

Tufts Health Together Accountable Care Organizations for 2023

Tufts Health Together—ACOs

We're pleased to announce that two Tufts Health Together plans have been selected by MassHealth as part of their Accountable Care Organization (ACO) program: Tufts Health Together with UMass Memorial Health and Tufts Health Together with Cambridge Health Alliance.

MassHealth is launching 17 ACOs beginning April 1, 2023. ACOs support MassHealth eligible members with a value-based care model that emphasizes investment in primary care, behavioral health, and pediatric care.

ACOs offer members:

- Health care that's coordinated and focused on their needs
- Easy access to the right specialists at the right time
- Tools to better control chronic illnesses like asthma and diabetes
- Access to services such as Community Partners (entities designated by MassHealth to work with ACOs to support members with behavioral health or long-term services and supports) and Flexible Services (program offers targeted services to high-risk members to address certain health-related social needs such as housing instability and nutrition insecurity)

Tufts Health Together with UMass Memorial Health is a new collaboration. Members who have a primary care provider who is part of Tufts Health Together with UMass Memorial Health will be enrolled in the ACO plan. We have begun sending materials to participating members and clinicians, and additional information will be provided in the coming months. In addition, you can find more information at our [Tufts Health Together with UMass Memorial Health website](#).

Tufts Health Together with Cambridge Health Alliance is a continuing collaboration. Members who are currently enrolled with Tufts Health Together with Cambridge Health Alliance do not need to take any action to remain on the plan. For more information on this ACO, please refer to our [Tufts Health Together with Cambridge Health Alliance website](#).

For questions and support, members can be directed to MassHealth at 800-841-2900 (TTY: 711). Members can also contact our Customer Service department at 888-257-1985 or membership@point32health.org.

We are hosting several webinars to give an ACO overview for clinicians. To register for an upcoming webinar, visit our [Training webpage](#) and select the date that works best for you. ▲

Integration and Commercial migration: reminders and updates

All products

Please remember to visit our [Integration FAQ](#) for answers to common questions about the combination of Harvard Pilgrim Health Care and Tufts Health Plan under our parent organization, Point32Health.

Recently added information and reminders include:

- **Confirm the member's product** — As we continue to move members from Tufts Health Plan Commercial plans to Harvard Pilgrim Health Care commercial plans, it's important to check member eligibility. We encourage you to ask for the member's ID card and to use our secure provider portals to check member eligibility and benefits. For Harvard Pilgrim, use [HPHConnect](#); For Tufts Health Plan members, visit the [Tufts Health Plan secure provider portal](#).
- **Eligibility transactions (270/271s)** — In an effort to minimize eligibility transaction rejections for migrating members and resubmissions, Point32Health is automatically returning eligibility information for migrating members with the correct Plan details. For example, if a request is sent to Tufts Health Plan for a member who recently migrated from Tufts Health Plan Commercial to Harvard Pilgrim Commercial, information returned will note the correct Harvard Pilgrim policy and benefit information. If you utilize a trading partner, please make them aware of this information.
- **EOPS/835s and spanned claims** — When a service for a migrating member spans the migration date, Tufts Health Plan will pay for services prior to the migration date and Harvard Pilgrim will pay for services on and after the migration date. There is no need for the provider to resend a claim; in an effort to minimize provider disruption, Point32Health is automatically entering the claim into our legacy organizations' processing systems. However, we want you to be aware that providers will receive 2 Explanations of Payment/835s for spanned claims: one from each legacy organization. While your statements will reflect two different payers and claim numbers, the date of service and total charges will be identical on both statements. You'll see that each organization will process their portion of the claim and deny the portion that the other legacy organization is responsible for. The EOP/835 will include messaging that says: "Dates of service following migration between THP and HPHC adjudication systems have been denied and transferred to the appropriate system for processing and adjudication. No further provider action needed" or "The claim/service has been transferred to the proper payer/processor for processing. Claim/service not covered by this payer/processor."
- **Obtaining medical drugs through specialty pharmacy** — While OptumRx is the specialty pharmacy for *pharmacy benefit drugs* (though some plans may offer the opportunity for the member to use their current specialty pharmacy as well), please note that there was no change in contracted specialty pharmacies providing medical benefit drugs. For more information, please refer to [this list](#) of Specialty Pharmacies providing medical benefit drugs for Harvard Pilgrim members and [this list for Tufts Health Plan members](#).
- **Oral formula** — If a migrating patient has an approved authorization for oral formula from Tufts, the authorization remains valid when the patient moves to their Harvard Pilgrim plan and the member can continue to receive their oral formula through a DME provider as they have been through the end date of the authorization. Please note, though, that from now through April 1, 2023, when requesting a new authorization for oral formula for a Harvard Pilgrim member, the member would receive the oral formula through the pharmacy, not the DME. As of April 1, 2023, that is changing, and Harvard Pilgrim members will receive oral enteral formulas through a DME provider. For details, refer to [this article in the February 2023 newsletter](#).
- **Behavioral health insourcing** — We have included updated information on recruitment of behavioral health providers and continuity of care. If you are a behavioral health provider who is contracted with Tufts Health Plan, be on the lookout for a mailing with a contract amendment that will allow you to care for all our members, including Harvard Pilgrim members beginning on July 1, 2023. In most cases, there is no action for you to take when you receive your amendment packet; if action is required your packet will detail next steps. If you are a behavioral health provider with Optum/UBH who doesn't currently participate in the Point32Health network, we encourage you to contact our Ancillary Behavioral Health Contracting team by email at AHCBehavioralHealth@point32health.org or by phone at 617-972-9400 x 43145 to join our network.

