

## Update on Behavioral Health insourcing

### Harvard Pilgrim Health Care commercial

We want to provide you with an update on our plans to insource our behavioral health program for Harvard Pilgrim commercial members.

In June, we notified providers that we moved back our planned insourcing of behavioral health to allow us to focus on system restoration following the cybersecurity incident. Now that our systems are online and [we are returning to business as usual](#), we will insource our behavioral health program for Harvard Pilgrim commercial members effective Nov. 1, 2023.

Harvard Pilgrim Health Care Medicare Advantage Stride<sup>SM</sup> (HMO)/(HMO-POS) will not be insourcing and will continue to be serviced by Optum Behavioral Health.

Starting Nov 1st, Harvard Pilgrim contracted providers should bill Harvard Pilgrim directly for behavioral health services for commercial members, rather than billing Optum/UBH. (Please note: If a commercial member is admitted at the time of insourcing, spanning prior to and beyond Nov 1st, the provider will continue to work with Optum for utilization management and should bill Optum directly for payment of the full admission episode.)

While additional information will be shared in the upcoming weeks, please keep the following in mind related to behavioral health insourcing:

- **Expanding our network** — We are committed to expanding our behavioral health network. If you are a behavioral health provider and received a contracting packet or a contract amendment from us, we encourage you to complete any remaining steps as soon as possible. If you have any questions about your contracting packet or you didn't receive a packet and would like to be part of our Harvard Pilgrim behavioral health network, please contact us by email at [AHCBehavioralHealth@point32health.org](mailto:AHCBehavioralHealth@point32health.org) or by phone at 617-972-9400 x 43145.
- **Contract effective date** — If you already signed a contract to provide care for Harvard Pilgrim commercial members, the effective date of your contract is Nov. 1, 2023. Point32Health fee schedules were recently mailed to contracted behavioral health providers; if you did not receive one or have questions, please contact [AHCBehavioralHealth@point32health.org](mailto:AHCBehavioralHealth@point32health.org).
- **Commercial migration & behavioral health** — We continue to move commercial Tufts Health Plan members to Harvard Pilgrim plans upon their account renewal date (for more, see our [Integration FAQ for providers](#)).
  - **If your patient's insurance change occurs before Nov. 1 and you participate in Optum/UBH:** Follow Optum/UBH behavioral health policies and bill Optum/UBH for services.
  - **If your patient's insurance change occurs before Nov. 1 and you don't participate in Optum/UBH:** Please contact Optum/UBH to receive a single case agreement at 888-777-4742. If you already have a single case agreement in place with Optum, but it was slated to end as of June 30, 2023 it has been updated to be valid through Oct. 31, 2023.
  - **If your patient's insurance change occurs after Nov. 1:** Bill Harvard Pilgrim directly. Members will utilize the Harvard Pilgrim behavioral health network, and Harvard Pilgrim/Point32Health policies, fee schedules, and processes apply.

- **Open authorizations** — When insourcing occurs on Nov. 1, 2023, open authorizations obtained from Optum/UBH will be honored through their expiration date.
- **Behavioral health payment policy** — The Point32Health [Behavioral Health and Substance Use Disorder Payment Policy](#) currently applies for Tufts Health Plan, but will apply for Harvard Pilgrim commercial plans as of Nov. 1, 2023.

Please look to future issues of the newsletter for more information on behavioral health. The newsletter is [posted online](#) and you can [register to receive it directly to your inbox](#). ▲

## Billing reminder for pelvic floor therapy

### All products

As a reminder, Point32Health provides coverage for treatment of pelvic floor disorders. Members are eligible to receive clinical evaluation and physical therapy (PT) as outlined in their plan benefits. When billing for PT for pelvic floor disorders, providers should use diagnosis code 090.89.

Prior authorization is not required for Harvard Pilgrim Health Care members in need of pelvic floor physical therapy. For Tufts Health Plan members, prior authorization requirements vary. Refer to the applicable [Medical Necessity Guidelines](#) for details.

Additional billing information can be found within the [Harvard Pilgrim Health Care Physical, Occupational, and Speech Therapy Payment Policy](#) as well as the Tufts Health Plan [Commercial](#), [Medicare Preferred and Senior Care Options \(SCO\)](#), and [Tufts Health Plan Public Plans](#) Physical, Occupational, and Speech Therapy Professional payment policies. ▲

## You're invited: Join us for a personalized claims consultation in Canton

### All products

As part of our ongoing commitment to collaborating with our valued provider partners, and building on the success of our July claims consultation, we are hosting another claims consultation in October. 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, Oct. 16 from 10 a.m.– 2 p.m. at the Point32Health headquarters located at 1 Wellness Way, Canton, MA 02021. Appointments will be scheduled in 30-minute increments and registration is required — walk-ins unfortunately cannot be accommodated.

Refreshments 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](mailto:Claims_Consultations@Point32Health.org) by Oct. 2 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 Oct. 16)

We hope to see you there!

Please note that 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. ▲

## Update: Prior authorization on insulin pumps and home infusion

### Harvard Pilgrim Health Care Commercial

As part of ongoing efforts to review prior authorization requirements and reduce administrative burden, Harvard Pilgrim Health Care is removing prior authorization requirements for insulin infusion pumps and home infusion administration for commercial members. This change also aligns our Harvard Pilgrim commercial plan with Tufts Health Plan, which does not require prior authorization for these services.

For dates of service on or after Aug. 1, the following codes will no longer require prior authorization:

- E0784 (external ambulatory infusion pump, insulin)
- E0787 (external ambulatory infusion pump, insulin, dosage rate adjustment using therapeutic continuous glucose sensing)
- 99601 (home infusion/visit, 2 hours)
- 99602 (home infusion, each additional hour)

Previously, for Harvard Pilgrim commercial members, while insulin pumps that work independently and do not communicate with a continuous glucose monitor (CGM) did not require authorization, those that do work in conjunction with a CGM did require authorization. Going forward, prior authorization will not be required for any insulin infusion pumps, regardless of whether they work independently or communicate with a CGM.

