Quality Management

MY 2025 HEDIS Medical Record Review
Aspirus Health Plan's HEDIS Medical Record Review Vendor (Datavant on behalf of Optum) will be contacting clinics in the coming weeks to coordinate medical record review for Aspirus Health Plan members seen at your clinics. As a contracted provider you are obligated to allow Aspirus Health Plan and its vendor to conduct this review. HEDIS measures are nationally used by all accredited health plans. Medical record review is an important component of the HEDIS compliance audit. It ensures that medical record reviews performed by our vendor meet audit standards for sound processes and that abstracted medical data are accurate.

Why is HEDIS important to physicians? HEDIS measures track a health plan's and physician's ability to manage health outcomes. Generally, strong HEDIS performance reflects enhanced quality of care. With proactive population management, physicians can monitor care to improve quality while reducing costs. It's not just about the scores. It's about the woman whose pap smear led to early detection and treatment of her cervical cancer. Or the toddler who didn't get whooping cough because he received the appropriate scheduled immunizations. Or the 65-year-old who kept up with screenings that revealed increased cholesterol. As a result, he received appropriate treatment and potentially avoided another heart attack.

We would appreciate your cooperation with collecting medical record review information at your clinic site(s). We appreciate your clinic's assistance in making this a smooth process.

Serving a Culturally and Linguistically Diverse Membership
Cultural and linguistic competence is the ability of health care providers and health care organizations to understand and respond effectively to the cultural and linguistic needs brought by their patients/consumers to the health care encounter. Cultural and linguistically appropriate services lead to improved outcomes, efficiency, and satisfaction.

The Wisconsin Department of Health and Human Services offers online learning and resources for the National Cultural Competency and Language Access (CLAS) Standards. For a listing of DHS Resources visit: Cultural Competency and Language Access | Wisconsin Department of Health Services. The CLAS Standards are aimed at health care professionals and organizations to ensure equitable, respectful care is provided to diverse populations.

For more information regarding National CLAS Standards, click on the following link, Culturally and Linguistically Appropriate Services - Think Cultural Health (hhs.gov).

Culture Care Connection is an online learning and resource center, developed by Stratis Health, aimed at supporting health care providers, staff, and administrators in their ongoing efforts to provide culturally-competent care to their patients.
For more information regarding Stratis Health's resource center, click on the following link, http://www.culturecareconnection.org/.

Emergency Room Reductions

As a trusted provider in the Aspirus Health Plan network, you play a critical role in guiding patients to the most appropriate and cost-effective level of care. Understanding the options available can help your patients make informed decisions — and avoid unnecessary costs. Below is an overview you can share or use during patient discussions to explain how they can access the right care at the right time.

The Right Care. The Right Place. The Right Time.

The cost of care can vary depending where you go. At Aspirus Health Plan, we want you to get the right care, at the right place, and at the right time. Below is an example of the services available to you and their associated costs, so you can compare the cost of a medical visit — if you have a cough, for example — to see how you can save money.

Nurseline

Registered nurses can answer general health questions you may have. The nurseline is available 24/7/365 by calling 866.220.3138. There is no cost for using this service.

Primary Care Office Visit $

Schedule an appointment with your first line of defense. Your primary care practitioner (PCP) is often the first to notice small changes in your health that could signal bigger issues.

MDLive $$

Connect with board certified doctors, therapists and dermatologists over the phone or via video consult 24/7/365 to receive care for a range of medical conditions. Contact MDLive by calling 800.657.6169, visiting the website at MDLive.com/aspirushealthplan or downloading their app on the app store.

Walk-In Clinic or Urgent Care Visit $$$

Walk-in and urgent care clinics offer options when your PCP is not available and you can't wait for an appointment to deal with conditions and ailments that are urgent but not life-threatening.

Emergency Department Visit $$$$$

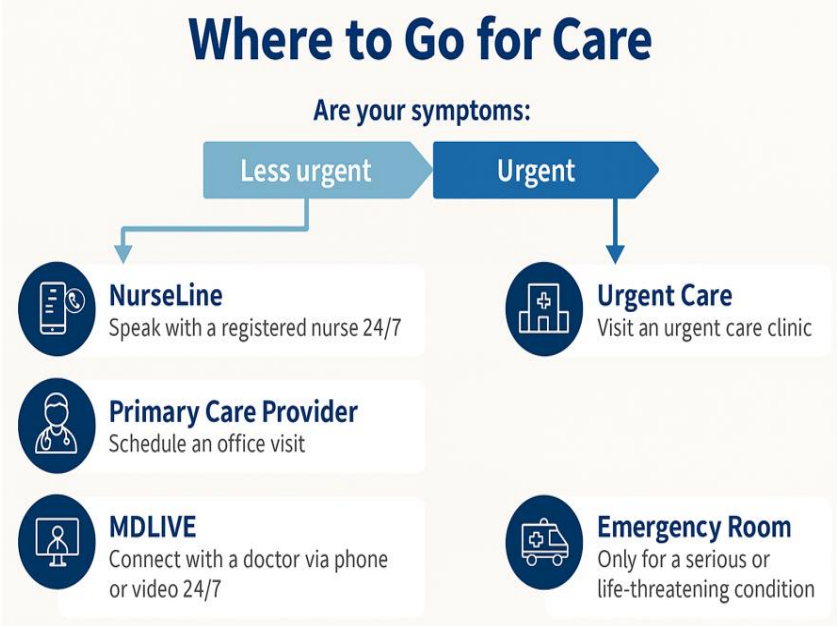
Use for serious, acute, life-threatening problems. If you are experiencing an emergency, call 911.

