

System updates for our provider network

All Products

We continue our work in restoring our core Harvard Pilgrim Health Care systems and encourage providers and office staff to visit our System Update for Providers FAQ for the latest information. We will also continue to send emails to our newsletter subscribers and HPHConnect users with important updates.

About the cybersecurity incident

On April 17, Point32Health identified a cybersecurity ransomware incident that impacted systems we use to service members, accounts, brokers and providers. This is impacting systems that support Harvard Pilgrim Health Care commercial and Medicare Advantage StrideSM plans (HMO)/(HMO-POS). Tufts Health Plan, Tufts Medicare Preferred, Tufts Health Public Plans and CarePartners of Connecticut systems remain accessible.

After detecting the unauthorized party, we proactively took our Harvard Pilgrim Health Care systems offline to contain the threat. While we work diligently to restore affected systems as quickly and as safely as possible, our team is working around the clock so that Harvard Pilgrim Health Care (HPHC) members receive the services they need.

Recent updates

The online [System Update for Providers FAQ](#) includes information on recent updates including:

- **Eligibility information** — We have restored capabilities for 270/271 eligibility transactions for Harvard Pilgrim Health Care commercial plans. You can now check eligibility for Harvard Pilgrim Health Care commercial members who were enrolled on or before April 15, 2023 via HPHConnect, the Provider Call Center, batch 270/271 transactions, and trading partners.
 - The information reflects member participation in a Harvard Pilgrim commercial plan through April 15. Please be aware that eligibility information for members who enrolled with Harvard Pilgrim Health Care commercial plans on or after April 16 is not currently available. We have issued temporary member ID cards (starting with P3 rather than the standard HP) and/or eligibility letters to new members; please accept the temporary ID card/or eligibility letters are proof of eligibility and provide care to these members.
 - For Medicare Advantage StrideSM (HMO)/(HMO-POS) members, providers can continue to access eligibility information through the Stride provider portal.
- **Claims processing** — We understand the impact on payment delays for providers and identified claims processing and provider reimbursement as a top priority as we work to bring systems back online. We recently were able to process and release payment for additional claims that were already in process when we shut our systems down on April 17. We are continuing to work to restore our full claims processing and payment capabilities and will keep you updated on progress.
 - Meanwhile, please continue to hold claims submissions for Harvard Pilgrim Health Care commercial members until further notice.

- You should continue to submit claims for members of Harvard Pilgrim Medicare Advantage StrideSM (HMO)/(HMO-POS) and Tufts Health Plan (including commercial, Tufts Health Plan Senior Products, and Tufts Health Public Plans).
- **Behavioral health services for Harvard Pilgrim commercial members** — Due to the continuous work on restoration efforts, we have pushed back insourcing our Behavioral Health program for Harvard Pilgrim commercial members to fall 2023, instead of the originally scheduled date of July 1. By delaying the implementation, we can ensure the continuity of care for our members, while our staff continues work on the current outage.
 - There is no impact to Harvard Pilgrim Health Care Medicare Advantage StrideSM (HMO)/(HMO-POS) or Tufts Health Plan members.
 - Although our rollout is delayed, there will be no interruption to care or provider access for our Harvard Pilgrim Health Care members. All Harvard Pilgrim Health Care members in New England and nationwide will be able to continue to see their providers as they do today based on their current health plan designs.
 - Until insourcing occurs, Optum/UBH will continue to provide behavioral health services for Harvard Pilgrim members. Providers should continue to send behavioral health claims for Harvard Pilgrim members to Optum/UBH as you do today.
 - We are continuing to grow our behavioral health network. If you are a behavioral health provider who received a contracting packet from us, we encourage you to complete any necessary steps as soon as possible. This will help us offer a robust behavioral health network for our members and uninterrupted care to Harvard Pilgrim commercial members when insourcing occurs.

We appreciate your partnership in ensuring our members receive high-quality health care services, and your understanding during this challenging time. ▲

Behavioral Health Payment Policy update

Tufts Health Plan Commercial

Our new [Behavioral Health and Substance Use Disorder Payment Policy](#) applies for Tufts Health Plan commercial members, effective for dates of service beginning July 1, 2023.

The policy details reimbursement for behavioral health and substance use disorder providers for medically necessary services rendered in inpatient, outpatient and acute residential settings and includes billing guidelines.