External insulin infusion pumps consist of computer-controlled pumps that deliver insulin under the skin and can work independently or in conjunction with a continuous glucose monitoring device. For more information, please refer to our updated [Continuous Glucose Monitoring and Diabetes Management Devices Medical Necessity Guidelines](#).

Home infusion therapy involves the intravenous or subcutaneous administration of drugs or biologicals to a member at home. For more information, please refer to the updated [Home Health Care Services Medical Necessity Guidelines](#). ▲

## Join us for a provider training

### All products

Point32Health's August webinars offer providers the opportunity to ask questions and share feedback while gaining the latest information on products, processes, systems and more. Registering is easy. Just click the links below!

### Point32Heath

#### Behavioral Health Insourcing Updates

- [Friday, Aug. 4 from 9–10 a.m. ET](#)
- [Thursday, Aug. 10, 2023 2–3 p.m. ET](#)
- [Monday, Aug. 14 from noon–1 p.m. ET](#)
- [Tuesday, Aug. 22 from 1–2 p.m. ET](#)
- [Wednesday, Aug. 30 from 9–10 a.m. ET](#)

## Navigating the Provider Websites

- [Wednesday, Aug. 2 from 11 a.m. to noon ET](#)

## Harvard Pilgrim Health Care

### HPHConnect orientation for Behavioral Health Providers

- [Tuesday, Aug. 8 from 1–2 p.m. ET](#)
- [Thursday, Aug. 24 from 11 a.m.–noon ET](#)

### Provider Payment Dispute Overview

- [Tuesday, Aug. 29 from 10–11 a.m.](#)

## Tufts Health Plan

### Provider Payment Dispute Overview

- [Wednesday, Aug. 6 from 10–11 a.m. ET](#)

## 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:

- [Tuesday, Aug. 15 from 12:30-1 p.m. ET](#)
- [Thursday, Aug. 24 from 4:30-5 p.m. ET](#)



# 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. ▲

## Rhode Island professional fee schedule updates

### Tufts Health RITogether

Beginning Oct. 1, 2023, Point32Health will be updating the Rhode Island Medicaid professional fee schedule we use to determine claims reimbursement for services rendered to Tufts Health RITogether members.

Updates to the Rhode Island Medicaid professional fee schedule will occur through a phased approach over several months, and will initially involve adding any previously unmaintained codes to the fee schedule to ensure that it is up to date with current coding. Following these updates, we will maintain the fee schedule with monthly updates going forward, so as to remain aligned with the Rhode Island state coding and reimbursement guidelines.

We will provide updates in future issues of *Insights and Updates for Providers* as we continue the work of updating Rhode Island fee schedules over the coming months. ▲

## Behavioral Health and substance use disorder tools and resources

### Tufts Health RITogether

Tufts Health RITogether providers have access to several behavioral health and substance use disorder resources on our website. You'll find information on behavioral health coverage, prior authorization and notification for behavioral health services, and more on the [Tufts Health RITogether behavioral health webpage](#). You can also find important resources such as our Provider Manual, screening tools, forms, payment policies, medical necessity guidelines in our [Resource Center](#).

### Provider Manual

The [Tufts Health Public Plan Provider Manual](#) includes information on our policies, procedures, and more. You'll find more information on topics including:

- PCP responsibilities and Rhode Island provider responsibilities in the [Providers](#) section.
- Short-term care coordination and complex care management services in the [Care Management](#) section.
- Medical necessity and clinical criteria, patient care coordination, care management, and RI specific behavioral health services in the [Behavioral Health](#) section. ▲

## Reminder: Public Plans initial paper claims address change

### Tufts Health Public Plans

As a reminder, the address for Tufts Health Public Plans initial paper claim submissions changed on August 1, 2023. Initial paper claims for both Massachusetts and Rhode Island Public Plans that were previously sent to P.O. Box addresses in Foothill Ranch, CA, should now be sent to the following address:

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

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

The [Claims Requirements, Coordination of Benefits and Dispute Guidelines](#) chapter in the Tufts Public Plans Provider Manual has been updated to reflect this change in address.

In addition, for quicker payment, fewer rejections and ease of processing, we encourage providers to send their claims electronically to Tufts Health Plan using the direct EDI claim submission, clearinghouse claim submission, or online claim submission options outlined on Tufts Health Plan's [Electronic Services](#) webpage. ▲

## Cell and gene therapy monitoring

### All products

Cell and gene therapy offer a transformative approach in improving function and fighting disease. While an innovation in care, the industry is grappling with uncertainties regarding the long-term clinical benefits and high costs of these treatments.

Long-term monitoring of cell and gene therapies is important in ensuring efficacy and durability of response. For dates of service beginning Oct. 1, 2023, providers are required to comply with long-term monitoring requirements including requests for follow-up clinical data and/or attestation of clinical outcome.

This requirement is outlined in Harvard Pilgrim Health Care's [Commercial](#) and [Stride<sup>SM</sup> \(HMO\)/\(HMO-POS\)](#) Provider Manuals. We've also updated the Providers sections of the [Tufts Health Plan Provider Manuals](#). ▲

## Expanded coverage of Community Behavioral Health Centers

### Tufts Health Plan Commercial

Tufts Health Plan commercial members now have access to two programs provided by Community Behavioral Health Centers (CBHCs): Mobile Crisis Intervention (MCI) and Community Crisis Stabilization (CCS). Previously, these services were covered for members of other products (including Tufts Health Direct, Tufts Health Together, Tufts Health Plan Senior Care Options, and Tufts Health Unify); they are now available for commercial members as of June 22, 2023.

These services do not require prior authorization. However, [notification of admission to a CCS](#) within a CBHC must be provided within 72 hours of the admission. You can provide notification through the [secure Tufts Health Plan provider portal](#) or by contacting your Behavioral Health utilization manager.

