

Insights and Updates for Providers

July 2024

Change Healthcare update: Timely filing limits and claim adjustment requirements to resume

**Harvard Pilgrim Health Care Commercial | Tufts Health Plan Commercial |
Tufts Health Public Plans | Tufts Health Senior Products**

Effective for claims submitted on or after Sept. 1, 2024, Point32Health will end the temporary claims timely filing and claims adjustment waiver that we instituted related to the Change Healthcare cybersecurity event and will return to our standard requirements for all lines of business.

To support providers who utilize Change Healthcare, a subsidiary of Optum, as a clearinghouse while connections were being restored, Point32Health temporarily waived timely filing limits for affected providers for Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Public Plans, and Tufts Health Plan Senior Products. Additionally, claims adjustment/replacement claims were temporarily waived for Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, and Tufts Health Public Plans.

With electronic claims submission connections to Change Healthcare/Optum (via iEDI and RelayHealth) restored ([see the May newsletter announcement](#)) for claims submitted on or after Sept. 1, 2024, our standard timely filing and claim adjustment requirements will resume.

For the latest information, including a list of all available clearinghouses/trading partners, please refer to the [Our Response to Change Healthcare's Cybersecurity Incident page](#). To view our standard timely filing and claim adjustment requirements, refer to the claims sections of our [Provider Manuals](#). ▲

Recovering negative balances

Harvard Pilgrim Health Care Commercial | Tufts Health Plan Commercial

As you may know, Point32Health takes the necessary steps to recover negative balances, which are created when a claim has been overpaid and is subsequently retracted/re-adjudicated. Reasons why a claim may be retracted include, but are not limited to:

- Duplicate payment
- Payment to the wrong provider
- Payment for the wrong member
- Retroactive termination of a member
- Overpayment identified through internal or external audits
- Payment adjustment from rate correction (e.g., claim should have been paid at contract rate)

Negative balances are typically recovered using other claims payments to offset the amount. If there are insufficient claims payments, a negative balance may be transferred to other claims systems within Point32Health and its affiliates to offset the amount. For example, a negative balance related to a Tufts Health Plan product member

may be resolved via Harvard Pilgrim claims. Alternatively, the provider may submit a refund check to the plan to resolve a negative balance.

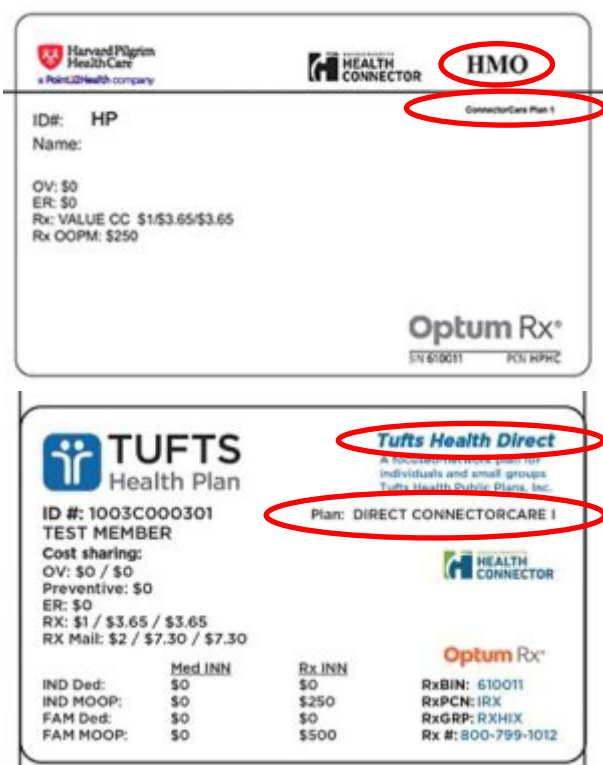
Negative balances that cannot be settled through offsetting claims payments or a refund check may be placed in a collection status.

For more information about negative balances, refer to the [Negative Balance policy](#) of Harvard Pilgrim's commercial Provider Manual and the [Claims chapter](#) of the Tufts Health Plan commercial Provider Manual. ▲

ConnectorCare plans – in-network coverage reminder

Harvard Pilgrim Health Care Commercial | Tufts Health Direct

As you may know, as of Jan. 1, 2024, every insurance carrier that participates in the Massachusetts Health Connector marketplace also offers a health insurance plan through the ConnectorCare program. We're pleased to share that Harvard Pilgrim Health Care has joined Tufts Health Plan as a ConnectorCare issuer for the 2024 plan year!



