

# MOVE YOUR NUTRITION SERVICES GROUP TO THE NEXT LEVEL WITH AMERICAN SPECIALTY HEALTH



DO YOU WANT TO DEVELOP YOUR PRACTICE AND EXPAND YOUR PATIENT BASE?  
DO YOU WANT TO INCREASE REFERRALS FROM REGIONAL AND NATIONAL HEALTH PLANS?

If you answered YES to these questions, then American Specialty Health (ASH) can help!

ASH is a leading personal health improvement organization that covers millions of people nationwide by providing specialty health care benefits, wellness/health coaching, and fitness programs to health plans, insurance carriers, employer groups, and trust funds.

ASH programs and services include specialty health care benefit and affinity programs for acupuncture, chiropractic, massage therapy, naturopathy, nutrition services, and physical, occupational, and speech therapy.

Since our inception, ASH has been a quality-focused organization and one of the first organizations to be fully accredited by URAC and certified by NCQA in the areas of Utilization Management and Credentialing. ASH's subsidiaries cover nearly 30 million of Americans under their benefit administration programs alone.

## Why Join ASH?

- Increased patient access
- Online support through ASHLink®
- Online claims submission and payment
- Less paperwork and administration
- Incentive payments for health information technology and quality results
- Practitioner initiatives—we listen to you!
- No application fee or annual fee
- Listing on ASH and health plan client websites
- Access to new benefit and affinity discount programs as they become available

In the past 10 years, the number of members covered by ASH's specialty health care programs has increased by more than 100%. These programs currently cover more than 30 million health plan members.

# Products

American Specialty Health Incorporated's subsidiaries offer or administer a series of products designed to meet the full range of needs and requirements of full-service health plans, insurance carriers, employer groups, school districts, municipalities, and union trust funds. ASH offers both benefit and affinity plans.

## Benefit Programs

ASH subsidiaries administer HMO, PPO, POS, OAP, EPO, Medicaid, and Medicare Advantage programs on behalf of health plan clients and employer groups. Access to contracted practitioners may be direct or may require a primary care physician referral. Depending on the health plan or employer group requirements, medical necessity review may or may not be required prior to reimbursement of services. Members have an annual benefit limit, as well as a deductible copayment or coinsurance due to the contracted practitioner at each visit.

Through our programs, health plans can offer a specialty health care benefit option to existing medical benefits, potentially attracting an increased number of practitioners. Practitioners that are part of our specialty health care program may be better positioned to attract more business in the process.

## How It Works

- Eligible members select a practitioner and call to make an appointment.
- Practitioner examines member and provides necessary treatment.
- Practitioner submits treatment plan to ASH for review of services. All treatment plans are reviewed by peers.
- Each treating practitioner works with an ASH clinical quality evaluation manager who is in the same specialty field.
- ASH fully reviews most treatment plans within two days of receipt. If an ASH contracted practitioner has any questions regarding a treatment plan, the practitioner may call an ASH clinical quality evaluation manager via a toll-free number.

ASH provides comprehensive support services. Each practitioner has toll-free access to ASH's customer service department Monday through Friday from 7 a.m. to 6 p.m. (Pacific Time). Additional support includes practitioner education webinars and information available in the "Resources" section of ASHLink. (More information on ASHLink follows.)

## The ChooseHealthy® Affinity Program

The ChooseHealthy affinity program provides a unique way for ASH and its contracted practitioners to work with health plans that may be hesitant to offer specialty health care benefits. It provides a mechanism for the health plan to provide members with discounted access to specialty health care and to learn about the benefits of these services.

Under an affinity program, members have direct access to practitioners; no medical referral is required. Contracted practitioners give a discount in their fees to the members and members pay contracted practitioners directly for services rendered. The contracted practitioner is not required to obtain approval or to submit claims, and there are no annual limits to this program. The health plan actively promotes the affinity program to its members and encourages members to access contracted practitioners.



# Improve Efficiency and Cut Costs



To more effectively integrate with our contracted practitioners, our online tool, ASHLink, provides an efficient mechanism for a variety of interactions between ASH and our contracted practitioners. ASH utilizes this technology system to manage our health quality improvement systems and support transactions with practitioners. Through ASHLink, contracted practitioners can:

- Exchange clinical information about individual cases for quality assurance and medical necessity review
- Reference clinical practice guidelines to support the delivery of health care services
- Email communications with clinical quality evaluation managers (clinical peers)
- Check for member eligibility verification and benefits
- Submit clinical appeals

In addition, a comprehensive educational library of information about working within the ASH system is available. Contracted practitioners can streamline routine office procedures, such as member eligibility verification and electronic claims submissions. ASHLink is available 24 hours a day, 7 days a week, which helps practitioners and their office staff reduce time spent on the phone, and allows a faster response time and access to all necessary information required to integrate with ASH.

Once you have completed the credentialing process and have received your welcome letter, you can activate your ASHLink account by logging onto [www.ASHLink.com](http://www.ASHLink.com), clicking the “Online Activation Process” link, and using the User ID and PIN provided in your welcome letter. Once your account is activated, you can begin submitting electronic transactions immediately.