Look for additional updates in future issues of Insights and Updates for Providers and visit the [Integration FAQ](#) regularly. ▲

Expanded access to CGP for advanced solid tumors

Tufts Health Direct | Tufts Health RITogether | Tufts Health Together

On Jan. 1, 2023, Point32Health entered into a collaboration with Foundation Medicine, Inc. (FMI) to expand access to comprehensive genomic profiling (CGP) for Harvard Pilgrim Health Care Commercial members and Tufts Health Plan Commercial members. We're pleased to announce that we've broadened that expanded access, and the coverage now also applies to Tufts Health Together, Tufts Health RITogether, and Tufts Health Direct members.

Through this collaboration, we have expanded coverage for the FoundationOne®CDx (CPT 0037U) and FoundationOne®Liquid CDx (CPT 0239U) CGP tests, with prior authorization, for all eligible members who meet the criteria identified in the Medical Necessity Guidelines for [Comprehensive Genomic Profiling with FoundationOne CDx or FoundationOne Liquid CDx to Guide Cancer Treatment in Patients with Advanced Cancer](#).

About FoundationOne CDx and FoundationOne Liquid CDx

FoundationOne CDx is an FDA-approved tissue-based comprehensive genomic profiling test. It is a qualitative next-generation sequencing based *in vitro* diagnostic test that uses targeted high throughput hybridization-based capture technology for detection of substitutions, insertion and deletion alterations (indels), and copy number alterations (CNAs) in 324 genes and select gene rearrangements, as well as genomic signatures including microsatellite instability (MSI) and tumor mutational burden (TMB). For more information, see the [FoundationOne CDx Technical Information \(FDA Label\)](#).

FoundationOne Liquid CDx is an FDA-approved blood-based comprehensive genomic profiling test. It is a qualitative next generation sequencing based *in vitro* diagnostic test that uses targeted high throughput hybridization-based capture technology to detect and report substitutions, insertions and deletions (indels) in 311 genes, rearrangements in four genes and copy number alterations in three genes. For more information, see the [FoundationOne Liquid CDx Technical Information \(FDA Label\)](#).

Requesting authorization

As a reminder, the genetic/genomic and molecular diagnostic testing authorization program for Harvard Pilgrim Commercial products and Tufts Health Public Plans is managed through an arrangement with Carelon Medical Benefits Management ([formerly AIM Specialty Health®](#)). For Harvard Pilgrim Commercial, Tufts Health Together, Tufts Health RITogether, and Tufts Health Direct members, please submit your authorization request for FoundationOne CDx or FoundationOne Liquid CDx online via Carelon's portal at www.providerportal.com or by telephone at 855-574-6476.

For Tufts Health Plan Commercial members, you can continue to request prior authorization from Tufts Health Plan via the secure online [provider portal](#). ▲

Harvard Pilgrim Provider Portal required fields update

Harvard Pilgrim Health Care Commercial

Harvard Pilgrim is making an update to the electronic prior authorization request submission process in [HPHConnect](#), our online provider portal, which will take effect May 4, 2023.

With the update, Contact Name and Contact Info will become required fields when submitting an outpatient service transaction. Today, these fields are required for inpatient services, but optional for outpatient services.

