



WELCOME!

Contact Us:

Phone: 1-844-637-4760

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Compliance:

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Great Plains Medicare Advantage goes Live January 1, 2018!

Take the following steps to ensure a smooth start:

<p>STEP 1: Review our Model of Care</p>	<p>Learn about the services, care coordination, and extra support we provide for our Members and physician partners.</p> <p>Review our Model of Care at: https://greatplainsmedicareadvantage.com/providers-partners/#Septimo</p>
<p>STEP 2: Sign up for Electronic Billing and Payment</p>	<p>You can submit claims through your clearinghouse. Just ask for the payers.</p> <p>Download a companion guide at: http://exchangeedi.com/quick-links</p> <p>Our Payer ID is: Great Plains Medicare Advantage ND – GPND1 Great Plains Medicare Advantage SD – GPSD1 Great Plains Medicare Advantage NE – GPNE1</p>
<p>STEP 3: Setup your office staff on our Provider Portal</p>	<p>Great Plains Medicare Advantage has a Provider Portal that allows you to submit authorization requests, inquire on the status of an authorization or claim, and verify member eligibility/benefit utilization.</p> <p>Get connected here: https://planprovportal.align-360.com/ez-net60GPA/login.aspx</p>
<p>STEP 4: Be compliant</p>	<p>CMS requires all providers to complete Fraud, Waste and Abuse Training. Additionally, Great Plains Medicare Advantage has a Standards of Conduct for all Providers and Vendors.</p> <p>Complete the CMS Compliance Training here: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html</p> <p>Read and Acknowledge the Standards of Conduct here: https://greatplainsmedicareadvantage.com/wp-content/uploads/documents/GREATPLAINS_Standards-of-Conduct.pdf</p>
<p>STEP 5: Understand our Authorization Process</p>	<p>Prior authorization is designed to promote the utilization of medically necessary services, to prevent unanticipated denials of coverage, to ensure that participating providers are utilized, and that all services are provided at the appropriate level of care for the member’s needs. Primary Care Physicians and Nurse Practitioners are actively involved with all referrals and treatment recommendations and should be notified of recommendations prior to submitting requests for prior authorization.</p> <p>A complete list of services that require authorization can be found on the website here: https://greatplainsmedicareadvantage.com/wp-content/uploads/documents/GREATPLAINS_Services_Prior_Authorization.pdf</p>
<p>STEP 6: Learn More!</p>	<p>The Great Plains Medicare Advantage Provider Manual is an easy reference document for all things related to the Plan - Member Rights, Provider Responsibilities, Claims Payment, Appeals and Grievances, Utilization Review, and more.</p>



Read the manual and Print a copy for your office here: https://greatplainsmedicareadvantage.com/wp-content/uploads/documents/GREATPLAINS_Provider-Manual.pdf

Please contact us with your questions: 1-844-637-4760 (TTY: 711)

Physician Responsibilities

- You must treat Great Plains Medicare Advantage customers the same as all other patients in your practice, regardless of the type or amount of reimbursement.
- You may not balance bill a customer for providing services that are covered by Great Plains Medicare Advantage. This excludes the collection of standard copays. You may bill a customer for a procedure that is not a covered benefit if you have followed the appropriate procedures outlined in the Claims section of Provider Manual.

Provision of Healthcare Services

Participating providers shall provide health care services to all customers, consistent with the benefits covered in their policy, without regard to race, ethnicity, national origin, religion, sex, age, mental or physical disability or medical condition, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), genetic information, source of payment, or any other bases deemed unlawful under federal, state, or local law.

Participating providers shall provide covered services in a culturally competent manner to all customers by making a particular effort to ensure those with limited English proficiency or reading skills, diverse cultural and ethnic backgrounds, and physical or mental disabilities receive the health care to which they are entitled. Examples of how a provider can meet these requirements include but are not limited to: translator services, interpreter services, teletypewriters or TTY (text telephone or teletypewriter phone) connection.

