



**MARCH 2025**

## QUICK LINKS

[Clinical Practice Guidelines—Advanced Health](#)

[Provider Manual](#)

[Member Handbook](#)

[Oregon State Drug Review](#)

[Provider Notifications](#)

**DON'T FORGET**, you can easily access our provider portal to check member eligibility, authorization status, claim status and more. Visit <https://visibiledi.com/advancedhealth/Home/Login>

**Please remember to send in your Pregnancy Notifications**

## Mental Health First Aid

### LEARN HOW TO SUPPORT YOUR FRIENDS, FAMILY AND NEIGHBORS

Mental Health First Aid (MHFA) teaches you how to identify, understand and respond to signs of mental health and substance use challenges among adults. You'll build skills and confidence you need to reach out and provide initial support to those who are struggling. You'll also learn how to help connect them to appropriate support. Please see the attached flyer for details and tentative dates.

### Foodsmart

Advanced Health Members now have access to a registered dietician via telehealth through our collaboration with Foodsmart. This will teach members how to improve their nutrition, manage their health conditions, and save money on food. Members can call AH Customer Service or go to <https://foodsmart.com/>.

## CCO 101 Tour

Advanced Health has begun our Tour to give you a comprehensive look at who we are and what we do. Multiple sessions will be scheduled through 2025. For more information, please reach out to our Provider Relations Representative, Dani Thompson at 541-266-6512.

Effective March 19, 2025, SWOIPA, Inc. has removed the prior authorization requirement for CPT codes 69209 and 69210 for in-network providers regardless of ICD 10 code(s).

## Vitamin D Testing

Vitamin D testing has been classified as low-value care. Low-value care refers to tests, treatments, and procedures that, based on clinical evidence and research, have been shown to offer minimal benefit except in specific, well-defined clinical scenarios. This type of care is often referred to as overuse, waste, or unnecessary care. The utilization of low-value care can result in poor patient outcomes, including physical, emotional, and financial burdens, as well as increased healthcare costs, including cascading expenses and inefficient use of time and resources by providers and staff. All claims submitted for CPT code 82306 must include the approved prior authorization number on the claim for dates of service 3/01/25 forward. Claims that do not include the authorization number will be systematically denied.

Advanced Health | 285 LaClair St | Coos Bay OR 97420 | 541-266-7147 | <https://advancedhealth.com/>

# Health Related Social Needs- Housing

Did you know that Advanced Health members can qualify for up to six-months of rent assistance?

**The Health Related Social Needs Housing benefit launched in November 2024. To date, Advanced Health has helped 80 households maintain housing in Coos and Curry Counties.**

**In collaboration with multiple Community Benefit Organizations, landlords, and rental agencies Advanced Health has paid over \$100,000 in rent for members at risk of homelessness.**

**If you have a patient who is struggling to pay rent and is at risk of homelessness, please refer them to the Advanced Health website for additional information and member self-referral form:**

**<https://advancedhealth.com/members/health-related-social-needs/>**

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A Message from the Grievance Team:

Members have a right to file a complaint any time, about any dissatisfaction they have with their care (i.e., provider, facilities, transportation, CCO), and we have state and federal obligations to respond to the member in writing about their complaint.

The investigation (not accusation) is an opportunity for provider to respond, and members are often reminded of their rights and responsibilities along the way.

For more information about complaint processing, please review pages 50-51, in the Advanced Health Provider Manual 2024-2025.

Reminder: Advanced Health does not, and requires all contractors, and network providers not to:

- Discourage a Member from using any aspect of the Member grievance system;
- Take any punitive action against a provider who requests an expedited resolution or supports a Member's grievance or appeal;
- Encourage the withdrawal of a complaint, appeal, or hearing request that has been filed, or;
- Use the filing or resolution of a complaint, appeal or hearing request as a reason to retaliate against a Member or to request Member dis-enrollment

Providers may contact the Grievance System Coordinator at 541-269-3202 with any concerns.



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## COMPLIANCE MATTERS

### Documentation Standard

In the ever-evolving landscape of healthcare, comprehensive and precise documentation is essential not only for compliance but for the continuity and quality of patient care. As healthcare providers, the records we create serve as the foundation for coordinated care, ensuring that every patient receives timely, informed treatment.

Here are key practices to elevate your documentation standards:

#### **Clarity and Completeness Matter:**

Every patient encounter is part of a broader narrative, and your documentation should reflect this. By ensuring that your notes are detailed and clear, you provide the next caregiver or specialist with all the information necessary to continue delivering high-quality, uninterrupted care. Complete documentation allows for the accurate assessment and treatment of each patient, preventing any gaps in care that could affect outcomes.