We anticipate that this change will reduce administrative turnaround time by cutting down on the time required for Harvard Pilgrim to gather information for authorization review while claims are in pend status.

When submitting an electronic outpatient authorization request today, after selecting "Outpatient" from the New Request drop down list, you would be prompted to complete the required fields indicated with a red asterisk (e.g., patient name, diagnosis code, requesting provider, servicing provider) as well as the optional fields, including

Contact Name and Contact Info, before clicking “Submit.” As of May 4, Contact Name and Contact Info will be indicated with a red asterisk and included as required fields.

Our DME, Habilitative and Rehabilitative Therapies, and Surgical Day Care User Guides will be updated in advance of the May 4 effective date to reflect this change in the outpatient prior authorization request process. ▲

Inactive account management for secure portal

All Tufts Health Plan Products

We encourage provider practices to regularly review their secure portal account to ensure that the list of registered users is accurate and up to date. To aid in account maintenance, we will be removing inactive user accounts from the [Tufts Health Plan secure portal](#), beginning March 31, 2023.

We will remove accounts that have not had any activity in the last 6 months and will continue inactive user clean up on a rolling basis.

Please review your users to determine whether you have any inactive users who still require access to the secure portal. If so, please have the user log in prior to March 31, 2023.

Users who don't remember their password may utilize the online password reset, which is available on the login screen. If need any additional assistance, please [contact Provider Services](#).

We also regularly perform inactive account management for Harvard Pilgrim Health Care's secure portal, HPHConnect, as noted in previous issues of the provider newsletter. ▲

Reminder: Telehealth Reimbursed at Pre-Pandemic Rate

Harvard Pilgrim and Tufts Commercial

As a reminder, Point32Health resumed our pre-pandemic telehealth reimbursement practices for Harvard Pilgrim Health Care and Tufts Health Plan providers, in keeping with guidance provided by the states we serve, for dates of service beginning March 1, 2023.

Point32Health recognizes that telehealth is a valuable care delivery system that expands access to much-needed services for patients nationwide and has proven to be particularly advantageous amid the challenges presented by the COVID-19 pandemic. We support ongoing care delivered via telehealth and will continue to reimburse for these visits as follows.

Medical services provided via telehealth to our Commercial Massachusetts, Rhode Island, and Maine members (with the exceptions noted below) **will be reimbursed at 80% of the in-person rate.**

The following telehealth services will continue to pay at 100% of the in-person rate:

- Telehealth services provided by behavioral health providers to all Commercial members in Massachusetts, Rhode Island, Maine, New Hampshire, and Connecticut
- Medical services provided via telehealth members of our Commercial New Hampshire and Connecticut plans
- Telehealth services provided by in-network registered dietician nutritionists and PCPs for members of our Rhode Island Commercial plans

For additional information, please refer to the [Harvard Pilgrim Health Care](#) and [Tufts Health Plan](#) Telehealth/Telemedicine Payment Policies. ▲

Billing for telehealth

[Tufts Health Plan SCO](#) | [Tufts Health Together](#) | [Tufts Health Unify](#)

MassHealth has released [MCE Bulletin 95](#), which includes updated telehealth policy requirements and new billing guidelines that (1) amends and restates previously released guidance, including All Provider Bulletin 355, and (2) supersedes MCE Bulletin 74. As we noted in the April and February 2022 newsletters, previous MassHealth bulletins included information on services ineligible for telehealth delivery and required the use of certain telehealth modifiers to indicate the modality used to deliver services.

Reprocessing Claims for Dates of Service on or after April 16, 2022 through February 28, 2023

As a result of this MassHealth guidance, Tufts Health Plan will reprocess eligible telehealth claims that were previously denied for not including modifiers 95 (services rendered via audio-video telehealth), V3 (services rendered by audio-only telehealth), and GQ (services rendered via asynchronous telehealth), and reimburse them, as appropriate. This applies to claims with dates of service April 16, 2022 through Feb. 28, 2023.

Modifiers required as of April 1, 2023

The requirements to use certain telehealth modifiers, including a modifier for institutional claims, have been amended and reinstated by MassHealth. The MassHealth guidance is effective for the dates of service on or after April 1, 2023 and expected to remain in place through at least Sept. 30, 2023.

