

Ascension Personalized Care

Clinician Newsletter, Feb. 2023

This newsletter shares important updates, reminders and resources related to the Ascension Personalized Care medical plan.

We are excited to announce Ascension has expanded our ACA Marketplace plans for individuals and families who may be looking for affordable health insurance starting January 1, 2023. Plans will be offered in Indiana, Michigan, Kansas and new for 2023 - Texas, Tennessee and additional counties in Michigan.

Ascension Personalized Care (APC) plans deliver strong value, and we've already seen enrollment completely exceed expectations. We won't have final enrollment numbers for a few more weeks, but we expect to have roughly seven times the number of members we had last year.

This plan features:

- Low premiums
- Unique health and wellness benefits
- Access to most doctors and providers in the clinically integrated network
- \$0 deductible Bronze and Silver plans
- Pharmacy benefits included with all plans
- No referrals needed within the Ascension network
- \$0 for certain preventive care screenings, tests and immunizations (see website for details)
- \$0 wellness visits for kids

As an in-network doctor for APC, we want to make sure you and your staff have a smooth experience working with our health plan.

To-do list:

- Has APC been added to your EMR and billing systems?
- Are administrative staff at all your locations aware of this new plan?
- Do you know where to follow-up with any claims or billing issues you might have?
- Have you signed up for an onboarding presentation with your local navigator?
- Do you have PCPs actively looking to expand their panel?

To learn more about the plan or address any questions, please reach out to your local APC navigator:

Indiana: Teddy Horton
317-800-0338
theodore.horton@ascension.org

Kansas: Kathy Gann
316-708-2953
katherine.gann@ascension.org

Michigan: Chesla Emerick
872-210-7624
chesla.emerick@ascension.org

Tennessee: Jana Steele
615-585-6417
jana.steele@ascension.org

Texas: Katie Ray
210-410-8713
katherine.murtaghhuerta@ascension.org

Please verify when you have an APC patient that you are selecting the correct insurance package option from the dropdown menu in Athena

APC should be under 654644 Automated Benefit Services - US Health and Life (EPO). APC members should not be listed as having SmartHealth insurance. Having incorrect insurance plans selected could result in a delay of claims payment or denial of the claim. We have found a large percentage of patients impacted, so please be sure to review and update patient data accordingly.

Is a new provider joining your group?

To have your claims pay seamlessly, be sure to send us your new providers, location changes, or provider terming to ACMproviders@ascension.org.

Review claims on the ABS portal

Stay on top of claims information by accessing the ABS portal to:

- View claims history and payment status
- Verify eligibility
- Inquire on status of prior authorizations

[Go to the ABS portal](#)

When using the portal, you will be able to tell if a member is in the Ascension or APC group once you search under the "Eligibility, Claims, Auths" tab. You would use the "Eligibility" tab to search for a member using their SSN or alternate member ID. Once you hit the search button, a row will come up and it will include the name, date of birth, group, location, gender, status and effective date of the member. Under "Group" it will show "ASCENSION" or one of the following for APC: ACEXCHKS, ACEXCHMI, ACEXCHIN, ACEXCHTN, ACEXCHTX.

Eligibility and verification

Faxback instruction

If you're having trouble confirming your patient's eligibility, APC offers numerous options for verification including:

- Visiting the online portal at secure.healthx.com/Provider_2022.
- Connecting with a Customer Service representative at 833-600-1311 from 8:00 a.m. to 6:00 p.m. EST Monday through Friday.
- 24/7 fax recall.

Using the FaxBack system is easy. Call 888-494-4600 and have the patient's member ID and your fax number available. Once eligibility is confirmed, you will receive a fax including instructions on how to submit claims and a benefits schedule for your patient's plan.

How to look for dependents

Once you are connected to the FaxBack system, you will be able to look up eligibility and benefits for a dependent. To verify:

1. Enter your fax number.
2. Enter your tax ID number.
3. Select "1" for eligibility and benefits for the subscriber.

"2" for eligibility and benefits for a dependent.

"3" for claim status for the subscriber.

"4" for claim status for a dependent.

4. Enter the member ID number.
5. Enter the DOB (example July 6, 1979 is 07061979).

The system will provide the eligibility or claim information verbally and will ask whether you would like the information faxed to you. A fax will be sent containing the member's eligibility, along with the SBC for the member, or the requested claim information.

Prior authorization

Clinicians may be required to complete a prior authorization request prior to certain services being rendered. Prior authorization is not required for emergency services or urgent care services.

To request a prior authorization clinicians can:

- Log in to the clinician portal and view the status of an authorization at secure.healthx.com.
- Fax a completed prior authorization form to 512-380-7507.
- Call Ascension Care Management Insurance Holdings at 844-995-1145.
- Email Ascension Care Management Holdings at shp-authorization@ascension.org.

For a comprehensive list of procedures with the appropriate ICD-10 or CPT codes, [click here](#).

ID cards

Pharmacy

Ascension's drug plan is automatically included in Ascension Personalized Care's drug plan. Cigna is the pharmacy provider. Cigna pharmacy cards are mailed within 5-7 days of a member showing paid in our system. There is a 24-hour lag time between a member showing paid in the Cigna system and being able to enroll at my.cigna.com to view their pharmacy card online.

Medical

Members will receive an APC medical card in the mail. Subscribers with single coverage will receive one medical ID card. Subscribers with dependents will receive two medical ID cards. Please note that ID cards are generated in the subscriber's name only.

Medical ID cards are mailed within 2-3 business days of the premium showing paid in our system.



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