

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid 600 Washington Street Boston, MA 02111 www.mass.gov/masshealth



MassHealth Transmittal Letter ALL-159 August 2008

- TO: All Providers Participating in MassHealth
- FROM: Tom Dehner, Medicaid Director

RE: All Provider Manuals (Revised Appendix A)

This letter transmits a revised Appendix A for all provider manuals, including information about the MassHealth dental third party administrator, Dental Services of Massachusetts, Inc (DSM), and its subcontractor, Doral Dental USA, LLC. Appendix A is a directory of MassHealth-related addresses, phone numbers, fax numbers, and e-mail addresses.

Appendix A is also available on the MassHealth Web site at <u>www.mass.gov/masshealthpubs</u>. Click on Provider Library, then on MassHealth Provider Manual Appendices.

If you have any questions about the information in this transmittal letter please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.

NEW MATERIAL

(The pages listed here contain new or revised language.)

All Provider Manuals

Pages A-1 through A-22

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

All Provider Manuals

Pages A-1 through A-20 — transmitted by Transmittal Letter ALL-143

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This appendix contains the names, addresses, and telephone numbers of units, agencies, and contractors that you may need to contact in the course of doing business with MassHealth. This appendix is also available on the MassHealth Web site at <u>www.mass.gov/masshealthpubs</u>. Click on Provider Library, then on MassHealth Provider Manual Appendices.

This directory is organized alphabetically by function.

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Benefit Plans and Utilization Management

MassHealth has entered into agreements with various entities to manage and review the quality and appropriateness of care.

If you have questions about the <i>PCC Plan</i> , PCC Plan Network Management Services, or referral requirements:	PCC Plan Hotline 1-800-495-0086 (TTY: 617-790-4130 for people with partial or total hearing loss) 617-790-4138 (fax)
If you have questions about service authorization or claims for members enrolled in the Massachusetts Behavioral Health Partnership :	1-800-495-0086 617-790-4185 (fax)
 If you have questions about the <i>Acute Hospital Utilization</i> <i>Management Program</i>, including: admission screening; prepayment review; and postpayment review: 	Masspro 245 Winter Street Waltham, MA 02451-1231 781-890-0011
For <i>admission screening</i> only:	1-800-732-7337 (Acute PAS) 1-800-752-6334 (Acute PAS fax)
For <i>prepayment review</i> only:	781-290-5784 (Prepayment Review fax)
 If you have questions about the <i>Chronic Disease and Rehabilitation Hospital Utilization Management Program</i>, including: admission screening; prepayment review; and postpayment review: 	Masspro 245 Winter Street Waltham, MA 02451-1231 781-890-0011 1-800-554-5127 (Chronic/Rehab PAS)
For preadmission screening, conversion screening , and concurrent review :	1-800-554-5127 (Chronic/Rehab PAS) 1-800-752-6334 (Acute and Chronic/Rehab PAS fax)

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Claims Submission and Resolution (Dental Claims)

MassHealth has contracted with Dental Services of Massachusetts, Inc. (DSM) to serve as the dental thirdparty administrator. Doral Dental USA, LLC, is the subcontractor to DSM who will receive MassHealth *dental claims* and answer providers' questions about the dental program.