#### **The Importance of Timeliness:**

Timely documentation is not merely a best practice; it is a safeguard for both patient safety and compliance. Recording patient details promptly ensures that information remains accurate and current, reducing the risk of oversights and enhancing the continuity of care. The sooner information is recorded, the more reliable it becomes for all members of the care team.

#### **Consistency Across Records:**

Consistency in how we document patient information across different care settings strengthens communication within our teams. When everyone adheres to standardized practices, we reduce the possibility of errors and misunderstandings, particularly when coordinating care across multiple disciplines.

#### **Regulatory Adherence is Crucial:**

Maintaining compliance with regulatory requirements such as HIPAA, CMS, and other governing bodies is essential for protecting both our patients and our practice. Thorough, compliant records minimize the risk of audits or legal exposure, ensuring that we remain focused on delivering exceptional care without interruption.

#### **Maximizing the Benefits of EHR Systems:**

Our electronic health record (EHR) system is designed to support comprehensive and compliant documentation. By utilizing the full functionality of EHRs, you can ensure that key details are captured, patient histories are easily tracked, and care decisions are well-informed. Effective use of this technology helps to improve efficiency, reduce errors, and support the best possible care outcomes.

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## Provider Fraud, Waste, and Abuse Training

As a reminder, Advanced Health is required to offer annual Fraud, Waste, and Abuse training to our providers. We have created a brief presentation on FWA that is located on our website at <https://advancedhealth.com/home/advanced-health-compliance-and-fraud-waste-and-abuse-program-for-employees-providers-subcontractors-and-members/>.

## ADVANCED HEALTH NOTIFICATIONS FOR PROVIDERS

### Did you know

Advanced Health offers a stipend for each completed Pregnancy Notification form submitted to our office?

To qualify, a form must be completed and signed by the patient and the stipend is paid to the first provider that submits the form to our office.

This process applies to ALL patients testing positive for pregnancy, not just Advanced Health members.

Stipends are paid on a quarterly basis.

In March of 2024, the Oregon Health Authority updated the Hysterectomy and Sterilization Consent Forms, initially allowing a grace period for previously signed copies but announced as of 12/1/24, they will no longer accept forms with revision dates prior to 2024. Moving forward, please use the updated forms, linked below:

- <https://advancedhealth.b-cdn.net/wp-content/uploads/2024/04/Hysterectomy-consent-he0741-rev-3.2024.pdf>
- <https://advancedhealth.b-cdn.net/wp-content/uploads/2024/04/Consent-to-Sterilization-ages-21-and-older-he0742a-rev-3.2024.pdf>
- <https://advancedhealth.b-cdn.net/wp-content/uploads/2024/04/Consent-to-Sterilization-ages-15-20-he0742b-Rev-3.2024.pdf>

## ADVANCED HEALTH PROVIDER PORTAL

### Encourage Your Team to Utilize Advanced Health's Provider Portal!

Save time and streamline your workflows by using Advanced Health's provider portal! It's an intuitive, easy-to-use platform designed to help providers and billing staff resolve most inquiries quickly and efficiently. Here's why the portal is your go-to resource for most inquiries:

#### What You Can Do in the Portal:

- **Verify Member Information:** Check eligibility and PCP assignments with ease.
- **Track Authorizations and Claims:** View the status of submitted authorizations and claims.
- **Access Payment Details:** Review adjudication details, payment amounts, and download PDF Explanation of Payment (EOP) reports or ANSI X12 835 Remittance Advice files on demand.
- **Submit Claims:** Manually enter claims directly through the portal.
- **Utilize LineFinder:** Simplify searches for codes on the Prioritized List of Health Services and related code sets from data.oregon.gov with this comprehensive, easy to use tool.
- **24/7 Accessibility:** Access the portal anytime, day or night, without being restricted to our customer service business hours.
- **Coming Soon in 2025 – Submit authorizations:** Enter prior authorization requests directly through the portal! This exciting new feature, currently in beta testing, will allow office staff to streamline workflows by submitting requests online instead of completing and faxing manual forms. Stay tuned for updates!

#### Easy Registration and Quick Setup:

Getting started is simple!

- Visit the Advanced Health Provider Portal at [www.visibiledi.com/advancedhealth](http://www.visibiledi.com/advancedhealth).
- Register with a valid email address, Tax ID, and provider NPI.
- Access is granted within 24-48 business hours following verification. Confirmation emails will come from [support@visibiledi.com](mailto:support@visibiledi.com) (check your spam folder if needed).

#### Need Help?

For assistance with registration or portal functionality, email: [portal.support@advancedhealth.com](mailto:portal.support@advancedhealth.com).

Additional information can be found at [advancedhealth.com/providers](http://advancedhealth.com/providers).

Before calling our customer service phone line, consider using the portal for quick resolutions to simple inquiries—it's a time-saver for everyone!