Please keep in mind that if you are contracted with Point32Health's Harvard Pilgrim Health Care Commercial or Tufts Health Direct plans, **you are an in-network provider** for ConnectorCare members who have chosen coverage through either of these plans. You can identify Harvard Pilgrim members by their health insurance ID cards, which specify the ConnectorCare plan type (1, 2, 3), under "HMO" in the upper right corner. Please see the sample card image on the left for reference.

ConnectorCare members who have purchased health care coverage through Tufts Health Plan can be recognized by their Tufts Health Direct member ID cards, which include the ConnectorCare plan type (I, II, III), as seen on the following sample card image.

Confirmation of your patients' ConnectorCare member coverage can be obtained through the [HPHConnect](#) and [Tufts Health Plan](#) secure provider portals or via the [New England Healthcare EDI Network \(NEHEN\)](#) if you are a member.

The increased number of ConnectorCare plan issuers, along with extended income eligibility limits for the program have expanded access to affordable health care coverage for thousands of Massachusetts residents. We're proud of our role in helping to improve health outcomes across the state and look forward to our continued participation in this vital Massachusetts initiative.

[Read on to learn more](#) about the 2024 ConnectorCare Program. ▲

Enrollment/screening for RI Medicaid providers

Tufts Health RITogether

As a reminder, if you are a Rhode Island Medicaid provider who hasn't completed screening and enrollment with the state Medicaid program, it's important to do so to ensure that you can continue to participate in our Tufts Health RITogether network.

The 21st Century Cures Act requires that states screen and enroll all providers rendering services to Medicaid members, regardless of specialty.

We encourage unscreened providers to complete screening and enrollment with Rhode Island Medicaid as soon as possible — to allow you to receive reimbursement for Tufts Health RITogether members and to ensure you can remain in our Tufts Health Public Plans network in the future.

The application for enrollment/screening can be accessed directly on the [RI Medicaid Healthcare Portal](https://riproviderportal.org) (www.riproviderportal.org). You'll also find a Provider Enrollment User Guide there, and additional information can be found on the RI EOHHS website (<https://eohhs.ri.gov/providers-partners/provider-enrollment>).

If you have any other questions or concerns that are not answered by the Provider Enrollment User Guide, please contact the RI Medicaid Customer Service Help Desk at 800-964-6211. ▲

Reminder: removal of certain prior authorization requirements

**Harvard Pilgrim Health Care Commercial | Tufts Health One Care |
Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together**

As a reminder, in connection with Point32Health's ongoing initiative to support our provider partners in efficiently delivering high-quality care, [the following procedures and associated codes no longer require prior authorization](#) for our Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, and Tufts Health One Care members:

- **Laparoscopic Cholecystectomy** (CPT 47562, 47563, 47564)
- **Transcervical Radiofrequency Ablation of Uterine Fibroids** (CPT 58580)
- **Prostatectomy, Transurethral Resection (TURP)** (CPT 52601, 52630, 52648)

Please continue to check future issues of Insights and Updates for Providers for information on subsequent changes intended to further our goal of minimizing your administrative burden while expediting member care.

For guidance on submitting notifications and prior authorization requests, please refer to the [Referral, Notification and Authorization Policy](#) in the Harvard Pilgrim Health Care Commercial Provider Manual and the [Referrals, Prior Authorizations and Notifications section](#) of the Tufts Health Plan Provider Manual. Additionally, look to Point32Health's [Medical Necessity Guidelines page](#) to review clinical coverage criteria. ▲

New maternity and family planning webpages launch

All products

Starting a family is not always easy — that's why we've launched the new maternity and family planning sections of our [Point32Health](#) and [Harvard Pilgrim Health Care](#) member websites to offer members a wealth of resources to help them navigate the process. The need for health care tailored to the individual is important, and these new sites aim to support members in all stages of family planning and care, from conception to birth and beyond.

Additional topics include obtaining breast pumps, being reimbursed for lactation consultations, offering care management support for pregnant members, and more. The websites will also spotlight [Ovia Health](#), which is available to support and guide members through the journey of reproductive health, pregnancy and parenthood.