Doral Customer Service:	MassHealth Dental 12121 N. Corporate Parkway Mequon, WI 53092 www.masshealth-dental.net
Verify member eligibility, provider customer service, questions about benefits, enrollment, credentialing, training, and complaints:	1-800-207-5019 1-800-466-7566 (TTY) Hours: Monday-Friday, excluding holidays, 8:00 A.M. – 6:00 P.M.
Intervention Services: Member education, member appointment coordination, broken appointments assistance, and customer Service for members:	inquiries@mahealth-dental.net
If you have questions about <i>prior authorizations</i> :	1-800-207-5019 Hours: Monday-Friday, excluding holidays pa@masshealth-dental.net
Send <i>paper prior authorization requests</i> to:	MassHealth Dental – PA 12121 N. Corporate Parkway Mequon, WI 53092
Submit prior authorization via the Web at:	www.masshealth-dental-net
If you have questions about <i>paper claims submission, claims inquiry, or claim status</i> :	1-800-207-5019 Hours: Monday-Friday, excluding holidays, 8:00 A.M. – 6:00 P.M. <u>claims@masshealth-dental.net</u>
Submit electronic claims (837 transactions) at <u>www.masshealth-dental-net</u> or through clearinghouse payer ID CKMA1	1-800-207-5019 Hours: Monday-Friday, excluding holidays, 8:00 A.M. – 6:00 P.M. <u>eclaims@masshealth-dental.net</u>
Fraud Hotline	1-800-237-9139 Hours: Monday-Friday, excluding holidays, 8:00 A.M. – 6:00 P.M. inquiries@mahealth-dental.net

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Claims Submission and Resolution (Non-dental and Non-pharmacy Claims)

MassHealth has contracted with MAXIMUS to receive MassHealth claims, *except for pharmacy and dental claims*, and to answer providers' questions about the payment of services covered by MassHealth.

MassHealth Customer Service: MassHealth **ATTN:** Customer Service P.O. Box 9118 Hingham, MA 02043 If you have questions about *claims or MassHealth policy*, 1-800-841-2900 or want to request a replacement remittance advice: Hours: Monday-Friday, excluding holidays, 8:00 A.M. – 5:00 P.M. providersupport@mahealth.net If you have a question about the *status of a claim*: 1-800-841-2900 Hours: Monday-Friday, excluding holidays, 8:00 A.M. – 5:00 P.M. www.massrevs.eds.com If you have questions about policies and procedures for 1-800-841-2900 submitting *electronic claims*, *technical support*, *or testing* Hours: Monday-Friday, excluding for HIPAA claims transactions: holidays, hiaasupport@mahealth.net After you are approved to submit claims electronically, www.mass.gov/masshealth upload your HIPAA-compliant *electronic claims* to the Web-Based Transactions page at: If you have questions about Provider Claim Submission 1-800-841-2900 Software (PCSS): Hours: Monday-Friday, excluding holidays, 8:00 A.M. - 5:00 P.M. PCSSsupport@masshealth.net Send original paper claims to: MassHealth ATTN: Originals P.O. Box 9118 Hingham, MA 02043 Send *paper adjustments* of all paid claims to: MassHealth **ATTN:** Adjustments P.O. Box 9118 Hingham, MA 02043 Send *paper resubmittals* of all denied claims to: MassHealth **ATTN:** Resubmittals P.O. Box 9118 Hingham, MA 02043 Send *voids* of all claims paid in error to: MassHealth ATTN: Voids P.O. Box 9118

Hingham, MA 02043

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If you have <i>Medicare/MassHealth claims</i> that cross over systematically, send paper crossover		MassHealth ATTN: Crossover C P.O. Box 9118 Hingham, MA 0204	
Send all 90-day waiver requests to:		MassHealth ATTN: 90-Day Wai P.O. Box 9118 Hingham, MA 0204	
If you have questions about <i>final deadline appeals</i> , for all claims, contact the Final Deadline Appeals Unit at:		MassHealth ATTN: Final Deadli 600 Washington Stre Boston, MA 02111 617-210-5538 <u>fdeappeals@state.ma</u>	eet

Claims Submission and Resolution (Pharmacy Claims)

MassHealth has contracted with ACS State Healthcare (ACS) to receive MassHealth *pharmacy claims* and answer providers' questions about the Pharmacy Online Processing System (POPS).