Out-of-Area

Urgent and Emergency care are covered by Aspirus Health Plan if you are out of the area and need immediate treatment.

Contact us for questions or to report urgent/ emergency care received out of the area.

866.631.8583
customerservice@aspirushealthplan.com



List of In-Network Urgent Care Centers

Urgent Care Center Name	Address				Contact #	Hours
BELLIN HEALTH	2820 ROOSEVELT RD.	MARINETTE	WI	54143	(715) 735-5225	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM
MEMORIAL MEDICAL CENTER, INC. DBA TAMARACK HEALTH ASHLAND MEDICAL CENTER	1615 MAPLE LN.	ASHLAND	WI	54806	(715) 682-4563	Daily 10:00 AM - 10:00 PM
ASPIRUS IRON RIVER HOSPITAL - PROFESSIONAL	1400 W. ICE LAKE RD.	IRON RIVER	MI	49935	(906) 265-6121	M - F 7:30 AM - 5:00 PM Closed on weekends
GUNDERSEN TRICOUNTY HOSPITAL AND CLINICS EMER AND URGENT CARE	18601 LINCOLN ST	WHITEHALL	WI	54773	(715) 538-4361	Daily 7:00 AM - 9:00 PM
ASPIRUS DIVINE SAVIOR HOSPITAL	2817 NEW PINERY RD	PORTAGE	WI	53901	(608) 745-2345	Daily 9:00 AM - 9:00 PM
AURORA MEDICAL CENTER KENOSHA	10400 75TH ST.	KENOSHA	WI	53142	(262) 948-5600	M - F 7:00 AM - 10:00 PM Saturday & Sunday 8:00 AM - 4:00 PM
ASPIRUS STANLEY HOSPITAL	1120 PINE ST	STANLEY	WI	54768-1297	(715) 644-6130	Daily 8:00 AM - 8:00 PM
ASPIRUS STEVENS POINT HOSPITAL	900 ILLINOIS AVE	STEVENS POINT	WI	54481	(715) 346-5000	M - F 8:00 AM - 8:00 PM Weekends & Holidays 8:00 AM - 4:00 PM
ASPIRUS STEVENS POINT HOSPITAL - URGENT CARE	900 ILLINOIS AVE.	STEVENS POINT	WI	54481	(715) 346-5000	M - F 8:00 AM - 8:00 PM Weekends & Holidays 8:00 AM - 4:00 PM
ASPIRUS MERRILL HOSPITAL	601 SOUTH CENTER AVE.	MERRILL	WI	54452-3404	(715) 536-5511	Daily 8:00 AM - 8:00 PM
GUNDERSEN LUTHERAN MEDICAL CENTER ONALASKA	3111 GUNDERSEN DR	ONALASKA	WI	54650	(608) 775-8100	Daily 7:00 AM - 10:00 PM
GUNDERSEN LUTHERAN MEDICAL CENTER WINONA CAMPUS	1122 W HIGHWAY 61	WINONA	MN	55987	(608) 782-7300	M - F 7:00 AM - 9:00 PM Saturday & Sunday 9:00 AM - 5:00 PM
GUNDERSEN BOSCOBEL AREA HOSPITAL AND CLINICS EMER AND URGENT CARE	205 PARKER ST	BOSCOBEL	WI	53805	(608) 375-4114	Daily 8:00 AM - 8:00 PM
SAUK PRAIRIE HEALTHCARE URGENT CARE/PRO FEE	260 26TH ST.	PRAIRIE DU SAC	WI	53578	(608) 643-3311	Daily 9:00 AM - 9:00 PM
HOWARD YOUNG MEDICAL CENTER	240 MAPLE ST	WOODRUFF	WI	54568	(715) 356-8000	Daily 7:00 AM - 8:00 PM
HOWARD YOUNG MEDICAL CENTER - URGENT CARE	240 MAPLE ST.	WOODRUFF	WI	54568	(715) 356-8000	Daily 7:00 AM - 8:00 PM
BELLIN HEALTH	1630 COMMANCHE AVE.	GREEN BAY	WI	54313	(920) 430-4585	Daily 8:00 AM - 8:00 PM Holiday Hours 8:00 AM - 4:00 PM