We encourage you to share these valuable resources with any Point32Health (Harvard Pilgrim or Tufts Health Plan) patients in your practice who may benefit from them! ▲

New HEDIS tip sheet for GSD

All products

Point32Health is pleased to share that we have developed a new HEDIS® tip sheet related to the [Glycemic Status Assessment for Patients with Diabetes \(GSD\) measure](#), which replaces the former Hemoglobin A1C Control for Patients with Diabetes (HBD) measure.

The best practices highlighted in our HEDIS 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 Point32Health tip sheets currently available to providers, refer to the [HEDIS tip sheet page](#) on our provider website.

Be sure to look to future issues of Insights and Updates for Providers for new information as we continue to develop additional tip sheets!

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

Contracting, Enrollment, and Credentialing Quick Reference Guide

All products

To become a network provider with any health plan, there are several important steps and processes that must occur. This includes the contracting process, the enrollment process, and where appropriate, the credentialing process. Because these steps are often confused with each other, we've developed this [quick reference guide](#) to highlight the differences and offer tips on how to avoid delays.

For more information and resources on how to join our network, refer to the [Harvard Pilgrim](#) and [Tufts Health Plan](#) websites. You can also find additional information in our [Provider Manuals](#). ▲

MassHealth update to reimbursement for certain 340B drugs

Tufts Health Together

As you may know, the federal 340B Drug Pricing Program allows participating hospitals and other providers to purchase certain covered outpatient drugs or biologicals from manufacturers at discounted prices. In accordance with requirements issued via MassHealth's recent [Managed Care Entity Bulletin 114](#) and [All Provider Bulletin 390](#), **effective July 1, 2024 Point32Health will no longer provide reimbursement for the drugs identified below for Tufts Health Together members when they are purchased through the 340B program.**

You will need to use non-340B stock for these drugs. Claims for Tufts Health Together members billed with the modifier UD, which indicates that the drugs were purchased through the 340B Drug Pricing Program, will be denied:

- Abecma (idecabtagene vicleucel)
- Breyanzi (lisocabtagene maraleucel)
- Carvykti (ciltacabtagene autoleucel)
- Hemgenix (etranacogene dezaparvovec)
- Kymriah (tisagenlecleucel)
- Luxturna (voretigene neparvovec)
- Skysona (elivaldogene autotemcel)

- Tecartus (brexucabtagene autoleucel)
- Yescarta (axicabtagene ciloleucel)
- Zolgensma (onasemnogene abeparvovec-xioi)
- Zynteglo (betibeglogene autotemcel)

Important billing guidelines

As indicated in Point32Health's [Drugs and Biologicals Payment Policy](#), because the above-referenced drugs are part of [MassHealth's Acute Hospital Carve-Out Drug List](#), they must be submitted as professional claims, separately from any facility claims, for appropriate compensation. Providers are required to include the 11-digit national drug code (NDC) number, corresponding HCPCS code(s), and number of units administered to the member on the claim, along with the following supporting documentation, in accordance with [MassHealth MCE Bulletin 42](#):

- The hospital's actual acquisition cost of the drug
- Copy of the invoice(s) for the drug from the drug manufacturer, supplier, distributor, or other similar party or agent
- Any additional supporting documentation, as necessary

Claims with supporting documentation cannot be submitted electronically and must be submitted on paper, in accordance with the claim submission requirements found in the [Claim Requirements, Coordination of Benefits and Dispute Guidelines](#) chapter of the Tufts Health Public Plans Provider Manual. ▲

Dr. Jud Brewer's Hunger Habit workshop available on demand

All products

If you missed the chance to join Dr. Jud Brewer's Hunger Habit workshop in March, you can [access the recorded version](#) on the Boston University Center for Continuing Education website from now until April 22, 2025.

Ideal for health care professionals who treat patients struggling with unhealthy eating patterns, Dr. Brewer's virtual workshop focuses on practical processes for changing unhelpful habits and making healthier choices.

Dr. Jud Brewer, MD, Ph.D. ("Dr. Jud"), is a New York Times best-selling author and thought leader in the field of habit change. To learn more about his work, clinical resources, and trainings, visit [drjud.com](#). ▲

Help us keep directory information up to date

All products

Provider directories are an important resource for health care consumers, who utilize them to select providers, make appointments, and access care. In accordance with the No Surprises Act of 2021, providers should review and revalidate their information every 90 days to ensure accuracy of the Provider Directory. Failure to review and update information at least every 90 days may result in directory suppression until such information is validated.