Great Plains Medicare Advantage offers interpreter services and other accommodations for the hearing-impaired. Translator services are made available for non-English speaking or Limited English Proficient (LEP) customers. Providers can call Great Plains Medicare Advantage customer service at **1-844-637-4760** (TTY: 711) to assist with translator and TTY services if these services are not available in their office location.

Great Plains Medicare Advantage Contracted Hospitals are listed above, Notify Plan of ALL ER or Hospitalizations: 1-844-637-4760 (TTY: 711)



Name	Address	City	ST	Zip
Albany Area Hospital	300 Third Avenue	Albany	MN	56307
Altru Hospital	1200 S Columbia Rd	Grand Forks	ND	58201
Ashley Medical Center	612 Center Ave N	Ashley	ND	58413
Avera Creighton Hospital	1503 Main Street	Creighton	NE	68729
Avera DeSmet Memorial Hospital	306 Prairie Avenue SW	De Smet	SD	57231
Avera Flandreau Hospital	214 North Prairie	Flandreau	SD	57028
Avera Gregory Hospital	400 Park Avenue	Gregory	SD	57533
Avera Hand County Memorial Hospital	300 West 5th Street	Miller	SD	57362
Avera Heart Hospital of South Dakota	4500 W. 69th Street	Sioux Falls	SD	57108
Avera McKennan Hospital & University Health Center	1325 S Cliff Ave	Sioux Falls	SD	57105
Avera Queen of Peace Hospital	525 North Foster Street	Mitchell	SD	57301
Avera Sacred Heart Hospital	501 Summit	Yankton	SD	57078
Avera St. Anthony's Hospital	300 N. 2nd Street	Oneill	NE	68763
Avera St. Luke's Hospital	305 South State Street	Aberdeen	SD	57401
Avera St. Marys Hospital	801 E. Sioux Ave.	Pierre	SD	57501
Avera Weskota Memorial Medical Center	604 1st Street NE	Wessington Springs	SD	57382
Beatrice Community Hospital	4800 Hospital Parkway	Beatrice	NE	68310
BEATRICE COMMUNITY HOSPITAL & HEALTH CENTER INC	4800 Hospital Parkway	Beatrice	NE	68310
BRYAN HEALTH	1600 S. 48th St.	Lincoln	NE	68506
CHI HEALTH CREIGHTON UNIVERSITY MEDICAL CENTER-BERGAN MERCY	601 N 30th St	Omaha	NE	68131
CHI HEALTH CREIGHTON UNIVERSITY MEDICAL CENTER-BERGAN MERCY	7500 Mercy Rd	Omaha	NE	68124
CHI Health Good Samaritan	10 E 31st St	Kearney	NE	68847
CHI HEALTH IMMANUEL	6901 N 72nd St	Omaha	NE	68122
CHI HEALTH LAKESIDE	16901 Lakeside Hills Court	Omaha	NE	68130
CHI HEALTH MERCY CORNING	603 Rosary Dr	Corning	IA	50841
CHI Health Mercy Council Bluffs	800 Mercy Dr	Council Bluffs	IA	51503
CHI Health Midlands	11111 S 84th St	Papillion	NE	68046
CHI HEALTH MISSOURI VALLEY	631 N 8th St	Missouri Valley	IA	51555
CHI HEALTH NEBRASKA HEART	7500 S 91st St	Lincoln	NE	68526
CHI HEALTH SCHUYLER	104 W 17th St	Schuyler	NE	68661
CHI HEALTH ST. ELIZABETH	555 S 70th St	Lincoln	NE	68510
CHI HEALTH ST. FRANCIS	2620 W Faidley Ave	Grand Island	NE	68803
CHI HEALTH ST. MARY'S	1301 Grundman Blvd	Nebraska City	NE	68410
CHI MERCY HEALTH	570 Chautauqua Blvd	Valley City	ND	58072