As of April 1, when submitting a professional claim for services provided by telehealth, providers must use Place of Service (POS) 02 or 10 and must append one of the following modifiers: 95, 93, FQ, FR, and/or GQ. Tufts Health Plan will deny professional telehealth claims that do not include the appropriate modifier. Additionally, if a distant-site provider submits an institutional claim, the provider must append modifier GT on the institutional claim when there is an accompanying professional claim containing POS 02 or 10.

For additional information, please refer to the [Telehealth/Telemedicine Payment Policy](#). ▲

Reminder: MassHealth Unified Formulary

Tufts Health Together

Effective April 1, 2023, Tufts Health Together–MassHealth MCO Plan and ACPPs, in conjunction with the other Medicaid managed care organizations (MCOs) in the Commonwealth, will be utilizing MassHealth’s Unified Formulary for pharmacy medications and for select medical benefit drugs.

For pharmacy medications

As of that date, pharmacy coverage and criteria for Tufts Health Together consequently will mirror that of MassHealth. Tufts Health Together will maintain its own coverage and policies for select scenarios as granted by MassHealth when appropriate, including but not limited to, quantity limit exceptions. Please note that MassHealth will be updating its opioid management strategy in April to require prior authorization of opioid regimens exceeding 180 milligram of morphine equivalents (MME) per day when two or more opioids are prescribed. Members and providers are encouraged to review the [MassHealth Drug List](#) for pharmacy drug coverage and criteria.

For medical benefit drugs

For medical drug benefit coverage, in some cases we will utilize the MassHealth Drug List criteria, while in others Point32Health criteria will apply. In addition, we are removed prior authorization from some medical benefit drugs for Tufts Health Together members.

Prior authorization no longer required – The following medical benefit drugs and codes will be covered without prior authorization for Tufts Health Together members, effective April 1, 2023.

Drug Name	Code	Drug Name	Code
Advate	J7192	Koate	J7190
Adynovate	J7207	Kogenate	J7192
Afstyla	J7210	Kovaltry	J7211
Alphanate	J7186	Monoclate	J7190
Alphanine	J7193	Mononine	J7193
Alprolix	J7201	Novoeight	J7182
Benefix	J7195	Novoseven	J7189
Coagadex	J7175	Nuwiq	J7209
Corifact	J7180	Obizur	J7188
Eloctate	J7205	Profilnine	J7194
Esperoct	J7204	Rebinyln	J7203
Feiba	J7198	Recombinate	J7192
Helixate	J7192	Rixubis	J7200
Hemlibra	J7170	Sandostatin LAR Depot	J2353
Hemofil	J7190	Sevenfact	J7212
Humate- P	J7187	Tretten	J7181
Idelvion	J7202	Vonvendi	J7179
Ixinity	J7195	Wilate	J7183
Jivi	J7208	Xyntha	J7185

Newly require prior authorization and will utilize MassHealth Drug List criteria – Beginning April 1, 2023, for coverage for Tufts Health Together Members, the following medical benefit drugs and codes will require prior authorization and must meet the criteria of the MassHealth Drug List.

Drug Name	Code	Drug Name	Code
Acthar	J0800	Lupaeta pack	J3590
Apretude	J0739	Makena	J1726
Aranesp	J0881	Nexviazyme	J0219
Berinert	J0597	Spevigo	J3490
Boniva	J1740	Trelstar	J3315
Camcevi	J1952	Probuphine	J0570
Cortrophin	J0800	Quzyttir	J3490
Firmagon	J9155	Ruconest	J0596
Eligard	J9217	somavert	J9307
Epogen	J0885	Sinuva	J7402
Kalbitor	J1290	Trogarzo	J3590
Gamastan	J1460	Triptodur	J3316
hydroxyprogesterone caproate	J1729	Vantas	J9225
Nplate	J2796	Zinplava	J0565
Lupron	J9217	Zoladex	J9202

Will continue to require prior authorizations and will use MassHealth Drug List criteria — The following drugs currently require prior authorization for Tufts Health Together members and will continue to do so. As of April 1, 2023, coverage criteria used will be MassHealth’s Drug List criteria.