BELLIN HEALTH	440 WOODWARD AVE.	IRON MOUNTAIN	MI	49801	(906) 776-9040	Daily 8:00 AM - 8:00 PM Holiday Hours 8:00 AM - 4:00 PM
GUNDERSEN ST JOSEPHS HOSPITAL AND CLINICS EMER AND URGENT CARE	400 WATER AVE	HILLSBORO	WI	54634	(608) 489-8200	Daily 8:00 AM - 8:00 PM
ASPIRUS MEDFORD HOSPITAL - URGENT CARE	135 S. GIBSON ST.	MEDFORD	WI	54451-8100	(715) 748-8100	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 3:00 PM

AURORA MEDICAL CENTER OSHKOSH	855 N. WESTHAVEN DR.	OSHKOSH	WI	54904	(920) 456-6000	Daily 7:00 AM - 7:00 PM
GUNDERSEN LUTHERAN MEDICAL CENTER TEC TYPE B URGENT CARE	1910 SOUTH AVE	LA CROSSE	WI	54601	(608) 782-7300	Daily 7:00 AM - 11:00 PM
REEDSBURG AREA MEDICAL CENTER WALK-IN CARE	1900 N. DEWEY ST.	REEDSBURG	WI	53959	(608) 524-6477	M - F 7:00 AM - 7:00 PM Saturday & Sunday 7:00 AM - 5:00 PM Holidays 9:00 AM - 5:00 PM
ASPIRUS RHINELANDER HOSPITAL	2251 N SHORE DR	RHINELANDER	WI	54501	(715) 361-2000	Daily 8:00 AM - 8:00 PM
CHILDREN'S URGENT CARE - DELAFIELD	3195 HILLSIDE DRIVE	DELAFIELD	WI	53018-2189	(262) 646-9977	M - F 5:00 PM - 10:00 PM Saturday & Sunday 11:00 AM - 5:00 PM Holidays Closed
CHILDREN'S URGENT CARE - FOREST HOME	1432 W. FOREST HOME AVE., 3200	MILWAUKEE	WI	53204-3228	(414) 567-5401	Daily 9:00 AM - 8:00 PM Holidays 11:00 AM - 5:00 PM
CHILDREN'S URGENT CARE - KENOSHA	6809 122ND AVENUE	KENOSHA	WI	53142-7335	(262) 891-6600	Daily 9:00 AM - 8:00 PM Holidays 11:00 AM - 5:00 PM
CHILDREN'S URGENT CARE - MEQUON	1655 W. MEQUON ROAD	MEQUON	WI	53092-3230	(262) 518-2622	M - F 5:00 PM - 10:00 PM Saturday & Sunday 11:00 AM - 5:00 PM Holidays Closed
CHILDREN'S URGENT CARE - NEW BERLIN	4855 S. MOORLAND RD, 3RD FLOOR	NEW BERLIN	WI	53151-7494	(262) 432-7599	M - F 5:00 PM - 10:00 PM Saturday & Sunday 11:00 AM - 5:00 PM Holidays Closed
THEDACARE PHYSICIANS - BERLIN - WALK IN CLINIC	225 MEMORIAL DR. STE 1100	BERLIN	WI	54923	(920) 361-5535	M - F 8:00 AM - 6:00 PM Saturday & Sunday 8:00 AM - 2:00 PM
THEDACARE PHYSICIANS NEENAH MULTISPECIALTY	333 N. GREEN BAY RD.	NEENAH	WI	54956-1954	(920) 729-6088	M - F 7:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 5:00 PM
THEDACARE URGENT CARE APPLETON	3925 N. GATEWAY DR.	APPLETON	WI	54911	(920) 454-7002	M - F 7:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 5:00 PM
AURORA URGENT CARE	1100 GATEWAY CT	WEST BEND	WI	53095-8539	(262) 335-8600	Daily 8:00 AM - 8:00 PM Memorial Day 8:00 AM - 4:00 PM
AURORA URGENT CARE	14555 W NATIONAL AVE	NEW BERLIN	WI	53151-4494	(262) 827-2955	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	1640 E SUMNER ST	HARTFORD	WI	53027-2684	(262) 670-4000	Daily 8:00 AM - 8:00 PM Memorial Day 8:00 AM - 4:00 PM
AURORA URGENT CARE	16985 W BLUEMOUND RD	BROOKFIELD	WI	53005-5909	(262) 641-8400	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	215 WASHINGTON ST	GRAFTON	WI	53024-1700	(262) 375-3700	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	3003 W GOOD HOPE RD	MILWAUKEE	WI	53209-2042	(414) 352-3100	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	3289 N MAYFAIR RD	WAUWATOSA	WI	53222-3203	(414) 771-7900	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM

AURORA URGENT CARE	6425 W. MEQUON RD.	MEQUON	WI	53092-1862	(262) 387-8200	M - F 7:00 AM - 9:00 PM Saturday & Sunday 8:00 AM - 8:00 PM Memorial Day - 8:00 AM - 4:00 PM

AURORA URGENT CARE	6901 W. EDGERTON AVENUE	GREENFIELD	WI	53220	(414) 325-5244	M - F 7:00 AM - 9:00 PM Saturday & Sunday 8:00 AM - 8:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	N84W16889 MENOMONEE AVE	MENOMONEE FALLS	WI	53051-2810	(262) 251-7500	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	1005 SPRING CITY DR	WAUKESHA	WI	53186	(262) 301-2020	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM
AURORA URGENT CARE	10400 75TH ST	KENOSHA	WI	53142-7884	(262) 948-7030	M - F 7:00 AM - 10:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	1136 WESTOWNE DR	NEENAH	WI	54956-2175	(920) 720-8200	M - F 7:00 AM - 7:00 PM Saturday 7:00 AM - 3:00 PM Memorial Day - Closed
AURORA URGENT CARE	120 CHAPMAN FARMS BLVD	MUKWONAGO	WI	53149-9337	(262) 363-6160	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	1284 N SUMMIT AVE	OCONOMOWOC	WI	53066-4459	(262) 569-3080	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	135 JACKSON ST	OSHKOSH	WI	54901-4713	(920) 303-8100	M - F 8:00 AM - 5:00 PM
AURORA URGENT CARE	146 E GENEVA SQ	LAKE GENEVA	WI	53147-9694	(262) 249-4660	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	1575 N RIVERCENTER DR	MILWAUKEE	WI	53212-3978	(414) 283-8444	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	1881 CHICAGO ST	DE PERE	WI	54115-3770	(920) 403-8000	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	1910 ALABAMA ST	STURGEON BAY	WI	54235-3532	(920) 746-7200	M - F 7:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	201 E MORRISSEY DR	ELKHORN	WI	53121-4395	(262) 741-1900	M - F 8:00 AM - 8:00 PM Saturday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	210 WISCONSIN AMERICAN DR	FOND DU LAC	WI	54937-2999	(920) 907-7000	M - F 7:00 AM - 7:00 PM Saturday & Sunday 7:00 AM - 3:00 PM Memorial Day - Closed
AURORA URGENT CARE	2414 KOHLER MEMORIAL DR	SHEBOYGAN	WI	53081-3129	(920) 457-4461	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 12:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	248 MCHENRY ST	BURLINGTON	WI	53105-1828	(262) 767-8000	M - F 8:00 AM - 8:00 PM Saturday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	25320 75TH ST	PADDOCK LAKE	WI	53168	(262) 843-2336	M - F 8:00 AM - 8:00 PM Saturday 8:00 AM - 4:00 PM Memorial Day - Closed

AURORA URGENT CARE	2600 KILEY WAY	PLYMOUTH	WI	53073-5020	(920) 449-7000	M - F 8:00 AM - 8:00 PM Saturday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	2621 S. GREEN BAY RD.	RACINE	WI	53406	(262) 504-6150	M - F 7:00 AM - 10:00 PM Saturday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	3509 DEWEY ST	MANITOWOC	WI	54220	(920) 686-5731	M - F 7:00 AM - 7:00 PM Saturday 7:00 AM - 3:00 PM Memorial Day - Closed
AURORA URGENT CARE	4061 OLD PESHTIGO RD	MARINETTE	WI	54143-3887	(715) 732-8090	M - F 8:00 AM - 8:00 PM Saturday 8:00 AM - 4:00 PM Memorial Day - Closed