At a minimum of every 90 days, providers should make sure to review and verify the accuracy of their information displayed in our [Harvard Pilgrim Health Care](#) and [Tufts Health Plan](#) provider directories (including practice location, phone number, hours of operation, ability of each individual provider to accept new patients, and any other information that affects the content or accuracy of the directories).

Reporting changes

Changes to data should be reported via the [CAQH Provider Data Portal](#) (formerly known as CAQH ProView) for those who have implemented it.

Report any contractual affiliation changes to Harvard Pilgrim and/or Tufts Health Plan by:

- Submitting a [Provider Change Form](#) to Harvard Pilgrim's Provider Processing Center for Harvard Pilgrim products by email at PPC@point32health.org, or;
- Submitting a [Medical](#) or [Behavioral Health](#) Provider Information Form to provider_information_dept@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.)

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.

Additional information

For additional information, please refer to the updated Directory Accuracy and Suppression of Unverified Provider Information policies for [Harvard Pilgrim Commercial plans](#) and [Harvard Pilgrim StrideSM \(HMO\)/\(HMO-POS\) Medicare Advantage plans](#), as well as the Directory Accuracy and Suppression of Unverified Provider Information sections recently added to the Providers sections of our Tufts Health Plan [Commercial](#), [Senior Products](#), and [Public Plans](#) Provider Manuals. ▲

Coverage reminder – Community Behavioral Health Center services

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health Plan Senior Care Options | Tufts Health Public Plans

As a reminder, Point32Health provides coverage of Community Behavioral Health Center (CBHC) Mobile Crisis Intervention (MCI) and Community Crisis Stabilization (CCS) services for Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Plan Public Plans, and Tufts Health Plan Senior Care Options (SCO) members.

Neither MCI nor CCS services require prior authorization; however, [notification of admission to a CCS](#) within a CBHC must be provided within 72 hours of the admission. Providers can submit notification through the secure [Tufts Health Plan](#) or [Harvard Pilgrim Health Plan](#) provider portals or by contacting their Behavioral Health utilization manager. To submit notification for Tufts SCO members, please call 800-208-9565.

When billing for MCI (H2011) and CCS (S9485) services, be sure to include the appropriate modifier. For additional directions and guidance, refer to the Behavioral Health and Substance Use Disorder [Commercial Plans](#), [Public Plans](#), and [Senior Products \(Senior Care Options\)](#) Payment Policies.

CBHCs were designated across Massachusetts in 2023 to provide adults and youth with 24/7 access to community-based and mobile crisis intervention services. 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.

Providers of CBHC services are encouraged to reach out to their assigned Provider Account Manager with questions, or contact the Provider Account Management team at BHPAM@Point32Health.org. ▲

Point32Health Medical Necessity Guideline updates

All products

The chart below identifies updates to our Medical Necessity Guidelines. For additional details, refer to the [Medical Necessity Guidelines page](#) on our Point32Health provider website, where you can find coverage and prior authorization criteria for our Harvard Pilgrim and Tufts Health Plan lines of business.

Updates to Medical Necessity Guidelines (MNG)			
Visit the Medical Necessity Guidelines page on our Point32Health provider website			
MNG Title	Products Affected	Eff. Date	Summary
Reconstructive and Cosmetic Surgeries	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Public Plans	9/1/2024	<p>For Tufts Health Direct, Tufts Health Together, and Tufts Health One Care, prior authorization will be required for the following codes:</p> <ul style="list-style-type: none"> • 15830 • 15834 • 15835 • 15837 • 15838 • 56620 <p>In addition, for Tufts Health Direct, Tufts Health Together, Tufts Health One Care, and Tufts Health RITogether, the following codes will require prior authorization when submitted with the ICD-10 diagnosis codes L90.5 or L91.0:</p> <ul style="list-style-type: none"> • 11042 • 0479T • 0480T <p>For Harvard Pilgrim Commercial products, panniculectomy procedures will no longer be reviewed against InterQual criteria, and will instead be reviewed in accordance with Point32Health's in-house criteria through our normal utilization management process.</p>

Updates to Medical Necessity Guidelines (MNG)

Visit the [Medical Necessity Guidelines](#) page on our Point32Health provider website

