

## System update and abbreviated provider newsletter

### All Products

As you may know, on April 17, Point32Health identified a cybersecurity ransomware incident that impacted systems we use to service members, accounts, brokers, and providers.

The incident is impacting systems that support Harvard Pilgrim Health Care's commercial and Stride<sup>SM</sup> (HMO)/(HMO-POS) Medicare Advantage plans. (Tufts Health Plan, Tufts Medicare Preferred, Tufts Health Public Plans, and CarePartners of Connecticut plans are not impacted.)

After detecting the unauthorized party, we proactively took our Harvard Pilgrim Health Care systems offline to contain the threat. We have notified law enforcement and regulators and are working with third-party cybersecurity experts to conduct a thorough investigation into this incident and remediate the situation.

### Abbreviated May provider newsletter issue

As a result of downstream complications stemming from this temporary system outage, we're publishing an abbreviated version of this month's issue of Insights and Updates for Providers. The issue is not as comprehensive as those you are accustomed to seeing and focuses instead on a cultivated selection of particularly notable updates. It's important to Point32Health to keep our provider network informed and supported; as soon as we've restored the impacted systems, we intend to resume our usual process of producing more robust monthly provider newsletters.

### Additional information

You and your office staff can reference our [System Update for Providers page](#) for more information about the incident and its effects on Harvard Pilgrim Health Care plans.

There you'll also find the answers to some frequently asked questions we've developed in an effort to minimize the negative impact of the system outage on our provider network and to aid in business continuity to the highest degree possible.

Topics covered include impact on utilization management and prior authorization processes, member eligibility status capabilities, reimbursement for services rendered, and more.

A few key things to keep in mind include:

- We are unable to accept claim submissions for Harvard Pilgrim Commercial members, and request that providers please hold these submissions until further notice. However, you should **continue to submit claims for: Harvard Pilgrim Medicare Advantage Stride<sup>SM</sup> (HMO)/(HMO-POS) members and all Tufts Health Plan members**, including Tufts Health Commercial Plans, Tufts Health Plan Senior Products, and Tufts Health Public Plans.
- It's important to continue to care for members. Even if you are not able to ascertain copay amounts or confirm eligibility, it's important to continue to ensure that patients can obtain health care. Once we resume providing eligibility files, you can then bill the member for the applicable copay. If it is determined, after having received care, that the member was not eligible on the date of service, Point32Health will nonetheless reimburse providers for the services.

- Effective April 15, 2023, and until further notice, Harvard Pilgrim Health Care commercial and Medicare Advantage Stride<sup>SM</sup> (HMO)/(HMO-POS) plans are waiving utilization management (UM) requirements, including prior authorization and notification, for medical and behavioral health covered services, except for the following: CAR-T Cell Therapy, gender-affirming surgical procedures, and solid organ transplant surgeries. We will not require providers to subsequently submit an authorization for services rendered while authorization is waived (from April 15, 2023 through the date at which our systems are operational).
- We will extend timely filing limits for claims affected by the system outage.
- Providers did not receive payment on April 21 and April 28 for services rendered to Harvard Pilgrim Health Care commercial members due to the cybersecurity ransomware incident. Please keep in mind that many lines of business were unaffected by this issue — including Harvard Pilgrim Health Care Medicare Advantage Stride<sup>SM</sup> (HMO)/(HMO-POS), all Tufts Health Plan products, and CarePartners of Connecticut — and as such, provider payments were made on time and will continue without interruption. Until normal processes are restored, we will publish specific information about the status of provider payments for that week on Wednesday at noon on [our FAQ page](#).

We recognize that this is a frustrating situation and appreciate your patience and understanding as we continue to work diligently to restore affected systems as quickly and as safely as possible. ▲

## COVID-19 coverage updates

### All Products

President Joe Biden has signed a bill that will officially end the federal COVID-19 Public Health Emergency (PHE) at the end of the day on May 11, 2023. As a result, Point32Health is returning to many pre-pandemic operations and policies and will be updating the Coronavirus (COVID-19) Updates for Providers page.

Point32Health will continue to comply with federal and state guidelines for COVID-19 vaccines, boosters, testing and treatment. Some updates include:

- **COVID-19 vaccines:** In-network COVID-19 vaccines will remain covered at no cost to our members. We are following federal and state guidance related to out-of-network member cost shares for these services.
- **Over-the-counter/home testing kits:** On May 12, 2023, following the end of the PHE, we will no longer cover over-the-counter COVID-19 tests for Commercial members. Medicare members will also no longer have coverage through their Red, White and Blue Medicare card. Medicaid members will continue to have access, based on MassHealth and Rhode Island Medicaid requirements.
- **Provider ordered testing and treatment:** COVID-19 tests, treatments and services ordered by a provider, including Paxlovid, will remain covered and we follow federal guidelines regarding approved treatments. We are following state guidance related to cost shares for these services.

Self-insured plans may apply different member cost-sharing for these services. Please contact your employer.

