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DIVISION OF INSURANCE

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HEALTH COVERAGE
Filing Guidance Notice 2013-D

TO: Insurance Carriers Offering or Renewing Insured Managed Care Plans in Massachusetts
FROM: Nancy Schwartz, Director, Bureau of Managed Care
DATE: February 25, 2013
RE: Services Provided by Physician Assistants

The purpose of this Notice is to provide guidance on the filing of material changes to managed care documents currently on file with the Massachusetts Division of Insurance (“Division”) to comply with the provisions of Chapter 224 of the Acts of 2012 that address services provided by physician assistants (“PA”), including, but not limited to Sections 150, 152, 153, 160, 161, 163, 166, 167, 168, 170, 171, 172, 187, 195, and 203.

Insurance carriers (“Carriers”) with managed care plans subject to the provisions of M.G.L. c. 176O and 211 CMR 52.00, *et seq.* are required to provide existing and prospective members with coverage certificates and provider directories that meet the relevant statutory requirements of the sections of M.G.L. c. 175, *et seq.* and M.G.L. c. 176O, *et seq.* Affected Carriers also are required to amend physician assistant contracts to be consistent with the statutory requirements.

Evidences of Coverage

When making changes to evidences of coverage (“EOC”), Carriers shall revise health plan policies and evidences of coverage/certificates to include clear, concise and complete statements that address the following:

- Physician assistants are recognized as participating providers within the plan.
- The definition and use of the following terms within any EOC or policy are consistent with those definitions as revised by Chapter 224:
 - primary care provider (“PCP”);
 - emergency medical condition;

- health care services; and
 - behavioral health manager.
- The term “primary care provider” replaces the term “primary care physician” within the EOC, and particularly as used in relation to emergency services and behavioral health services.
- For plans that provide coverage for PCPs, to the maximum extent possible, EOCs and policies notify the insured of the need for each insured to be attributed to a PCP, including the way in which the insured may select and change his or her PCP, or otherwise be attributed to a PCP by the Carrier.

Provider Directory

Provider directories shall display participating PAs in a non-discriminatory manner, and shall incorporate PAs into the PCP section of the provider directory.

Carriers shall submit to the Division all necessary material change amendments to policies, subscriber certificates and/or EOCs currently, provider directories and provider contracts that are part of managed care accreditation files to reflect the above-noted changes, as well as the manner and reasonable timetable the Carrier will use to notify members of the changes and to distribute the amended documents.

If you have any questions regarding this Filing Guidance Notice, please contact Nancy Schwartz, Director, Bureau of Managed Care, at (617) 521-7347.