MNG Title	Products Affected	Eff. Date	Summary
Minimally Invasive Procedures for the Treatment of Benign Prostatic Hypertrophy	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care	9/1/2024	<p>MNG renamed from Procedures for the Treatment of Benign Prostatic Hypertrophy to Minimally Invasive Procedures for the Treatment of Benign Prostatic Hypertrophy.</p> <p>We will begin covering Waterjet Tissue Ablation (Aquablation) (CPT 0421T, HCPCS C2596) with prior authorization, and the updated MNG outlines clinical coverage criteria. Point32Health in-house criteria will be utilized for all applicable plans, with the exception of Tufts Health One Care, which will be reviewed against the local coverage determination (LCD).</p> <p>For Tufts Health One Care, Point32Health will now use InterQual criteria for Water Vapor Thermal Therapy, as the associated local coverage determination (LCD) has been retired. (Completed InterQual SmartSheets must be sent by fax to 857-304-6304.)</p>
Procedures for the Treatment of Symptomatic Varicose Veins	Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care	9/1/2024	<p>Prior authorization will be required for the following CPT codes:</p> <ul style="list-style-type: none"> • 36473 – Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated • 36474 – subsequent vein(s) treated in a single extremity, each through separate access sites
Custom Fabricated Oral Appliances for Obstructive Sleep Apnea	Tufts Health RITogether	9/1/2024	<p>Prior authorization will be required for HCPCS code E0486 (oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, custom fabricated, includes fitting and adjustment).</p>
Implantable Neurostimulators Video Capsule Endoscopy Manual Wheelchairs	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care	8/1/2024	<p>MNGs reviewed/updated as part of 2024 InterQual clinical content updates.</p>

Updates to Medical Necessity Guidelines (MNG)

Visit the [Medical Necessity Guidelines](#) page on our Point32Health provider website

MNG Title	Products Affected	Eff. Date	Summary
<p>Blepharoplasty, Upper/Lower Eyelid, and Brow and/or Eyelid Ptosis Repair</p> <p>Endoscopic Sinus Surgeries</p> <p>Hysterectomy</p> <p>Mobile Outpatient Cardiac Telemetry</p> <p>Orthognathic Surgery</p> <p>Osteogenesis Stimulators</p> <p>Positive Airway Pressure Devices for OSA (Harvard Pilgrim)</p> <p>Positive Airway Pressure Devices for Tufts Health RITogether and Tufts Health One Care</p> <p>Minimally Invasive Procedures for the Treatment of Benign Prostatic Hypertrophy</p> <p>Surgical Procedures for the Treatment of Obstructive Sleep Apnea</p> <p>Inpatient Acute Level of Care (Med/Surg)</p> <p>Temporomandibular Joint Disorder</p> <p>Vertebroplasty and Kyphoplasty</p> <p>Outpatient Pulmonary Rehabilitation (Harvard Pilgrim only)</p> <p>Molecular Diagnostics (Tufts Health Plan Commercial only)</p> <p>Speech Generating Devices (Tufts Health Public Plans only)</p> <p>Outpatient PT OT ST (Tufts Health Plan only)</p> <p>Home Health Care Services</p>	<p>Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care</p>	<p>7/1/2024</p>	<p>MNGs reviewed/updated as part of 2024 InterQual clinical content updates.</p> <p>Minimally Invasive Procedures for the Treatment of Benign Prostatic Hypertrophy:</p> <ul style="list-style-type: none"> • changed the Prostatectomy, Transurethral Resection (TURP) subset name to Urethral Lift • added CPT codes 52441 and 52442 • removed CPT codes 52601, 52630, and 52648
<p>Behavioral Health Inpatient and 24-Hour Level of Care Determinations</p>	<p>Tufts Medicare Preferred, Tufts Health Plan Senior Care Options</p>	<p>7/1/2024</p>	<p>The applicability of this coverage guideline, which is intended to document existing notification processes and requirements, has been expanded to include the Tufts</p>

Updates to Medical Necessity Guidelines (MNG)

Visit the [Medical Necessity Guidelines](#) page on our Point32Health provider website

