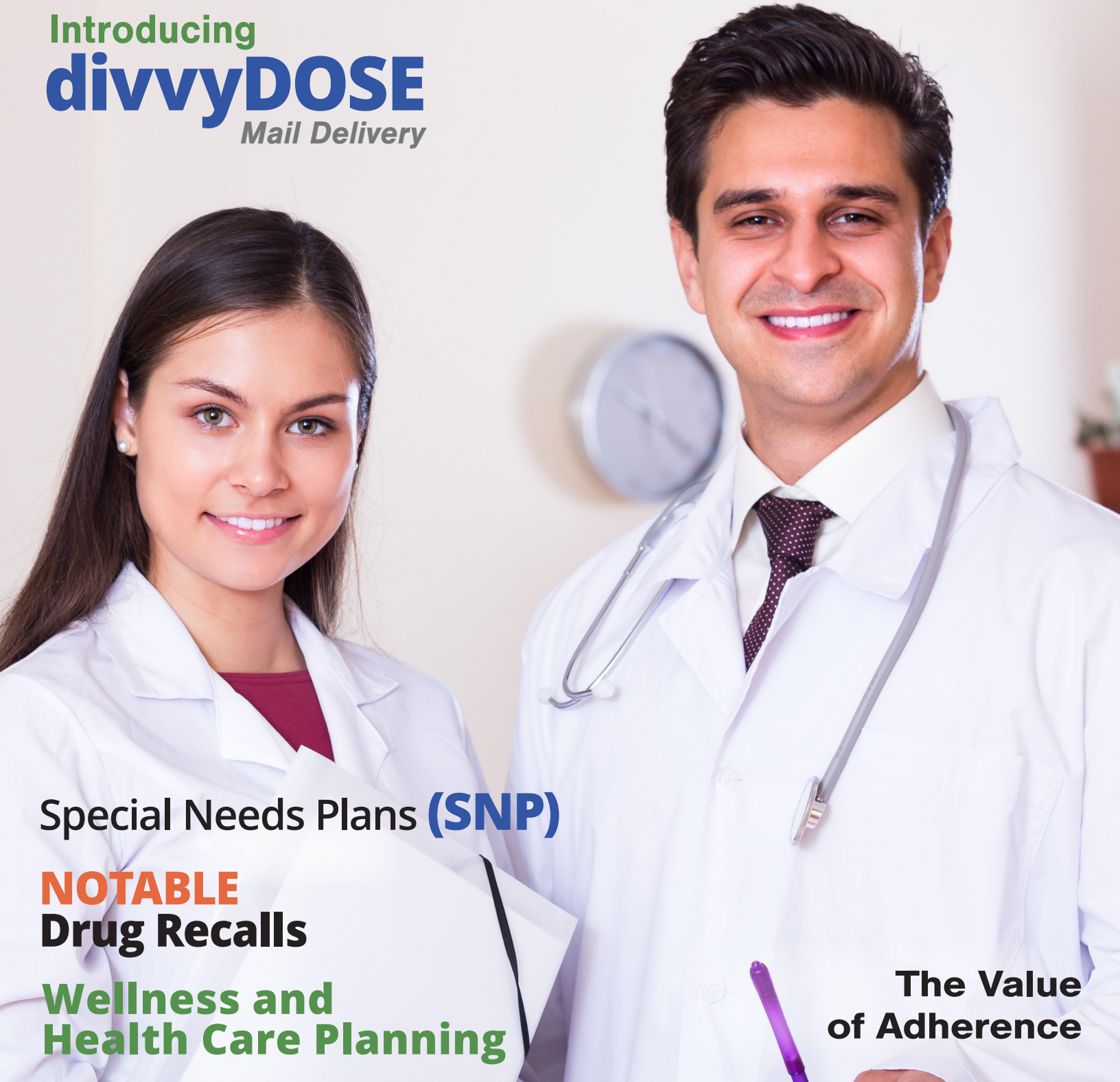


ProviderNews



Introducing
divvyDOSE
Mail Delivery



Special Needs Plans **(SNP)**

NOTABLE
Drug Recalls

**Wellness and
Health Care Planning**

**The Value
of Adherence**

Mission Statement

Ultimate Health Plans' mission is to provide all members with the highest quality healthcare with access to highly qualified physicians. We hold ourselves accountable for treating our members with dignity and respect, providing world-class customer service, and recognizing our commitment to the community as a local corporation.

