

Introducing Our Chief Medical Officer Glenn Pomerantz, MD, JD

Uncategorized

New England has a special pull for Glenn Pomerantz, MD, JD, Point32Health's new Chief Medical Officer. He grew up in Sharon, Massachusetts, and opened his first practice there in a two-family house, converting the kitchen into an office and the living room into a waiting room. After serving the community for several years, he embarked on a career in the health plan industry that took him throughout the Northeast and Midwest; he and his wife still held on to their Sharon home.

"I love this part of the world. I think it's a magical place," explains Dr. Pomerantz. "For me it's home. To be able to contribute where I was nurtured and supported through my early school days and where I opened my internal medicine practice is a special opportunity."

A perfect complement to Point32Health's commitment to community-based care, Dr. Pomerantz was named chief medical officer at Point32Health on Aug. 25, 2023, and in this role, he is responsible for leading and advancing the organization's clinical capabilities. He oversees clinical innovation, quality and accreditation, medical policy, and the Harvard Pilgrim Health Care Institute, which includes the Department of Population Medicine at Harvard Medical School.

Dr. Pomerantz sees his work with the Point32Health provider network as a natural extension of his days being in practice and his extensive experience in the health plan industry.

"When a patient asks a doctor, nurse, or office manager 'Which plan should I choose?' my goal is that only one answer comes to mind: a Point32Health plan. That our provider network feels that there's a fair, collaborative partnership between them and Point32Health — that we respect what they do, we look at emerging problems in their practice and support them in improving patient outcomes, and that if there's an issue, we are a partner they can depend on to work together with them to try to address it," Dr. Pomerantz explains.

Dr. Pomerantz comes to Point32Health from C2i Genomics, a company that offers a whole genome cancer intelligence treatment platform. As chief medical officer at C2i, Dr. Pomerantz led the development of more than 30 clinical trials and oversaw operations for the company's European Union laboratory business and product development.

Prior to his role at C2i Genomics, Dr. Pomerantz had extensive experience in the health plan industry, most recently serving as senior vice president of health services at Gateway Health in Pittsburgh where his responsibilities included oversight for network management, medical management, pharmacy, clinical innovation, and quality. In this role, he designed and successfully deployed three innovation projects to align with the state's priorities — increasing access to rural care and convening community-based resources addressing social determinants of health (SDOH).

He has also served as chief medical officer at Blue Cross and Blue Shield of Minnesota and Horizon Blue Cross Blue Shield of New Jersey, and as national medical director at Aetna and Cigna. His accomplishments have included rebuilding medical management programs and redesigning departmental structure and processes to drive productivity improvements and enhance the capacity of key utilization management and medical policy teams, as

well as leading the transition of members into value-based reimbursement models with strategic hospital partners that lowered total cost of care while improving outcomes.

In those roles and in his work now at Point32Health, Dr. Pomerantz believes that having a clear understanding of the needs and challenges of the provider network underpins opportunities for innovation.

“A successful health plan has to see the world through the eyes of a hospital administrator, a nurse, a physician, an office manager, a clinician,” says Dr. Pomerantz. “When you do that, it makes you appreciate information very differently and it allows you to create a collaboration that propels care and innovation forward.” ▲

Preparing for Behavioral Health Insourcing

Harvard Pilgrim Health Care Commercial

In preparation for the launch of our integrated and insourced behavioral health program on Nov. 1, 2023, we are sharing several tools and resources with you. Please share with your practice staff as needed.

As a reminder, this change impacts Harvard Pilgrim Health Care commercial members only — as they transition from using Optum/United Behavioral Health services to this new insourced model. Please continue to ask our health plan members to present their current member ID card to ensure accurate billing and claims processing for your services.

We created a handy Behavioral Health Quick Reference Guide to aid you with common transactions with Harvard Pilgrim, such as submitting claims, utilizing HPHConnect, checking eligibility, accessing refund reports and submitting a refund, viewing policies, and more. We encourage you to [view and save it](#).

Getting Started

In addition, the following tips and resources are available to support you in working with us to provide outstanding behavioral health care to our commercial members.

- **Training sessions** — On Monday, Oct. 2 and Monday Nov. 13 from 11:30 a.m. – 1 p.m., providers are invited to join us at our Canton headquarters for Preparing for Behavioral Health Insourcing, an introduction to Point32Health’s integrated behavioral health program. If you prefer to meet virtually, we offer a variety of virtual interactive sessions as well as recordings of trainings. Providers are encouraged to [sign up today!](#)
- **HPHConnect** — Harvard Pilgrim’s secure portal, [HPHConnect](#) enables providers to verify patient eligibility; send authorization and specialty referral requests and receive timely responses; and submit and track claims for commercial members. In addition, you can access a variety of reports, including negative balance and refund reports. Our [HPHConnect user guides](#) offer step-by-step instructions on completing transactions. To register for HPHConnect, follow these steps:
 - **Prior to Nov. 1, 2023:** Behavioral health providers can get early access by registering now. Please complete both the [online registration form](#) and the [Trading Partner Agreement](#). When completing the online registration, select option 2 (non-contracted provider), as your contract effective date is Nov. 1 or later.
 - **On or after Nov. 1, 2023:** Complete the [online registration form](#) and select option 1 (you are currently contracted). You do not need to complete the Trading Partner Agreement.
- **Electronic Funds Transfer (EFT)** — Through our partnership with Payspan, you can receive deposit payments [electronically](#) to a bank account, receive electronic 835 ERAs and EOPs directly, and review current or past payments online. Here are some important EFT tips:
 - When registering, include your accurate NPI. Leaving the NPI field blank or inputting an incorrect number during registration may interfere with your clearinghouse’s ability to process your ERA/835. If you leave the NPI field blank, your NPI will later appear as “9999999999.”
 - If you are currently utilizing Payspan, please enable the auto registration process. If you have this setting enabled in Payspan, it will allow automatic enrollment for EFT once you begin receiving reimbursement from Harvard Pilgrim, eliminating the need to enroll manually.

- Refer to this [EFT Quick Reference Guide](#) for more details.
- **Insights and Updates for Providers** — Stay up to date on the latest news, policy changes, and process updates! Published monthly on our Point32Health website, the provider newsletter can also be delivered straight to your inbox.
- **Provider website** — www.harvardpilgrim.org/provider is dedicated to supporting your practice with Provider Manuals, user guides, medical necessity guidelines, pharmacy information, a behavioral health section, payment policies, disease management information, product pages, and more.

Where to submit claims

Harvard Pilgrim contracted providers should begin billing Harvard Pilgrim for behavioral health services provided to commercial members as of Nov. 1, 2023. If, however, a commercial member is admitted on an acute inpatient unit prior to the Nov. 1, 2023 insourcing date and stays hospitalized until or beyond Nov. 1, 2023, the provider will continue to work with Optum for utilization management and should bill Optum for payment of the full inpatient admission episode.

