



Fast Facts

News for Providers from HealthPartners
Provider Relations & Network Management

JANUARY 2026

Administrative

Provider directory information

Regulations require providers and health plans to verify directory information.

HealthPartners provider compliance staff makes outreach calls, reviews websites and accepts rosters to validate that your information is correct.

We verify the following information for each practitioner who appears in directories:

- Practitioner names and practice locations
- Practitioner specialty
- Location names
- Location addresses
- Phone numbers where members can call to make appointments to see the provider
- Hospital affiliations
- Provider website URLs, if available
- Whether the provider is accepting new patients at some or all locations

HealthPartners providers are expected to keep their information up to date by using the Provider Data Profiles application on our provider portal. **Sign in** to access

Provider Data Profiles from the applications menu and review/update your location details and practitioners. If you don't see Provider Data Profiles in your application menu, please contact your portal delegate to get access to the Provider Data Profiles application.

You can also request a roster of the provider information we have on file by emailing **providercompliance@healthpartners.com**. You can use the roster to verify whether the information we have is accurate and make updates to the information if needed.

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Culture Care Connection

LANGUAGE RESOURCES FOR CLINICIANS

HealthPartners and UCare worked together to identify a collection of language resources for Minnesota health care providers. The language resources are displayed on Culture Care Connection, an online learning and resource center that supports clinical and non-clinical health care professionals to reduce health disparities and promote health equity.

The collection of language resources is intended to support you in advancing culturally responsive care at your practice and provide the health care community with tools to improve communication with individuals and families who speak a language other than English. The sampling of language resources includes patient-facing communication tools and educational resources. There is a language resource available for each threshold language. Threshold languages are languages other than English spoken by 1,000 individuals based on U.S. Census data.

Check out these and many other resources at [Culture Care Connection](#).

Cultural competency training and office accessibility

HealthPartners and all health plans are required to maintain accurate information in our provider directories including information regarding Cultural Competency Training for providers and whether provider locations are accessible for members with disabilities. Please take a moment to complete the [Questionnaire](#) included as part of this edition of Fast Facts. Instructions are on the form for returning the information to HealthPartners or send to providercompliance@healthpartners.com.

Check out these and many other resources at [Culture Care Connection](#).

RRP ER Claim Reconsideration form

The Restricted Recipient Program (RRP) ER Claim Reconsideration form is now available online. Previously offered as a PDF only, this form can now be completed and submitted electronically.

You can access the online form on the HealthPartners/Forms for Providers page: [Forms for providers](#)

This form is intended for providers submitting Emergency Room Reconsideration requests for patients enrolled in the HealthPartners Restricted Recipient Program. Once submitted, the form will be routed directly to the HealthPartners Restricted Recipient Case Management Team for processing.

For questions about the form or RRP ER Reconsideration submissions, please contact the team at **(952) 883-6799**.

New Technology Committee update

HealthPartners has a New Technology Committee whose mission is to evaluate new and upcoming medical technologies.

The following topics are coming up for review:

- Autologous skin cell suspension for wound treatment (e.g., ReCell System)
- Carotid sinus baroreceptor reflex activation device (Barostim Neo System)
- Craniosacral therapy
- Cryoablation treatment of benign breast fibroadenomas
- Cryoablation treatment of malignant breast tumor
- Endoluminal gastroplasty/gastroplication for gastro-esophageal reflux disease (GERD) (examples include transoral incisionless fundoplication (TIF) (e.g., EsophyX), BARD™ Endoscopic Suturing System (BESS), Syntheon ARD Plicator)
- LINX reflux management system for gastro-esophageal reflux disease non-invasive muscle stimulation for treatment of obstructive sleep apnea (e.g., eXcite OSA device)
- Non-pneumatic compression devices (e.g., Koya Dayspring, Therma Bright Venowave)
- Phrenic nerve neurostimulation (e.g., Remede implantable system) for treatment of central sleep apnea
- SmartPill gastrointestinal monitoring system
- Stretta endoscopic treatment for gastroesophageal reflux (radiofrequency remodeling of the lower esophageal sphincter and gastric cardia)
- Topical oxygen therapy, including hyperbaric topical oxygen therapy (HTOT) and continuous topical oxygen therapy (CTOT)
- Transcatheter tricuspid valve implantation/replacement (e.g., Evoque Tricuspid Valve Replacement System)
- Transcutaneous electrical modulation pain reprocessing (i.e., scrambler therapy); Calmare Pain Therapy is an example device that uses this technology.