AURORA URGENT CARE	6609 W GREENFIELD AVE	WEST ALLIS	WI	53214-4941	(414) 257-8577	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	6611 SPRING ST	MOUNT PLEASANT	WI	53406	(262) 504-3100	M - F 7:00 AM - 5:00 PM Memorial Day - Closed
AURORA URGENT CARE	6901 W EDGERTON AVE	GREENFIELD	WI	53220-4420	(414) 325-5244	M - F 7:00 AM - 9:00 PM Saturday & Sunday 8:00 AM - 8:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	818 FORREST LN	WATERFORD	WI	53185-4577	(262) 514-8199	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	8400 WASHINGTON AVE	RACINE	WI	53406-3735	(262) 884-4088	M - F 7:00 AM - 10:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	855 N WESTHAVEN DR	OSHKOSH	WI	54904-7668	(920) 303-8700	Daily 7:00 AM - 7:00 PM
AURORA URGENT CARE	9200 W LOOMIS RD	FRANKLIN	WI	53132-8887	(414) 529-9200	M - F 7=8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	W231N1440 CORPORATE CT	WAUKESHA	WI	53186	(262) 896-6030	M - F 8:00 AM - 8:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	200 E RYAN RD	OAK CREEK	WI	53154-4563	(414) 570-4330	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - 8:00 AM - 4:00 PM
AURORA URGENT CARE	2000 E LAYTON AVE	ST. FRANCIS	WI	53235-6055	(414) 744-7880	M - F 8:00 AM - 7:00 PM Saturday & Sunday 8:00 AM - 4:00 PM Memorial Day - Closed
AURORA URGENT CARE	S68W15500 JANESVILLE RD	MUSKEGO	WI	53150-2613	(414) 422-0330	Mon 8:30 AM - 5:00 PM Tue 8:30 AM - 6:30 PM Wed 7:30 AM - 5:00 PM Thu 8:30 AM - 5:00 PM Fri 8:30 AM - 5:00 PM
UW HEALTH - UNION CORNERS CLINIC - URGENT CARE	2402 WINNEBAGO STREET	MADISON	WI	53704	(608) 828-7603	M - F 8:00 AM - 8:00 PM Weekends 8:00 AM - 5:00 PM
UW HEALTH - WEST TOWNE CLINIC - URGENT CARE	7102 MINERAL POINT RD.	MADISON	WI	53717	(608) 828-7603	M - F 8:00 AM - 8:00 PM Weekends 8:00 AM - 5:00 PM
AURORA BAYCARE MEDICAL CENTER	2845 GREENBRIER RD	GREEN BAY	WI	54311	(920) 288-8000	M - F 9:00 AM - 5:00 PM

Mental Heath Crisis Line and Medication Resources

After-hours mental health options are available both locally and nationally for individuals with urgent mental health needs. In Wisconsin, support services for those facing a mental health crisis include the option to call, text, or message online for all types of issues that can cause emotional distress. Local County Crisis Line* and National Crisis Service** contact information is provided below.

Mental health medication accessibility is taken into account when determining our formulary. There are medications used to treat mental health conditions on our Tier 1 formulary. Medication coverage can be accessed in the electronic medical record (EMR) at point-of-prescribing by accessing the ePrescribing tool within the EMR application. Prescribers can also access Aspirus Health Plan Formularies by logging into the Prescriber Portal with their NPI and State on the Navitus website: Prescribers (navitus.com).

*Wisconsin County Crisis Line contact information - https://www.preventsuicidewi.org/county-crisis-lines

**National Crisis Service resources are also available 24/7 across the United States by calling or texting to 988 or

chat online at 988lifeline.org

After surveying our members this year for the Aspirus Commercial lines of business, we noticed an opportunity to improve the timeliness of appointment availability compared to the previous year. To ensure we continue to meet our members' needs and maintain clinical safety, we kindly ask Providers to adhere to the access standards as outlined in the plan requirements. For your convenience, a table summarizing these standards is included below. For more detailed information, please refer to the **"Standards of Appointment Access Policy"** located in Section 2 of the Aspirus Health Plan Office Procedures Manual, available in the Provider Portal.

Access to Care Standards

Type of Care	Behavioral Health Accessibility Standards	Primary Care & Specialty Accessibility Standards
Preventative, Routine, and Non-Urgent	N/A	15 business days (Primary), 30 business days (Specialty)
Urgent Care	24 hours	24 hours
Emergency Care	Immediate	Immediate
After Hours Care	Connect with a practitioner or leave a message	Connect with a practitioner or leave a message
Non-life-threatening Emergency	6 hours or ER	N/A
Initial Routine Care	10 business days	N/A
Follow-up Routine Care	7 business days	N/A

Reminding Patients of Yearly Preventive Screenings

As the end of 2025 rapidly approaches, it's the perfect time to remind our patients about the importance of annual preventive screenings. These screenings are a cornerstone of proactive health care, helping to detect potential health issues early—often before symptoms appear.

Why It Matters

Preventive screenings can significantly reduce the risk of serious illness by identifying conditions such as high blood pressure, diabetes, cancer, and more at an early, more treatable stage. For many patients, these appointments are the key to staying on track with their health goals and maintaining a high quality of life.