We encourage **electronic** submission of claims through EDI channels or HPHConnect for ease, speed, and efficiency. Harvard Pilgrim's electronic payer ID number: **04271**

Paper claims mailing address:

Harvard Pilgrim Health Care
P.O. Box 699183
Quincy, MA 02269-9183

Prior authorization requests

When insourcing occurs on Nov. 1, 2023, open authorizations obtained from Optum/UBH will be honored through their expiration date. For new prior authorization requests, we encourage use of [HPHConnect](#). You may also fax authorization requests to 800-232-0816 or call the Provider Service Center at 800-708-4414.

Policies and forms

You'll find the commercial policies and forms you need on our provider website, including:

- [Commercial Provider Manual](#)
- [Forms](#)
- [Medical Necessity Guidelines](#) and [Medical Benefit Drug Medical Necessity Guidelines](#)
- [Payment policies](#) (including the [Behavioral Health and Substance Use Disorder Payment Policy](#) and the [Autism Professional Payment Policy](#))
- [Pharmacy resources](#)

Contracting reminders

If you already signed a contract to provide care to Harvard Pilgrim commercial members, your contract with Harvard Pilgrim will apply to covered services you provide to our members on and after Nov. 1, 2023 (except for inpatient admissions that begin prior to Nov. 1, 2023, as described above). 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 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 or by phone at 617-972-9400 x43145.

Additional information

Harvard Pilgrim Health Care Medicare Advantage StrideSM (HMO)/(HMO-POS) members are not impacted by this change and will continue to be serviced by Optum/UnitedBehavioral Health. ▲

Register for a claims consultation event near you!

All products

Point32Health is delighted to share that we're expanding our claims consultation series as part of our ongoing commitment to collaborating with our valued provider partners throughout our service area.

We're offering the following claims consultation events:

- Tuesday, Oct. 10 from 10 a.m.– 2 p.m. at the Providence Marriott Downtown located at 1 Orms Street, **Providence, RI 02904** (register by Oct. 3)
- Monday, Oct. 16 from 10 a.m.–2 p.m., at our Canton headquarters, 1 Wellness Way, **Canton, MA 02021** (register by Oct. 2)
- Wednesday, Oct. 25 from 11 a.m.– 3 p.m. at the Puritan Backroom conference center located at 245 Hooksett Road, **Manchester, NH 03104** (register by Oct. 20)
- Wednesday, Nov. 8 from 10 a.m.– 2 p.m. at the CarePartners of Connecticut Headquarters, 55 Capital Boulevard, Suite 101, **Rocky Hill, CT 06067** (register by Nov. 6)
- Thursday, Nov. 16, 2023 from 11 a.m.– 3 p.m. at the Lincoln Hotel, 17 Lincoln Street, **Biddeford, ME 04005** (register by Nov. 10)

The events will present 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.

Appointments will be scheduled in 30-minute increments and registration is required. Refreshments and Wi-Fi access will be available.

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

To reserve your space, please complete a [claims consultation registration form](#) and submit it by email to Claims_Consultations@Point32Health.org. We hope to see you there! ▲

Update on commercial migration: MA and RI markets

Commercial products

As you know from previous communications, a key area of focus for the organization is the delivery of a more unified product portfolio for our commercial markets business. This work, which began in 2023 and will continue throughout 2025, is progressing well. Migration is occurring on a rolling basis, based upon the employer account renewal date.

- **In 2023** — Massachusetts small group commercial accounts began transitioning to Harvard Pilgrim in January 2023, and the Massachusetts Group Insurance Commission (GIC) account also migrated in July 2023.
- **In 2024** — Beginning in January 2024, Tufts Health Plan Rhode Island commercial members will be migrated to Harvard Pilgrim Health Care commercial products. In addition, Massachusetts large group accounts with renewal dates occurring in June–December will migrate.
- **In 2025** — Massachusetts large group accounts with January–May renewal dates will migrate to Harvard Pilgrim products.
- We are communicating extensively with commercial employer accounts and health plan members on these changes. In particular, health plan members are being reminded to look for their new member ID cards and present them when seeking care or services to ensure that eligibility and claims processing are accurate.

Rhode Island commercial migration

Beginning on Jan. 1, 2024, Tufts Health Plan commercial members in Rhode Island will be transitioned to one of Harvard Pilgrim's commercial products, which include HMO, PPO, and national plans. You can learn more about Harvard Pilgrim's offerings by visiting [the Learn About Our Products page](#) on the provider website. We'll also be offering a new large-group national product, Ocean State Access America, in 2024.

Please keep in mind that Rhode Island Medicare and Medicaid products will continue to be offered under the Tufts Health Plan brand.



In anticipation of Rhode Island commercial migration, Harvard Pilgrim is expanding our established network of providers in Rhode Island. If you are a participating Tufts Health Plan Rhode Island provider who received an Amendment by Notice to your Health Services Agreement to enable you to participate in Harvard Pilgrim Health Care products, please be sure to complete the necessary documents, including a [W-9 form](#) and [HCAS Provider Enrollment form](#), and return them to AncillaryNetworkContracting@point32health.org.

While most providers in the Tufts Health Plan network are enrolled in the Harvard Pilgrim network, in the event that a migrating member is in active care with a provider who does not yet participate in Harvard Pilgrim's network, we have continuity of care plans in place to ensure the member can continue to see their provider for 365 days.

Please remind office staff to request the member's ID card to confirm eligibility. Every new member and those making plan changes will receive a Harvard Pilgrim member ID card, including migrating members from Tufts Health Plan. We also encourage you to use [HPHConnect](#) to verify benefits and eligibility, submit authorization requests, submit claims and check status, and more.

Be sure to look for additional information on our Rhode Island commercial migration and the Ocean State Access America product in the next issue of our provider newsletter. In addition, please refer to our [Integration FAQ](#) on the provider website. ▲

Address change for Harvard Pilgrim Stride

Harvard Pilgrim Stride (HMO) Medicare Advantage

The mailing address for all Harvard Pilgrim Stride claims submissions has changed. Going forward, please use the following address:

**Harvard Pilgrim Health Care, Inc.
c/o Stride Claims Processing
P.O. Box 211067
Eagan, MN 55121**

This address has replaced all previous addresses in Lubbock, TX (P.O. Boxes 16755, 93430, and 6748). Any correspondence sent to these addresses for Harvard Pilgrim StrideSM (HMO)/(HMO-POS) Medicare Advantage will be forwarded to the new PO Box for a limited time. Providers should begin using the new Eagan, MN address effective immediately.

You should continue to submit all provider claim appeals by fax (617-509-4225) or by mail to:

Medicare Advantage Provider Appeals
P.O. Box 690546
Quincy, MA 02269

To reflect this change in address, we have updated the applicable forms, policies, and guides on the [StrideSM \(HMO\)/\(HMO-POS\) Medicare Advantage section](#) of [our Harvard Pilgrim provider website](#).