Detailed billing requirements for MCI services (H2011) and CCS services (S9485) can be found in the [Behavioral Health and Substance Use Disorder Payment Policy](#).

Earlier this year, we shared with our providers that a network of CBHCs had been designated across Massachusetts to provide adults and youth with 24/7 access to community-based and mobile crisis intervention services. The aim of the program is to increase access to urgent and outpatient behavioral health care and promote community-based treatment options rather than emergency department visits for behavioral crisis intervention.

The MCI and CCS programs serve adults and youths. Through the MCI program, members have access to 24/7 site- and community-based mobile crisis assessment, intervention, and stabilization. The CCS program offers 24/7, staff-secure crisis care, providing safe, short-term, medically necessary treatment in a community-based environment that is voluntary and less restrictive than inpatient psychiatric hospitalization.

CBHC providers are encouraged to reach out to their assigned Provider Account Manager with questions, or contact the Provider Account Management team at [BHPAM@Point32Health.org](mailto:BHPAM@Point32Health.org).

**Editor's note:** This article was updated on Aug. 7, 2023 to clarify that these services are also available for members of other products. ▲

# Billing for specialized Community Support Program services

Tufts Health Plan SCO | Tufts Health Together | Tufts Health Unify

As part of MassHealth's recent expansion of Community Support Program (CSP) Services, members of the Tufts Health Plan Together, Tufts Health Unify, and Tufts Health Plan Senior Care Options products have access to services to assist with the health-related social needs of individuals who are experiencing housing instability, homelessness, or justice involvement.

The following provides an overview of the programs, as well as important information on billing and providing notification, which is required for each of these programs.

## Community Support Program for Homeless Individuals (CSP-HI)

This program is available to homeless members who frequently utilize MassHealth's acute care services. CSP-HI provides assistance to members before, during, and after transitioning into housing. Coverage is effective for dates of service on or after April 1, 2023.

Notification to Tufts Health Plan is required and should be provided by [completing this form](#) and returning it by fax to the appropriate number listed at the top of the form.

When billing for these services, please ensure that you submit claims using HCPCS code H2016 (comprehensive community support services, per diem) with the modifier HK (specialized mental health programs for high-risk populations). In addition, the appropriate secondary diagnosis code must also be included to reflect the member's housing situation:

- Z59.00 – Homelessness, unspecified
- Z59.01 – Sheltered homelessness
- Z59.02 – Unsheltered homelessness

## Community Support Program Tenancy Preservation Program (CSP-TPP)

This program serves members who are at risk of homelessness and eviction due to disability-related behavior. Through CSP-TPP, members are connected to community-based services that will help them address the causes of the behavior that led to lease violations. Coverage is effective for dates of service on or after April 1, 2023.

Notification to Tufts Health Plan is required and should be provided by [completing this form](#) and returning it by fax to the appropriate number listed at the top of the form.

When billing for CSP-TPP services, please ensure that you submit claims using code H2016 (comprehensive community support services, per diem) with the HE (mental health program) modifier. The secondary diagnosis code of Z59.811 (housing instability) must also be included.

## Community Support Program for Individuals with Justice Involvement (CSP-JI)

This program provides health care coordination and support for members with justice involvement including those who were previously detained or incarcerated in a correctional facility. Coverage was effective as of Sept. 1, 2022 for Tufts Health Together members. For Tufts Health Senior Care Options and Tufts Health Unify members, coverage was effective as of Jan. 1, 2023.

To provide notification to Tufts Health Plan for the CSP-JI program, please complete the [CSP-JI Notification form](#) and return it by fax to the appropriate number listed at the top of the form.

When billing for these services, please ensure that you submit claims using the code H2016 (comprehensive community support services, per diem) and HH modifier (integrated mental health/substance abuse program).

Additional program information and details can be found at:

- [Community Support Program for Homeless Individuals \(CSP-HI\)](#)
- [Community Support Program Tenancy Preservation Program \(CSP-TPP\)](#)
- [Community Support Program for Individuals with Justice Involvement \(CSP-JI\)](#)
- [Community Support Programs \(CSP\)](#)

**Editor's note:** This article was updated on 8/17/23 to reflect housing instability code change from Z59.81 to Z59.811. On Nov. 14, 2023, the article was further updated to remove a line saying the secondary diagnosis Z code is required for Community Support Program for Individuals with Justice Involvement, as this secondary diagnosis code is not required for the CSP-JI service. ▲

## Claims filing requirement for court-ordered service

### Tufts Health RITogether

For RITogether members, Tufts Health Plan will not require prior authorization for claims for court-ordered mental health/substance abuse services, for dates of service beginning July 1, 2023.

To ensure appropriate reimbursement for court-ordered mental health/substance use services, it's necessary to bill with an H9 modifier to designate that the service is court ordered. In some cases, providers could be required to present the court order to avoid post-claim payment retractions.

For further details, refer to the [Inpatient and Intermediate/Diversions Behavioral Health \(Mental Health & Substance Use Disorder\) Facility Payment Policy](#) and the [Outpatient Behavioral Health \(Mental Health & Substance Use Disorder\) Professional Payment Policy](#). ▲

## Reminder: P.O. Box changes for referral forms

### Tufts Health Plan Commercial | Tufts Health Plan SCO | Tufts Medicare Preferred HMO | US Family Health Plan (USFHP)

Tufts Health Plan encourages electronic submission of referrals through our secure portal or via electronic trading partners for greater convenience and a real-time receipt of a referral number.