Under the new policy, when billing for behavioral health and substance use disorder services, providers must include the appropriate modifier to indicate clinician type, and reimbursement varies as noted in the chart below:

Code	Description	Comments
AF	Psychiatrist	Allows 100% of the contracted allowable rate
AH, HP	Clinical psychologist or doctoral level (PhD, PsyD, EdD)	Allows 100% of the contracted allowable rate
AJ	Clinical Social Worker	Allows 75% of the contracted allowable rate
HL	Intern	Allows 85% of the contracted allowable rate
HM	Less than bachelor's degree level	Allows 75% of the contracted allowable rate
HN	Bachelor's degree level	Allows 75% of the contracted allowable rate
HO	Master's degree level	Allows 75% of the contracted allowable rate

In addition, supervised practitioners may receive reimbursement at a rate equivalent to that of the participating supervising practitioner. All claims rendered by a supervised practitioner must be submitted by the contracted supervising practitioner and must include the appropriate modifier indicating the licensure level of the supervised practitioner.

For more complete details, please refer to the [Behavioral Health and Substance Use Disorder Payment Policy](#).

As we noted in previous communications, we made the decision to delay the insourcing of our Behavioral Health program for our Harvard Pilgrim Health Care commercial members to fall 2023. As a result, the Behavioral Health and Substance Use Disorder Payment Policy applies only for Tufts Health Plan commercial members until insourcing occurs, at which time the policy will also apply for Harvard Pilgrim commercial members. We will be sharing additional information about behavioral health insourcing for Harvard Pilgrim commercial members in future issues of the newsletter. ▲

Join us for a personalized claims consultation

All Products

In the spirit of collaboration with our valued provider partners, Point32Health is pleased to announce that we will be opening the doors to our Canton office this summer to host providers for claims consultations. The event will be an opportunity for providers to meet with our Provider Relations team, who will be available as a resource to support you by answering questions you may have about claims — from submission, to adjudication, to processing, and more.

The event will be Monday, July 24 from 10 a.m. to 2 p.m. at the Point32Health headquarters located at **1 Wellness Way, Canton, MA**. Appointments will be scheduled in 30-minute increments and registration is required — walk-ins unfortunately cannot be accommodated.

Refreshments will be served and Wi-Fi access will be available. Spanish speaking staff will also be available to offer assistance.

To reserve your space, please email Claims_Consultations@Point32Health.org by Friday, June 30 with the following information:

- Your name
- Your phone number
- Provider or facility name
- NPI
- Preferred time slots (30-minute increments between 10 a.m. and 2 p.m. on July 24)

We hope to see you there!

Please note that for Harvard Pilgrim Medicare Advantage StrideSM (HMO)/(HMO-POS); Tufts Health Plan (including commercial, Tufts Health Plan Senior Products, and Tufts Health Public Plans); and CarePartners of Connecticut members, you should continue to submit corrected claims and provider payment disputes per your normal process, and claims should not be held until your consultation. Paper claims should not be brought to these consultation appointments. As noted on our [System update for providers page](#), we are currently unable to accept claim submissions for Harvard Pilgrim commercial members, and request that providers please hold these submissions until further notice. ▲

Reminder: Tufts Health Together Accountable Care Organizations for 2023

Tufts Health Together – ACOs

As previously announced, two Tufts Health Together plans have been selected by MassHealth to participate in a new value-based sub-capitation accountable care organization (ACO) beginning April 1, 2023. Here are some reminders and information to note:

- Tufts Health Together with Cambridge Health Alliance is a continuing collaboration and members who have a primary care provider (PCP) who is part of Tufts Health Together with Cambridge Health Alliance will continue to be enrolled in this ACO plan.
- Tufts Health Together with UMass Memorial Health is a new collaboration. Members who have a PCP who is part of Tufts Health Together with UMass Memorial Health are enrolled in this ACO plan. To support members' transition to an in-network provider, there is a 90-day continuity of care period. Members can visit our [online provider directory](#) to search for an in-network clinician.
- For information on coverage and prior authorization requirements, please refer to the Tufts Health Together [medical](#) and [behavioral health](#) benefit summaries.
- Use MassHealth's Eligibility Verification System (EVS) for the latest member eligibility information. Members who have questions about their eligibility may contact MassHealth at 800-841-2900. ▲

One Care training requirement and resources for Tufts Health Unify

Tufts Health Unify

The Executive Office of Health and Human Services (EOHHS) and the Centers for Medicare & Medicaid Services (CMS) require providers and office staff to complete comprehensive training on the One Care (Medicare-Medicaid dual eligible) program.