Please contact us if you have comments about any of these topics or a suggestion of new topics for us to consider. Comments or examples of new technologies for consideration may be sent to newtechnology@healthpartners.com.

Medical Policy updates – 01/01/2026

MEDICAL ♦ BEHAVIORAL HEALTH ♦ DURABLE MEDICAL EQUIPMENT (DME) ♦ MEDICAL DENTAL COVERAGE POLICY

Please read this list of new or revised HealthPartners coverage policies. HealthPartners coverage policies and related lists are available online at [Coverage criteria policies | HealthPartners](#). Upon request, a paper version of revised and new policies can be mailed to clinic groups whose staff does not have Internet access. Providers may speak with a HealthPartners Medical Director if they have a question about a utilization management decision.

HealthPartners Coverage Policies	Comments / Changes
Surgical treatments for lipedema and lymphedema	<p>Effective immediately, policy updated. See published policy online.</p> <ul style="list-style-type: none"> • The following criteria have been updated for clarity to now state: <ul style="list-style-type: none"> ○ Submitted documentation demonstrates nodular (dimpled or orange peel texture) fat deposits in the affected extremities bilaterally and symmetrically. ○ Color photographs are submitted that confirm the presence of bilateral symmetric adiposity (fat accumulation) in the affected extremities.
Investigational services – list of non-covered services	<p>Effective immediately, policy revised.</p> <ul style="list-style-type: none"> • The following services have been added to this policy as non-covered/ investigational: <ul style="list-style-type: none"> ○ Confocal laser endomicroscopy (e.g., Cellvizio system) for any indication (CPT 0397T) ○ Pressure-enabled drug delivery (TriNav Infusion System) (CPT C9797, C8004, C1982) ○ Skin and soft tissue substitutes: EpiEffect, Esano ACA, Complete AA, Complete ACA, Complete SL, Complete FT, Emerge Matrix, Amnio-Maxx or Amnio-Maxx lite (HCPCS Q4278, Q4275, Q4272, Q4273, Q4274, Q4303, Q4302, Q4270, Q4271, Q4297, Q4239) ○ Transcatheter mitral valve replacement (TMVR) or implantation (TMVI) (e.g., Tendyne – Abbott Laboratories) (CPT 0483T, 0484T) • The following topic was removed from the policy due to lack of business value: <ul style="list-style-type: none"> ○ Unicondylar spacer device (OrthoGlide) cobalt-chrome knee implant which replaces lost cartridge in an osteoarthritic knee and is intended as an alternative to partial or total knee replacement (no specific code).
Waterjet ablation (aquablation) for benign prostatic hyperplasia (BPH)	<p>Effective immediately, policy revised.</p> <ul style="list-style-type: none"> • Policy has been renamed from “Waterjet ablation (aquablation) of prostate tissue” to “Waterjet ablation (aquablation) for benign prostatic hyperplasia (BPH).” • Eliminated the criterion requiring a medication trial prior to aquablation for BPH

Contact the Medical Policy Intake line at **952-883-5724** for specific patient inquiries.

MEDICAL POLICY FEEDBACK

HealthPartners is looking for provider feedback regarding the policies listed below. The policies can be found at: [HealthPartners Medical Policies](#).

- Cardiac event monitoring
- Continuous passive motion (CPM) devices
- Hospital bed
- Implanted and percutaneous peripheral nerve stimulation for treatment of pain
- Intraosseous radiofrequency ablation of the basivertebral nerve
- Investigational spine procedures
- Lift chair mechanism
- Nutritional support
- Pneumatic compression devices and heat/cold therapy units
- Skilled nursing facility (SNF)
- Spinal fusion, lumbar

Please contact us at medicalcoveragepolicydepartment@healthpartners.com if you have any comments or suggestions.

To submit feedback related to third-party clinical criteria including InterQual or MCG Guidelines currently utilized by HealthPartners, send an email to medicalcoveragepolicydepartment@healthpartners.com.

Drug Formulary updates

COMMERCIAL DRUG FORMULARY

Updates include:

- Ventolin HFA has been removed from the formulary, replaced with the generic.
- Humira and Hadlima are being removed from the formulary. Adalimumab-aaty, adalimumab-fkjp, and adalimumab-adaz (10mg only) are being added as replacements. Prior authorization approvals will be entered for the preferred biosimilars that will mirror current authorizations.
- Lantus is being removed from the formulary, replaced with a lower-cost biosimilar, insulin-yfgn.