Wellness and Health Care Planning

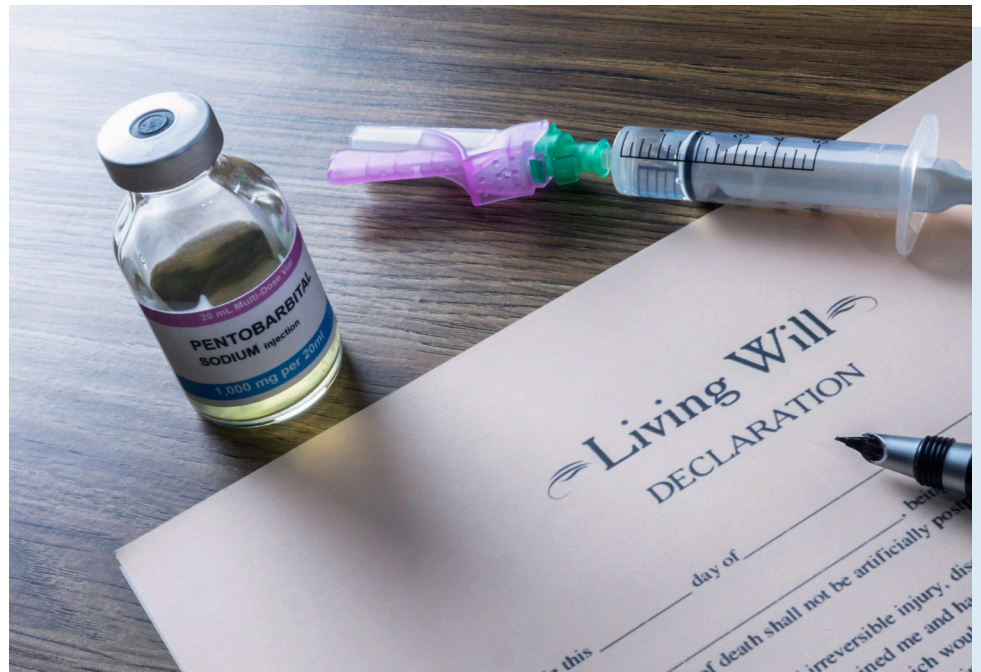
Ultimate Health Plans works with our network of providers to offer members improved, timely access to Wellness and Health Care Planning (WHP), including advance care planning. Monitoring and reporting of VBID are submitted annually in March. Members receive three forms in the Welcome Kit that help support Wellness and Health Care Planning.

1. Health Risk Assessment

The Health Risk Assessment tool (or HRA) is an internally developed, standardized tool used to collect information about each Special Needs Plan (SNP) member. Using this Risk Assessment tool, UHP conducts a comprehensive initial and annual assessment of the beneficiary's medical, physical, psychosocial, cognitive, mental, and functional needs. The HRA collects data during the comprehensive initial clinical assessment or subsequent periodic assessments, including condition-specific issues and other non-clinical information. This information helps evaluate the health status and risk of the individual SNP member and develop their individualized care plan.

2. Advance Care Plan

An advance directive is a written or oral statement about how you want medical decisions made should you not be able to make them yourself. It can also express your wish to make an anatomical donation after death. Some people make advance directives when they are diagnosed with a life-threatening illness. Others put their wishes into writing while they are healthy, often as part of their estate planning. The Welcome Kit includes three types of advance directives: A Living Will, A Health Care Surrogate Designation, and An Anatomical Donation.



3. Care Transition

Care transition is the movement of a member from one care setting (hospital, ambulatory primary care practice, ambulatory specialty care practice, long-term care, home health, rehabilitation facility) to another without a disruption in coverage. The form focuses on the member's medical history and medical equipment.

Members can call the Member Service Department at 888-657-4170 (TTY 711) (Monday through Friday, 8 am – 8 pm) for instructions on completing the forms.

Once members complete the forms, they can return them in a postage-paid envelope provided to the following address for processing:

Ultimate Health Plans
PO Box 3459
Spring Hill, FL 34611



Special Needs Plans (SNP)

Here at Ultimate, we proudly offer several Special Needs Plans to our members, your patients. Special Needs Plans are a type of Medicare Advantage Plan that provide coordinated care to members with specific illnesses or chronic conditions. Ultimate Health Plans offers five SNP plans in the counties we service on the East Coast, in Central Florida, and the West Coast:

Advantage Care SNP (C-SNP)	Advantage Care SNP (C-SNP)
<ul style="list-style-type: none"> • Cardiovascular Disorder • Chronic Heart Failure • Chronic Lung disorder • Diabetes Mellitus 	<ul style="list-style-type: none"> • Dual Eligible (Member qualifies if eligible for both Medicare and Medicaid)