## Resources Available on ASHLink

- Practitioner Services Agreement
- Client summaries
- Operations manual
- Forms
- Practitioner education library
- Notifications
- Value-Added Program discounts
- Newsletters

## Earn Incentives

The more you use ASHLink, the more you can increase your office revenue. **An incentive of up to *five percent* of ASH-paid claims is available when at least 50 percent of your transactions are processed through ASHLink.** Beyond providing opportunities for incentives, using ASHLink reduces the time you need to spend on the phone and provides you with a faster average turnaround time for treatment plans and claims than for paper submissions.

## Direct Deposit

In addition to conserving paper and being environmentally friendly, there are other bonuses when you sign up for our direct deposit program. The advantages of participating in the program include:

- An additional ***one percent*** of ASH-paid claims incentive
- Quick payment processing (average turnaround time from receipt of a claim sent in via ASHLink to direct deposit takes less than four days)
- Easy tracking on ASHLink
- Faster access to your funds
- Time savings—no going to the bank

**In 2012, ASH paid more than \$2.6 million to practitioners in ASHLink incentives.**

# Credentialing and Guidelines

## What to Expect

Upon successful submission of the application materials, the credentialing process will begin.

## Credentialing

If additional information is needed or if there is anything missing from the credentialing materials you submitted, you will receive communication from an ASH credentialing department representative. Such documents may include but are not limited to:

- Credentialing Application
- ASH Addendum (where applicable)
- Practitioner Services Agreement
- W-9
- Copy of your Professional Liability (Malpractice) Insurance

If you have questions regarding ASH's clinical guidelines at any time during the credentialing process, you may refer to the Practitioner section of our website (under Clinical Quality and Clinical Practice Guidelines section) at [www.ashcompanies.com](http://www.ashcompanies.com). Additionally, you may also call to request a phone appointment with one of our clinicians. Our clinicians are peers in your same field of expertise and are here to answer your questions regarding matters of a clinical nature.

ASH strives to be as efficient as possible and, in many cases, we can complete your credentialing in as little as 45 – 60 days.

**Note: ASH follows all state guidelines in accordance with NCQA regarding limited timeframes for processing credentialing applications. As such, it is very important that you return all needed documents within a timely manner (or as soon as possible) to prevent a possible credentialing cancellation.**

## ASH Guidelines

Please review our guidelines as follows:

- Agreement: Execute agreement(s) with ASH to participate in benefit plans and affinity programs.
- Credentialing: Complete the credentialing application and provide supporting documentation consisting of Attachment A and signature page from the Practitioner Services Agreement and Professional Liability (Malpractice) face sheet.
- Peer Review: Reimbursement for services may be subject to peer review. Peer medical necessity review is provided by licensed practitioners of nutritional services.
- Quality Management: Participate in ASH's or the health plan's appeals, grievance, and dispute processes if there are any disagreements regarding coverage, medical necessity review decisions, or administrative actions.
- Fee Schedule Amounts: Accept the ASH fee schedule amounts as payment in full. There is no allowance of "balance billing" members for any reductions in payment or unapproved services.
- Professional Liability (Malpractice) Insurance Coverage: Minimum requirements are typically \$100,000 per incident and \$300,000 per aggregate. There is a \$1,000,000/\$3,000,000 requirement for selected states and/or health plans.
- Comprehensive General Liability Insurance Coverage: Minimum requirements are typically \$100,000 per incident and \$100,000 per aggregate.





## Our National Certifications and Accreditations

The National Committee for Quality Assurance (NCQA) is a private, not-for-profit organization dedicated to improving health care quality through measurement, transparency, and accountability.

ASH was one of the first specialty health companies to receive NCQA Organization Certification in Utilization Management and Credentialing and continues to renew both certifications.

URAC is identified nationally as the premier accrediting entity for specialty health plans. URAC standards include areas of organizational structure and administrative services, network management, quality management, utilization management, practitioner services, practitioner credentialing, and member participation and protection. ASH subsidiaries were first accredited in 1998 and currently hold full accreditation for the following programs: Health Plans, Health Networks with Credentialing, Health Utilization Management, Claims Processing, and HIPAA Privacy & Security.



## Our Commitment to Quality

One of our objectives is to support organizational, process, service, and clinical quality improvement activities. By identifying opportunities for improvement and implementing corrective actions where necessary, we continue to enhance the quality of care and service rendered to our members, your patients.

Additionally, our specialty health care system exists to enhance and strengthen the practitioner-patient interface, to positively influence the quality of clinical outcomes, and to provide access to clinically necessary and appropriate services for all members. It is a "peer-based" system with practitioners of nutritional services rendering all credentialing and medical necessity review decisions.

Our commitment to quality relies on high clinical and member satisfaction outcomes, and the enhancement of our members' health and well-being.

## OUR MISSION TO EMPOWER INDIVIDUALS TO LIVE HEALTHIER AND LONGER.



