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# **Specialists**

### **Definitions**

**Specialist** — A health professional who has advanced education and training in one clinical area of practice.

**Physician Specialists** — Practitioners who are credentialed as either medical doctors (M.D.) or doctors of osteopathy (D.O.). They may practice individually or as part of a group. Physician specialists are enrolled with individual Harvard Pilgrim provider identification (ID) numbers, and bill with the individual National Provider Identifier (NPI) number. Harvard Pilgrim requires providers to use NPIs on requests for services for requesting and servicing providers, including facilities.

**Hospital-Based Physicians** — Practitioners who practice exclusively within the inpatient or outpatient facility setting and who provide care for Harvard Pilgrim members only as a result of the member being directed to the hospital. Examples of hospital-based physicians include, but are not limited to pathologists, radiologists, anesthesiologists, and emergency room physicians.

- Hospital-billed physician services are billed by the hospital using the hospital's tax identification number (e.g., a cardiologist who interprets EKGs for a hospital).
- The services rendered by these practitioners are reimbursed to the hospital according to the terms and conditions
  of the hospital contract.

**Non-Physician Specialists** — Practitioners who have met the professional and legal requirements necessary to provide a health care service. Non-physician specialists include, but are not limited to, chiropractors, dentists, oral surgeons, physical therapists, podiatrists, occupational therapists, optometrists, and speech therapists.

- Physical therapists, occupational therapists, and speech therapists may be enrolled in our claims processing system as a group.
- All other non-physician specialists are enrolled in our claims processing system as individuals.

Refer to the *Provider Directory* for more information on how providers are marketed.

## **Scope of Services**

Specialists provide medically necessary specialty care to Harvard Pilgrim members. For most specialty care, HMO, and POS members using their in-network benefits must be referred by their PCPs for specialty care. The specialist treats the member according to the PCP's request and exchanges clinical information with the member's PCP.

- If a member visits a specialist without a valid referral for services that require a PCP referral, the specialist should contact the member's PCP for a referral.
- If the PCP does not approve the referral, the specialist should inform the member of his/her financial liability and have the member sign a financial liability form.

When possible, behavioral health providers are expected to obtain member consent to exchange relevant treatment information with the PCP, as appropriate, for the coordination of the member's care.

The specialist must obtain prior approval from the member's PCP before any change is made to the original referral (i.e., scope and/or number of visits). If a specialist decides that a member needs care that the specialist cannot provide, the specialist must consult with the member's PCP. The member's PCP will initiate a new referral to the appropriate specialist.

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#### **Network Operations & Care Delivery Management-Provider Network**

## **Specialty Care Requirements**

Physicians, podiatrists, and oral surgeons affiliated with Harvard Pilgrim are required to maintain hospital privileges, or alternate coverage arrangements, at contracted hospitals. The privileges/arrangement must be consistent with the specialty in which they provide care to Harvard Pilgrim members.

Harvard Pilgrim requires that specialists:

- Meet Harvard Pilgrim credentialing standards and successfully complete initial credentialing and periodic recredentialing processes.
- Are published as a specialist in Harvard Pilgrim's Provider Directory. (Refer to the <u>Provider Directory</u> for exceptions.)
- Are encouraged to achieve and maintain board certification in the specialties in which they provide care to Harvard Pilgrim members.
- Allow Harvard Pilgrim to use practitioner performance data (such as quality, cost, resource use, or utilization information) as is required by the National Committee for Quality Assurance (NCQA).

#### **Providing Services**

Physician specialists must also provide:

- Clear, accessible coverage arrangements with contracted (Harvard Pilgrim-credentialed) practitioners, which ensure that members have access to initial non-urgent visits within 14 days and initial urgent visits within seven days.
- 24-hour/7-day emergency coverage plans
  - This coverage arrangement must provide access to a Harvard Pilgrim

    –affiliated clinician.
  - Directing members to an emergency room does not meet this standard.

Clinicians may not provide services for Harvard Pilgrim members until the Credentialing Committee approves them. Any claim submitted prior to the effective date of the affiliation will be denied. A specialist's effective date is the date of committee approval.

Maine specialists must satisfy the following access standards:

Service: Urgent care Timeline: Within 24 hours
Service: Routine specialty care Timeline: Within 30 days

In general, specialists should not keep members with a scheduled appointment waiting an unreasonable length of time.

• For Maine specialists, an unreasonable length of time means more than 45 minutes.

PUBLICATION HISTORY	
06/15/12	reviewed; no changes
06/15/13	added NCQA practitioner performance data requirement information
03/15/14	added CT NCQA/URAC's provider network access and availability standards information
09/15/16	reviewed; administrative edits for clarity
03/01/18	reviewed; no changes
09/01/21	reviewed; no changes
01/01/23	reviewed; no changes
01/01/24	removed references to Connecticut

<sup>&</sup>lt;sup>1</sup> Maine providers are not required to maintain privileges at a Harvard Pilgrim–contracted hospital and may enroll without a Harvard Pilgrim–contracted hospital affiliation.