Alternatively, providers may submit outpatient referrals using paper referral forms. As communicated previously, mailing addresses for referral forms have been updated. New P.O. Box mailing addresses are listed below. To order referral forms, fax a completed W.B. Mason Provider Forms Requisition to W.B. Mason at 800-738-3272 or email [tuftshealthplan@wbmason.com](mailto:tuftshealthplan@wbmason.com)

Tufts Health Plan Commercial	Tufts Health Plan P.O. Box 178 Canton, MA 02021-0178
Tufts Medicare Preferred HMO	Tufts Health Plan P.O. Box 518 Canton, MA 02021-0518
Tufts Health Plan Senior Care Options	Tufts Health Plan P.O. Box 518 Canton, MA 02021-0518
US Family Health Plan	US Family Health Plan P.O. Box 495 Canton, MA 02021





# Billing Medicare members for non-covered services

## Harvard Pilgrim Stride (HMO) Medicare Advantage | Tufts Health Plan Senior Products

We would like to provide some reminders regarding the steps a contracted provider must take prior to billing members of our Harvard Pilgrim Health Care and Tufts Health Plan Medicare Advantage plans/Senior Products for non-covered services.

Members may come to their provider seeking a non-covered service, or you as a provider may determine that it is appropriate to provide a service or treatment that isn't normally covered by the member's Medicare Advantage/Senior Products plan. Please note that you cannot directly bill the member for that service unless the member has been formally advised by the plan that the service will not be covered. In order to bill the member, you must first request a plan review by submitting an organization determination request to the plan. If the plan makes a non-coverage determination and the member wants to proceed with treatment, you must obtain the member's informed written consent, which must include the specified non-covered service as well as the specific charge to the member.

### Submitting an organization determination

Providers sometimes inform their patients that a service is non-covered and offer to provide the service in exchange for a cash payment without seeking an organization determination in advance from Harvard Pilgrim or Tufts Health Plan. This is an inappropriate billing practice and is not allowed by Point32Health or Medicare.

Before providing a non-covered service for a Medicare Advantage/Senior Products member and accepting payment for the service, providers are required to request an organization determination on the member's behalf or advise the member to request such a determination. After an organization determination is requested, the provider and member will be notified of the decision. Both a denial notice from the plan, as well as valid informed consent from the member, must be received before the provider can bill the member.

You can submit an organization determination request for medical services in the following ways:

#### Harvard Pilgrim:

- Phone: 1-888-609-0692 (TTY: 711)
- Fax: 1-866-874-0857
- Mail: Harvard Pilgrim Health Care  
Attn: Stride Utilization Management  
1 Wellness Way Canton, MA 02021

#### Tufts Health Plan:

- By fax to Precertification Operations: 617-972-9409

The appropriate course of action before prescribing a non-covered **prescription drug** is to submit a **coverage determination request** to the plan, which can be done via the following methods:

#### Harvard Pilgrim:

- Phone: 1-888-609-0692 (TTY: 711)
- Fax: 617-673-0956
- Mail: Harvard Pilgrim Health Care  
Attn: Pharmacy Utilization Management  
1 Wellness Way Canton, MA 02021
- Online via PromptPA at <https://point32health.promptpa.com>

## Tufts Health Plan:

- Phone: 1-800-701-9000 (TTY: 711)
- By filling out a [Request for Medicare Prescription Drug Coverage Determination form](#) and sending it by fax to 617-673-0956 or by mail to:

Tufts Health Plan Medicare Preferred  
Attn: Pharmacy Utilization Management Department  
1 Wellness Way Canton, MA 02021-1166

- Online via PromptPA at <https://point32health.promptpa.com>

If the plan denies coverage, the provider must obtain the member's informed consent before prescribing the drug.

## Reminder: ABNs not valid for Medicare Advantage members

As a reminder, the process of submitting an Advance Beneficiary Notice of Non-coverage (ABN) is applicable for Original Medicare only, and is not considered a valid form of denial notice for a Harvard Pilgrim or Tufts Health Plan Medicare Advantage/Senior Products member.

## More information

For further details and instructions related to the correct process for billing members for non-covered services, please refer to [Tufts Health Plan's Senior Products Provider Manual](#) and the [Billing Members](#) and [Provider Roles and Responsibilities](#) policies in the Harvard Pilgrim Stride<sup>SM</sup> (HMO)(HMO-POS) Medicare Advantage Provider Manual. ▲

# Point32Health Medical Necessity Guideline updates

## All products

## Updates to Medical Necessity Guidelines (MNG)

MNG Title	Products Affected	Effective Date	Summary
<a href="#">New Technology Assessment and Non-Covered Services</a>	Harvard Pilgrim commercial	Oct. 1, 2023	List of noncovered/investigational services will be updated to reflect that codes Q2026 (Injection, Radiesse, 0.1 ml) and C1878 (Material for vocal cord medialization, synthetic [implantable]) will be considered investigational and no longer covered, except when billed with the ICD-10 diagnosis codes J38.01 or J38.02.
<a href="#">Gender Affirming Services</a> (Harvard Pilgrim) <a href="#">Gender Affirming Services</a> (Tufts Health Plan)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Oct. 1, 2023	Criteria changes to align with updates to World Professional Association for Transgender Health (WPATH) standards of care. Codes 57295, 57296, and 57426 will no longer require prior authorization. Prior authorization will be required for the following CPT codes: 55899, 58999, 14301, 14302, 15773,