Your Role as a Trusted Practitioner

We encourage all our providers to take a moment during each patient interaction—whether in person, by phone, or via telehealth—to:

Review the patient's screening history

- Discuss any overdue or upcoming preventive services
- Help schedule appointments before the year ends
- This is also a great opportunity to educate patients on the benefits of preventive care and address any concerns or misconceptions they may have.

Common Screenings to Highlight

Depending on age, gender, and risk factors, patients may be due for:

- Annual wellness visits
- Blood pressure and cholesterol checks
- Cancer screenings (e.g., mammograms, colonoscopies, cervical cancer tests)
- Diabetes and A1C testing
- Immunizations and boosters
- Mental health screenings

Let’s Finish the Year Strong

Encouraging patients to schedule their screenings now helps avoid the year-end rush and ensures they don’t miss out on covered benefits. It also reinforces our shared commitment to preventive, patient-centered care.

Credentialing

Aspirus Health Plan reminds network applicants and network participants of specific Practitioner Rights. Practitioners have the right to:

1. Review information submitted to support their credentialing application that has been obtained from outside sources except for References, Recommendations and Peer-review protected information except as required by law.
2. Correct erroneous information from other sources.
3. Receive the status of their credentialing or recredentialing application, upon request.

Aspirus Health Plan conducts outreach to practitioners if information obtained during AHP’s credentialing process varies substantially from the information the practitioner has provided to AHP.

Aspirus Health Plan also reminds practitioners that Credentialing Committee decisions for initial credentialing and recredentialing applicants are made available to the practitioner no more than 30 days after the Credentialing Committee’s decision date. Aspirus Health Plan is not required to notify of continued network participation determinations. Applicants must register for secure messaging notifications on Aspirus Health Plan’s Provider Portal. The site can be accessed via Aspirus Health Plan.

Medical Management

Continuity of Care and Transition of Care
Coming soon, there will be a new format and requirement for the Continuity of Care and Transition form that will be available on the Aspirus Health Plans website.
www.aspirushealthplan.com/insurance/priorauthorization. Providers will be required to complete the form and sign the attestation and provide clinical documentation supporting request. Please monitor the Aspirus Health Plan Provider Portal for updates to these policies **www.aspirushealthplan.com**.

Affirmative Statement About Incentives
Aspirus Health Plan does not specifically reward practitioners or other individuals for issuing denials of coverage or service care. Financial incentives for utilization management decision-makers do not encourage decisions that result in under-utilization. Utilization management decision making is based only on appropriateness of care and service and existence of coverage.

Member's Rights and Responsibilities
Aspirus Health Plan presents the Member Rights & Responsibilities with the expectation that observance of these rights will contribute to high quality patient care and appropriate utilization for the patient, the providers, and Aspirus Health Plan. Aspirus Health Plan further presents these rights in the expectation that they will be supported by our providers on behalf of our members and an integral part of the health care process. It is believed that Aspirus Health Plan has a responsibility to our members. It is in recognition of these beliefs that the following rights are affirmed and presented to Aspirus Health Plan members. (See final page of this Provider Newsletter for a copy of the Statement of Member's Rights & Responsibilities.

Out of Network Forms
Please ensure you are using the most recent version of Aspirus Health Plan Out-of-Network Referral Request Form. This is found on the Provider Resources section. Incomplete/outdated forms may result in a delay in processing the out-of-network request.

Prior Authorization Forms
Please ensure you are using the most recent version of Aspirus Health Plan Prior Authorization Request form(s). These are found on the Medical Policy section of the Aspirus Health Plan website. Incomplete/outdated forms may result in a delay in processing the prior authorization request.

Adverse Determination – To Speak to a Physician Reviewer
Aspirus Health Plan attempts to process all reviews in the most efficient manner. We look to our participating practitioners to supply us with the information required to complete a review in a timely fashion. We then hold ourselves to the timeframes and processes dictated by the circumstances of the case and our regulatory bodies. Practitioners may, at any time, request to speak with a peer reviewer at Aspirus Health Plan regarding the outcome of a review by calling (866) 631-5404, option 4 and the Intake Department will facilitate this request. You or your staff may also make this request of the nurse reviewer with whom you have been communicating about the case and she/he will facilitate this call. If, at any time, we do not meet your expectations and you would like to issue a formal complaint regarding the review process, criteria or any other component of the review, you may do so by calling or writing to our Customer Service Department.