If you have questions about billing and claims including questions about <i>90-day waiver</i> requests	ACS Technical Help Desk 1-866-246-8503 24 hours a day, seven days a week
Fax the completed <i>90-day waiver</i> form and any pertinent documentation to:	1-866-556-9315 (fax)
If you need ID Card Request forms:	1-866-556-9313 (fax)
For all other assistance with billing and claims:	ACS Provider Relations <u>MassHealth@Providerrelations@acs-</u> <u>inc.com</u>
If you have questions about member eligibility:	MassHealth Customer Service 1-800-841-2900 Automated Voice Response (AVR):

1-800-554-0042

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If you have questions about prior authorization:		University of Massa School Drug Utilization Rev Commonwealth Med 100 Century Drive Worcester, MA 0160 1-800-745-7318 1-877-208-7428 (fax	view Program licine 06
Prior authorization requests for nonpharmacy sentences of nutritional, enteral, diapers, med/hospital equip RN, and PCA should be made to:		MassHealth Prior Au 600 Washington Stra Boston, MA 02111 Phone: 1-617-451-70 1-800-862-8341 (fax	eet 000
Send <i>written</i> questions related to claims, MassF policy, registration for electronic remittance advice to:		ACS State Healthcar ATTN: MassHealth 260 Franklin Street, Boston, MA 02110 <u>masshealth.provider</u> <u>inc.com</u>	Suite 1020
If you have questions about provider enrollmen credentialing:	t and	1-800-322-2909 providersupport@ma	ahealth.net

Clinical Screenings for Long-Term-Care Services

The following Aging Service Access Points (ASAPs) are designated by MassHealth to perform clinical eligibility screening activities for certain long-term-care services and programs (adult day health, nursing facility, and Program of All-inclusive Care for the Elderly (PACE)) for MassHealth members of all ages. ASAPs also review prior-authorization (PA) requests for personal emergency response systems (PERS) for MassHealth members of all ages, with the exception of MCB-eligible members. When applicable, please send the necessary clinical documentation or PA request to the ASAP serving the town in which the member lives. Requests must be reviewed and approved by the ASAP before MassHealth will pay for a MassHealth member to receive the long-term-services and programs identified above. Clinical approval is a prerequisite for MassHealth payment.

For assistance in locating the ASAP serving the member's city or town, call 1-800-AGE-INFO.

ASAP

BayPath Elder Services, Inc. 354 Waverly Street Framingham, MA 01702 1-800-287-7284 or 508-872-1866 508-872-3325 (fax) 508-872-5012 (TTY)

Service Area

Ashland, Dover, Framingham, Holliston, Hopkinton, Hudson, Marlborough, Natick, Northborough, Sherborn, Southborough, Sudbury, Wayland, Westborough

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Boston Senior Home Care 110 Chauncy Street Boston, MA 02111 617-451-6400 617-451-6631 (fax) 617-695-0437 (TTY)

Bristol Elder Services, Inc. 182 North Main Street Fall River, MA 02720 1-800-427-2101 or 508-675-2101 508-679-0320 (fax)

Central Boston Elder Services, Inc. 2315 Washington Street Boston, MA 02119 617-277-7416 or 617-277-7818 617-277-2005 (fax) 617-277-6691 (TTD)

Chelsea/Revere/Winthrop Home Care Center, Inc. 100 Everett Ave, Unit 10 P.O. Box 6427 Chelsea, MA 02150-0008 617-884-2500 617-884-7988 (fax) 1-800-432-2370 (TTY)

Coastline Elderly Services, Inc. 1646 Purchase Street New Bedford, MA 02740 508-999-6400 508-993-6510 (fax) 508-994-4265 (TDD)

Elder Services of Berkshire County, Inc. 66 Wendell Avenue Pittsfield, MA 01201 1-800-544-5242 or 413-499-0524 413-442-6443 (fax) 413-499-9764 (TTY)

Service Area

Beacon Hill (West End), Charlestown, Chinatown, Columbia Point, Dorchester, East Boston, East Mattapan, North End, South Boston