MNG Title	Products Affected	Effective Date	Summary
			15774, 15877, 15878, 15879, 56620, 53410, 54300, 56810. Codes 15824, 15826, and 15828 will no longer be covered.
<a href="#">Genetic Testing Prenatal Diagnosis Carrier Screening</a>	Tufts Health Plan commercial	Oct. 1, 2023	Criteria updates related to targeted carrier screening and expanded carrier screening.
<a href="#">Surgical Treatments for Lymphedema and Lipedema</a> (Harvard Pilgrim) <a href="#">Surgical Treatments for Lymphedema and Lipedema</a> (Tufts Health Plan)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Oct. 1, 2023	Bioimpedance spectroscopy will no longer be covered as an option to diagnose lymphedema.
<a href="#">Respite Care for Tufts Health Unify</a>	Tufts Health Unify	Oct. 1, 2023	New MNG outlining criteria for respite care services, in alignment with the criteria from MassHealth’s <a href="#">“130 CMR 630.00: Home- and community-based services waiver services.”</a> Prior authorization will be required for the codes H0045, T1005, S5150, and S5151.
<a href="#">Lumbar Artificial Disc Replacement – Single level (NIA)</a>	Harvard Pilgrim Health Care commercial, Harvard Pilgrim Medicare Advantage	Sept. 1, 2023	Will cover 22857, 22862, and 22865 with prior authorization via NIA. Notice provided in April newsletter, and implementation was delayed per June newsletter notification.
<a href="#">Lumbar Artificial Disc Replacement – Multiple levels (NIA)</a>	Harvard Pilgrim Health Care commercial, Harvard Pilgrim Medicare Advantage	Sept. 1, 2023	Will cover 22860, 0164T, and 0165T with prior authorization via NIA. Notice provided in April newsletter, and implementation was delayed per June newsletter notification.
<a href="#">Genetic and Molecular Diagnostic Testing</a>	Tufts Health Plan commercial	Aug. 1, 2023	Adding coverage criteria for liquid biopsy testing (testing of circulating tumor DNA).
<a href="#">Guardant360 CDx</a>	Tufts Health Plan commercial	Aug. 1, 2023	Guardant360 CDx testing is now covered in the initial diagnostic setting for patients with breast cancer.
<a href="#">Continuous Glucose Monitoring and Diabetes Management Devices for Tufts Health Together</a>	Tufts Health Together	Aug. 1, 2023	MNG name changed from Continuous Subcutaneous Insulin Delivery Devices for Tufts Health Together to Continuous Glucose Monitoring and Diabetes Management Devices for Tufts Health Together.

MNG Title	Products Affected	Effective Date	Summary
			In alignment with updates from MassHealth, criteria added for continuous glucose monitoring devices.
<a href="#">Genetic and Molecular Diagnostic Testing for Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health Unify</a>	Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health Unify	Aug. 1, 2023	Prior authorization no longer required for CPT codes 81267 and 81268.
<a href="#">Tumor Treating Fields</a> (Harvard Pilgrim) <a href="#">Tumor Treating Fields</a> (Tufts Health Plan)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	Added the following as a covered indication: adult member with unresectable, locally advanced or metastatic, malignant pleural mesothelioma to be used concurrently with pemetrexed and platinum-based chemotherapy.
<a href="#">Stereotactic Radiosurgery and Stereotactic Body Radiotherapy</a> (Harvard Pilgrim) <a href="#">Stereotactic Radiosurgery and Stereotactic Body Radiotherapy</a> (Tufts Health Plan)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	The following indication will now be covered: Noninvasive cardiac radioablation using stereotactic radiotherapy for the treatment of ventricular tachycardia.
<a href="#">Proton Beam Therapy</a> (Harvard Pilgrim) <a href="#">Proton Beam Therapy</a> (Tufts Health Plan)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	MNG updated to clarify that simultaneous use of proton beam therapy and intensity-modulated radiation therapy is considered non-covered/investigational for any diagnosis. In addition, the following is now covered: melanoma of the uveal tract (iris, choroid, or ciliary body) with no evidence of metastasis or extra-scleral extension.
<a href="#">Intensity Modulated Radiation Therapy</a> (Harvard Pilgrim) <a href="#">Intensity Modulated Radiation Therapy</a> (Tufts Health Plan)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	MNG updated to clarify that simultaneous use of proton beam therapy and intensity-modulated radiation therapy is considered non-covered/investigational for any diagnosis.
<a href="#">UVB Home Units for Skin Disease</a> (Harvard Pilgrim) <a href="#">UVB Home Units for Skin Disease</a> (Tufts Health Plan)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	Prior authorization no longer required for codes E0691, E0692, E0693, and E0694.

MNG Title	Products Affected	Effective Date	Summary
<p>Continuous Passive Motion Device – Extension Beyond 21 Days (Harvard Pilgrim)</p> <p>Continuous Paszrive Motion Device – Extension Beyond 21 Days (Tufts Health Plan)</p>	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	Prior authorization no longer required for codes E0935 and E0936, and the Continuous Passive Motion Device – Extension Beyond 21 Days MNGs will be retired.
<p><a href="#">COVID-19 Monoclonal Antibody Therapy</a> (Harvard Pilgrim)</p> <p><a href="#">COVID-19 Monoclonal Antibody Therapy</a> (Tufts Health Plan)</p>	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	Criteria on the MNG updated to reflect current emergency use authorizations from the FDA.
<p><a href="#">Implantable Neurostimulators</a> (Harvard Pilgrim)</p> <p><a href="#">Implantable Neurostimulators</a> (Tufts Health Plan)</p>	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Aug. 1, 2023	The following codes no longer require prior authorization: 95961, 95970, 95971, 95972, 95980, 95981, and 95982.
<p><a href="#">Continuous Glucose Monitoring and Diabetes Management Devices</a> (Harvard Pilgrim)</p> <p><a href="#">Continuous Glucose Monitoring and Diabetes Management Devices</a> (Tufts Health Plan)</p>	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Public Plans (with the exception of Tufts Health Together)	Aug. 1, 2023	<p>Added clarifying language around CGM access via DME providers or pharmacy.</p> <p>Prior authorization no longer requires for CPT code 95249.</p>
<p><a href="#">Elahere OncoHealth</a> (Harvard Pilgrim Commercial)</p>	Harvard Pilgrim commercial	Aug. 1, 2023	Removed step through bevacizumab when used to treat epithelial ovarian, fallopian tube, or primary peritoneal cancer. Elahere will now be a first line treatment.
<p><a href="#">Syfovre</a> (Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether)</p> <p><a href="#">Syfovre</a> (Tufts Medicare Preferred, Tufts Health Plan SCO, Tufts Health Unify)</p> <p><a href="#">Syfovre</a> (Harvard Pilgrim commercial)</p> <p><a href="#">Syfovre</a> (Harvard Pilgrim Stride)</p>	Harvard Pilgrim Stride <sup>SM</sup> (HMO) (HMO-POS) Medicare Advantage, Harvard Pilgrim Commercial, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Health Plan Senior Products, Tufts Health Unify	Aug. 1, 2023	Prior authorization now required for Syfovre (HCPCS code C9151), approved by the FDA in February 2023 for Treatment of geographic atrophy (GA) secondary to age-related macular degeneration.
<p><a href="#">Leqembi</a> (Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Health Together)</p>	Harvard Pilgrim Stride <sup>SM</sup> (HMO) (HMO-POS) Medicare Advantage, Harvard Pilgrim Commercial, Tufts Health Plan commercial, Tufts	July 11, 2023	Prior authorization now required for Leqembi (HCPCS code J3490), approved by the FDA in July 2023 for the treatment of Alzheimer’s disease.

