

Authorization and Notification

Authorization Requirements

Our plan members will be required to select a Primary Care Provider (PCP). The PCP will serve as the coordinator of care to ensure access to medically necessary specialty care. The PCP may oversee all of the medical care and services provided to the member. Out-of-network referrals require plan notification and authorization. Refer to the [StrideSM \(HMO\) Medicare Advantage Referral Policy and Procedures](#) for more information.

It is extremely important that Harvard Pilgrim authorization procedures are followed for services that require prior authorization. If a member proceeds to receive care at the direction of his/her primary care provider or network specialist, believing that such care was verbally or otherwise authorized by the provider, the member cannot be held financially responsible.

In such cases when the referring network provider fails to follow Harvard Pilgrim's CMS approved authorization protocols, Harvard Pilgrim may decline to pay the claim in which case participating providers will be held financially responsible for services received by the member. Again, CMS prohibits holding the member financially responsible in these cases.

To request an authorization, call the Medicare Advantage Provider Service Center at 888-609-0692. Providers can review the status of authorization requests via the Medicare Advantage Provider Portal at www.harvardpilgrim.org/provider.

Refer to the [StrideSM \(HMO\) Medicare Advantage Prior Authorization and Referral Chart](#) for links to our authorization policies and authorization request forms. CMS preventive services do not require an authorization or referral. For more information, please refer to our *Stride (HMO) Summary of Benefits or Evidence of Coverage*.

Prior Authorization Requests for Drugs

Certain prescription medications require prior authorization through Harvard Pilgrim. Providers may submit an electronic prior authorization (ePA) through electronic medical record (EMR) system, through a third party ePA vendor, or directly from public or secured Provider Portal via PromptPA.

Requests for Part B and Part D drug authorizations may also be submitted to the Pharmacy Utilization Management Department via the following:

Fax: 617-673-0956
Mail: Harvard Pilgrim Health Care
Attn: Pharmacy Utilization Management Department
1 Wellness Way, Canton, MA 02021

Acute Care Facility Discharge Notification Requirements

To expedite claims processing and initiate care management services to members following an inpatient stay, Harvard Pilgrim requires all acute care facilities to submit a daily list of discharged members. Harvard Pilgrim will accept the current format of your discharge census. Daily discharge reports require the following information:

- Date of report
- Member's first name
- Member's last name
- Member's Harvard Pilgrim ID number
- Name of facility
- Discharge date
- Discharge diagnosis
- Discharge disposition (home, another facility, deceased)

Fax discharge data to 617-509-1147, "Attn: Care Management Dept."

PUBLICATION HISTORY

10/15/13	original documentation
12/15/14	reviewed; no changes
01/01/16	updated referral/authorization table
01/25/16	added the <i>universal home health services prior authorization form</i> link and fax info to referral/authorization table
02/26/16	updated the authorization submission information to inpatient rehabilitation facilities and skilled nursing facilities
10/15/16	updated prior authorization and referral chart
06/25/19	added link to Stride Medicare Advantage Referral Policy
01/01/22	updated document format
01/01/23	reviewed; added Prior Authorization Requests for Drugs section