As a reminder, you may also file claims electronically using payer ID# 04245, which we recommend for efficiency and quick turnaround times. Before doing so, please ensure that your clearinghouse can remit information to our trading partner Change Healthcare (800-845-6592). ▲

Tufts Health Unify becomes Tufts Health One Care

Tufts Health Unify

Effective Jan. 1, 2024, Tufts Health Unify is changing its name to Tufts Health One Care. By aligning the name with the Massachusetts One Care Program, you'll find it easier to determine which population this plan serves. With a One Care plan, members get the benefits of both Medicare and MassHealth (Medicaid) programs through one health plan.

Current Tufts Health Unify members will receive a new member ID card in December to reflect the new product name. The member ID number will remain the same.

There are no other changes as a result of this name change. Provider contract terms will remain in place, and we will update Unify references in contracts over time. Please continue to follow the same requirements for claims and utilization management as you do today.

We will be updating Tufts Health Unify references in our policies and other documents beginning in January. You may see the Tufts Health Unify name on some materials until the completion of this work.

If you have any questions about this name change, please contact Provider Services at 888-257-1985. ▲

New portal functionality for Tufts Health RITogether

Tufts Health RITogether

Point32Health is pleased to share that for our Tufts Health RITogether members, providers will soon have more electronic functionality than ever before. Beginning on Oct. 4, 2023, you will be able to submit notifications and prior authorization requests for these members — both medical and behavioral health — in Tufts Health Plan's [secure provider portal](#).

This functionality is available through MHK (formerly MedHOK), the medical management tool accessed from within the secure portal.

We encourage you and your office staff to take advantage of this convenient capability, which automatically directs requests to the Utilization Management team for review. It may also reduce wait times on determinations (when all information is included in the request).

Other benefits include:

- Most direct way to submit requests, eliminating the risk of a misdirected fax
- Allows providers to attach clinical documentation and notes
- Providers can view and confirm requests in the system
- Updates in real time — so you can see determinations as soon as they are made
- On the spot determinations for certain services

Please note, while online notifications and prior authorization requests are available for Tufts Health Plan commercial, Tufts Health Medicare Preferred, Tufts Health Direct, and Tufts Health Together members, they are not currently available for Tufts Health Unify or Tufts Health Plan Senior Care Options members. Requests for these members should continue to be submitted as they are today.

For more information, including step-by-step instructions on how to submit notifications and prior authorization requests, please refer to the [MHK Portal User Guide](#).

If you have not yet registered for the secure Provider portal, [instructions are available on our website](#). ▲

New HEDIS® tip sheets now available

All products

Point32Health is pleased to share that we have developed new HEDIS® tip sheets related to the following measures:

- Kidney Health Evaluation for Patients with Diabetes (KED) ([Harvard Pilgrim](#) and [Tufts Health Plan](#))
- Controlling High Blood Pressure (CBP) ([Harvard Pilgrim](#) and [Tufts Health Plan](#))
- Transitions of Care (TRC) ([Harvard Pilgrim](#) and [Tufts Health Plan](#))

The best practices highlighted in these tip sheets are intended to support your practice by ensuring that the data reported accurately reflects your practice's performance on these measures, and by identifying opportunities to improve patient care.

For the full collection of tip sheets Point32Health currently makes available to providers, you can refer to the HEDIS® tip sheet pages on our [Harvard Pilgrim](#) and [Tufts Health Plan](#) provider websites.

And be sure to look to future issues of Insights and Updates for Providers for more updates as we continue to develop new tip sheets!

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). ▲

BH screening for children and adolescents in the primary care setting

All products

With childhood and adolescent behavioral health concerns continuing to rise among health care professionals, we'd like to remind our provider partners about the importance of offering routine behavioral health screening during primary care visits.

Primary care providers are often the first line to childhood and adolescent patient care. As such, they are uniquely situated to begin the process of identifying emotional and behavioral health issues that could lead to serious mental health conditions. Given the widespread shortage of mental health professionals, behavioral health screening in the primary care setting today plays a significant role in early detection, intervention, and coordination of follow-up care when needed.

There are a variety of universal behavioral health screening tools for use by professionals to evaluate children and adolescents, including the [Pediatric Symptom Checklist-17 \(PSC-17\)](#), [Patient Health Questionnaire-9 \(PHQ-9\)](#), and [CRAFFT interview](#). **For health care professionals interested in continuing education, the [American Academy of Pediatrics Bright Futures Series](#) offers webinars focused on screening principles, the benefits of collaboration between medical and behavioral health care providers, and other timely topics.**

In addition, we have developed Behavioral Health (BH) Screening FAQs to assist providers, including for [Tufts Health Direct](#), [Tufts Health RITogether](#) and [Tufts Health Together](#). These materials offer guidance on conducting screenings, communicating with patient family members, billing for services, facilitating behavioral health referrals, and more.

Whether you're a primary care provider or behavioral health specialist, building and managing a collaborative care network for children and adolescents in need of mental health services is essential. We encourage all our provider partners to continue to expand their referral networks by regularly sharing up-to-date program and contact

information along with their capacity to accept new patients. To assist with the exchange of process documentation and other information integral to the treatment of primary care/behavioral health patients, refer to Point32Health's [Coordination of Care Check List](#). ▲

Help us keep directory information up to date

All products

The Centers for Medicare & Medicaid Services and other regulatory bodies, as well as the federal [No Surprises Act of 2021](#), require health plans to maintain and update data in provider directories — and we rely on providers to review their data and notify us of changes as they happen to ensure that members have access to accurate information.

On at least a quarterly basis, providers should make sure to review and verify the accuracy of their demographic data (including, but not limited to practice location, phone number, hours of operation, ability of each individual provider to accept new patients) displayed in our [Harvard Pilgrim Health Care](#) and [Tufts Health Plan](#) provider directories. Changes to data should be reported via the [CAQH Provider Data Portal](#) (formerly known as CAQH ProView) for those who have implemented it.

If your practice has not yet implemented CAQH, please report changes to demographic data to Harvard Pilgrim and/or Tufts Health Plan by:

- Submitting a [Provider Change Form](#) to Harvard Pilgrim's Provider Processing Center by email at PPC@point32health.org, or;
- Submitting a [Medical](#) or [Behavioral Health](#) Provider Information Form to provider_information_dept@point32health.org for Tufts Health Plan commercial or Senior Products or to provider_data_request@point32health.org for Tufts Health Plan Public Plans products. (For Rhode Island commercial products, please use the following email box: RIProviderEnrollment@point32health.org.)

(Please keep in mind that if your practice participates in both the Harvard Pilgrim and Tufts Health Plan provider networks, you will need to report demographic data changes to both plans as identified above.)