The following SNP benefits for your patients include:

- ❖ Case and Disease Management
- ❖ Social Services
- ❖ Transition of Care
- ❖ Benefits for Over-the-Counter Products
- ❖ Telemedicine Services
- ❖ Transportation Services
- ❖ Routine Dental, Vision, and Hearing Benefits
- ❖ SilverSneakers Program (Gym Membership)
- ❖ Meal Benefit

If you feel any patient meets the criteria and isn't enrolled in a Special Needs Plan, please reach out to your Provider Network Representative or the Provider Service Department phone number at 888-657-4171 (Monday through Friday, 8 am – 6 pm) to better assist you in getting your patient, our member, the care they need.

Notable Drug Recalls

Drug recalls are the most effective way to protect the public from a defective or potentially harmful product. Drug recalls are voluntary and initiated by the company to remove a product from the market. Below are notable drug recalls for medications that are covered on our formulary. Please visit the FDA website for a full listing.

<https://www.fda.gov/drugs/drug-safety-and-availability/drug-recalls>



On February 10, 2023, BD announced a consumer-level recall of some lots of BD Insulin Syringes with the BD Micro-Fine IV Needle because of manufacturing issues that can result in unsealed packaging for the individual syringes. If the blister pack of the syringe has a nonintact seal, then there is a potential that the syringe is no longer sterile. Per BD, using a nonsterile syringe poses the risk of a local skin infection which may require medical treatment such as antibiotics. Anyone with an existing inventory of the recalled product should stop use and distribution, and quarantine the product immediately.

Patients with questions concerning this recall can contact BD at 844-823-5433 or productcomplaints@bd.com.

Product Description	NDC	Lot # / Expiration Date
BD INSULIN SYRINGES WITH THE BD MICRO-FINE IV NEEDLE 1 ML, 12.7 MM, 28 G		2038204 (4/2027)
		2024074 (4/2027)
		2031528 (4/2027)

On March 2, 2023, Apotex Corp. announced a consumer-level recall of six lots of brimonidine tartrate ophthalmic solution 0.15% due to cracks that developed in some of the units' caps that may impact sterility and cause adverse events. Brimonidine tartrate ophthalmic solution is an alpha-adrenergic receptor agonist indicated for the reduction of elevated intraocular pressure (IOP) in patients.

Patients with questions concerning this recall can contact Apotex Corp. at 800-706-5575 (8:30 am – 5 pm, EST Monday through Friday) or email UScustomerservice@Apotex.com. Patients are also encouraged to contact their healthcare providers for further guidance or if they have experienced any problems from using the product.

Adverse reactions resulting from the use of these products should be reported to the FDA's MedWatch Adverse Event Reporting Program. You can report online at www.fda.gov/medwatch/getforms.htm, fax the report to 800-FDA-0178, or use the provided pre-addressed form to submit it by mail. To obtain a form, please contact 800-332-1088.

Product Description	NDC	Lot # / Expiration Date
BRIMONIDINE TARTRATE OPTHALMIC SOLUTION, 0.15%	60505-0564-1 (5ml)	TJ9848 (2/2024)
		TJ9849 (2/2024)
		TK0258 (4/2024)
		TK5341 (4/2024)
	60505-0564-2 (10 ml)	TK0261 (4/2024)
	60505-0564-3 (15 ml)	TK0262 (4/2024)

On March 15, 2023, Camber Pharmaceuticals announced a consumer-level recall of one lot of Atovaquone oral suspension due to potential *Bacillus cereus* contamination in the product. Atovaquone oral suspension is indicated for prevention and treatment of Pneumocystis jiroveci pneumonia (PCP) in adults and children 13 years of age and older who cannot tolerate other medicines, such as trimethoprim-sulfamethoxazole.

Patients with questions concerning this recall can contact Inmar by phone at 877-597-0878 (Monday through Friday, 9 am – 5 pm EST) or email rxrecalls@inmar.com. Consumers should contact their physician or healthcare provider if they have experienced any problems that may be related to taking or using this drug product.

Adverse reactions resulting from the use of these products should be reported to the FDA's MedWatch Adverse Event Reporting Program. You can report online at www.fda.gov/medwatch/getforms.htm, fax the report to 800-FDA-0178, or use the provided pre-addressed form to submit it by mail. To obtain a form, please contact 800-332-1088.