Phone number: (866) 631-5404, Option 4
Address: Aspirus Health Plan, Grievance Department
P.O. Box 1062
Minneapolis, MN 55400

MEDICAL POLICY
Medical Policy documents are available on the Aspirus Health Plan website to members and to providers without prior registration. The most current version of Medical Policy documents are accessible under the Medical Policy

section on the Aspirus Health Plan website (https://www.aspirushealthplan.com/). (Click on Providers on the bottom of the page then choose Medical Policies).
If you wish to have paper copies of these documents, or you have questions, please contact the Medical Policy Department telephonically at (866) 631-5404

2025 Prior Authorization List - Provider Notification

Starting November 1, 2025, significant changes to the Aspirus Health Plan medical/BH and medical drugs Prior Authorization (PA) List will go into effect. Please review the updated PA List which will be published at https://www.aspirushealthplan.com/insurance/priorauthorization. To identify what requires prior authorization as failure to obtain prior authorization before providing the service/item/drug will result in denied claims.

Providers are required to submit a non-urgent/emergent prior authorization request a minimum of 2 weeks prior to scheduling a procedure/providing service or items.

As a reminder, to facilitate timely claims payment, non-emergent Out-of-Network services require prior authorization, or the claim will be denied.

The Prior Authorization list (PAL) is reviewed quarterly as new and deleted codes are published. The PAL is subject to change and may be updated as codes are added and deleted. Please monitor the online PAL closely for notice of changes

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies List

- View updates for prior auth requirements with the 11-01-2025 update to the prior auth list on the **aspirushealthplan.com** website.

Medical Clinical Policies for Medical Necessity Determination

- New: None

Medical Clinical Policies for Coverage Benefit Determination

- New: None
- Revised: None
- Retired: None

Medical/Surgical and Behavioral Health Care Services Investigative List

- Deletions: None

Please visit https://www.aspirushealthplan.com/ for the most current version.

Pharmacy

Pharmacy Policy documents for coverage of provider-administered drugs are available on the Aspirus Health Plan website to members and to providers without prior registration. The most current version of Pharmacy Policy documents are accessible under the Pharmacy Policies area on the Aspirus Health Plan website

(https://www.aspirushealthplan.com/). (Click on Providers on the bottom of the page then choose Pharmacy Policies).
If you wish to have paper copies of these documents, or you have questions, please contact the Pharmacy Policy Department telephonically at (763)-847-4477 or 1-800-940-5049 ext. 4477.
Pharmacy criteria documents for coverage of drug requests under the Pharmacy benefit are available at Navitus.com by clicking on Prescriber Portal, then choosing Prior Authorization.

Pre-Payment, Post Service Claim Edit Program (PSCE)
The official PSCE program was terminated effective 1/1/24. All drugs should still be dosed to follow FDA labeling. Anything outside of what is approved by the FDA should be requested through the PA process. The request will be reviewed according to policy, Off-Label Drug Use PP/O002.

Improving Alignment Between Drug Prior Authorizations and Claims Billing
Understanding the Issue: Duration vs. Billing Discrepancy
Drug prior authorizations (PAs) are typically approved for a six-month duration, in accordance with Optum Authorization (OA) guidelines. However, this timeframe often does not align with how providers bill claims—commonly per milligram (mg) or unit administered. This mismatch can lead to confusion and potential claim denials, as the Claims Coding team does not have the clinical expertise to reconcile dosage discrepancies.
Historically, a placeholder value of "9999" units was used to bypass this issue. However, this practice was discontinued at the request of the Aspirus Health Plan due to concerns about accuracy and compliance.
Proposed Solution: RN-Led Dosage Calculations
To ensure consistency between authorization and billing, Registered Nurses (RNs) will now perform drug dosage calculations during the authorization process. This approach ensures that approvals reflect the clinical intent and align with billing practices, reducing errors and delays.

Addressing Incomplete Treatment Plans
Current Challenge
Incomplete treatment plans submitted by providers continue to be a significant barrier to timely authorization. These gaps require additional outreach and delay the review process.
Recommended Improvements
To streamline the process and reduce delays, we propose the following:

- **Provider Education**: Launch targeted education initiatives to emphasize the importance of submitting complete treatment plans.
- **Escalation Protocol**: If clarification cannot be obtained after outreach, route the case to the Medical Director (MD) for review and potential denial.

Drug Dosage Calculation Protocol
To support accurate and clinically appropriate authorizations, the following protocol will be implemented:
RN Responsibilities

- **Documentation Review**:
  - If documentation is insufficient:
    - Attempt **1 outreach for treatment plan.**
- **If Clarification Is Not Obtained**:
  - Calculate dosage for **1 treatment** based on **FDA standard dosing**.
  - If FDA dosing is presented as a range, use the **maximum dose per treatment**.
- **If Calculation Is Not Possible**:
  - Route to MD and specify missing parameters (e.g., weight).

Important Notes

- Do **not** use "9999" (unlimited units).
- If medical necessity is not met and no treatment plan is provided, initiate RFI for clarification.
- If routing to MD for medical necessity without a treatment plan, include the FDA

standard dose calculation.
- If a provider submits a new request for additional dosages (after approval of one FDA standard dose), RN may approve the new case if it falls within the same Date of Service. Document linkage to the previously approved case.
- Nurses will make **one additional outreach** for missing information before routing to MD for lack of treatment plan.