MNG Title	Products Affected	Eff. Date	Summary
			Medicare Preferred and Tufts Health Plan Senior Care Options lines of business.
Behavioral Health Level of Care for Non-24 Hour/Intermediate/ Diversionary Services	Tufts Medicare Preferred	7/1/2024	Coverage guideline updated to clarify that partial hospitalization services require notification in accordance with InterQual Medicare Behavioral Health Criteria, which consists of CMS national coverage determinations (NCDs)/local coverage determinations (LCDs) for Tufts Medicare Preferred.
Positive Airway Pressure Devices for Tufts Health RITogether and One Care Positive Airway Pressure Devices for Sleep Apnea Sleep Studies for Tufts Health RITogether	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care	7/1/2024	Annual review of sleep-related MNGs, no changes.
Allergy Testing and Immunotherapy	Harvard Pilgrim Commercial, Tufts Health Plan Commercial	7/1/2024	Allergen Immunotherapy criteria updated with clarifications related to immunotherapy for environmental allergens and immunotherapy connected to a diagnosis of systemic reaction to an insect sting for patients with specific IgE to venom allergens.
Reconstructive and Cosmetic Surgeries	All products	7/1/2024	<p>Harvard Pilgrim and Tufts Health Plan Commercial, and all Tufts Health Public Plans:</p> <p>Updates to criteria and notes, including but not limited to language related to</p> <ul style="list-style-type: none"> • recurrent skin infections refractory to medical treatment • submission of the Dermatology Medical Record indicating the nature of the skin condition, treatments attempted, and response to treatment <p>All products:</p> <p>Addition of note clarifying that staged procedures with liposuction combined with excess skin removal that have the potential to change or improve appearance without significantly improving physiological function are considered cosmetic in nature and may be excluded from coverage.</p>

Updates to Medical Necessity Guidelines (MNG)

Visit the [Medical Necessity Guidelines page](#) on our Point32Health provider website

MNG Title	Products Affected	Eff. Date	Summary
Tufts Health One Care Prior Authorization and Inpatient Notification List Harvard Pilgrim StrideSM (HMO)/(HMO-POS) Medicare Advantage Prior Authorization and Inpatient Notification List Tufts Health Plan Senior Care Options Prior Authorization and Inpatient Notification List Tufts Health Medicare Preferred (HMO and PPO) Prior Authorization and Inpatient Notification List	Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health Plan Senior Care Options, Tufts Health Medicare Preferred, Tufts Health One Care	7/1/2024	<p>Newly created Prior Authorization and Inpatient Notification Lists for Harvard Pilgrim StrideSM (HMO)/(HMO-POS) Medicare Advantage and Tufts Health One Care, which outline services requiring prior authorization and notification in one streamlined location for quick reference.</p> <p>For Tufts Health Plan SCO, previously separate Prior Authorization List and Notification List combined into one comprehensive document.</p> <p>Updated format of existing Medicare Preferred (HMO and PPO) Prior Authorization and Inpatient Notification List.</p>



Point32Health medical drug program updates

All products

The chart below identifies updates to our medical benefit drug program. For additional details, refer to the Medical Necessity Guidelines associated with the medical drug in question, which you can find on our Point32Health (the parent company of Harvard Pilgrim Health Care and Tufts Health Plan) [Medical Benefit Drug Medical Necessity Guidelines page](#).

Alternatively, some medical drugs are managed through an arrangement with OncoHealth when utilized for oncology purposes for Harvard Pilgrim Commercial and Harvard Pilgrim StrideSM (HMO)/(HMO-POS) Medicare Advantage members. You can find information about this program on the [OncoHealth page](#) in the Vendor Programs section of the Harvard Pilgrim provider website and you can access the prior authorization policies for these drugs directly on [OncoHealth's webpage for Harvard Pilgrim](#).

Tufts Health Together utilizes MassHealth's Unified Formulary for pharmacy medications and select medical benefit drugs; for drug coverage and criteria refer to the [MassHealth Drug List](#).

Visit our new [Medical Drug Medical Necessity Guidelines page](#) to access these policies (*unless otherwise noted*).

Medications being added to prior authorization		
MNG/Drug(s)	Plan & additional information	Eff. date
Zymfentra (infliximab-dyyb) Targeted Immunomodulators – Skilled Administration Part B Step Therapy	<p>Harvard Pilgrim StrideSM (HMO)/(HMO-POS) Medicare Advantage, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health One Care</p> <p>Prior authorization is now required for Zymfentra (HCPSC J1748), approved by the FDA in Oct. 2023 for the maintenance treatment of adults with moderately to severely active ulcerative colitis following treatment with an infliximab product administered intravenously, and</p>	7/1/2024