CHI ST ALEXIUS HEALTH DEVILS LAKE	1031 7th Street NE	Devils Lake	ND	58301
CHI ST ALEXIUS HEALTH DICKINSON	30 West 7th Street	Dickinson	ND	58601
CHI ST ALEXIUS HEALTH WILLISTON	1301 15th Avenue W	Williston	ND	58801
CHI St. Alexius Health Bismarck	900 E Broadway Ave	Bismarck	ND	58501
CHI ST. ALEXIUS HEALTH CARRINGTON	800 North 4th Street	Carrington	ND	58421
CHI St. Alexius Health Dickinson	2500 Fairway St	Dickinson	ND	58601
CHI St. Alexius Health Garrison	407 3rd Ave SE	Garrison	ND	58540
CHI St. Alexius Health Turtle Lake	220 5th Ave West	Turtle Lake	ND	58575
Community Memorial Hospital	809 Jackson Street	Burke	SD	57523
DUNES SURGICAL HOSPITAL	600 N Sioux Point Rd	Dakota Dunes	SD	57049
Jacobson Memorial Hospital Care Center	601 East St N	Elgin	ND	58533
Lakewood Health Center	600 Main Avenue S	Baudette	MN	56623
Landmann Jungman Memorial Hospital	600 Billars Street	Scotland	SD	57059
Linton Hospital	518 N Broadway St	Linton	ND	58552
Lisbon Area Health Services	905 Main Street	Lisbon	ND	58054
Mary Lanning Hospital	715 N. Saint Joseph Ave.	Hastings	NE	68901
MERCY MEDICAL CENTER - SIOUX CITY	801 5th St	Sioux City	IA	51101
Murray County Medical Center	2042 Juniper Ave	Slayton	MN	56172
Oakes Community Hospital	1200 North 7th Street	Oakes	ND	58474
Oakland Mercy Hospital	601 E 2nd St	Oakland	NE	68045
ORANGE CITY AREA HEALTH SYSTEM	1000 Lincoln Cir SE	Orange City	IA	51041
Pioneer Memorial Hospital and Health Services	315 N Washington Street	Viborg	SD	57070
PLAINVIEW AREA HEALTH SYSTEM	704 N 3rd St	Plainview	NE	68769
Rapid City Regional Hospital	353 Fairmont Blvd	Rapid City	SD	57701
Rapid City Regional Hospital	1039 Montgomery Street	Custer	SD	57730
Rapid City Regional Hospital	1440 N Main Street	Spearfish	SD	57783
Rapid City Regional Hospital	61 Charles Street	Deadwood	SD	57732
Rapid City Regional Hospital	949 Harmon Street	Sturgis	SD	57785
Sakakawea Medical Center	510 8th Ave NE	Hazen	ND	58545
Sanford Aberdeen Medical Center	2905 3rd Avenue SE	Aberdeen	SD	57402
Sanford Bagley Medical Center	203 4th St NW	Bagley	MN	56621
Sanford Bemidji Medical Center	1300 Anne St NW	Bemidji	MN	56601
Sanford Canby Medical Center	112 Saint Olaf Ave S	Canby	MN	56220
Sanford Chamberlain Medical Center	300 S Byron Blvd	Chamberlain	SD	57325
Sanford Clear Lake Medical Center	701 3rd Ave S	Clear Lake	SD	57226
Sanford Hospital Canton/Inwood Medical Center	440 N Hiawatha Dr	Canton	SD	57013
Sanford Hospital Webster	1401 W 1st Street	Webster	SD	57274
Sanford Jackson Hospital	1430 N Highway	Jackson	MN	56143
Sanford Luverne Medical Center	1600 N Kniss Avenue	Luverne	MN	56156
Sanford Mayville Medical Center	42 5th Avenue SE	Mayville	ND	58257
Sanford Medical Center	300 N 7th St	Bismarck	ND	58501



