage Plans will transition to a new Pharmacy Benefit Manager (PBM), Navitus Health Solutions. Navitus will process pharmacy claims, perform first level prior authorization

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Aspirus Health Plan's Provider Website

<https://medicare.aspirushealthplan.com/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.



reviews, manage the pharmacy network and manage the Pharmacy Help Desk.

Documents related to the 2024 Aspirus Health Plan formulary are now available at <https://medicare.aspirushealthplan.com/formulary>. Additional pharmacy information for providers, including Medical Injectable Drug Prior Authorization Resources, can be found on the [Medicare Pharmacy page of the Provider Website](#).

In mid-October, Aspirus Health Plan began sending postcards to Medicare members affected by changes to the 2024 formulary and their providers. The postcards list the drug impacted, the type of change, as well as any formulary alternative(s).

NEW: Search Function on Aspirus Health Plan Provider Website

Providers can now search the Aspirus Health Plan Medicare Advantage website via the search function in the upper right-hand corner of the website. Search for forms, documents, resources, policies and more. Providers can filter the search to only show provider-related information by navigating to the left-hand side of the page and selecting the “Providers” box. See example below.

The screenshot shows the Aspirus Health Plan website interface. At the top left is the Aspirus Health Plan logo. To the right is a search bar with a magnifying glass icon and a 'Log in' button. Below the logo is a navigation menu with links: Medicare Advantage Home, Medicare Advantage Plans, Search Network, Member Resources, Provider Resources, Agent Resources, and Contact Us. The main content area shows a search bar with the text 'authorization' and a magnifying glass icon. Below the search bar, it says 'Results 1-10 of 10 for authorization'. There are two filter tabs: 'Authorizations | Aspirus Health Plan' and 'Providers'. The 'Providers' tab is selected. Below the filters, there is a list of search results, including '... Use Disorder Authorizations (PDF) Medical Injectable Drug Authorization List (PDF) 2022 Authorization Grids Medical Services Authorizations (PDF) Mental Health and Substance Use Disorder ...'. Below the search results, there is a section for 'Pharmacy | Aspirus Health Plan' with a 'Providers' filter tab. Below this, there is a review section with the text: 'Review ... To request an adjustment to an existing prior authorization: The authorization must be active. End date extensions can be completed due to scheduling issues or health reasons (e.g., ...'.

Documentation Improvement: Sepsis

When reporting sepsis as a diagnosis, the provider must document sepsis in the medical record. It is crucial that sepsis is documented properly and clearly to ensure accurate reporting.

Tips for documenting sepsis:

- Document the infection. If the patient is admitted with a localized infection and develops sepsis after admission, document the localized infection along with the sepsis or severe sepsis.
- When there is documentation of severe sepsis, there should be evidence of organ dysfunction or perfusion.
 - Severe sepsis may not be reported without documentation of the organ dysfunction.
- Sepsis and severe sepsis should not be reported unless the provider has documented sepsis, severe sepsis or an acute organ dysfunction.
- Use words such as “due to/related to/associated with” to specify a causal organism.
 - Example: sepsis due to E. coli.

- Do not report sepsis if the condition has resolved during a patient’s hospital stay.

Providing specific and accurate documentation helps to ensure quality of care for a patient it is important to. Attention to these details in documenting sepsis supports medical necessity and will improve patient care.

Strong and Stable Kit

The Strong and Stable Kit provides tools to help members stay strong and prevent falls.

The Strong and Stable - Falls Prevention Kit includes:

- Resistance band strength kit.
- Tip sheets with helpful falls prevention advice.
- Tub grips to install on slippery areas.
- A nightlight that stays lit when the power goes off and can be used as a flashlight.
- A medication box.

Members may order a kit* through their online member account at <https://medicare.aspirushealthplan.com/member-login> or by calling Customer Service at the number on the back of their member ID card.

***Note:** Must be an eligible Aspirus Health Plan Medicare Advantage member at the time of the order. Limit one kit per year per member. Kit contents may be subject to change. Members should allow 4 – 6 weeks for delivery.

Rewards and Incentives


Aspirus Health Plan offers member incentives for a variety of preventive health services. Members should log in to or create an online member account at <https://medicare.aspirushealthplan.com/member-login> or call Customer Service at the number on the back of their member ID card to see if they are eligible. Additional information about services and vouchers are available on Aspirus Health Plans [Rewards and Incentives page](#).

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 EDIsupportMA@aspirushealthplan.com.

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 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.

 aspirushealthplan.com/medicare

Issuer: 80840
 Name: JOHN Q DOE
 ID: 123456789
 RxBIN: 123456 RxPCN: ABCDEF RxGrp: GHIJKL
 Svc Type: MEDICAL/DENTAL
 Group Number: UXXXXX_XXX
 Care Type: XXXXXXXX
 12345 123
 Medicare Limiting Charges Apply

MedicareRx
Prescription Drug Coverage

OV \$XX / SP \$XX / UC \$XX / ER \$XX Issued: 06/30/2021

FOR MEMBER USE - For emergency care go to the nearest hospital or call 911.
Customer Service, including 24/7 nurse line:
 715-631-7411 or 1-855-931-4850, TTY 1-855-931-4852
Appeals and Grievances: 715-631-7440 or 1-855-931-4858, TTY 1-855-931-4852
Delta Dental Customer Services: 612-402-3950, 1-866-298-5520, TTY 1-866-298-5520 / 711
Mental Health and Substance Use Disorder Services: 715-631-7442 or 1-855-931-5264
TruHearing: 1-844-782-6486 / 711

FOR PROVIDER USE - Notify Aspirus within 24 hours of admission: **One PassSM**
 FAX: 715-787-7316
Provider submit claims to:
Electronically: using Payer ID 36483
Claim submission by mail: Aspirus Health Plan, P.O. Box 22 Mpls, MN 55440-9975
Prescription drug claims must be submitted electronically to Navitus.
Navitus Pharmacy Help Desk: 1-833-837-4300
Provider Assistance Center: 715-631-7412 or 1-855-931-4851
Chiropractic: Fulcrum Health, Inc., P.O. Box 981808, El Paso, TX 79998-1808
Dental: Delta Dental of Minnesota, P.O. Box 9120, Farmington Hills, MI 48333-9120

Please note that all Aspirus Health Plan Medicare Advantage 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.).

Aspirus Health Plan Medicare Advantage Provider Assistance Center Holiday Hours

The Provider Assistance Center (PAC) is open Monday through Friday, 8 am-5 pm and can be reached at: 715.631.7412 (local), or 1.855.931.4851 toll-free.

The Provider Assistance Center is **closed** for the following holidays:

- Thanksgiving (observed) - Thursday, Nov. 23 and Friday, Nov. 24
- Christmas Eve and Day (observed) – Friday, Dec. 22 and Monday, Dec. 25
- New Year’s Day (observed) – Monday, Jan. 1