MNG Title	Products Affected	Effective Date	Summary
<a href="#">Legembi</a> (Tufts Medicare Preferred, Tufts Health Plan SCO, Tufts Health Unify) <a href="#">Legembi</a> (Harvard Pilgrim commercial) <a href="#">Legembi</a> (Harvard Pilgrim Stride)	Health Together, Tufts Health Direct, Tufts Health RITogether, Tufts Health Plan Senior Products, Tufts Health Unify		



## Update on authorization requests for home care and hospice

### Harvard Pilgrim Health Care Commercial

We want to make providers aware of a change related to requests to extend an existing authorization for home care and hospice services for Harvard Pilgrim Health Care commercial members. Currently, if an extension request is approved, the authorization is updated with additional units and the end date is extended.

Effective for dates of service beginning Oct. 1, 2023, providers must request a new authorization for services that extend beyond the end date of the existing authorization. Each approved authorization for the patient will have its own authorization number.

The existing criteria for hospice and home care services is not affected. For more information, please refer to the [Home Health Care](#) and the [Hospice and Palliative Care Services](#) medical necessity guidelines. ▲

## Migration to 2023 InterQual criteria

### Harvard Pilgrim Health Care Commercial | Tufts Health Plan Commercial | Tufts Health Public Plans

As you are likely aware, Point32Health utilizes InterQual criteria for clinical authorization review for a number of services for our Harvard Pilgrim commercial, Tufts Health Plan commercial, and Tufts Health Public Plans products.

Please note that for the Medical Necessity Guidelines listed below, we will be adopting 2023 InterQual SmartSheets to replace the previous versions currently in use:

- Bariatric Surgery
- Blepharoplasty, Upper/Lower Eyelid and Brown and/or Eyelid Ptosis Repair
- Behavioral Health: Neuropsychological and Developmental Testing
- Psychological testing, Minnesota Multiphasic Personality Inventory-Adolescent® (MMPI-A®)
- Psychological testing, Minnesota Multiphasic Personality Inventory-2® (MMPI-2®)
- Psychological testing, Millon® Adolescent Clinical Inventory (MACI®)
- Psychological testing, Personality Assessment Inventory™ (PAI®)
- Psychological testing, unspecified symptom validity test (SVT)
- Psychological testing, unspecified test
- Requested Service: Repetitive Transcranial Magnetic Stimulation
- Transcranial Magnetic Stimulation (TMS)

- Requested Service: Repetitive Transcranial Magnetic Stimulation tape
- Bronchial Thermoplasty (HPHC Commercial only)
- Cholecystectomy
- Custom Fabricated Oral Appliances
- Endoscopic Sinus Surgeries
- Genetic and Molecular Diagnostic Testing (THP Commercial only)
- Home Health Care
- Hysterectomy
- Implantable Neurostimulators
- Inpatient Acute Level of Care (Medical/Surgical)
- Manual Wheelchairs
- Mobile Cardiac Outpatient Telemetry
- Orthognathic Surgery for Severe Oral-Maxillofacial Function Disorders
- Osteogenesis Stimulators
- Outpatient PT/OT/ST (THP Public Plans only)
- Positive Airway Pressure Devices for Sleep Apnea
- Positive Airway Pressure Devices for Tufts Health RITogether and Tufts Health Unify
- Procedures for the Treatment of Symptomatic Varicose Veins
- Reconstructive and Cosmetic Services
- Surgical Procedures for the Treatment of Obstructive Sleep Apnea
- Temporomandibular Joint Disorder Treatment
- Vertebroplasty and Kyphoplasty
- Video Capsule Endoscopy

For complete information, refer to the associated Medical Necessity Guidelines. ▲

## OncoHealth program update

### Harvard Pilgrim Health Care Commercial | Harvard Pilgrim Stride (HMO) Medicare Advantage

In a continued effort to reduce prior authorization burden on providers and members, effective Sept. 1, 2023 the following drugs will no longer require prior authorization through [OncoHealth](#) for oncology indications for members of Harvard Pilgrim Health Care's commercial and Medicare Advantage Stride<sup>SM</sup> (HMO)/(HMO-POS) plans.

Please be aware that this update is for the OncoHealth program and oncology indications only. Utilization management guidelines may apply for non-oncology indications; if any of these drugs have non-oncology indications, please refer to the Medical Necessity Guidelines on the [Harvard Pilgrim website](#) for a policy that may be in place for non-oncology indications.