Drug Name	Code	Drug Name	Code	Drug Name	Code
Abecma	Q2055	Gamunex	J1561	Releuko	Q5125
Abilify Maintena	J0401	Geodon	J3486	Remicade	J1745
Actemra	J3262	Givlaari	J0223	Remodulin	J3285
Adakveo	J0791	Granix	J1447	Renflexis	Q5104
Aduhelm	J0172	Hizentra	J1559	Retacrit	Q5106
Amondys 45	J1426	HyQvia	J1575	Risperdal Consta	J2794
Amvuttra	J0225	Ilaris	J0638	Saphenlo	J0491
Aristada	J1944	Ilumya	J3245	Signifor LAR	J2502
Aristada Initio	J1943	Inflectra	Q5103	Simponi Aria	J1602
Asceniv	J1554	Infliximab	J1745	Soliris	J1300
Aveed	J3145	Invega Hafye	J2426	Spinraza	J2326
Avsola	Q5121	Invega Sustenna	J2426	Spravato	S0013
Benlysta	J0490	Invega Trinza	J2426	Stelara	J3358
Berinert	J0597	Krystexxa	J2507	Supprelin LA	J9226
Bivigam	J1556	Kymriah	Q2042	Synagis	90378
Botox	J0585	Lemtrada	J0202	Tecartus	Q2053
Breyanzi	Q2054	Leqvio	J1306	Testopel	J3490
Carvykti	Q2056	Lupron 3.75	J1950	Tezspire	J2356
Cinqair	J2786	Lupron Depot	J1950	Ultomiris	J1303
Cinryze	J0598	Luxturna	J3398	Uplizna	J1823
Cutaquip	J1551	Myobloc	J0587	Veletri	J1325
Cuvitru	J1555	Nivestym	Q5110	Viltepso	J1427
Dysport	J0586	Nucala	J2182	Vyepti	J3032
Empaveli	J3490	Ocrevus	J2350	Vyondys 53	J1429
Enjaymo	J1302	Octagam	J1568	Vyvgart	J9332
Entyvio	J3380	Onpattro	J0222	Xembify	J1558
Epoprostenol	J1325	Orencia	J0129	Xeomin	J0588
Evenity	J3111	Oxlumo	J0224	Xgeva	J0897
Exondys51	J1428	Panzyga	J1599	Xiaflex	J0775
Fabrazyme	J0180	Perseris	J2798	Xolair	J2357
Fasenra	J0517	Prevymis	J3490	Yescarta	Q2041
Fensolvi	J1951	Privigen	J1459	Zarxio	Q5101
Flebogamma	J1572	Procrit	J0885	Zolgensma	J3399
Gammagard	J1569	Proleukin	J9015	Zulresso	J1632
Gammagard S/D	J1566	Prolia	J0897	Zyprexa Relprevv	J2358
Gammaked	J1561	Radicava	J1301		
Gammaplex	J1557	Reblozyl	J0896		

No change — Continue to require prior authorization and must meet criteria in Tufts Health Plan’s medical necessity guidelines.

Drug name	Drug name
Abaxane	Opdualag
Bevacizumab products	Rituximab products
Brineura	Scenesse
Cerezyme, Eleyso, VPRIV	Skysona
Crystiva	Tepezza
Evkeeza	Trastuzumab products
Kanuma	Vimizim
Nulibry	Viscosupplements
	Zynteglo

For more information on medical benefit drug coverage for Tufts Health Together members, please refer to the [MassHealth Medical Benefit Unified Formulary Drugs Requiring PA Medical Necessity Guideline](#), as well as the [MassHealth Drug List](#). ▲

Requests for assisted reproductive technology services

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial

As a reminder, Point32Health published the following new medical necessity guidelines (MNGs), effective Jan. 1, 2023, pertaining to assisted reproductive technology services for members of Harvard Pilgrim Health Care Commercial products, Tufts Health Plan Commercial products, and Tufts Health Direct:

Harvard Pilgrim:

- [Assisted Reproductive Technology Services – Massachusetts Products](#)
- [Assisted Reproductive Technology Services – New Hampshire Products](#)
- [In Vitro Fertilization \(IVF\) and Other Fertility Services CT](#)

Tufts Health Plan:

- [Assisted Reproductive Technology Services – Massachusetts Products](#)
- [Assisted Reproductive Technology Services – Rhode Island Products](#)

These MNGs have been developed in addition to, not in replacement of, our respective legacy plans’ existing Infertility Services MNGs. Refer to the new MNGs for complete information, including full clinical coverage criteria for various services, codes requiring prior authorization, limitations, and appropriate contact information.

Requesting authorization and corrected fax numbers

You can request prior authorization for infertility/assisted reproductive technology services online via our [Harvard Pilgrim](#) and [Tufts Health Plan](#) provider portals — which we recommend for their ease of use and quick turnaround times — as well as by fax.