Attleboro, Berkley, Dighton, Fall River, Freetown, Mansfield, Norton, Raynham, Rehobeth, Seekonk, Somerset, Swansea, Taunton, Westport

Allston, Back Bay, Brighton, Fenway, Jamaica Plain, North Dorchester, Parker Hill, Roxbury

Chelsea, Revere, Winthrop

Acushnet, Dartmouth, Fairhaven, Gosnold, Marion, Mattapoisett, New Bedford, North Dartmouth, Rochester

Adams, Alford, Becket, Cheshire, Clarksburg, Dalton, Egremont, Florida, Great Barrington, Hancock, Hinsdale, Lanesborough, Lee, Lenox, Monterey, Mount Washington, New Ashford, New Marlborough, North Adams, Otis, Peru, Pittsfield, Richmond, Sandisfield, Savoy, Sheffield, Stockbridge, Tyringham, Washington, West Stockbridge

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Elder Services of Cape Cod & the Islands, Inc. 68 Route 134 South Dennis, MA 02660-3774 1-800-244-4630 (on Cape Cod) 1-800-442-4492 (off Cape Cod) 508-394-4630 508-394-4630 508-394-8691 (TDD/TTY)

Elder Services of Merrimack Valley, Inc. 360 Merrimack Street Riverwalk, Building 5 Lawrence, MA 01843-1740 1-800-892-0890 or 978-683-7747 978-687-1067 (fax) 1-800-924-4222 (TTY)

Elder Services of Worcester Area, Inc. 411 Chandler Street Worcester, MA 01602 1-800-243-5111 or 508-756-1545 508-754-7771 (fax) 508-792-4541 (TDD)

ETHOS 555 Amory Street Jamaica Plain, MA 02130-2672 617-522-6700 617-524-2899 (fax)

617-524-2687 (TDD) Franklin Country Home Care Corporation 330 Montague City Road, Suite 1

Turners Falls, MA 01376-2530 1-800-732-4636 or 413-773-5555 413-772-1084 (fax) 413-772-6566 (TDD)

Greater Lynn Senior Services 8 Silbee Street Lynn, MA 01901 1-800-594-5164 or 781-599-0110 781-592-7540 (fax) 781-477-9632 (TDD)

Service Area

Barnstable, Bourne, Brewster, Buzzards Bay, Centerville, Chatham, Chilmark, Dennis, Eastham, Edgartown, Falmouth, Gay Head, Harwich, Hyannis, Mashpee, Nantucket, Oak Bluffs, Orleans, Provincetown, Sandwich, Tisbury, Truro, Vineyard Haven, Wellfleet, West Tisbury, Yarmouth

Amesbury, Andover, Billerica, Boxford, Chelmsford, Dracut, Dunstable, Georgetown, Groveland, Haverhill, Lawrence, Lowell, Merrimack, Methuen, Newbury, Rowley, Salisbury, Tewksbury, Tyngsborough, Westford, West Newbury

Auburn, Barre, Boylston, Grafton, Hardwick, Holden, Leicester, New Braintree, Oakham, Paxton, Rutland Shrewsbury, West Boylston, Worcester

Hyde Park, Roslindale, South Jamaica Plain, West Mattapan, West Roxbury

Ashfield, Athol, Benardston, Buckland, Charlemont, Colrain, Conway, Deerfield, Erving, Gill, Greenfield, Hawley, Heath, Leverett, Leyden, Monroe, Montague, New Salem, Northfield, Orange, Petersham, Phillipston, Rowe, Royalston, Shelburne, Warwick, Wendell, Whately

Lynn, Lynnfield, Nahant, Saugus, Swampscott

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Greater Springfield Senior Services, Inc. 66 Industry Avenue Springfield, MA 01104-4243 1-800-649-3641 or 413-781-8800 413-781-0632 (fax) 413-272-0399 (TTY)

HESSCO Elder Services One Merchant Street Sharon, MA 02067-1662 1-800-462-5221 or 781-784-4944 781-784-4922 (fax)