J0893	Decitabine (Sun Pharma)	J9351	Topotecan Hcl	J9151	Daunorubicin Citrate Liposomal
J9181	Etoposide Phosphate	J9293	Mitoxantrone Hcl	J1559	Hizentra
J3489	Zoledronic Acid	J0207	Amifostine Crystalline	J1460	Immune Globulin, Gamma(Igg)
J0640	Leucovorin Calcium	J9030	BCG Live	J1575	Hyqvia
J9045	Carboplatin	J0594	Busulfan	J3590	Unclassified IVIG
J9267	Paclitaxel	J3590	Cablivi	J9218	Leuprolide Acetate
J9263	Oxaliplatin	J9050	Carmustine	J9219	Leuprolide Acetate/Lidocaine Hcl
J9000	Doxorubicin Hcl	J9065	Cladribine	J9230	Mechlorethamine Hcl
J9370	Vincristine Sulfate	J9027	Clofarabine	J9245	Melphalan Hcl
J1626	Granisetron Hcl	J9100	Cytarabine	J9245	Melphalan Hcl/Betadex Sulfobutyl Ether Sodium
J9280	Mitomycin	J9130	Dacarbazine	J2425	Palifermin
J9360	Vinblastine Sulfate	J9120	Dactinomycin	J2430	Pamidronate Disodium
J1190	Dexrazoxane Hcl	J9150	Daunorubicin Hcl	J9268	Pentostatin
J9040	Bleomycin Sulfate	J9160	Denileukin Diftitox	A9604	Samarium Sm 153 Lexidronam
J0894	Decitabine	J1260	Dolasetron Mesylate	J9320	Streptozocin
J9025	Azacitidine	J9178	Epirubicin Hcl	A9600	Strontium-89 Chloride
J9206	Irinotecan Hcl	J9200	Floxuridine	J9330	Temsirolimus
J9017	Arsenic Trioxide	J9185	Fludarabine Phosphate	J3316	Triptorelin Pamoate
J9201	Gemcitabine Hcl	J1560	Gamma Globulin > 10 Cc Inj	J2469	Palonosetron Hcl
J9171	Docetaxel	J9211	Idarubicin Hcl		
J9181	Etoposide	J9208	Ifosfamide		
J9060	Cisplatin	J1558	Xembify		



## Pharmacy coverage changes

Harvard Pilgrim and Tufts Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together

### Updates to Existing Prior Authorization Programs

Drug	Plan	Eff. date	Policy & Additional Information
Descovy	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct	Oct. 1, 2023	Descovy and HIV Pre-Exposure Prophylaxis (PrEP) ( <a href="#">Harvard Pilgrim</a> , <a href="#">Tufts Health Plan</a> )
Increlex	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health RITogether	Oct. 1, 2023	Increlex ( <a href="#">Harvard Pilgrim</a> , <a href="#">Tufts Health Plan</a> )



Drug	Plan	Eff. date	Policy & Additional Information
Lumryz, Xyrem, Xywav	Tufts Health RITogether	Oct. 1, 2023	<a href="#">Sodium Oxybate Products: Lumryz, Xyrem, and Xywav</a>
Non-Formulary Medications	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct	Oct. 1, 2023	Non-Formulary Exceptions ( <a href="#">Harvard Pilgrim</a> , <a href="#">Tufts Health Plan</a> )
Opioid Analgesics	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct	Oct. 1, 2023	Opioid Analgesics ( <a href="#">Harvard Pilgrim</a> , <a href="#">Tufts Health Plan</a> )
Opioids and Analgesics	Tufts Health Together	Oct. 2, 2023	Opioids and Analgesics*
RI Opioid Prescribing Limits	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct	Oct. 1, 2023	RI Opioid Prescribing Limits ( <a href="#">Harvard Pilgrim</a> , <a href="#">Tufts Health Plan</a> )

## Drug Status Changes

Drug	Plan	Eff. date	Policy & Additional Information
carglumic acid	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together	Oct. 1, 2023	Carglumic acid will be added to the specialty pharmacy program provided by Optum Specialty
Tavalisse (fostamatinib disodium hexahydrate)	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together	Oct. 1, 2023	Tavalisse will be added to the specialty pharmacy program provided by Optum Specialty

\* Tufts Health Plan maintains its own Opioids and Analgesics Pharmacy Medical Necessity Guidelines, which will be updated prior to Oct. 2, 2023 to align criteria with the MassHealth Unified criteria. Please refer to this policy for more information. ▲

## Prenatal vitamin coverage update

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

Effective for fill dates on or after Jan. 1, 2024, Harvard Pilgrim Health Care Commercial Plans, Tufts Health Plan Commercial Plans and Tufts Health Plan Direct will only cover prescription generic prenatal vitamins on our pharmacy formulary. Brand and generic over-the-counter prenatal vitamins will be excluded. All brand prescription prenatal vitamins will be moved to non-formulary.

Please refer to the formulary for information on prenatal vitamins. You can find formulary information on the pharmacy pages of the [Harvard Pilgrim Health Care](#) and [Tufts Health Plan](#) provider websites.

To request that a patient continue to receive coverage for a non-formulary prenatal vitamin, the prescribing provider must request an exception through the pharmacy review process under the [Pharmacy Medical Necessity Guidelines for Non-Formulary Exceptions policy](#). (You can find information and forms/resources to guide you in requesting an exception on Tufts Health Plan's [Utilization Management webpage](#).) ▲

## Generic inhalers coverage update

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

Effective Oct. 1, 2023, the following generic inhaler products will not be covered in the formularies for Harvard Pilgrim Health Care commercial, Tufts Health Plan commercial and Tufts Health Direct. Alternative NDCs for the same drug, and similar agents, are covered on our formularies.

Product ID (NDC)	Product Label Name	Alternative Covered Agent(s)
66993013597	fluticasone furoate-vilanterol inhalation 100-25	Breo Ellipta Inhalation
66993013697	fluticasone furoate-vilanterol inhalation 200-25	Breo Ellipta Inhalation
66993007896	fluticasone propionate HFA 44mcg	<ul style="list-style-type: none"> <li>• Arnuity Ellipta</li> <li>• Qvar Redihaler</li> <li>• Pulmicort Flexhaler</li> <li>• Flovent HFA*</li> </ul>
66993007996	fluticasone propionate HFA 110mcg	<ul style="list-style-type: none"> <li>• Arnuity Ellipta</li> <li>• Qvar Redihaler</li> <li>• Pulmicort Flexhaler</li> <li>• Flovent HFA*</li> </ul>
66993008096	fluticasone propionate HFA 220mcg	<ul style="list-style-type: none"> <li>• Arnuity Ellipta</li> <li>• Qvar Redihaler</li> <li>• Pulmicort Flexhaler</li> <li>• Flovent HFA*</li> </ul>
66993001968	albuterol sulfate HFA	albuterol HFA (generic for Proventil and ProAir)

\* Flovent HFA and Flovent Diskus will be discontinued on December 1, 2023, and no longer covered as of January 1, 2024. ▲

## Reminder: Prior authorization for long-acting opioids

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

Harvard Pilgrim Health Care commercial, Tufts Health Plan commercial, and Tufts Health Direct require prior authorization for select long-acting opioids.