We recently updated our MNGs for assisted reproductive technology services to ensure that they now contain the correct fax numbers for authorization requests.

When initiating prior authorization requests by fax, please be sure to submit the required documentation via the applicable channel indicated below:

- Harvard Pilgrim Referral and Authorization Unit: **800-232-0816**

- Tufts Health Plan Precertification Department:
 - **617-972-9409** for Commercial products
 - **888-415-9055** for Tufts Health Direct

In addition, we'd like to clarify that a separate authorization is **not** required for associated injectable pharmacy benefit drugs **that are formulary** once a request for an assisted reproductive technology service has been approved. (A separate authorization is required for **non-formulary** medications.) ▲

Point32Health Medical Necessity Guideline updates

Uncategorized

Updates to Medical Necessity Guidelines (MNG)

MNG Title	Products	Effective Date	Summary
Manual Wheelchairs (Harvard Pilgrim Commercial) Manual Wheelchairs (Tufts Health Plan Commercial and Direct)	Harvard Pilgrim Commercial	May 1, 2023	In alignment with Tufts Health Plan, Harvard Pilgrim Health Care is adopting InterQual criteria for Commercial prior authorization review, and will draw from the following subsets: Wheelchair Manual, Standard Hemi (low seat) Wheelchair Manual, Lightweight Wheelchair Manual, High Strength Lightweight Wheelchair Manual, Ultra Lightweight Wheelchair Manual, Heavy Duty Wheelchair Manual, Extra Heavy Duty Wheelchair Manual, Adult Size, Includes Tilt in Space Prior authorization will be required for codes K0002, K0003, K0004, K0005, K0006, K0007, and E1161.
Power Wheelchairs (Harvard Pilgrim Commercial) Power Wheelchairs (Tufts Health Plan Commercial and Direct)	Harvard Pilgrim Commercial	May 1, 2023	Harvard Pilgrim is adopting Tufts Health Plan's criteria, and will require prior authorization for the following code sets: K0010-K0014 – Motorized/power wheelchair, Motorized/power wheelchair base K0813-K0864 – Power wheelchair group 1,2 and 3 K0890-K0891 – Power wheelchair group 5 K0898 – Power wheelchair, not otherwise classified K0899 – Power mobility device, not coded by DME PDAC or does not meet criteria E1002-E1012 – Wheelchair accessory, power seating system

MNG Title	Products	Effective Date	Summary
<p>Power Operated Vehicles (Harvard Pilgrim Commercial)</p> <p>Power Operated Vehicles (Tufts Health Plan Commercial and Direct)</p>	<p>Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct</p>	<p>May 1, 2023</p>	<p>Harvard Pilgrim is adopting Tufts Health Plan's criteria, and will require prior authorization for codes E1230, K0800, K0801, K0802, and K0812. (Code K0802 will also require prior authorization for Tufts Health Plan Commercial and Tufts Health Direct.)</p> <p>In addition, codes K0806, K0807, K0808 will no longer be covered for Harvard Pilgrim Commercial members.</p>
<p>Xenpozyme (Harvard Pilgrim Commercial)</p> <p>Xenpozyme (Harvard Pilgrim StrideSM [HMO]/[HMO-POS] Medicare Advantage)</p> <p>Xenpozyme (Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health RITogether)</p> <p>Xenpozyme (Tufts Health Together)</p> <p>Xenpozyme (Tufts Health Plan SCO, Tufts Medicare Preferred, Tufts Health Unify)</p>	<p>All products</p>	<p>March 1, 2023</p>	<p>New MNG for Xenpozyme (J3490), an enzyme replacement therapy approved by the FDA in August 2022. Prior authorization is required, and the MNG details the coverage criteria, approved indications, limitations, and more.</p>
<p>Vitamin D Screening and Testing</p>	<p>Tufts Health Plan Commercial, Tufts Health Public Plans</p>	<p>March 1, 2023</p>	<p>Annual review, no changes.</p>
<p>Private Duty Nursing in the Home</p>	<p>Tufts Health Plan Commercial</p>	<p>March 1, 2023</p>	<p>Annual review, no changes.</p>
<p>Dental Implants</p>	<p>Tufts Health Plan Commercial</p>	<p>March 1, 2023</p>	<p>Annual review, no changes.</p>
<p>Clinical Review of Dental Services in Medical Benefit</p>	<p>Harvard Pilgrim Commercial</p>	<p>March 1, 2023</p>	<p>Annual review, no changes.</p>
<p>Dental Procedures Requiring Hospitalization</p>	<p>Tufts Health Plan Commercial</p>	<p>March 1, 2023</p>	<p>Coverage criteria expanded to include medical conditions resulting in American Society of Anesthesiology physical status classification of Class III or higher.</p>