Failure to review and update demographic information at least quarterly may result in suppression from the Harvard Pilgrim and Tufts Health Plan provider directories until the information is validated. In addition, if Point32Health identifies potentially inaccurate provider information in the directories, we may outreach to your practice to validate or obtain accurate information. If we are unable to obtain a timely response, the provider record may be subject to suppression in the directories until up-to-date information is received. ▲

Inform Point32Health if you offer concierge medicine services

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

Point32Health would like to remind any providers who are planning to offer concierge medicine services to eligible members that you are required to provide Point32Health at least 90 days' advance notice prior to establishing a concierge-style practice.

It is important that you provide notice because all health plans must identify providers who offer concierge medicine services in our [Harvard Pilgrim Health Care](#) and [Tufts Health Plan](#) provider directories, and we need your help to make sure that information is accurate and up to date.

If you intend to offer these services, please notify us by sending an email to your contract specialist or associate contract specialist letting us know, and be sure to attach copies of the marketing materials you make available to patients informing them that you will offer concierge medicine services and when you will begin doing so.

Among other requirements, you're required to specify to prospective patients that your practice requires payment of a subscription fee as a condition of accepting patients and for certain amenities and/or services that are not covered

by Harvard Pilgrim/Tufts Health Plan. Your marketing materials must clearly differentiate services (i.e., amenities covered by the additional fee versus services covered by Point32Health). ▲

Well-child visits and vaccines for adolescents

All products

Teenagers, like younger children, greatly benefit from regular check-ups and vaccinations, and these appointments are recommended annually for patients between ages 12-21. These visits allow providers to assess their overall well-being, address risky behaviors, and detect conditions which could affect the teens' future development.

As these young patients navigate the ups and downs of adolescence, many feel like they are the only ones facing academic pressure, family conflict, curiosity about drugs or alcohol, emerging sexuality and identity, or difficulty with friend groups or partners. Teens have many questions about what is “normal” as it relates to a wide variety of topics and we know that they often turn to you, as their provider, for help during this period of profound change. Health care providers understand that habits and choices made during adolescence have a significant long-term impact on both physical and emotional well-being.

The adolescent well-visit can be a fascinating and rewarding visit for both the provider and the patient. It is a crucial time to offer a trusting adult relationship to a teen who is facing important life choices, and we appreciate the work you do to prioritize this unique population.

For some useful strategies for increasing well-child visits for adolescents, visit the School Based Health Alliance and scroll to the Frequently Asked Questions section.

Improving vaccination rates

Adolescents are not as likely to receive recommended vaccinations as younger children. The CDC outlines systems and strategies for improving vaccination rates and recommends the following vaccines for adolescents:

- HPV vaccine
- Tdap
- Meningitis B
- Meningitis ACWY
- COVID-19

For more information, refer to the [CDC Immunization Schedule](#). ▲

Enrollment/screening process for Medicaid providers

Tufts Health RITogether | Tufts Health Together | Tufts Health Unify

As a reminder, federal regulations require that providers who render services for Medicaid members are screened by and enrolled with the appropriate state Medicaid agency. This requirement applies to providers who participate in Tufts Health RITogether, Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans (ACPPs), and Tufts Health Unify. Tufts Health Plan has been mailing reminder letters to providers who have yet to complete this enrollment/screening process throughout the year.

Tufts Health RITogether providers may complete this process via the Rhode Island Executive Office of Health and Human Services ([EOHHS provider portal](#)). For additional information, please refer to [this FAQ](#) and the [EOHHS website](#). Please keep in mind that claim payments may be impacted for Rhode Island Medicaid providers who have not been appropriately screened by Oct. 31, 2023. These providers should ensure that they have been screened and enrolled before this date to avoid denials on claims submitted for dates of service beginning Nov. 1, 2023.

For Tufts Health Together and Tufts Health Unify, complete this screening and enrollment process via the [MassHealth website](#). In addition, [this FAQ](#) offers more information.

The [Credentialing and Contracting Overview page](#) on our provider website also includes information on this requirement. ▲

Telehealth billing reminders and MassHealth guidance

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

As a reminder, MassHealth has issued guidance related to various aspects of billing for telehealth services via their [All Provider Bulletin 355](#), [All Provider Bulletin 364](#), and [MCE Bulletin 95](#).

As we communicated in the [March 2023](#) and [July 2023](#) issues of Insights and Updates for Providers, we would like to remind providers of the importance of adhering to the guidance and requirements identified in these bulletins, which deal with appending appropriate telehealth modifiers to claims, billing properly for provider-to-provider e-consults, and more.

In addition, as identified in MassHealth's [All Provider Bulletin 374](#) ("Access to Health Services through Telehealth Options"), modifier V3 is no longer available. Providers should report modifier 93 to indicate services rendered via audio-only telehealth, as indicated in appendix T of the CPT Manual.

For more information, please refer to the above-referenced bulletins, as well as Tufts Health Plan's [Evaluation and Management Professional Payment Policy](#) and [Telehealth/Telemedicine Payment Policy](#). ▲

Tips for avoiding unnecessary denials

CareLink

CareLink is a national open-access PPO plan that provides both in and out-of-network benefits. CareLink members have access to the Tufts Health Plan provider network in Massachusetts and Rhode Island, and the Cigna provider network in other states.

We are committed to ensuring that providers have an optimal experience when submitting claims for CareLink members. Through ongoing monitoring and review, we've compiled a list of reminders to help avoid common unnecessary claim denials and rejections:

- When providing care to CareLink members, follow Tufts Health Plan payment policies and medical necessity guidelines. You can access our policies in the [Resource Center](#) of the Tufts Health Plan website.
- Use the appropriate NPI number when submitting claims. If a claim denies because the wrong provider information was included, send a corrected claim with the appropriate provider information. Do not submit an appeal.
- Inappropriate use of modifiers may impact your reimbursement or cause the claim to deny. For example: using both modifiers TC and 26 is considered unbundling. Refer to the [Modifiers Payment Policy](#) for more information on applying modifiers appropriately.
- It is inappropriate to report a diagnostic mammography on the same date of service as a digital breast tomosynthesis. Refer to the [Imaging Services Payment Policy](#) for more information.
- Anesthesia claims are reimbursed in whole unit increments. Each 15-minute interval is converted to one time unit, rounding up to next unit for 8-14 minutes and rounding down for 1-7 minutes. Refer to the [Anesthesia Professional Payment Policy](#) for more information.

To learn more about CareLink, access the [CareLink section](#) of our Provider Manual. ▲

Federal waiver requirement to prescribe buprenorphine eliminated

All products

If you treat patients with opioid use disorder (OUD), please keep in mind some recent federal changes regarding prescribing buprenorphine and training requirements for prescribers.