In support of the EOHHS and CMS, and to make it easier for our valued providers to comply with this requirement, we offer convenient training resources in the [Tufts Health Unify Provider Trainings](#) section of the Tufts Health Plan provider website.

The program has two tracks — [a general training series](#) developed by MassHealth via UMass Medical School and available through the [One Care Shared Learning website](#), as well as a [plan-specific Tufts Health Unify training](#) — and providers are required to complete both tracks in order to meet One Care requirements.

Within track one, in addition to live webinars and online modules, you'll find recorded webinars featuring a myriad of pertinent topics in health care, including trainings on accessibility and accommodations, which focus on promoting wellness among people with disabilities and include specific information on Americans with Disabilities Act (ADA) requirements.

You must complete both training program tracks to meet One Care requirements. We will record and submit your participation to both EOHHS and CMS.

Our [Frequently Asked Questions page](#) for Tufts Health Unify addresses some questions you may have about training requirements, as well as many other general questions about Tufts Health Unify and topics such as contracting, delivering care, and doing business with us. ▲

Tufts Health Public Plans initial paper claims address change

Tufts Health Public Plans

Please be aware that the address for Tufts Health Public Plans initial paper claim submissions is changing. Starting August 1, 2023, initial paper claims for both Massachusetts and Rhode Island Public Plans should be sent to the following address:

Tufts Health Public Plans – Paper Claims Submissions
P.O. Box 189
Canton, MA 02021-0189

Until August 1, please continue to send initial paper claim submissions for Massachusetts and Rhode Island Public Plans to the addresses located in Foothill Ranch, CA.

Our address for submitting corrected claims, disputes, appeals and medical records will not change. You can continue to submit these requests to: Tufts Health Public Plans, P.O. Box 524, Canton, MA 02021.

For the latest claims address information, refer to the [Claims Requirements, Coordination of Benefits and Dispute Guidelines](#) chapter in the Tufts Public Plans Provider Manual. ▲

NIA vendor program code updates

[Harvard Pilgrim Health Care Commercial](#) | [Harvard Pilgrim Stride \(HMO\) Medicare Advantage](#) | [Tufts Health Plan Commercial](#) | [Tufts Health Public Plans](#)

In the April issue of Insights and Updates for Providers, Point32Health announced a number of changes expected to take effect June 1, 2023 in relation to the medical necessity review and prior authorization program that National Imaging Associates, Inc. (NIA) oversees on our behalf for certain procedures.

While the updates announced for our Tufts Health Plan commercial and Tufts Health Public Plans products are now in effect, **the changes we announced for Harvard Pilgrim commercial and Harvard Pilgrim Health Care StrideSM (HMO)(HMO-POS)** have been delayed as a result of the system outage we are experiencing. (For specific code update details, refer to the chart included in the original article titled “NIA vendor program code updates,” which begins on Page 13 of [this PDF of the April newsletter issue.](#))

We do not yet know when our systems will allow us to configure the changes related to Harvard Pilgrim products, but we will issue an updated communication in a future issue of the newsletter to keep you apprised in advance of the new effective date for those updates. ▲

Telehealth reimbursement for Tufts Health Direct members

Tufts Health Direct

As we announced in previous issues of Insights and Updates for Providers, Point32Health currently reimburses medical services provided via telehealth for our commercial Harvard Pilgrim Health Care and Tufts Health Plan members in Massachusetts, Rhode Island, and Maine at 80% of the in-person rate.

Effective for dates of service beginning Aug. 1, 2023, in an effort to align practices across products, we will apply the same reimbursement to telehealth services rendered to our Tufts Health Direct members. Services provided via telehealth to Tufts Health Direct members will be reimbursed at 80% of the in-person rate, with the exception of telehealth services provided by behavioral health providers, which will continue to pay at 100% of the in-person rate.

For additional information, please refer to the [Tufts Health Plan Telehealth/Telemedicine Payment Policy](#), which we have updated to reflect the new reimbursement rate for Tufts Health Direct. ▲

Standard annual eligibility review process returning

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

We want to ensure that our Medicaid members are aware that they must take action to renew their coverage — and you and your practice play an important role in assisting with these efforts. During the COVID-19 public health emergency, the annual renewal process for Medicaid members was paused to ensure that members had continuous coverage. However, that waiver expired in April 2023, and as a result, over the next year all Medicaid members will need to have their eligibility redetermined.