Sanford Medical Center Fargo	801 Broadway N	Fargo	ND	58102
Sanford Medical Center Hillsboro	12 3rd Street SE	Hillsboro	ND	58045
Sanford Rock Rapids Medical Center	801 S Greene St	Rock Rapids	IA	51246
Sanford Sheldon Medical Center	118 N 7th Ave	Sheldon	IA	51201
Sanford USD Medical Center	1305 W 18th Street	Sioux Falls	SD	57105
Sanford Vermillion Hospital	20 S Plum Street	Vermillion	SD	57069
Sanford Westbrook Medical Center	920 Bell Ave	Westbrook	MN	56183
Sanford Wheaton (CAH)	401 12th St N	Wheaton	MN	56296
Sanford Worthington Medical Center	1018 6th Avenue	Worthington	MN	56187
SELECT SPECIALTY HOSPITAL - SIOUX FALLS INC	800 E 21ST ST	SIOUX FALLS	SD	57105
Southwest Healthcare Services	14 6th Ave SW	Bowman	ND	58623
ST. FRANCIS HEALTHCARE CAMPUS	2400 St. Francis Dr	Breckenridge	MN	56520
St. Gabriel's Hospital	815 SE 2nd Street	Little Falls	MN	56345
St. Joseph's Area Health Services	600 Pleasant Avenue	Park Rapids	MN	56470
St. Michaels Hospital	410 W. 16th Avenue	Tyndall	SD	57066
West Holt Memorial Hospital	406 W Neely Street	Atkinson	NE	68713
West River Regional Medical Center	1000 Highway 12	Hettinger	ND	58639
Windom Area Hospital	2150 Hospital Drive	Windom	MN	56101
Winner Regional Healthcare Center	745 E 8th Street	Winner	SD	57580
Wishek Community Hospital	1007 4th Ave S	Wishek	ND	58495
	1 Burdick Expressway West	Minot	ND	58701
	307 1ST Avenue NW	Kenmare	ND	58746



Plan Model of Care

Great Plains Medicare Advantage's Model of Care organizes best practices and industry innovations such as the PCP/NFist-Nurse Practitioner care team providing onsite, facility-based primary health care support; a risk-assessment tool designed for a geriatric, nursing home patient population; a comprehensive history and physical assessment that drives an Individualized Care Plan (ICP); a care management platform that helps identify needed preventive health/HEDIS services, ensures the use of evidence based guidelines, and facilitates care team communications for care coordination; and frequent face-to-face member and caregiver/family member interactions that identify member care preferences and allow time for important care decision discussions and counseling.

The Model of Care facilitates the early assessment and identification of health risks and major changes in the health status of members with complex care needs, and the coordination of care to improve members overall health. Great Plains Medicare Advantage's Institutional Special Needs Plan (I-SNP) Model of Care has the following goals:

- Improve access to medical, mental health, and social services;
- Improve access to affordable care;
- Improve coordination of care through an identified point of contact; ☐ Improve transitions of care across healthcare settings and providers;
- Improve access to preventive health services; ☐ Assure appropriate utilization of services; and ☐ Improve member health outcomes.

Importantly, the Model of Care focuses on the individual I-SNP member. I-SNP members receive a comprehensive health risk assessment initially and annually thereafter. Based on this assessment, an individualized care plan is developed, based on evidenced-based clinical protocols. An interdisciplinary care team, which includes practitioners of various disciplines and specialties based on the needs of the member, is responsible for care management. The member may participate in this process, as may all of their healthcare providers. The individual care plan is stored centrally so that it can be shared with all members of the interdisciplinary care team, as indicated. All providers are encouraged to participate in the I-SNP Model of Care and interdisciplinary care teams.

Great Plains Medicare Advantage uses a data-driven process for identifying the frail/disabled, multiple chronic illnesses and those at the end of life. Risk stratification and protocols for intervention around care coordination, barriers to care, primary care givers, education, early detection, and symptom management are also components of the Model of Care. Based on the needs of Plan members, a specialized provider network is available to assure appropriate access to care, complementing each member's primary care provider.