For information on COVID policies as of May 12 or later, please refer to the [Coronavirus \(COVID-19\) Updates for Providers page](#). ▲

## GIC product updates effective July 1

### Harvard Pilgrim Health Care Commercial

Effective July 1, 2023, Point32Health is updating our Commercial Group Insurance Commission (GIC) product offerings. For the 2023-2024 plan year, we will offer two custom Commercial Harvard Pilgrim Health Care/GIC products in New England for active GIC or eligible municipal enrollees, retired GIC enrollees not eligible for Medicare, retired municipal teachers, and certain other government retirees:

**Harvard Pilgrim Quality HMO** — Harvard Pilgrim Quality HMO (formerly Primary Choice HMO) is a tiered limited-network HMO, open to Massachusetts residents (except in Martha’s Vineyard, Nantucket, and Cape Cod). This plan includes a deductible, lower PCP copayment, two copayment tiers for specialist office visits, and two copayment tiers for inpatient admissions to acute care hospitals.

**Harvard Pilgrim Explorer POS** — Harvard Pilgrim Explorer POS (formerly Independence Plan POS) is a tiered full-network product, open to Massachusetts state and municipal employees, that allows members to seek in-network medical care (from their PCP or from Harvard Pilgrim participating providers with a PCP referral) or out-of-network medical services (from non-participating providers or Harvard Pilgrim participating providers without a PCP referral). Harvard Pilgrim Explorer POS offerings include a deductible, three lower-cost copayment tiers for PCPs, and three copayment tiers for specialist visits and inpatient admissions to acute care hospitals.

Providers received letters in early March informing them of their inclusion in the products and tier assignments.

### **2023-2024 tiering methodology**

Tier assignments are the same for both plans with some exceptions; however, because Harvard Pilgrim Quality HMO is a limited-network product, some of Harvard Pilgrim’s contracted providers do not participate in this network. It is important to confirm network participation before a Harvard Pilgrim Quality HMO member receives treatment.

Please note that for the 2023-2024 plan year, we’ve updated the methodology used to assign tier classifications, which are based on quality and cost performance, as measured by health-status-adjusted total medical expenses and relative prices, and select Quality and Health Equity measures. If applicable quality measures were unavailable, tiers were based solely on health-status-adjusted total medical expenses or relative prices, or both. Providers outside of Massachusetts were not included in the tiering analysis, and default to Tier 2 for both products.

For more information about our tiering methodology, refer to [the Fast Facts for Hospitals and Professional Providers](#) document on Point32Health’s provider website.

### **Tufts Health Plan Spirit and Tufts Navigator retiring**

As we’ve detailed in our [Point32Health Integration FAQ](#), Tufts Health Plan’s Commercial members have begun migrating to Commercial Harvard Pilgrim products as Point32Health’s Commercial markets move toward a more unified product portfolio, with transitions occurring on products’ renewal dates. As a reminder, this includes Tufts Health Plan’s Commercial GIC products, Tufts Health Plan Spirit and Tufts Navigator — members of these plans will automatically be enrolled in the corresponding Harvard Pilgrim Commercial GIC HMO or POS product as of July 1, 2023. ▲

## **Claims editing alignment**

### **Commercial Products**

As part of our integration, we are continuing to align our policies and claims editing processes across our legacy brands, Harvard Pilgrim Health Care and Tufts Health Plan. Effective for dates of service beginning July 1, 2023, all claims for both medical and behavioral health services, including those performed at community mental health centers, will be subject to claims edits and processed consistently across our claims platforms for the legacy brands. ▲

## **New pilot program for select Harvard Pilgrim members**

### **Harvard Pilgrim Health Care Commercial**

Point32Health is collaborating with Freespira, Inc. to offer a new, evidence-based pilot program, which is now available for eligible fully insured Commercial Harvard Pilgrim Health Care members ages 18 and over in Massachusetts, New Hampshire, and Maine.

The pilot features Freespira, a medication-free, FDA-cleared, digital therapeutic treatment proven to significantly reduce or eliminate symptoms of panic disorder (panic attacks) and post-traumatic stress disorder (PTSD). This treatment offers symptom relief and potential remission by addressing the underlying physiological factor behind panic disorder and PTSD: dysregulated breathing arising from carbon dioxide hypersensitivity.

The 28-day, at-home treatment program features dedicated advisors, clinician assessors, and coaches who work with each patient throughout the treatment journey. Patients receive a small sensor to monitor their breathing, plus a dedicated tablet providing real-time feedback, and learn techniques to regulate their breathing patterns. Many patients feel a difference within the first two weeks. Once complete, all equipment is returned, pre-paid.

Patients who enroll in the pilot may opt to have Freespira, Inc. send a copy of their end-of-treatment report to their primary care physician, in which case Freespira, Inc. would contact that physician to notify them that their patient has enrolled, and to confirm that they would like to receive the report.