Please see the formulary for details, at healthpartners.com/formulary.

Pharmacy Customer Service is available to providers (physicians and pharmacies) 24 hours per day and 365 days per year.

- Fax – **952-853-8700** or **1-888-883-5434** Telephone – **952-883-5813** or **1-800-492-7259**
- HealthPartners Pharmacy Services, 8170 33rd Avenue South, PO Box 1309, Mpls, MN 55440

HealthPartners Customer Service is available from 8 AM – 6 PM Central Time, Monday through Friday, and 8 AM – 4 PM Saturday. After hours calls are answered by our Pharmacy Benefit Manager.

For additional information, please contact healthpartnersclinicalpharmacy@healthpartners.com.

Pharmacy benefit changes

EFFECTIVE JANUARY 1, 2026

HealthPartners will transition its pharmacy benefits claims administration to Express Scripts, Inc. (ESI). Please review the following key updates:

- **Pharmacy Network:** Some members may experience changes to their pharmacy network. Prescribers should not be impacted, but prescriptions can be transferred if needed.
- **Drug Costs and Coverage:** Costs and coverage may change for certain members. Those impacted have been notified by mail.
- **New Member ID Cards:** Members will receive new ID cards which must be presented when picking up prescriptions.
- **Real-Time Pharmacy Benefits (RTPB):** Alternative medication options displayed in RTPB may differ from previous listings.
- **Formulary:** HealthPartners will continue to manage the drug formulary. Only routine formulary updates are expected for January 1. Please reference the HealthPartners' formulary page for new PDFs of covered drugs by line of business (Commercial, Medicaid, Medicare). healthpartners.com/insurance/members/pharmacy/drug-formulary/
- **Prior Authorizations:** HealthPartners will continue to manage drug coverage criteria and review prior authorizations. Please continue submitting prior authorizations as usual. Please reference the HealthPartners' formulary page for new PDFs of all drugs requiring prior authorization and their associated coverage criteria. healthpartners.com/insurance/members/pharmacy/drug-formulary/
- **Opioid Prior Authorization Program:** Formulary opioid edits – including prior authorization requirements, quantity limits, and cumulative dose restrictions – will be applied to all providers across all lines of business. Any previously granted exceptions will be discontinued on January 1.

For questions or assistance, please contact your HealthPartners contract representative.

Government Programs

HealthPartners Minnesota Senior Health Options (MSHO) 2026 Cost Sharing and Supplemental Benefits

The MSHO plan provides comprehensive coverage for seniors covered by Medicare and Medical Assistance.

COST SHARING

As a reminder, MSHO members don't pay a monthly premium, have no deductibles, and pay \$0 for covered services when they go to an in-network provider. Depending on a member's LIS (low-income subsidy) level, some HealthPartners MSHO members may have a copay for Part D covered prescription drugs.

SUPPLEMENTAL BENEFITS

HealthPartners also offers supplemental benefits to MSHO members. These benefits may change each year. Members can contact Member Services with questions about these and other benefits. The Supplemental Benefits for 2026 are as follows:

CARE & SUPPORT

- A GrandPad tablet that features built-in cellular connectivity, a simplified interface for seniors, and 24/7 technical and customer support for members with certain conditions* – **NEW for 2026**
- Home-Based Palliative Care – **NEW for 2026**
- Free RideCare transportation to/from SilverSneakers® health club, health education classes, Alcoholics Anonymous or Narcotics Anonymous meetings
- Foot care visits
- Unlimited visits to Virtuwell®, a 24/7 online medical clinic
- A life-like support pet (cat, dog or bird) for companionship to reduce anxiety and loneliness*

DENTAL & VISION

- Crowns coverage
- Coatings on eyeglasses
- Progressive lenses for eyeglasses

HEALTHY LIVING

- Fruits and Veggies Rx – \$50 monthly voucher-based food benefit allowance to be used toward the purchase of fresh fruits and vegetables from participating grocery stores* – **NEW for 2026**
- Over-the-Counter (OTC) Allowance (\$75 quarterly benefit) to purchase OTC non-prescription medications and health-related items
- SilverSneakers® fitness program
- Healthy aging and cooking classes
- Pocket hearing amplifier

FOR MEMBERS WITH A DEMENTIA DIAGNOSIS, SUCH AS ALZHEIMER'S OR OTHER COGNITIVE IMPAIRMENT

- Caregiver support including coaching and counseling through family caregiver services, short-term respite care, psychotherapy and transportation to these services*

*Available to members with specific diagnoses who meet eligibility criteria.