Product Description	NDC	Lot # / Expiration Date
ATOVAQUONE ORAL SUSPENSION	31722-629-21	E220182 (12/2023)

On March 23, 2023, Ascend Laboratories announced a consumer-level recall of Dabigatran capsules due to the presence of a nitrosamine, N-nitroso-dabigatran, above the established FDA-acceptable daily intake level. The product is used as an oral anticoagulant to lower the risk of stroke and blood clots.

Patients with questions concerning this recall who wish to report an adverse event or quality issues about the products being recalled should contact Ascend Laboratories LLC., by phone at: 877-272-7901, available 24/7.

Adverse reactions resulting from the use of these products should be reported to the FDA's MedWatch Adverse Event Reporting Program. You can report online at www.fda.gov/medwatch/getforms.htm, fax the report to 800-FDA-0178, or use the provided pre-addressed form to submit it by mail. To obtain a form, please contact 800-332-1088.

Product Description	NDC	Lot # / Expiration Date
DABIGATRAN ETEXILATE MESYLATE CAPS 150 MG	67877-475-60	22142448 (5/2024)
		22142449 (5/2024)
		22142450 (5/2024)
		22143845 (7/2024)
DABIGATRAN ETEXILATE MESYLATE CAPS 75 MG	67877-474-60	22142462 (5/2024)
		22142463 (5/2024)
		22142464 (5/2024)
		22143000 (6/2024)
		22143001 (6/2024)
		22143002 (6/2024)

The Value of Adherence

Encouraging patients to take their medicine can be challenging. Patients that are compliant and adhere to their drug therapy have better outcomes and experience an overall lower cost of care. Statistics show that each year, poor adherence contributes to more than \$500 billion in avoidable healthcare costs, around 125,000 potentially preventable deaths, and up to 25% of hospitalizations in the United States.

Studies have found that **prescribing a 90-day maintenance medication supply increases therapy compliance** and members' ability to achieve healthier outcomes and reach the 80% adherence rate.

Frequently prescribed medications for treating diabetes, cholesterol, and hypertension are

Introducing divvyDOSE Mail Delivery!

Optum Rx and divvyDOSE have joined forces to help simplify managing members' medications. DivvyDOSE is a full-service pharmacy that pre-sorts prescription medications by day, date, and time—putting it all together and sending a monthly box. Members will benefit because there will be no self-sorting and no missing dosages.

Member is a candidate for the program if:

- They are utilizing greater than seven prescriptions a month.
- Member has adherence challenges.
- Member is on a complex medication regimen.
- Member cannot use 90-day supply at retail or mail.

Convenient:

DivvyDOSE will coordinate with the members' doctors and insurance to prevent them from running out of what they need.

- DivvyDOSE delivers a 30-day supply at a time.
- To qualify, a member must fill no less than five prescriptions.
- The member incurs no additional expenses outside the copay if the member has one.



inexpensive Tier 1 generics with a \$0 copay.

Consider using Optum Rx mail order to prescribe a three-month supply of Tier 1 generic medications for a \$0 copay.



Image sources: <https://divvydose.com/>

Saves Time:

Each month, divvyDOSE is delivered directly to members' front doors with free delivery, saving them time from excursions to the pharmacy.

Important Reminders:

- Opioids are not available for mail-order delivery.

Enrollment:

- Enrollment is simple. For additional information, contact divvyDOSE at 855-384-9802, TTY 711, 8 am – 7 pm CT or visit www.divvydose.com to learn more.



CONTACT US

BY PHONE:

Monday - Friday, 8 a.m. to 6 p.m.
1-888-657-4171 (TTY 711)

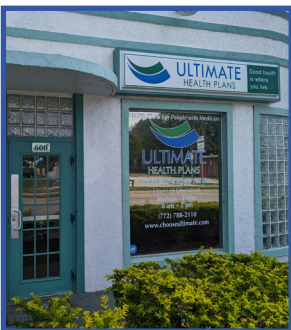
BY MAIL:

Ultimate Health Plans, Inc.
PO Box 3459
Spring Hill, FL 34611

ONLINE:

You may find answers to many of your questions online at www.ChooseUltimate.com

Community Outreach Offices



600 N US Hwy 1, STE A
Fort Pierce, FL 34950



4058 Tampa Rd, STE 7
Oldsmar, FL 34677



2713 Forest Rd
Spring Hill, FL 34606



303 SE 17th St, STE 305
Ocala, FL 34471

www.ChooseUltimate.com

