Provider Tipsheet



Phone Numbers

Individual Plans 866.631.4611

Group Plans 866.631.5404

Claims Address

Aspirus Health Plan PO Box 1890 Southampton, PA 18966

EDI Payer Information

Change Healthcare - Preferred Clearinghouse **Aspirus Health Plan Payer ID - 41147**

Website

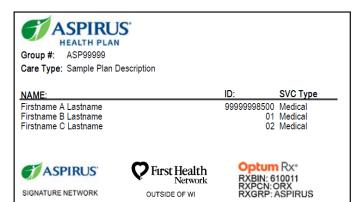
aspirushealthplan.com

Visit aspirushealthplan.com. Select For Business, then **Provider Resources** to find information on medical and pharmacy policies, appeals, prior authorizations, and much more.

Provider Registration

Visit aspirushealthplan.com. Select For Business, then Provider Registration.

Sample Signature Network ID Card



Customer Service/Pre-Certification: 1.866.631.5404 or

customerservice@aspirushealthplan.com

Pharmacies: 24/7 support 1.844.284.0142 www.optumrx.com

My Account: Register/Log in at aspirushealthplan.com for details on claims, out of pocket balances, EOBs, network providers and

MDLIVE 1.888.632.2738

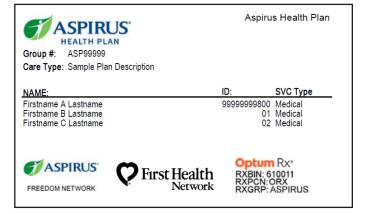
Nurseline 1 866 220 3138

Submit Claims: Aspirus Health Plan PO Box 1890 Southampton, PA 18966

Payer ID: 41147

First Health provider verification: 1 800 226 5116 www.mvfirsthealth.com

Sample Freedom Network ID Card



Customer Service/Pre-Certification: 1.866.631.5404 or

customerservice@aspirushealthplan.com

Pharmacies: 24/7 support 1.844.284.0142 www.optumrx.com

My Account:

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MDLIVE 1.888.632.2738 Nurseline 1.866.220.3138 Submit Claims: Aspirus Health Plan PO Box 1890 Southampton, PA 18966 Payer ID: 41147

First Health provider verification: 1.800.226.5116 www.myfirsthealth.com