Abortion and abortion-related care update

Massachusetts products

As a reminder, effective Jan. 1, 2023, the Reproduction and Gender-Affirming Care Act expands legal protections for practitioners providing services related to pregnancy terminations and gender-affirming care within the state of Massachusetts. Additionally, the law requires coverage of abortion and related services without cost share (including deductibles, co-insurance, copayments, and any other cost sharing requirement).

The Division of Insurance (DOI) recently issued [new guidance](#) to define abortion and abortion-related care for the purpose of this legislation:

- **Abortion:** Any medical treatment intended to induce the termination of, or to terminate, a clinically diagnosable pregnancy except for the purpose of producing a live birth; provided, however, that abortion shall not include providing care related to a miscarriage.
- **Abortion-related care:**
 - Pre-operative evaluation and examination
 - Pre-operative counseling
 - Laboratory services, including pregnancy testing, blood type, and Rh factor
 - Rh (D) immune globulin (human)
 - Anesthesia (general or local)
 - Post-operative care
 - Follow-up
 - Advice on contraception or referral to family planning services

Please refer to the DOI's [Bulletin 2023-01 Relative to Abortion and Abortion-related Care](#) for more information. ▲

Point32Health's access to care standards

Uncategorized

One of Point32Health's fundamental priorities is ensuring the best possible access to care for the members we serve through our Harvard Pilgrim Health Care and Tufts Health Plan products. To that end, we maintain policies for our Tufts Health Plan and Harvard Pilgrim plans that outline network practitioner standards regarding clinician availability, timeliness of appointments, and telephone accessibility, among other things.

Please refer to the policies identified below to review these standards and requirements.

Harvard Pilgrim Health Care

- [Practice Site Standards](#) policy, Network Operations & Care Delivery Management section of our Commercial Provider Manual
- [Access to Care](#) policy, StrideSM (HMO)/(HMO-POS) Medicare Advantage Provider Manual

Tufts Health Plan

- Medical Care Access Goals for Primary Care Offices section of the [Quality Administrative Guidelines](#) chapter of the Commercial Provider Manual
- Provider Access Standards section of the [Providers](#) chapter of our Tufts Health Public Plans Provider Manual
- Medical Care Access Goals for Primary Care section of the [Quality Administrative Guidelines](#) chapter of our Senior Products Provider Manual ▲

Members' rights and responsibilities

Uncategorized

Point32Health's Harvard Pilgrim Health Care and Tufts Health Plan members are notified of their respective plans' Members' Rights and Responsibilities upon enrollment and annually thereafter, and all clinicians also receive a copy at the time of contracting and credentialing and annually thereafter.

Periodically, Point32Health will include this information in our provider newsletter. Please take a moment to familiarize yourself with the documents below, found in the Provider Manuals specific to our various Harvard Pilgrim and Tufts Health Plan lines of business.

Because this information may vary among states, product lines, etc., please be sure to read each section that pertains to patients you treat.

Harvard Pilgrim Health Care

- [Rights and Responsibilities policy](#) in the Member Care section of the Commercial Provider Manual
- [Member Rights and Responsibilities policy](#) in the StrideSM (HMO)(HMO-POS) Medicare Advantage Provider Manual

Tufts Health Plan

- Members' Rights and Responsibilities sections of the:
 - [Members chapter](#) in the Commercial Provider Manual
 - [Rights and Responsibilities chapter](#) in the Tufts Health Public Plans Provider Manual
 - [Members chapter](#) in the Senior Products Provider Manual

Copies of this information can also be mailed upon request by calling Provider Services. ▲

Hydration therapy reimbursement update

Harvard Pilgrim Health Care Commercial

Effective for dates of service beginning May 1, 2023, Harvard Pilgrim Health Care's Commercial plans will no longer provide reimbursement for hydration therapy (CPT codes 96360, 96361, J7030, J7040, J7042, J7050, J7060, J7070, J7120, or J7121) when billed without a requisite diagnosis on the claim for members older than 18 years of age.