The NFist is an important and unique part of Great Plains Medicare Advantage's provider network. A NFist is a physician who is (1) contracted with Great Plains Medicare Advantage, (2) licensed to practice allopathic (MD) or osteopathic (DO) medicine, and (3) is responsible for providing primary care services for Great Plains Medicare Advantage members in the Nursing Facility (NF) or Skilled Nursing Facility (SNF) setting, including coordination and management of the delivery of all covered services.



The Great Plains Medicare Advantage NFist model ensures that every member has direct access to primary care services onsite in the nursing facility and that the member's primary care physician (PCP)/NFist has experience understanding the special needs of nursing facility residents. NFists provide regular patient care services in the nursing home facilities, working to streamline care and minimize the need for transfers out of the facility for ambulatory services. They work directly with the Great Plains Medicare Advantage Nurse Practitioners to provide and oversee all aspects of member care including evaluating, recommending or providing treatments to optimize health status. When possible and clinically appropriate, NFists may decide to treat some acute exacerbations or conditions in place in the nursing facility rather than transferring the member to an external site of care, such as an acute care hospital or emergency room.

Great Plains Medicare Advantage uses a gatekeeper model, meaning that all specialist referrals and certain diagnostic tests require a referral to be obtained from a PCP/NFist prior to engaging the specialist or performing the diagnostic test.

All members are required to choose or designate a PCP/NFist at enrollment. Great Plains Medicare Advantage members are able to choose their PCP/NFist from the list of contracted NFists maintained and published by Great Plains Medicare Advantage. Members are able to change their PCP/NFist at any time. Physicians contracted as NFists and available to be chosen as a primary care physician with Great Plains Medicare Advantage are clearly identified in Great Plains Medicare Advantage's member materials, including the Provider Directory as credentialed at time of publication.

Great Plains Medicare Advantage's evidenced-based Model of Care includes the following components:

- The clinical team provides integrated health care management with a strong primary and preventive care focus to treat acute and chronic conditions.
- All members receive a comprehensive history and physical exam and care plan within 90 days of enrollment and comprehensive visits at least once a month, thereafter.
- Nurse Practitioners utilize a health risk assessment tool that rates each member's medical condition as low, moderate, or high.
- Risk scores dictate the Nurse Practitioner's clinical visit/monitoring schedule.
- A risk score framework is used at each clinical visit/monitoring and tracked over time.
- An individualized plan of care having goals and measurable outcomes specific to the targeted special needs of each member is developed.
- An interdisciplinary care team is formed for each member.
- Access to a specialized provider network having expertise pertinent to the targeted special needs of the member population.
- A medication therapy management program.
- Demonstrated cultural competency among staff and providers.
- Members and their caregivers/families engaged in decision making at all times.
- Member and caregiver/family participation in Plan policy and operations through surveys and formal feedback.

Execution of the I-SNP Model of Care is supported by systems and processes to share information between the health plan, healthcare providers and the member. The I-SNP Model of Care includes periodic analysis of effectiveness, and all activities are supported by the Quality Improvement Program



EFT/ACH REQUEST FORM

General Information:

Requested Effective Date:

Provider Name:

Provider Contact Name:

Contact Phone #:

Contact Email:

Tax ID Number:

Billing/Pay to NPI:

Bank Information:

ACH Routing Number (ABA#):

Bank Account Number:

Bank Name:

Bank Address:

*Effective no later than June 1, 2011 plans are prohibited from making payments for Medicaid covered items or services to any financial institution or entity, such as provider bank accounts or business agents, located outside of the United States, District of Columbia, Puerto Rico, the Virgin Islands, Guam, the northern Mariana Islands and American Samoa.

Comments/Notes:

Form Completed By: Date:

(1) Minimum of 30 days is needed to process a request