Please remind your Medicaid patients to complete the renewal process. In addition, to avoid any coverage issues, your staff may want to call patients before their appointments to ensure their coverage will still be active at the time of their appointment.

If a member has questions, here are a few resources you can direct them to:

Massachusetts

- Call MassHealth at 800-841-2900
- Look [online](#) for an enrollment assister in their area
- Visit one of the [MassHealth Enrollment Centers \(MECs\)](#). Appointments can be made [online](#). The centers are open for limited walk-in appointments, but online appointments are encouraged.
 - Members who are deemed ineligible may still qualify for subsidized Connector Care plans, and should visit the Massachusetts Health Connector [website](#) or call 877-623-7773 to learn more.

Rhode Island

- [Online](#) educational materials including frequently asked questions
- [Certified application counselors and navigators](#)
- Contact [EOHHS](#)

Rhode Island providers who need assistance with a member's eligibility can call the Gainwell provider support line at 401-784-8100. ▲

2023 Home Care Seasonal Flu Vaccine Fee Schedule

Harvard Pilgrim Health Care Commercial

Updates to Harvard Pilgrim's standard home care seasonal influenza vaccine fee schedule will take effect on Aug. 1, 2023. To request an updated fee schedule, please call the Provider Service Center at 800-708-4414. ▲

Mindfulness program for providers

All Products

Point32Health understands the impact of the long and demanding days many of our providers and their staff are continually tasked with working, and the toll this work can take over time. In recognition of these challenges and to continue partnering closely with our provider community, we're pleased to offer you access to a valuable mindfulness resource: our Peak Mind Challenge.

The Peak Mind Challenge features a playlist of twenty brief meditation videos that are intended to be watched once per day, most days of the week, for four weeks. The videos showcase the research of neuroscientist and mindfulness expert Dr. Amishi Jha, whose mindfulness-based methods can help participants — including those

who work in high-pressure, high-stress environments — train their attention to improve brain power, mood, and performance in just 12 minutes a day.

All the videos are guided by a team of mindfulness experts, and Dr. Jha will pop in to offer additional tips and techniques to develop a peak mind. The Peak Mind Challenge program is self-guided and registration is not required. To learn more, please visit the [Peak Mind Challenge page](#) on our website. ▲

Point32Health Medical Necessity Guideline updates

Tufts Health Plan Commercial | Tufts Health Public Plans

Updates to Medical Necessity Guidelines (MNG)

MNG Title	Products Affected	Effective Date	Summary
Long-Term Services & Supports (LTSS) for Tufts Health Unify	Tufts Health Unify	May 1, 2023	MNG updated to reflect the fact that the following codes/services may now be authorized for up to one year, as opposed to the previous limit of six months: S5120 – Chore services S5130 – Homemaking service per 15 minutes S5131 – Homemaking services per diem S5135 – Companion care S5170 – Home delivered meals S5175 – Laundry
Personal Assistance Services & Supports (PASS) Home and Community Based Services (HBTS) Behavioral Health: Evidence-Based Practices (EBP)	Tufts Health RITogether	April 19, 2023	In support of regulatory guidance from the Rhode Island Executive Office of Health and Human Services, prior authorization is no longer required for the screening and assessment codes T1023 and T1028.
Genetic and Molecular Diagnostic Testing for Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health Unify	Tufts Health RITogether	April 19, 2023	In support of state guidance pertaining to coverage of biomarker clinical laboratory services, CPT codes 81538, 81539, and 0174U are now covered, with prior authorization, for Tufts Health RITogether members.
Therapeutic Lenses	Tufts Health Plan commercial, Tufts Health Public Plans	June 1, 2023	Annual review, no changes.
Laser Vision Correction Surgery	Tufts Health Plan commercial, Tufts Health Public Plans	June 1, 2023	Annual review, no changes.



MassHealth Unified Formulary: medical drug updates

Tufts Health Together

As a reminder, Tufts Health Together–MassHealth MCO Plan and ACPPs, in conjunction with the other Medicaid managed care organizations (MCOs) in the Commonwealth, now utilize MassHealth’s Unified Formulary for pharmacy medications and for select medical benefit drugs.

Pharmacy coverage and criteria for Tufts Health Together consequently mirror that of MassHealth — but for medical drug benefit coverage, in some cases we utilize the Unified Formulary coverage and criteria, while in others Point32Health criteria apply.

Effective for dates of service beginning June 5, 2023, a number of updates regarding medical drugs and the MassHealth Unified Formulary will apply for Tufts Health Together.