Highland Valley Elder Services, Inc. 320 Riverside Drive, Suite B Florence, MA 01062-2700 1-800-322-0551 or 413-586-2000 413-584-7076 (fax) 413-585-8160 (TDD)

Minuteman Senior Services 24 Third Avenue Burlington, MA 01803 1-888-222-6171 or 781-272-7177 781-229-6190 (fax) 781-273-3114 (TDD)

Montachusett Home Care Corporation Crossroads Office Park 680 Mechanic Street Leominster, MA 01453-4402 1-800-734-7312 or 978-537-7411 978-537-9843 (fax) 978-534-6273 (TDD)

Mystic Valley Elder Services 19 Riverview Business Park 300 Commercial Street Malden, MA 02148-7312 781-324-7705 781-324-1369 (fax) 781-321-8880 (TDD)

Service Area

Agawam, Brimfield, East Longmeadow, Hampden, Holland, Longmeadow, Monson, Palmer, Springfield, Wales, West Springfield, Wilbraham

Canton, Dedham, Foxborough, Medfield, Millis, Norfolk, Norwood, Plainville, Sharon, Walpole, Westwood, Wrentham

Amherst, Blandford, Chesterfield, Chester, Cummington, Easthampton, Goshen, Granville, Hadley, Hatfield, Huntington, Middlefield, Montgomery, Northampton, Pelham, Plainfield, Russell, Southampton, Southwick, Tolland, Westfield, Westhampton, Williamsburg, Worthington

Acton, Arlington, Bedford, Boxborough, Burlington, Carlisle, Concord, Harvard, Lexington, Lincoln, Littleton, Maynard, Stow, Wilmington, Winchester, Woburn

Ashburnham, Ashby, Ayer, Berlin, Bolton, Clinton, Fitchburg, Gardner, Groton, Hubbardston, Lancaster, Leominster, Lunenberg, Pepperell, Princeton, Shirley, Sterling, Templeton, Townsend, Westminster, Winchendon

Everett, Malden, Medford, Melrose, North Reading, Reading, Stoneham

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ASAP

North Shore Elder Services 152 Sylvan Street Danvers, MA 01923 978-750-4540 978-750-8053 (fax) 978-624-2244 (TDD)

Old Colony Elderly Services, Inc. 144 Main Street Brockton, MA 02301-4099 1-800-242-0246 or 508-584-1561 508-897-0031 (fax) 508-587-0280 (TDD)

Senior Care, Inc. 5 Blackburn Center Gloucester, MA 01930-2259 1-866-927-1050 or 978-281-1750 978-281-1753 (fax) 978-282-1836 (TTY)

Somerville-Cambridge Elder Services 61 Medford Street Somerville, MA 02143-3429 617-628-2601 or 617-628-2602 617-628-1085 (fax) 617-628-1705 (TDD)

South Shore Elder Services, Inc. 159 Bay State Drive Braintree, MA 02184 781-848-3910 or 718-749-6832 617-843-8279 (fax) 781-356-1992 (TDD)

Springwell 125 Walnut Street Watertown, MA 02472 617-926-4100 617-926-9897 (fax) 617-923-1562 (TTY) Transmittal Letter

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Service Area

Danvers, Marblehead, Middleton, Peabody, Salem

Abington, Avon, Bridgewater, Brockton, Carver, Duxbury, East Bridgewater, Easton, Halifax, Kingston, Pembroke, Hanover, Hanson, Lakeville, Marshfield, Middleborough, North Easton, Plymouth, Plympton, Rockland, Stoughton, Wareham, West Bridgewater, Whitman

Beverly, Essex, Gloucester, Hamilton, Ipswich, Manchester, Rockport, Topsfield, Wenham

Cambridge, Somerville

Braintree, Cohasset, Hingham, Holbrook, Hull, Milton, Norwell, Quincy, Randolph, Scituate, Weymouth