We also encourage providers to refer any eligible patients they feel may benefit from the Freespira treatment program by visiting [www.freespira.com/provider](http://www.freespira.com/provider) or calling 1-800-735-8995. ▲

## FDA withdrawal of Makena

### All Products

As a result of the Food and Drug Administration's (FDA) decision on April 6 to withdraw approval of Makena (hydroxyprogesterone caproate) — both the brand name and generic injection — Point32Health will not authorize any prior authorization requests for new starts for Commercial, Tufts Health Direct, and Tufts Health RITogether members. Providers may request continuation of therapy for the compounded formulation, which requires prior authorization, if medical necessity is met. Please be aware, however, that as of July 1, 2023, we will no longer provide reimbursement for brand name Makena or the generic or compounded formulation.

As part of the MassHealth Unified Formulary, Tufts Health Together will follow MassHealth's coverage. Effective immediately, requests for new and existing Tufts Health Together utilizers will be reviewed against the criteria for non-FDA approved drugs and biologics. Requests for the compound will be reviewed for medical necessity for members currently being treated with brand or generic Makena.

In its decision to withdraw approval, the FDA stated that Makena was no longer deemed effective at reducing the risk of early birth in women with a history of spontaneous preterm birth. ▲

## Removing certain drugs from white-bagging program

### Tufts Health Direct | Tufts Health Medicare Preferred | Tufts Health Plan Commercial

Effective for dates of service beginning July 1, 2023, certain medications will no longer be offered as part of Tufts Health Plan's office-administered medical drug/white bagging program.

The drugs identified below will be removed from our Office-Administered Medical Drugs list for [Tufts Health Direct](#), as well as [for Tufts Health Plan Commercial and Tufts Medicare Preferred](#), and will no longer be available through CVS Caremark:

Aranesp	Arzerra	Avastin	Epogen
Gel-One	GenVisc 850	Hyalgan	Leukine
Lucentis	Monovisc	Mozobil	Neulasta
Neupogen	Octreotide	Orthovisc	Procrit
Sandostatin	Supartz	Synvisc	Synvisc-One
Vantas	Zarxio		

Providers can continue to buy and bill these medications once prior authorization has been obtained. (You can request prior authorization in [a number of ways](#), but we recommend submitting requests electronically through [PromptPA](#) for its ease of use and quick turnaround times.) In addition, some of the medications may be available under Tufts Health Plan's [Pharmacy](#) benefit. Please refer to the relevant plan's online formulary to confirm Pharmacy coverage of drug. ▲

## Reimbursement update for IEP services effective July 1

[Harvard Pilgrim Health Care Commercial](#) | [Tufts Health Direct](#) | [Tufts Health Plan Commercial](#) | [Tufts Health Together](#) | [Tufts Health Unify](#)

Effective for dates of service beginning July 1, 2023, Point32Health will no longer provide reimbursement for claims submitted with the following modifiers related to services provided in conjunction with a student's individualized education program (IEP):

- TM: Individualized education program
- TR: School-based individualized education program services provided outside the public school district responsible for the student

As a reminder, IEP services are covered through the student's school district or through the state and are considered non-reimbursable by Harvard Pilgrim Health Care and Tufts Health Plan.

We've updated the [Tufts Health Plan Modifier Payment Policy](#) to reflect this configuration change. We're currently unable to update the Commercial Harvard Pilgrim CPT Modifiers Payment Policy due to the [cybersecurity issue](#) affecting our Harvard Pilgrim systems, but we will publish the updated version as soon as we are able. ▲

## Behavioral Health Medical Necessity Guideline updates

[Harvard Pilgrim Health Care Commercial](#) | [Tufts Health Direct](#) | [Tufts Health Plan Commercial](#) | [Tufts Health RITogether](#) | [Tufts Health Together](#) | [Tufts Health Unify](#)

Effective July 1, 2023, we're updating the following behavioral health-related Medical Necessity Guidelines (MNGs), which are applicable for Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Together, Tufts Health RITogether, Tufts Health Unify, and Tufts Health Direct:

### Transcranial Magnetic Stimulation (TMS)

We're adopting customized InterQual criteria for clinical review of the services associated with this MNG. Claims containing procedure codes 90867, 90868 and 90869 will prompt InterQual review, and prior authorization will be required for these codes. For more information, please refer to the updated MNGs available on the [Point32Health](#) and [Tufts Health Plan](#) provider websites.

### Psychological and Neuropsychological Testing and Assessment

Our Psychological Testing and Assessment ([Point32Health provider site](#), [Tufts Health Plan provider site](#)) and Neuropsychological Testing and Assessment ([Point32Health provider site](#), [Tufts Health Plan provider site](#)) MNGs are being updated to utilize customized InterQual criteria for clinical review.

Prior authorization will be required for these services and the associated codes identified on the MNGs — these prior authorization requirements are existing for some of the applicable products listed above and new for others, but will apply broadly as of July 1, 2023. ▲

***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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