A federal change that took effect at the end of 2022 makes it simpler to prescribe buprenorphine. Previously, a special waiver known as a DATA-Waiver and a DATA-Waiver registration number were required in order to prescribe buprenorphine. However, the [MAT Act removed the X waiver](#) requirement for prescribing buprenorphine. Practitioners with up-to-date Drug Enforcement Administration (DEA) registrations that include Schedule III authority can now prescribe buprenorphine for OUD based on applicable state law.

In addition, a new DEA requirement took effect on June 27, 2023, requiring new or renewing DEA registrants to fulfill certain training requirements, including completing eight hours of training on opioid and other substance use disorders from certain accredited organizations. For more details, refer to the [Waiver Elimination \(MAT Act\) page](#) on the Substance Abuse and Mental Health Services Administration website.

Boston Medical Center's Grayken Center for Addiction Training and Technical Assistance offers [a session that meets the DEA course requirement](#). Focused on treating and managing the care of patients with opioid and other substance use disorders, the session can be completed virtually or via recording. ▲

Step Therapy Protocols and Exceptions

[Harvard Pilgrim and Tufts Commercial](#) | [Tufts Health Direct](#) | [Tufts Health Plan Commercial](#) | [Tufts Health Plan SCO-Medicaid Only Plans](#) | [Tufts Health Together](#)

Massachusetts law states that the clinical review criteria used to establish a step therapy protocol cannot require members to utilize a medication that is not likely to be clinically effective for the prescribed purpose. As a result, MA law now requires mandatory exceptions in step therapy protocols effective Oct. 1, 2023.

For commercial members, health plans are required to process step therapy exceptions and appeals within 3 business days following the receipt of all necessary information needed to make a medical necessity determination. For MassHealth members, health plans are required to process step therapy exceptions and appeals within 24 hours following the receipt of all necessary information. For urgent requests for all members, health plans are required to respond back within 24 hours following the receipt of all necessary information.

Point32Health's pharmacy program already allows for providers to submit step therapy exceptions. For more information on how to submit step therapy exceptions, visit the [Harvard Pilgrim Health Care](#) and [Tufts Health Plan](#) provider websites.

To simplify the step therapy exception process for providers, MassHealth and the Mass Collaborative are working on updating applicable prior authorization request forms. Visit our websites to access the latest versions of these forms. ▲

2024 Part B Step Therapy program

[Harvard Pilgrim Stride \(HMO\) Medicare Advantage](#) | [Tufts Health Plan Senior Care Options](#) | [Tufts Health Unify](#) | [Tufts Medicare Preferred](#)

Effective for fill dates on or after Jan. 1, 2024, the following coverage requirements will apply to the Part B Step Therapy program for Harvard Pilgrim StrideSM (HMO)/(HMO-POS) Medicare Advantage, Tufts Medicare Preferred, Senior Care Options, and Tufts Health Unify.

The following new categories will be added to the Part B Step Therapy program:

- Acromegaly
- Antiemetics
- Bone Resorption Inhibitors
- Botulinum Toxins

The following existing categories will be updated:

- Gaucher's Disease
- Leucovorin/LEVOleucovorin Injection
- Trastuzumab – Ogivri will be a non-preferred trastuzumab product. Kanjinti and Trazimera will be the preferred trastuzumab products.

For more information, refer to the updated Medicare Part B Step Therapy Medical Necessity Guidelines ([Harvard Pilgrim](#), [Tufts Health Plan](#)). ▲

Synagis coverage for the 2023-2024 RSV season

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

Point32Health would like to remind providers of our policy regarding Synagis (palivizumab), an injection of antibodies used to protect high-risk infants from severe respiratory syncytial virus (RSV) disease, for the 2023-2024 season.

Synagis requires prior authorization and should be reserved for infants with a history of pre-term birth and children with chronic lung disease or congenital heart disease. For members who qualify to receive five doses, the first dose is typically administered at the beginning of November and the last dose at the beginning of March to provide protection into April.

Requesting authorization

Point32Health manages prior authorization for medical drugs, including Synagis. Refer to the Synagis Medical Necessity Guidelines on the [Harvard Pilgrim](#) and [Tufts Health Plan](#) websites for clinical coverage criteria. Prescribing providers should request authorization for Synagis via PromptPA, which you can access [directly](#) or through the [Harvard Pilgrim](#) or [Tufts Health Plan](#) provider portals, or by fax.

Online submission will enable you to easily view drug specific criteria questions, attach clinical information, and receive a response more quickly.

For Harvard Pilgrim commercial, Tufts Health Plan commercial, and Tufts Health Direct, providers can also obtain Synagis from [CVS Caremark](#) for authorized members, and members are responsible for their appropriate cost share. If any of your patients have questions about their cost share for Synagis, please direct them to the Harvard Pilgrim or Tufts Health Plan Member Services phone number on the back of their ID card.

As a reminder, for Tufts Health Together, coverage and criteria for Synagis are available through the [MassHealth Drug List](#). ▲

Coverage updates – inhaled corticosteroids

Tufts Health Together

Brand name Flovent HFA (fluticasone propionate) and Flovent Diskus will be discontinued at the end of 2023. MassHealth will continue to require prior authorization for the authorized generic of Flovent HFA.

Given this change in product availability, MassHealth will be making coverage updates in the inhaled corticosteroid (ICS) inhaler class as part of the December rollout (effective Dec. 4, 2023).

- Brand Flovent HFA and Flovent Diskus will continue to be covered without prior authorization. Members can fill brand Flovent HFA and Flovent Diskus until the supply runs out. However, not switching members to an alternative prior to the end of the year could result in abrupt interruptions in therapy.

-
- Generic Flovent HFA will not be preferred and will require prior authorization.
 - Approval criteria for generic Flovent HFA will require trial and failure with at least two less costly alternatives.
 - Through March 4, 2024, stability on Flovent HFA will be considered a reason for a one-month approval of generic Flovent HFA. ▲

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 Dec. 4, 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.

Tufts Health Together-MassHealth MCO Plan and ACPPs, in conjunction with the other managed care organizations (MCOs) in the Commonwealth, now utilize MassHealth’s Unified Formulary for pharmacy medications and select medical benefit drugs. 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 \(MHDL\)](#) on or after the effective date.