Belmont, Brookline, Needham, Newton, Waltham, Watertown, Wellesley, Weston

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Tri-Valley Elder Services, Inc. 10 Mill Street Dudley, MA 01571 1-800-286-6640 or 508-949-6640 508-949-6651 (fax) 508-949-6654 (TDD)

WestMass Elder Care, Inc. 4 Valley Mill Road Holyoke, MA 01040 1-800-462-2301 or 413-538-9020 413-538-6258 (fax) 1-800-462-2301 (TDD)

Service Area

Bellingham, Blackstone, Brookfield, Charlton, Douglas, Dudley, East Brookfield, East Douglas, Franklin, Hopedale, Medway, Mendon, Milford, Millville, Northbridge, North Brookfield, Oxford, Southbridge, Spencer, Sturbridge, Sutton, Upton, Uxbridge, Warren, Webster, West Brookfield, Whitinsville

Belchertown, Chicopee, Granby, Holyoke, Ludlow, South Hadley, Ware

Adult Foster Care and Group Adult Foster Care Services

The following ASAP performs clinical eligibility screening activities for the adult foster care (AFC) and group adult foster care (GAFC) programs. Please send the applicable clinical documentation for all members seeking these services to:

Coastline Elderly Services 1646 Purchase Street New Bedford, MA 02740 508-999-6400 Fax: 508-993-6510

Clinical eligibility screening requests must be reviewed by Coastline Elderly Services before a MassHealth member can be served by an AFC or GAFC program. Clinical approval is a prerequisite for MassHealth payment.

Nursing Facility Services

For all individuals seeking admission to a nursing facility, regardless of payor, who have a diagnosis of, or are suspected of having, mental illness, mental retardation, and/or development disability, a Level II Preadmission Screening (PAS) is required before admission to a nursing facility.

For MassHealth members or applicants who have a mental illness and are seeking admission to a nursing facility, call the Department of Mental Health's designee, Health and Education Services (HES) at:

HES 978-745-2440, Ext. 126

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For MassHealth members or applicants who have mental retardation and/or developmental disabilities, and are seeking admission to a nursing facility, contact the Department of Mental Retardation for the Level II Preadmission Screening and Annual Resident Review (PASARR):

Referrals: 1-800-649-9378
To report admission: 617-624-7796 (Must be done on day of admission.)
Fax page 1 of Level II PAS to: 617-624-7557 (Must be done within 48 hours of admission.)

Final Deadline Appeals

If the service date on the claim exceeds 12 months (or 18 months, if another insurer is involved), and has received a final deadline exceeded error code (888), submit your *appeal* to: MassHealth ATTN: Final Deadline Appeals 600 Washington Street Boston, MA 02111 617-210-5538 fdeappeals@state.ma.us

Hearings

Applicants, members, and appeal representatives with questions about a fair hearing, and providers with questions about an adjudicatory hearing, should contact: Office of Medicaid Board of Hearings 2 Boylston Street Boston, MA 02116 617-210-5800 1-800-655-0338 617-210-5820 (fax)

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Member Eligibility

MassHealth has contracted with Electronic Data Systems (EDS) to maintain and monitor the MassHealth Recipient Eligibility Verification System (REVS). This system provides 24-hour access to member eligibility information for the previous 12 months. Be sure to have the member's card, MassHealth identification number, or name and date of birth when making eligibility inquiries. REVS access methods require a user ID and password. Providers must submit a Trading Partner Agreement in order to access REVS.

ACS, the contractor responsible for operating the Pharmacy Online Processing System (POPS), receives the same MassHealth member eligibility information as EDS. The pharmacy claim-adjudication process at ACS includes the same eligibility verification that is available through REVS. Therefore, it is not necessary for retail pharmacists to separately validate member eligibility for pharmacy claims through REVS.