Medications being added to prior authorization		
MNG/Drug(s)	Plan & additional information	Eff. date
	moderately to severely active Crohn's disease following treatment with an infliximab product administered intravenously.	
Ryzneuta (efbemalenograstim alfa) Part B Step Therapy OncoHealth Part B Step Therapy Long-acting Colony Stimulating Factor Products	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 One Care Prior authorization is now required for Ryzneuta (J9361), approved by the FDA in Nov. 2023 to decrease the incidence of infection, as manifested by febrile neutropenia, in adults with non-myeloid malignancies receiving myelosuppressive anti-cancer drugs associated with a clinically significant incidence of febrile neutropenia.	7/1/2024
Amtagvi (lifileucel)	Harvard Pilgrim Commercial, Harvard Pilgrim Stride SM (HMO)/ (HMO-POS) Medicare Advantage, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options Amtagvi, a tumor derived autologous T cell immunotherapy approved by the FDA in March 2024 for the treatment of adult patient with unresectable or metastatic melanoma, is covered with prior authorization. Please note that for Tufts Health Together, requests for Amtagvi will be reviewed using the Point32Health Amtagvi (lifileucel) MNG found on our Medical Benefit Drug Medical Necessity Guidelines page until Aug. 12, 2024. Beginning Aug. 12, Amtagvi requests will be reviewed against the criteria on the MassHealth Drug List .	7/1/2024

Updates to existing prior authorization programs		
MNG/Drug(s)	Plan & additional information	Eff. date
Zulresso (brexanolone)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health RITogether	9/1/2024
Adstiladrin (nadofaragene firadenovec-vncg) Hemgenix (etranacogene dezaparvovec-drlb) Lyfgenia (lovotibeglogene autotemcel) Roctavian (valoctocogene roxaparvovec-rvox) Zynteglo (betibeglogene autotemcel)	Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health One Care, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options Point32Health will now use MassHealth criteria for prior authorization review for these gene therapies.	7/1/2024
Elevydis	Tufts Health Together Minor updates to MassHealth's criteria.	7/1/2024

Updates to existing prior authorization programs		
MNG/Drug(s)	Plan & additional information	Eff. date
Lyfgenia	Tufts Health Together For Tufts Health Together members, prior authorization review for Lyfgenia will now be managed using MassHealth criteria .	7/1/2024
Casgevy (exagamglogene autotemcel)	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 One Care Casgevy will now be covered with prior authorization for an additional indication: treatment resistant beta-thalassemia	7/1/2024
Carvykti (ciltacabtagene autoleucl)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health One Care, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Direct, Tufts Health RITogether Carvykti has moved from a fourth-line treatment to a second-line treatment.	7/1/2024
Abecma (idecabtagene vicleucl)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Harvard Pilgrim Stride SM (HMO)/(HMO-POS) Medicare Advantage, Tufts Health One Care, Tufts Medicare Preferred, Tufts Health Plan Senior Care Options, Tufts Health Direct, Tufts Health RITogether Abecma has moved from a fourth-line treatment to a third-line treatment.	7/1/2024



Pharmacy coverage changes

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

The chart below identifies updates to our Pharmacy program. For additional details, refer to the [Pharmacy Medical Necessity Guidelines page](#) on our Point32Health provider website, where you can find the policies that detail coverage criteria for our Harvard Pilgrim and Tufts Health Plan lines of business.

Updates to existing prior authorization programs		
Visit the Pharmacy Medical Necessity Guidelines page on our Point32Health provider website for details.		
Drug/policy	Plan & additional information	Eff. date
Tarpeyo (budesonide)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct	9/1/2024



Upcoming training opportunities

All products

We invite you to join one of our many training sessions for you and your office staff. We will be offering several interactive webinars you can join throughout the month of July — if these don't fit your schedule, we offer

educational videos on demand. To register for a session, simply find a training date that works for you on our [Provider Training page](#), click the link, and enter the requested information.

Point32Health

Avoiding administrative claim denials: Wednesday, July 31 from noon–1 p.m. ET

Navigating the provider websites: Tuesday, July 2 from noon–1 p.m. ET

New provider orientation: Tuesday, July 30 from 10–11 a.m. ET

Provider payment disputes: Tuesday, July 9 from 10–11 a.m. ET

Referrals, prior authorizations and notifications overview: Wednesday, July 17 from 1–2 p.m. ET

Behavioral Health resources for all providers: Monday, July 22 from 9–10 a.m. ET

Tufts Health Plan

Tufts Health Public Plans overview: Wednesday, July 10 from noon–1 p.m. ET

Senior products review: Thursday, July 18 from 11 a.m.–noon



***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.**

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 provider_communications@point32health.org.

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