Adding to MHDL	Balfaxor, Brixadi (PA), Rezvoglar (PA), Sogroya (PA), zolpidem 7.5 mg capsule (PA)
Therapeutic class tables being updated	Agents not Otherwise Classified; Antibiotics and Anti-Infectives – Oral and Inhaled; Anticoagulants and Antiplatelet Agents; Anticonvulsants; Antidepressants; Anti-Hemophilia Agents; Cardiovascular Agents; Cerebral Stimulants and Miscellaneous Agents; Dermatologic Agents – Topical Chemotherapy, Genital Wart Treatment, and Miscellaneous Dermatologic Agents; Drug and Alcohol Cessation Agents; Enzyme Replacement and Substrate Reduction Therapies; Gastrointestinal Drugs – Antidiarrheals, Constipation, and Miscellaneous Gastrointestinal Agents; Growth Hormones and Increlex; Hypnotics; Immunological Agents; Inflammatory Bowel Disease Agents; Opioids and Analgesics; Pediatric Behavioral Health; Pulmonary Hypertension Agents; Respiratory Agents – Inhaled
Drugs being removed from the MassHealth brand name preferred over generic list	Asacol HD, Canasa, Coreg CR, Veletri, Viibryd, Zytiga 500 mg tablet
Drugs being locked to the medical benefit (utilization management restrictions may apply)	Astiladrin, Nexviazyme, Roctavian, Skysonsa, Zynyz
Removing from MassHealth Drug list due to product discontinuation	Bunavail, Probuphine
Drugs being added to the Mandatory 90 day (M90) program	Kombiglyze XR, metformin immediate-release 625 mg tablet, Onglyza



Pharmacy Coverage Changes

All products

Updates to Existing Prior Authorization Programs

Drug	Plan	Eff. date	Policy & Additional Information
Aliskiren, Aliskiren/HCTZ, Amlodipine/atorvastatin, Amlodipine/valsartan/HCTZ, Candesartan, Candesartan/HCTZ, Carvedilol ER, Diltiazem HCl coated beads tablet 24 hour tablets, Isradipine, Nimodipine, Nymalize, Edarbi, Eplerenone, Metoprolol tartrate, Nebivolol, Olmesartan/amlodipine, Telmisartan/HCTZ	Tufts Health RITogether	Dec. 1, 2023	Antihypertension Medications
Azopt, Bimatoprost, Brimonidine, Combigan, Lumigan, Rescula, Rhopressa, Simbrinza, Tafluprost, Travoprost, Vyzulta, Xelpros Glaucoma Medications Beconase AQ, Flonase Sensimist, Flunisolide, Mometasone, Omnaris, Qnasl, Qnasl Children's, Zetonna	Tufts Health RITogether	Dec. 1, 2023	Nasal Corticosteroid Medications
Belsomra, DayVigo, Edluar, Ramelton Zolpidem ER tablet, Zolpidem SL tablet	Tufts Health RITogether	Dec. 1, 2023	Hypnotic Medications
Cresemba, Posaconazole	Harvard Pilgrim Health Care commercial, Tufts Health Plan commercial, Tufts Health Direct	Dec. 1, 2023	Oral Antifungal Agents (Harvard Pilgrim , Tufts Health Plan)
Fosamax+D, Risedronate	Tufts Health RITogether	Dec. 1, 2023	Oral Bisphosphonate Medications (alendronate with vitamin D, risedronate)
Hetlioz, Hetlioz LQ	Tufts Health RITogether	Dec. 1, 2023	Hetlioz (tasimelteon)
Ivermectin lotion, Spinosad	Tufts Health RITogether	Dec. 1, 2023	Pediculicide Medications
Neo-Synalar	Harvard Pilgrim Health Care commercial, Tufts Health Plan commercial, Tufts Health Direct	Dec. 1, 2023	Neo-Synalar (neomycin/fluocinolone) (Harvard Pilgrim , Tufts Health Plan)
Orilissa	Harvard Pilgrim Health Care commercial, Tufts Health Plan commercial, Tufts Health Direct	Dec. 1, 2023	Endocrine Agents (Harvard Pilgrim , Tufts Health Plan)
Pregabalin, Pregabalin ER	Tufts Health RITogether	Dec. 1, 2023	Pregabalin (Lyrica) and Pregabalin Extended-Release (Lyrica CR)
Semprex-D	Tufts Health RITogether	Dec. 1, 2023	Non-Sedating Antihistamines

Drug	Plan	Eff. date	Policy & Additional Information
Sucralfate oral suspension	Tufts Health RITogether	Dec. 1, 2023	Sucralfate oral suspension
Vigabatrin	Tufts Health RITogether	Dec. 1, 2023	Vigabatrin

Drug Status Changes

Drug	Plan	Eff. date	Policy & Additional Information
Carafate oral suspension	Tufts Health RITogether	Dec. 1, 2023	Sucralfate oral suspension Generic substitution will be required.



Point32Health Medical Necessity Guideline updates

All products

Updates to Medical Necessity Guidelines (MNG)

MNG Title	Products Affected	Eff. Date	Summary
New Technology Assessment and Non-Covered Services Noncovered Investigational Services Procedures for the Treatment of Symptomatic Varicose Veins (Harvard Pilgrim , Tufts Health Plan)	Harvard Pilgrim Health Care commercial, Tufts Health Plan commercial, Tufts Health Public Plans	Nov. 1, 2023	<ul style="list-style-type: none"> • Polidocanol Endovenous Microfoam (Varithena) will now be covered, and the Sclerotherapy InterQual SmartSheet will be used for prior authorization review • VenaSeal cyanoacrylate glue for varicose veins (CPT codes 36482 and 36483) will be covered with prior authorization, and InterQual criteria will be used for review. • Endobronchial Valves for advanced COPD (Spiration Valve System and the Zephyr Endobronchial Valve System (CPT codes 31647, 31651, 31648, and 31649) will be covered with no prior authorization • Pattern electroretinography (CPT 0509T) and iStent infinite Trabecular Micro-Bypass System for Open-Angle Glaucoma (CPT 0671T) will be added to the non-covered services lists and will not be covered.
Absorbent Products	Tufts Health Together, Tufts Health Unify	Oct. 1, 2023	The products/codes associated with this MNG will no longer require prior authorization, and the MNG will be maintained for informational purposes. Minor criteria language updates based on MassHealth guidelines.



