

MEDICARE ADVANTAGE LOCATION DEMOGRAPHIC / UPDATE FORM

INSTRUCTIONS

- A Location Demographic / Update Form must be completed for each change in location, change in Tax ID or NPI, Ownership or Legal name change. These may require a new contract.
- If you need to add a new location, please use the Location Add Form.
- If you need to add services to your existing contract, please contract Aspirus Health Plan at info@aspirushealthplan.com.
- All changes must be submitted at least 30 calendar days prior to effective date. Missing information may cause delays in updates.
- For status checks and questions on how to fill out the form, please contact Aspirus Health Plan's Provider Assistance Center at 715-631-7412 or toll free at 1-855-931-4851.

Email the completed form to: providerappMA@aspirushealthplan.com.



MEDICARE ADVANTAGE LOCATION DEMOGRAPHIC / UPDATE FORM

Are you an Aspirus Health Plan contracted prov	vider? Yes	NO		
CONTACT INFORMATION				
Name:	Title:			
Phone:	Fax:			
Email:				
MAIN LOCATION INFORMATION				
Name:				
Physical Address:				
City:	State:	Zip:		
Phone:	Fax:			
NPI:				
TIN: (numbers only – no hyphens please)				
CHANGE INFORMATION:				
Effective Date:				
Type of Change:				
Old Information Tax ID Number:	New Infor			
		Tax ID Number:		
Legal Name/DBA:	_	Legal Name/or DBA:		
Fax Number:	Fax Number	Fax Number:		
Phone Number:	Phone Num	Phone Number:		
Billing Name:	Billing Name:			



MEDICARE ADVANTAGE LOCATION DEMOGRAPHIC / UPDATE FORM

Billing Address:			Bil	Billing Address:				
Billing City:			Bi	Billing City:				
Billing State:			Bi	Billing State:				
Billing Zip:			Bil	Billing Zip:				
Physical Address:			Ph	Physical Address:				
Physical City:			Ph	Physical City:				
Physical State:			Ph	Physical State:				
Physical Zip:			Ph	Physical Zip:				
NPI:			NE	NPI:				
OTHER INFORMATION Hours (Hours should be submitted in the format of 7-5)								
Hours (Hours sho	uld be submitte	d in the format	of 7-5)					
Hours (Hours sho	uld be submitte Tuesday	d in the format Wednesday	of 7-5) Thursday	Friday	Saturday	Sunday		
	Tuesday	Wednesday		Friday	Saturday	Sunday		
Monday	Tuesday ional Information	Wednesday on):	Thursday					