Complex Case Management

Our RN Complex Care Coordinators Can Make a Difference for Your Patients

RN Complex Care Coordinators are here to help our mutual customers by:

- Coordinating health care among providers
- Providing education regarding their health care needs, concerns and adherence to treatment plans
- Supporting and advocating for improved health care experiences and outcomes
- Locating available community resources
- Assisting them to become better health care consumers

The RN Complex Care Coordination team are RN's who work one-on-one with your patients, treating each person as an individual with unique needs and challenges. The goal and efforts have been aimed at optimizing connections both within the health care system and community to support the patient, set and work on health-related goals, and make the patient more confident in their ability to achieve their optimal health status.

The RN Complex Care Coordination team is ready to help with your patients. If you have a patient, you feel might benefit from the service, please contact the RN Complex Care Coordination Team at 715-843-1061 or CDMHRT-AspirusInc-Intake@aspirus.org.

Coding

Coding Appeal Request Form

All claim appeals related to a Coding service disallow are required to have a completed Coding Appeal Request Form (cover sheet) submitted with the validating records. This form is available on the main Aspirus internet link - https://aspirushealthplan.com/ - and located via this link – https://aspirushealthplan.com/webdocs/60043-AHP-Claims-Coding-Appeal-Request-Form_SE.pdf.

Any appeal received without this Coding Appeal Request Form will be rejected. It is important we know exactly what the appeal entails in order to appropriately address the disallowed service(s).

Examples of Coding Appeals for disallowed services (not all inclusive list);

- CPT® and HCPCS code(s)
- ICD-10-CM (diagnosis) code(s))
- ICD-10-PCS (inpatient procedure code(s))
- Place of Service (POS) code(s)
- Clinical Edits, not all inclusive list;
    - Code(s) restricted to certain age limits
    - Bundling per National Correct Coding Initiative (NCCI) code combinations
    - Unit maximums
    - Modifier(s) submitted or not submitted

    - Unlisted code documentation (please see the May Provider Newsletter for this Coding article)
- Internal payer edits, eg., frequency limits, services limited by Medical Policy criterion
- 837I (UB-04 form) fields;
    - Type of Bill (TOB)
    - Revenue Code(s)
    - Diagnosis Related Groups (DRGs)

In network provider (INN) contractual fee schedule (pricing) agreements are ***not*** a Coding Appeal inquiry and should be addressed with your Provider Relations Representative.

Out of network (OON) pricing and reimbursement concerns are ***not*** a Coding Appeal inquiry and are addressed by Customer Service.

Corrected claim submissions are to be submitted electronically as they usually are not considered an appeal.

Member Rights and Responsibilities

Aspirus Health Plan is committed to maintaining a mutually respectful relationship with you that promotes high-quality, cost-effective health care. The member rights and responsibilities listed below set the framework for cooperation among you, practitioners, and us.

As our member, you have the following rights and responsibilities:

1. A right to receive information about us, our services, our participating providers and your member rights and responsibilities.
2. A right to be treated with respect and recognition of your dignity and right to privacy.
3. A right to available and accessible services, including emergency services, 24 hours a day, 7 days a week.
4. A right to be informed of your health problems and to receive information regarding treatment alternatives and risks that are sufficient to assure informed choice.
5. A right to participate with providers in making decisions about your health care.
6. A right to a candid discussion of appropriate or medically necessary treatment options for your conditions, regardless of cost or benefit coverage.
7. A right to refuse treatment.
8. A right to privacy of medical and financial records maintained by us and our participating providers in accordance with existing law.
9. A right to voice complaints and/or appeals about our policies and procedures or care provided by participating providers.
10. A right to file a complaint with us and the Wisconsin Office of the Commissioner of Insurance and to initiate a legal proceeding when experiencing a problem with us. For information, contact the Wisconsin Office of the Commissioner of Insurance at 1.800.236.8517 and request information.
11. A right to make recommendations regarding our member rights and responsibilities policies.
12. A responsibility to supply information (to the extent possible) that participating providers need in order to provide care.
13. A responsibility to supply information (to the extent possible) that we require for health plan processes such as enrollment, claims payment and benefit management, and providing access to care.
14. A responsibility to understand your health problems and participate in developing mutually agreed-upon treatment goals to the degree possible.
15. A responsibility to follow plans and instructions for care that you have agreed on with your providers.
16. A responsibility to advise us of any discounts or financial arrangements between you and a provider or manufacturer for health care services that alter the charges you pay.

For information about claims, complaints or grievances visit **AspirusHealthPlan.com**.