Point32Health medical drug program updates

All products

New prior authorization programs

MNG Title	Products Affected	Eff. Date	Summary
<p>Epkinly (epcoritamab-bysp) (Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Health Together)</p> <p>Epkinly (epcoritamab-bysp) (Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify)</p>	<p>Tufts Health Plan commercial, Tufts Health Public Plans, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options</p>	<p>Dec. 1, 2023</p>	<p>Prior authorization will be required for the drug Epkinly (HCPCS J9999), approved by the FDA in May 2023 to treat large B-cell lymphoma and high-grade B-cell lymphoma.</p>
<p>Vyvgart Hytrulo (efgartigimod alfa and hyaluronidase-qvfc) (Harvard Pilgrim Stride)</p> <p>Vyvgart Hytrulo (efgartigimod alfa and hyaluronidase-qvfc) (Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred)</p>	<p>Harvard Pilgrim StrideSM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred</p>	<p>Dec. 1, 2023</p>	<p>Prior authorization will be required for Vyvgart Hytrulo (HCPCS J3590), approved in June 2023 for the treatment of generalized myasthenia gravis in adult patients who are anti-acetylcholine receptor antibody positive.</p>
<p>Adstiladrin (Harvard Pilgrim commercial)</p> <p>Adstiladrin (Harvard Pilgrim Stride)</p> <p>Adstiladrin (Tufts Health Plan commercial, Tufts Health Public Plans)</p> <p>Adstiladrin (Tufts Health Plan Senior Products)</p>	<p>All products</p>	<p>Oct. 1, 2023</p>	<p>New MNG for Adstiladrin (HCPCS J9020), a non-replicating adenoviral vector-based gene therapy approved by the FDA in December 2022 to treat high-risk Bacillus Calmette-Guerin- unresponsive non-muscle invasive bladder cancer with carcinoma in situ with or without papillary tumors. Prior authorization is required.</p>
<p>Columvi (glofitamab-gxbm) (Tufts Health Plan commercial, Tufts Health Direct)</p> <p>Columvi (glofitamab-gxbm) (Tufts Health RITogether, Tufts Health Together)</p> <p>Columvi (glofitamab-gxbm) (Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify)</p>	<p>Tufts Health Plan commercial, Tufts Health Public Plans, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options</p>	<p>Oct. 1, 2023</p>	<p>Prior authorization will be required for Columvi (HCPCS J9999), approved by the FDA in June 2023 for the treatment of diffuse large B-cell lymphoma not otherwise specified and large B-cell lymphoma resulting from follicular lymphoma for adults whose cancer has relapsed or become resistant to treatment after at least two previous rounds of systemic therapy.</p>

MNG Title	Products Affected	Eff. Date	Summary
<p>Elfabrio (pegunigalsidase alfa-iwxj) (Harvard Pilgrim commercial)</p> <p>Elfabrio (pegunigalsidase alfa-iwxj) (Tufts Health Plan commercial, Tufts Health Direct)</p> <p>Elfabrio (pegunigalsidase alfa-iwxj) (Tufts Health RITogether, Tufts Health Together)</p>	<p>Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Health Together</p>	<p>Oct. 1, 2023</p>	<p>Prior authorization will be required for Elfabrio (HCPCS J3590), approved by the FDA in May 2023 for the treatment of Fabry disease.</p>
<p>Rystiggo (rozanolixizumab-noli) (Harvard Pilgrim commercial)</p> <p>Rystiggo (rozanolixizumab-noli) (Harvard Pilgrim Stride)</p> <p>Rystiggo (rozanolixizumab-noli) (Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Health Together)</p> <p>Rystiggo (rozanolixizumab-noli) (Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify)</p>	<p>All products</p>	<p>Oct. 1, 2023</p>	<p>Prior authorization will be required for Rystiggo (HCPCS J3590), approved by the FDA in June 2023 for the treatment of generalized myasthenia gravis in adults who are anti-acetylcholine receptor- or anti-muscle-specific tyrosine kinase antibody-positive.</p>
<p>Vyvgart Hytrulo (efgartigimod alfa and hyaluronidase-qvfc) (Harvard Pilgrim commercial)</p> <p>Vyvgart Hytrulo (efgartigimod alfa and hyaluronidase-qvfc) (Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether)</p>	<p>Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether</p>	<p>Oct. 1, 2023</p>	<p>Prior authorization is now required for Vyvgart Hytrulo (HCPCS J3590), approved in June 2023 for the treatment of generalized myasthenia gravis in adult patients who are anti-acetylcholine receptor antibody positive.</p>
<p>Antipsychotic Medications (Tufts Health RITogether)</p> <p>Abilify Asimtufii (aripiprazole) (Tufts Health Together)</p>	<p>Tufts Health RITogether, Tufts Health Together</p>	<p>Oct. 1, 2023</p>	<p>Prior authorization is now required for Abilify Asimtufii (HCPCS C9152), approved in April 2023 for the treatment of schizophrenia in adults and as maintenance monotherapy treatment of bipolar I disorder in adults.</p>
<p>Brixadi (buprenorphine)</p>	<p>Tufts Health RITogether</p>	<p>Oct. 1, 2023</p>	<p>Prior authorization is now required for Brixadi (HCPCS J3490), approved in May 2023</p>

MNG Title	Products Affected	Eff. Date	Summary
			for the treatment of moderate to severe opioid use disorder in patients who have initiated treatment with a single dose of a transmucosal buprenorphine product or who are already being treated with buprenorphine.
Uzedy (risperidone)	Tufts Health RITogether	Oct. 1, 2023	Prior authorization is now required for Uzedy (HCPCS C9158), approved in April 2023 for the treatment of schizophrenia in adults.

Updates to existing prior authorization programs

Drug	Plan	Eff. date	Policy & Additional Information
Myobloc (rimabotulinumtoxin B)	Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Jan. 1, 2024	Myobloc (Harvard Pilgrim) Myobloc (Tufts Health Plan)
Dysport (abobotulinumtoxin A)	Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Jan. 1, 2024	Dysport (Harvard Pilgrim) Dysport (Tufts Health Plan)
Evenity (romosozumab-aqqg)	Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Jan. 1, 2024	Evenity (Harvard Pilgrim) Evenity (Tufts Health Plan)
Prolia (denosumab)	Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Jan. 1, 2024	Prolia (Harvard Pilgrim) Prolia (Tufts Health Plan)
Xgeva (denosumab)	Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Jan. 1, 2024	Xgeva (Tufts Health Plan) Xgeva (Harvard Pilgrim Stride)
Signifor LAR (pasireotide)	Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify	Jan. 1, 2024	Somatostatin Analogs for Non-oncology Indications (Harvard Pilgrim) Somatostatin Analogs for Non-oncology Indications (Tufts Health Plan)

Drug	Plan	Eff. date	Policy & Additional Information
Altuviiiio	Harvard Pilgrim commercial, Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify	Dec. 1, 2023	<p>Altuviiiio (Harvard Pilgrim commercial)</p> <p>Altuviiiio (Harvard Pilgrim Stride)</p> <p>Altuviiiio (Tufts Health Plan commercial, Tufts Health Direct)</p> <p>Altuviiiio (Tufts Health RITogether)</p> <p>Altuviiiio (Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify)</p>
Hemlibra	Harvard Pilgrim commercial, Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify	Dec. 1, 2023	<p>Hemlibra (Harvard Pilgrim commercial)</p> <p>Hemlibra (Harvard Pilgrim Stride)</p> <p>Hemlibra (Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether)</p> <p>Hemlibra (Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Unify)</p>
Amvuttra (vutrisiran), Onpattro (patisiran)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether	Dec. 1, 2023	<p>Amyloidosis Therapies (Harvard Pilgrim commercial)</p> <p>Amyloidosis Therapies (Tufts Health Plan Commercial, Tufts Health Direct)</p> <p>Amyloidosis Therapies (Tufts Health RITogether)</p>
Benlysta Intravenous	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether	Dec. 1, 2023	<p>Benlysta Intravenous (Harvard Pilgrim commercial)</p> <p>Benlysta Intravenous (Tufts Health Plan commercial, Tufts Health Direct)</p> <p>Benlysta Intravenous (Tufts Health RITogether)</p>
Ultomiris	Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Dec. 1, 2023	<p>Ultomiris (Harvard Pilgrim)</p> <p>Ultomiris (Tufts Health Plan)</p>
Soliris	Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Dec. 1, 2023	<p>Soliris (Harvard Pilgrim)</p> <p>Soliris (Tufts Health Plan)</p>