HealthPartners Minnesota Senior Health Options (MSHO) Model of Care 2026

REMINDER – TRAINING REQUIREMENT FOR PROVIDERS

The MSHO Model of Care provides a description of the management, procedures, and operational systems that HealthPartners has in place to provide the access to services, coordination of care and structure needed to best provide services and care to our MSHO population. The training provides a general understanding of how a member would access the benefits provided through the MSHO Model of Care.

Annual Model of Care training is a Centers for Medicare and Medicaid Services (CMS) requirement for Special Needs Plans. The Model of Care contains the following components:

1. Description of the MSHO population
2. Care Coordination
3. MSHO Provider Network
4. MSHO Quality Measurement & Performance Improvement

The HealthPartners 2026 MSHO Model of Care Training PowerPoint can be accessed on the Provider Portal [MSHO Model of Care](#).

MDH Immunization Resources Survey

SURVEY CLOSES ON FRIDAY, JANUARY 9TH

If you haven't already, take a moment to complete this **brief MDH Immunization Resources Survey** on your experience and use of the Minnesota Department of Health (MDH) immunization website and resources. We want to know:

- Do providers use the MDH website and resources?
- Are they easy to find and use?
- What do you find the most helpful and useful?

Please share this survey with any of your colleagues involved in the immunization process at your facility

All health care staff that are part of the immunization process are encouraged to take the survey! This includes staff that schedule appointments, discuss, recommend, and/or administer vaccines with patients, residents or employees.

The survey should take 5-7 minutes and will close on Friday, Jan. 9, 2026.

Reach out to the immunization team if you have any questions at health.vaccineSME@state.mn.us.

Medicare and Medicaid QMB program

BILLING MEMBERS ELIGIBLE FOR BOTH PROGRAMS IS PROHIBITED

Federal law prohibits Medicare providers from collecting Medicare Part A and Medicare Part B deductibles, coinsurance or copayments from HealthPartners members enrolled in the Qualified Medicare Beneficiaries (QMB) program, a dual-eligible program that exempts individuals from Medicare cost-sharing liability. These same laws may also apply to other dual-eligible beneficiaries in Medicare Advantage plans if the State Medicaid Program holds these individuals harmless for Part A and Part B cost sharing. Low Income Subsidy copayments still apply for Part D benefits.

Providers that are enrolled in Medicare have access to Medicare's HIPAA Eligibility Transaction System (HETS), which will identify QMB status. Link to the [HETS website](#)

Providers are responsible for identifying the QMB status of HealthPartners Medicare members and for following QMB billing requirements. When a claim is processed by HealthPartners for a Medicare member enrolled in the QMB program, the provider remittance advice statement includes remarks alerting the provider of a member's QMB status.

- For more information on the QMB program and requirements, visit the [QMB Program](#).
- For more information on QMB plans, visit [MedLearn Matters Article re QMB](#).

If you have questions regarding the content of this newsletter, please contact the person indicated in the article or call your HealthPartners Service Specialist. If you don't have his/her phone number, please call **952-883-5589** or toll-free at **888-638-6648**. This newsletter is available online at healthpartners.com/fastfacts.

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Provider Directory Cultural Competency and ADA Accessibility Questionnaire

Purpose:

Managed Care Federal Regulations require providers to confirm their cultural competency training and office accessibility for people with disabilities.

Instructions:

Please complete this form for each office location and submit the completed form to providercompliance@healthpartners.com, or fax the form back to **952-853-8708**.

If you have any questions regarding completing this form, call **844-732-3537**.

Clinic/Facility Name: _____

Office Location Address: _____

City: _____ **State:** _____ **Zip Code:** _____

NPI Number(s): _____

Clinic/Facility/Sole Practitioner Website URL: _____

Clinic/Facility/Sole Practitioner Phone Number (including area code):

Is your office accepting new patients? **Yes** **No**

Cultural Competency:

Cultural and linguistic competence is the ability of managed care organizations and the providers within their networks to provide care to recipients with diverse values, beliefs and behaviors, and to tailor the delivery of care to meet recipients' social, cultural and linguistic needs. The ultimate goal is a health care delivery system and workforce that can deliver the highest quality of care to every patient, regardless of race, ethnicity, cultural background, language proficiency, literacy, age, gender, sexual orientation, disability, religion or socioeconomic status.

Has office staff completed cultural competency training in the past 12 months?

Yes **Type of training:** _____

Month/Year completed: _____

No

Providers to submit annually