As we noted in the [Dec. 2022 newsletter](#), prior authorization for long-acting opioids took effect for Harvard Pilgrim commercial members initiating a new course of treatment on or after Jan. 1, 2023, and members who were already taking a long-acting opioid would require authorization at a later date.

As a reminder, Harvard Pilgrim commercial members who are currently taking a long-acting opioid and who have not had a clinical review completed will require authorization on or after Nov. 1, 2023.

For more information, please refer to the [Pharmacy Medical Necessity Guidelines for Opioid Analgesics](#). ▲

# MassHealth updates to Unified Formulary

## Tufts Health Together - MassHealth MCO Plan and ACPPs

MassHealth recently announced the following updates to the MassHealth Unified Formulary, effective Oct. 2, 2023. The table below outlines these changes, which include pharmacy products and medical drugs 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.

Adding prior authorization	Abilify Asimtufii; Allopurinol 200 mg tablet; Cuvrior; Leqembi; Omnipod Go; OTC ivermectin lotion; Vowst
Existing medical benefit prior authorization will now utilize MassHealth criteria	Syfovre
Therapeutic class tables being updated	Agents Not Otherwise Classified; Alzheimer’s Agents; Antipsychotics; Barbituates, Benzodiazepines, and Miscellaneous Anti-Anxiety Agents; Beta Thalassemia, Myelodysplastic Syndrome, and Sickle Cell Disease Agents; Corticosteroids – Intranasal; Diabetes Medical Supplies and Emergency Treatments; Gout Agents; Immunological Agents; Muscle Relaxants – Skeletal; Multiple Sclerosis Agents; Oncology Agents; Opioids and Analgesics*; Palivizumab (Synagis); Pediatric Behavioral Health; Pediculicides and Scabicides; Pharmaceutical Compounds; T-Cell Immunotherapies
Drugs being removed from the MassHealth brand name preferred over generic list	Invega tablet
Drugs being locked to the medical benefit (utilization management restrictions may apply)	Enjamo, Padcev, Soliris, Syfovre, Uplizna, Vyvgart
Removing from MassHealth Drug list due to product discontinuation	Ivermectin lotion (Rx), Sklice lotion (ivermectin) (Rx)
Compounding program updates	Compounded products meeting any of the following parameters will require PA: \$100 or greater total allowed ingredient cost; topical route of administration; any active ingredient requiring prior authorization The following compounding ingredients will be moved to not covered: benzodiazepine powders (alprazolam, clonazepam, diazepam, lorazepam, midazolam); cocaine crystals, powder; methylphenidate powder; opioid powders (apomorphine, buprenorphine, cocaine, codeine, fentanyl, hydrocodone, hydromorphone, levorphanol, methadone, morphine sulfate, oxycodone, sufentanil); PCCA compounding ingredients (including, but not limited to, proprietary bases, active pharmaceutical ingredients, and excipients)
Drugs being mandated to a 90-day supply after an initial fill	Alfuzosin extended-release; Timoptic Ocudose; Zioptan

\* Tufts Health Plan maintains its own Opioids and Analgesics Pharmacy Medical Necessity Guidelines, which will be updated prior to Oct. 2, 2023 to align criteria with the MassHealth Unified criteria. Please refer to this policy for more information. ▲

## JZ modifier now required

### Tufts Health Plan SCO | Tufts Medicare Preferred

In accordance with Centers for Medicare and Medicaid Services (CMS) [policy](#), for dates of service on or after July 1, 2023, Point32Health now requires providers to append modifier JW or JZ when reporting a drug from a single-dose vial or package.

As a reminder, modifier JW should be reported when there is drug waste from a single-dose vial or package, while modifier JZ should be reported when there is no drug waste.

Point32Health has updated our [Modifier Payment Policy](#) to reflect this new billing requirement. ▲

## Roadmap for Behavioral Health Reform: Incident and Issue Reporting Portal

### Tufts Health Plan Massachusetts products

Introduced in 2021 and implemented in 2023 by the Commonwealth, the [Massachusetts Roadmap for Behavioral Health Reform](#) increases access to mental health and substance use disorder treatment for people across Massachusetts and offers insurance-blind behavioral health crisis services to anyone in the state. New services supporting these reforms include the Behavioral Health Help Line (BHHL), Community Behavioral Health Centers (CBHCs), and Behavioral Health Urgent Care (BHUC) sites.

In an effort to collect feedback and concerns associated with the new services, the [Incident and Issue Reporting Portal](#) was developed by the Massachusetts Behavioral Health Partnership (MBHP), Massachusetts Department of Mental Health (DMH), and MassHealth's Office of Behavioral Health (OBH). This tool can be accessed and filled out by anyone at [masspartnership.com](http://masspartnership.com), [masshelpline.com](http://masshelpline.com), and [mass.gov](http://mass.gov). It is intended to log feedback associated with any service component of the Roadmap, and items entered in the form will receive direct follow-up based on the level of concern. An overview of the form and the questions on the live portal can be [found here](#).

Please note that this form is not a portal for adverse incidents or serious reportable health care events. Those should be reported to Tufts Health Plan's Quality Management Department via fax at 617-673-0973 or email at [adverse\\_events\\_submission@point32health.org](mailto:adverse_events_submission@point32health.org). For more information, please refer to the [Serious Reportable Events and Provider Preventable Conditions Payment Policy](#). ▲

***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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