DSM and its subcontractor Doral, which is responsible for processing dental claims, receives the same MassHealth member eligibility information as EDS. The dental claim-adjudication process at Doral includes the same eligibility verification that is available through REVS. Therefore, it is not necessary for dental providers to separately validate member eligibility for dental claims through REVS. Dental providers should validate member eligibility through the Doral system.

WebREVS	www.massrevs.eds.com
Automated Voice Response (AVR):	1-800-554-0042
Eligibility Operator (24-hour eligibility operator):	1-800-833-7582
 <i>REVS Help Desk:</i> Answers questions about: REVS access methods (WebREVS, point-of-service, PC software, and automated-voice-response systems) MassHealth cards REVS User Guides 	1-800-462-7738 Hours: Mon. – Fri., excluding holidays 8:00 A.M. – 5:00 P.M. <u>REVSHelpDesk@eds.com</u>

- availability of REVS
- how to verify eligibility

Send correspondence to:

EDS MassHealth 155 Federal Street, 6th Floor Boston, MA 02110 617-350-8180 (fax)

If members have questions about MassHealth, they1-800-841-2900should call MassHealth Customer Service at:(TTY: 1-800-497-4648 for people with
partial or total hearing loss)

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Payments

Providers are encouraged to receive MassHealth payments by electronic funds transfer (EFT).

To receive payments by EFT, you must complete the Authorization for Electronic Funds Transfer (EFT) of MassHealth Payments form. The authorization form is available for download from our Web site at www.mass.gov/masshealth. Click on Information for MassHealth Providers, and then MassHealth Provider Forms.

Your EFT request will not be approved unless you have a W-9 form on file. The W-9 form can also be downloaded from the Web according to the above instructions.

Send the <i>completed</i> EFT form (and W-9 form, if applicable) to:	MassHealth Provider Enrollment and Credentialing P.O. Box 9118 Hingham, MA 02043
If you have questions about <i>W-9 or EFT form</i> completion:	1-800-841-2900 617-988-8974 (fax) providersupport@mahealth.net
For replacement of a <i>lost or damaged check</i> :	617-210-5072

MassHealth payment information is available online. You may access the amount of your check or EFT by going to the Office of the State Comptroller's Web site at <u>www.mass.gov/massfinance</u>. Go to VendorWeb and follow the instructions.

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Prior Authorization (Dental Services)

Some services need prior authorization (PA). These items are identified in Subchapters 4 and 6 of your MassHealth provider manual.

Submit electronic PA requests at:	www.masshealth-dental.net
Mail all paper PA requests (except those for outpatient services) to:	MassHealth Dental – PA 12121 N. Corporate Parkway Mequon, WI 53092
Mail all paper PA requests for outpatient services to:	MassHealth Dental – PA P.O. Box 339 Mequon, WI 53092

Prior Authorization (Pharmacy Services)

Claims for certain drugs submitted through the Pharmacy Online Processing System (POPS) require prior authorization (PA). Please see Subchapter 4 of your provider manual and the MassHealth Drug List on the MassHealth Web site at <u>www.mass.gov/masshealth</u>. Click on MassHealth Drug List.

Other claims will be denied because of certain drug utilization review (DUR) edits. When appropriate, the pharmacist should discuss the medical necessity of prescribing such drugs with the prescriber before calling for DUR certification. Use the following telephone and fax numbers to request DUR certification or to check on the status of your pharmacy PA request if you have not received a response within 24 hours. If you have not received a response within 24 hours. If you have not received a response within 24 hours, the pharmacist may provide a 72-hour supply of a requested covered drug.

Send requests for all drugs that require PA to:	MassHealth Drug Utilization Review
	Program
<i>Note:</i> Telephone requests for PA will be accepted only in the	P.O. Box 2586
case of a medical emergency.	Worcester, MA 01613-2586
	1-800-745-7318
	1-877-208-7428 (fax)

Prior Authorization (Non-dental and Non-pharmacy Services)

Some services need prior authorization (PA). These items are identified in Subchapters 4 and 6 of your MassHealth provider manual.