Drug	Plan	Eff. date	Policy & Additional Information
Vyvgart	Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Unify, Tufts Health Plan Senior Care Options, Tufts Medicare Preferred	Dec. 1, 2023	Vyvgart and Vyvgart Hytrulo (Harvard Pilgrim) Vyvgart and Vyvgart Hytrulo (Tufts Health Plan)
Fabrazyme (agalsidase beta)	Harvard Pilgrim commercial, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether	Dec. 1, 2023	Fabrazyme (Harvard Pilgrim) Fabrazyme (Tufts Health Plan)
Paclitaxel Protein Bound (Abraxane)	Harvard Pilgrim commercial, Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage	Dec. 1, 2023	Paclitaxel Protein Bound (Abraxane)
Advate, Adynovate, Afstyla, Alphanate, Alphanine, Alprolix, Benefix, Coagadex, Corifact, Eloctate, Esperoct, Feiba, Hemofil, Humate-P, Idelvion, Ixinity, Jivi, Koate, Kovaltry, Monoclate, Mononine, Novoeight, Novoseven, Nuwiq, Obizur, Profilnine, Rebinyn, Recombinate, Rixubis, Sevenfact, Tretten, Vonvendi, Wilate, Xyntha	Harvard Pilgrim commercial, Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Plan commercial, Tufts Health Direct, Tufts Health RITogether, Tufts Medicare Preferred, Senior Care Options, Tufts Health Unify	Dec. 1, 2023	Factor Products (Harvard Pilgrim) Factor Products (Tufts Health Plan)
MassHealth Drug List	Tufts Health Together	Oct. 2, 2023	Minor criteria updates related to Zynteglo, a gene therapy treatment used to treat adult and pediatric beta-thalassemia patients who require regular red blood cell transfusions, as well as the chimeric antigen receptor (CAR) T-cell therapy drugs Abecma, Carvykti, Kymriah, and Tecartus



Integrated Point32Health payment policies

All products

As part of our integration work as a combined company, Point32Health continuously reviews and assesses payment policies for each of our legacy organizations (Harvard Pilgrim Health Care and Tufts Health Plan), and aligns them wherever possible for greater ease and efficiency.

Please note that this alignment of payment policies may or may not affect existing claims processing and/or provider reimbursement; substantial changes to these processes as a result of alignment efforts will continue to be communicated via provider channels and with advance notice. In many cases, alignment of payment policies

is a matter of merging existing information into one cohesive Point32Health policy, with no change in billing or reimbursement rules or requirements.

In connection with this integration work, we've developed the following integrated Point32Health Payment Policies:

- **Emergency Department Services** ([Harvard Pilgrim website](#), [Tufts Health Plan website](#)): This aligned Point32Health policy outlines the relevant information from the now-archived Harvard Pilgrim Emergency Care Payment Policy and Tufts Health Plan Emergency Department Services Payment Policy.
- **Dermatology** ([Harvard Pilgrim website](#), [Tufts Health Plan website](#)): This policy is replacing the previous Harvard Pilgrim Dermatology Payment Policy and Tufts Health Plan Dermatology Professional Payment Policy, which we have archived, and the relevant information from those policies can now be found on this aligned Point32Health version.
- **Radiation Oncology** ([Harvard Pilgrim website](#), [Tufts Health Plan website](#)): This Point32Health policy is replacing the Harvard Pilgrim Radiation Oncology Payment Policy and Tufts Health Plan Radiation Oncology Payment Policy
- **Chemotherapy Oncology** ([Harvard Pilgrim website](#), [Tufts Health Plan website](#)): This policy is replacing the Harvard Pilgrim Oncology and Chemotherapy Payment Policy and Tufts Health Plan Oncology Payment Policy

Nutritional Counseling

We've also replaced the previous Harvard Pilgrim Nutritional Counseling Payment Policy and Tufts Health Plan Nutritional Counseling Professional Payment Policy with a new, integrated Point32Health [Nutritional Counseling Payment Policy](#).

As a reminder, it's important for medical nutrition therapy services to be reported correctly based upon who is rendering them. As supported by the American Medical Association, CPT code ranges 97802-97804 or G0270-G0271 should only be reported by a medical nutritionist, nutritional professional, or hospital. If a physician or other qualified health care professional provides medical nutrition therapy, an evaluation and management or preventive service code should be selected. ▲

Point32Health billing updates

[Tufts Health Medicare Preferred PPO](#) | [Tufts Health Plan MCO/ACO](#) | [Tufts Health Plan Senior Care Options](#) | [Tufts Health Unify](#) | [Tufts Medicare Preferred HMO](#)

Point32Health is making some updates to our billing requirements, all of which will be effective Dec. 1, 2023 for all Tufts Health Plan Medicare Advantage and Medicare-Medicaid products.

Occurrence codes

Point32Health will require providers billing services on UB-04 claim forms for the applicable products to bill occurrence codes and corresponding occurrence dates in the following manner:

- An occurrence date must be present when billing an occurrence code
- An occurrence code must be present when billing an occurrence date
- A distinct occurrence code must not be billed more than once on a single claim

Occurrence codes and corresponding occurrence dates are located at Loop-2300/Segment HI/Element 1271 and Loop-2300/Segment HI/Element 1250, respectively, in the electronic 837 institutional claim format; for paper claims, occurrence codes and dates are reported in Form Locators (FL) 31-34. If any of this information is missing, the claim will be rejected and the provider will need to resubmit the claim in accordance with timely filing guidelines.

Condition codes: inpatient and skilled nursing facility (SNF) claims

In accordance with CMS requirements, we will require that a condition code of "40" be present on inpatient and SNF claims when the patient is transferred to another participating Medicare provider before midnight on the day of admission. Inpatient and SNF claims for members Tufts Health Plan Medicare Advantage and Medicare-Medicaid products not meeting this criterion will be rejected back to the submitting provider for correction and resubmission to Point32Health.

J-codes for injectable drugs

Effective Dec. 1, when J-codes for injectable drugs are submitted on claims for Tufts Health Unify, Tufts Health Plan MCO/ACO, Tufts Health Medicare Preferred HMO and PPO, and Tufts Health Plan Senior Care Options members without an accompanying quantity, appropriate National Drug Code (NDC) number, and unit of measurement code, these claims will be rejected back to the provider and must be resubmitted with the appropriate NDC 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, Sue Panos, 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