Rebyota (J3590) will require prior authorization and will use the [MassHealth Drug List](#) for criteria, and the following Point32Health Medical Necessity Guidelines for Tufts Health Together will be retired and these medical drugs will also use MassHealth Drug List criteria:

- Tzeild (C9148)
- Tecvayli (C9149)
- Xenpozyme (J0218)
- Zynteglo (J3490)

(For a full list of medical benefit drugs that use the MassHealth Drug List for criteria for Tufts Health Together, please refer to our [Medical Benefit Unified Formulary Drugs Requiring PA MNG.](#))

The following off-label uses have been added to the MassHealth Drug List with criteria and will now be covered indications for all intravenous immune globulin (IVIG) products:

- Antibody mediated rejection (AMR)
- Immune mediated necrotizing myopathy (IMNM)
- Intestinal Lung Disease (ILD)
- Pemphigus Vulgaris (PV)
- Polymyositis (PM)
- Prevention of recurrent infection in pediatric HIV members

For all off-label uses for IVIG products, initial authorizations will now be for three months, and reauthorizations will be for six months.

Authorizations for Oxlumo (J0224) will now be approved for one year, as opposed to the previous timeframe of six months.

Aveed (J3145) and Testopel (S0189) will now be approved for gender identity disorder/gender dysphoria/transsexualism/therapy after gender reassignment surgery under the MassHealth Drug List.

Quzyttir (J3490) will be locked to the medical benefit.

Minor updates will be made to the criteria for the following drugs:

- Abilify Maintena (J0401)
- Perseris (J2798)
- Trogarzo (J3590)
- Nucala (J2182)
- Reblozyl (J0896)
- Aranesp (J0881)
- Epogen (J0885)
- Procrit (J0885)
- Retacrit (Q5106)
- Lemtrada (J0202)
- Remodulin (J3285)
- Veletri (J1325)



MassHealth Unified Formulary: pharmacy drug updates

Tufts Health Together – MassHealth MCO Plan and ACPPs

MassHealth recently announced the following updates to the MassHealth Unified Formulary, effective July 31, 2023. The table below outlines these changes, which include pharmacy products being added to the MassHealth Drug List, as well as new and updated prior authorization programs.

As we noted previously, Tufts Health Together-MassHealth MCO Plan and ACPPs, in conjunction with the other managed care organizations (MCOs) in the Commonwealth, began utilizing MassHealth’s Unified Formulary for pharmacy medications and select medical benefit drugs as of April 1, 2023. Consequently, the pharmacy coverage and criteria for Tufts Health Together mirror that of MassHealth.

Please keep in mind that updated coverage and criteria will be available on the MassHealth Drug List on or after the effective date.

<p>Therapeutic Class Tables Being Updated</p>	<ul style="list-style-type: none"> • Agents Not Otherwise Classified • Antibiotics and Anti-Infectives – Oral and Inhaled • Anticoagulants and Antiplatelet Agents • Anticonvulsants • Antidepressants • Antidiabetic Agents • Antipsychotics • Antiretroviral/HIV Therapy • Barbituates, Benzodiazepines, and Miscellaneous Anti-Anxiety Agents • Cardiovascular Agents • Cystic Fibrosis Agents • Diabetes Medical Supplies and Emergency Treatments • Gastrointestinal Drugs – Antidiarrheals, Constipation, and Miscellaneous Gastrointestinal Agents • Gastrointestinal Drugs – Histamine H2 Antagonists, Proton Pump Inhibitors, and Miscellaneous Gastroesophageal Reflux Agents • Headache Therapy
---	---