This update is in alignment with Tufts Health Plan's existing reimbursement policy, and in accordance with [guidance from the Centers for Medicare and Medicaid Services \(CMS\)](#), which states that hydration therapy and related drugs should only be covered for certain diagnoses.

Harvard Pilgrim's Commercial [Injectable and Implantable Outpatient Drugs Payment Policy](#) and [Emergency Care Payment Policy](#) have been updated to reflect this change in reimbursement. ▲

Join us for a provider training

All products

Point32 Health will offer a number of trainings in March. Registering is easy, just click the links below.

What's ahead at Point32 Health: Integration updates:

Join us on [Thursday, March 9 from noon–1 p.m.](#) to hear more about key changes for 2023, including product changes and continuity of care, our new pharmacy benefit manager, medical benefit drug prior authorization, behavioral health, and more.

ACO overview:

Learn about Tufts Health Public Plans Accountable Care Organizations (ACOs):

- [Wednesday, March 8 from 11 a.m.–noon](#)
- [Wednesday, March 15 from 1–2 p.m.](#)
- [Tuesday, March 21 from noon–1 p.m.](#)

Harvard Pilgrim specific:

- HPHConnect Orientation: We'll guide you through the features of Harvard Pilgrim's secure portal HPHConnect and offer instructions on performing common transactions on [Thursday, March 30 from noon–1 p.m.](#)
- Referral, authorization, and notification overview: [Tuesday, March 14 from noon–1 p.m.](#)

Tufts Health Plan specific:

- Behavioral Health: Interactive session on [Tuesday, March 28 from 10:30 a.m.–11:30 a.m.](#) to assist Behavioral Health office managers, office staff, and providers in doing business with Tufts Health Plan.
- Identifying member cost share: [Tuesday, March 7 from 10–11 a.m.](#)
- Office managers meeting: [Wednesday, March 22 from 10:30–11:30 a.m.](#)

Monogram Health:

Point32Health is collaborating with Monogram Health for in-home chronic kidney disease (CKD stages 3b-5) and end-stage renal disease (ESRD) care management services for commercial fully insured members. Monogram Health will be offering webinars to provide an overview of the program on:

- [Friday, March 10 from 12:30-1 p.m.](#)
- [Thursday, March 23 from 5-5:30 p.m.](#)



Updates and reminders

[Tufts Health Plan SCO](#) | [Tufts Health Public Plans](#) | [Tufts Medicare Preferred](#)

The following is a list of helpful updates and reminders to keep in mind this month:

- **Required data elements for coordination of benefits claims (Tufts Health Public Plans, Tufts Health SCO, Tufts Medicare Preferred):** As a reminder, Tufts health Plan enhanced the processing of Coordination of Benefits (COB) claims submitted via EDI, allowing for electronic COB claims to be accepted and auto adjudicated. Complete and accurate information from the payer is required; for a list of the data elements required, please refer to [this article from the December newsletter](#). Claims submitted without the necessary data elements will be rejected.
- **Opioid treatment performance specifications (Tufts Health Together, Tufts Health, Unify, Tufts Health Plan SCO):** As part of ongoing review of our performance specifications, we revised our [Opioid Treatment Services Performance Specifications](#) in February.
- **Stretcher reminder (Tufts Health RITogether):** The Rhode Island Executive Office of Health and Human Services (RI EOHHS) recently noted that some providers/facilities may not have the appropriate equipment to accommodate patients and are requesting that transportation providers leave stretchers at the facility for the duration of the patient's appointment. RI EOHHS reminds providers of the need to comply with Title III of the Americans with Disabilities Act, and notes that transportation providers are not required to leave a stretcher at a provider/facility unless it is the member's personal mobility device and doing so may prevent the transportation provider from attending to other stretcher-bound transportations that day.
- **Standard form for chemotherapy prior authorization reminder (All Tufts Health Plan products):** As of Feb. 23, 2023, Tufts Health Plan only accepts the [Massachusetts Standard Form for Chemotherapy and Supportive Care Prior Authorization Requests](#). Any previous versions of the form will not be accepted.



Insights and Updates for Providers is a monthly newsletter for the network of Point32Health, the parent company of Harvard Pilgrim Health Care and Tufts Health Plan.

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Read *Insights and Updates for Providers* online, and subscribe for email delivery, at www.point32health.org/provider. For questions or comments about this newsletter, contact Anmarie Dadoly at anmarie_dadoly@point32health.org.

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