

Aspirus Health Plan Medicare Advantage Plans Diabetic Supplies List

Glucose Meters and Test Strips

Covered Products	Benefit Covered Under	Can Obtain Through	Quantity Limit
OneTouch	Part B	Pharmacy or Aspirus Health Plan Contracted DME Provider	No QL

Continuous Glucose Monitors

Covered Products	Benefit Covered Under	Can Obtain Through	Quantity Limit
Dexcom (requires prior authorization)	Part B	Pharmacy or Aspirus Health Plan Contracted DME Provider	See formulary for QL.
Freestyle Libre (requires prior authorization)	Part B	Pharmacy or Aspirus Health Plan Contracted DME Provider	See formulary for QL.

Insulin Delivery Devices

Covered Products	Benefit Covered Under	Can Obtain Through	Quantity Limit
Omnipod and Omnipod Cartridges (requires prior authorization)	Part D	Pharmacy	See formulary for QL.
Insulin Pumps and Insulin Pump Supplies	Part B	Aspirus Health Plan Contracted DME Provider	No QL

Supplies

Covered Products	Benefit Covered Under	Can Obtain Through	Quantity Limit
Lancets and Lancet Devices (most manufacturers are covered)	Part B	Pharmacy or Aspirus Health Plan Contracted DME Provider	No QL
Needles and Syringes (most manufacturers are covered)	Part D	Pharmacy or Aspirus Health Plan Contracted DME Provider	No QL
Alcohol Swabs, Gauze, other misc. Supplies (most manufacturers are covered)	Part D	Pharmacy	No QL

<u>Key</u>

DME – Durable Medical Equipment

Notice of Nondiscrimination

Aspirus Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Aspirus Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

We provide aids and services at no charge to people with disabilities to communicate effectively with us. such as TTY line, or written information in other formats, such as large print.

If you need these services, contact us at 715-631-7411 (voice) or toll free at 1-855-931-4850 (voice), 715-631-7413 (TTY), or 1-855-931-4852 (TTY).

We provide language services at no charge to people whose primary language is not English, such as qualified interpreters or information written in other languages.

If you need these services, contact us at the number on the back of your membership card or 715-631-7411 or toll free at 1-855-931-4850 (voice); 715-631-7413 or toll free at 1-855-931-4852 (TTY).

If you believe that Aspirus Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file an oral or written grievance.

Oral grievance

If you are a current Aspirus Health Plan member, please call the number on the back of your membership card. Otherwise please call 715-631-7411 or toll free at 1-855-931-4850 (voice); 715-631-7413 or toll free at 1-855-931-4852 (TTY). You can also use these numbers if you need assistance filing a grievance.

Written grievance

Mailing Address Attn: Appeals and Grievances Aspirus Health Plan P.O. Box 51 Minneapolis, MN 55440

Email: cagMA@aspirushealthplan.com

Fax: 715-631-7439

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 1-800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852)。

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 715-631-7411/1-855-931-4850 (телетайп: 715-631-7413/1-855-931-4852).

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).

ማስታወሻ: የሚናገሩት ቋንቋ ኣማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 715-631-7411/1-855-931-4850 (መስማት ለተሳናቸው: 715-631-7413/1-855-931-4852).

ဟ်သျဉ်ဟ်သး-နမ့်္။ကတ်၊ ကညီ ကိုဂ်အယိ, နမၤန့်၊ ကိုဂ်အတာ်မၤစားလ၊ တလက်ဘူဉ်လက်စ္၊ နီတမံးဘဉ်သံ့နှဉ်လီ၊ ကိုး 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).

ប្រយ័ក្ន៖ បើសិនជាអ្នកនិយា ភាសារ័ខ្មរ, រសវាជំនួយរ័ផ្នកភាសា ដោយមិនគិកឈ្នួល គឺអាចមានសំរាប់បំរវីអ្នក។ ចូរ ទូរស័ព្ទ 715-631-7411/1-855-931-4850 (TTY715-631-7413/ 1-855-931-4852)។

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 715-631-7411/1-855-931-4850 (ATS : 715-631-7413/1-855-931-4852).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852) 번으로 전화해 주십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 715-631-7411/1-855-931-4850 (TTY: 715-631-7413/1-855-931-4852).