	<ul style="list-style-type: none"> • Immunological Agents • Lipid-Lowering Agents • Multiple Myeloma Agents • Multiple Sclerosis Agents • Neuromuscular Blocker Agents • Oncology Agents • Pediatric Behavioral Health • Respiratory Agents – Oral • Urinary Dysfunction Agents
Drugs Moving to Prior Authorized Required	Neulasta Onpro, Oxybutynin solution
Drugs Being Added to the Brand-Over-Generic List (BOGL)	Pylera, Zegerid capsule, Zegerid suspension
Drugs Being Removed from the BOGL	Gilenya
Quantity Limit Updates	<ul style="list-style-type: none"> • Covered COVID-19 antigen self-tests (BinaxNow, CareStart, CVS COVID-19 At—Home Test, FlowFlex, Genabio, IHealth, Inteliswab, On-Go, QuickVue) will have a quantity limit of 2 kits per 28 days • Ozempic quantity limit updated to 1 pen per 28 days • Ezallor quantity limit updated to 1 capsule per day
Drugs Being Locked to the Medical Benefit (Utilization Management Restrictions May Apply) And Are Not Depicted Here)	Aponvie, Darzalex Faspro, Durysta, Elahere, Lamzede, Lunsumio, Miostat, Mitochol-E, Nexobrid, Pedmark, Sarclisa, Trodelvy, Veklury, Vivimusta
Drugs Being Removed from Medical Benefit Lock	Crysvita (PA), Spravato (PA, PBHMI)
Drugs Being Added to the MassHealth Drug List (Utilization Management Restrictions May Apply)	Aspruzyo (PA, QL), Atorvaliq (PA), Briumvi (PA), Furoscix (PA), Konvomep (PA), Oxybutynin 2.5 mg tablet (PA, QL), Phospholine iodide, Pradaxa pellets (PA), Rezlidhia (PA, QL), Skyclarys (PA, QL), Sunlenca (PA), Trikafta granules (PA, QL)
Drugs Being Removed from MHDL Due to Product Discontinuation	Bydureon, Brand Glucotrol IR tablet, Cafergot, DHE 45, Helidac, nizatidine solution, metoclopramide ODT, Zantac injection



Pharmacy coverage changes

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

Updates to Existing Prior Authorization Programs

Drug	Plan	Eff. date	Policy & Additional Information
Pretomanid	Tufts Health RITogether	Aug. 1, 2023	Pretomanid
Sirturo	Tufts Health RITogether	Aug. 1, 2023	Sirturo (bedaquiline)

Takhzyro	Tufts Health RITogether, Tufts Health Plan Commercial, Tufts Health Direct, Harvard Pilgrim Health Care Commercial	Aug. 1, 2023	Pharmacy Medical Necessity Guidelines: Hereditary Angioedema Medications (RITogether ; and Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Direct)
----------	--	--------------	---



Billing updates for Tufts Health Plan providers

Tufts Health Plan products

Point32Health would like to keep our providers apprised of a number of updates and reminders related to billing practices for various services and Tufts Health Plan products:

Billing for behavioral health crisis evaluation: Tufts Health Together

[As we communicated previously](#), MassHealth now requires acute hospitals to bill directly for behavioral health crisis evaluation for Tufts Health Together members who present in the ED. Hospitals may choose to subcontract out for these services; however, they must submit the claims using per diem code S9485.

In addition, we would like to remind providers that neglecting to include the admission type on these claims will cause the claim to deny. To ensure claims are paid properly, please be sure to include one of the following admission types:

- Urgent
- Emergent
- Trauma Center

For more information, please refer to the [Outpatient Behavioral Health \(Mental Health & Substance Use Disorder\) Professional Payment Policy](#).

Billing for inpatient hospital stays: all Tufts Health Plan products

As a reminder, when billing for inpatient hospital stays, providers should make sure the number of units and dates are the same on the claim. If they do not match, the claim will be denied and providers will need to submit a corrected claim. Please note that, in alignment with guidance from the Centers for Medicare and Medicaid Services (CMS), providers should not be billing room and board for the discharge date.

Use the most up-to-date CMS-1500 claims form: all Tufts Health Plan products

Please use the most updated [CMS-1500 form](#) when submitting claims for members of any of our Tufts Health Plan products. Previous versions of the form will no longer be accepted, and claims will be denied. If you still have stock of the old forms, please discard them and order the current form via [WB Mason](#). ▲

Code update for injectable drugs

Tufts Health Plan MCO/ACO | Tufts Health Unify

Effective for dates of service beginning Aug. 1, 2023, J-codes for injectable drugs will deny when submitted for Tufts Health Unify and Tufts Health Plan MCO/ACO claims without an accompanying quantity, appropriate National Drug Code (NDC) number, and unit of measurement code.

This is in accordance with criteria from the Executive Office of Health and Human Services and consistent with industry standard correct coding. ▲

***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.**

Audrey Kleinberg, Director, Provider Relations & Communications

Anmarie Dadoly, Senior Manager, Provider Communications

Joseph O’Riordan, Jesse Salvato, Stephen Wong, Writers

Kristin Edmonston, Production Coordinator

Kristina Ciceleva, Graphic Designer

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.

Point32Health