Submit electronic PA requests using the Automated Prior	www.masshealth-apas.com
Authorization System (APAS) at:	

APAS technical support and training:

1-866-378-3789

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Mail all paper PA requests, <i>except</i> those for personal emergency response systems (PERS) and those listed below for Massachusetts Commission for the Blind (MCB) and Community Case Management (CCM) members to:		MassHealth ATTN: Prior Author (include name of pro 600 Washington Stre Boston, MA 02111	gram area)
Mail PA requests for <i>MCB members</i> for durable medical equipment, personal care attendant, continuous skilled nursing (for those aged 22 or over), PERS, and oxygen and respiratory therapy services to:		Massachusetts Comn the Blind 48 Boylston Street Boston, MA 02116	nission for
Mail all other PA requests for PERS to:		The member's local Access Point (ASAP) this appendix.	
Mail, fax, telephone, or use APAS for PA requests for CCM members (22 years of age and under) for nursing, home health aide, physical therapy, occupational therapy, speech therapy, personal care attendant, durable medical equipment, and oxygen and respiratory therapy equipment to:		Community Case Ma University of Massac School 333 South Street Shrewsbury, MA 015 1-800-863-6068 1-508-421-6129 (TT 1-508-421-5905 (fax	husetts Medical 545 Y)
You may call the MassHealth PA Unit, CCM, applicable, to ask about the status of a PA required the above addresses. Please wait the times spectrum 450.303 before calling.	lest sent to one of		
For PA requests not sent to CCM or MCB, call the Customer Service Team (CST):		1-800-841-2900	
CCM:		1-800-863-6068	
PA for home health skilled nursing visits for MassHealth Basic members:		617-451-7132	
MCB PA Unit:		617-727-5550	

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Provider Enrollment and Credentialing

For All Providers Except Dental

MassHealth has contracted with MAXIMUS to manage provider enrollment and credentialing activities, except for dental providers. Provider Enrollment and Credentialing establishes and maintains a file on every MassHealth provider.

You must contact Provider Enrollment and Credentialing to report any changes in

- your licensure and certification;
- Medicare provider status;
- ownership information; or
- any other information submitted in your application.

You may contact Provider Enrollment and Credentialing by telephone to

- request a provider application;
- ask about the status of your provider application;
- verify your participation status; or
- verify the information in your provider file.

You must write to Provider Enrollment and Credentialing on your letterhead stationery and include your MassHealth provider number, NPI, and tax identification number to

- report changes in information, such as your provider name and address;
- change or add your Medicare provider number to your MassHealth provider file; or
- report a change in ownership.

When you notify Provider Enrollment and Credentialing of a change in your Medicare provider number, you must include a copy of your Medicare Welcome Letter.

When you notify Provider Enrollment and Credentialing of a change in your legal name, legal address and/or check mailing/remit address, you must include a signed Massachusetts Substitute W-9 Form, located at <u>www.mass.gov/osc</u>.

To notify Provider Enrollment and Credentialing of any change in licensure, certifications, and qualifications or data that may affect participation in MassHealth, or to participate in the Primary Care Clinician Plan (PCCP), you must request a PCC Plan enrollment and credentialing application from

MassHealth Provider Enrollment and Credentialing P.O. Box 9118 Hingham, MA 02043 1-800-841-2900 617-988-8974 (fax) Hours: Monday-Friday, excluding holidays 8:00 A.M. – 5:00 P.M. providersupport@mahealth.net

For Dental Providers

MassHealth has contracted with DSM/Doral to manage provider enrollment and credentialing activities *for dental providers*. Provider Enrollment and Credentialing establishes and maintains a file on every MassHealth dental provider.

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Questions about enrollment and credentialing for dental providers:

MassHealth Dental 12121 N. Corporate Parkway Mequon, WI 53092 1-800-207-5019 1-800-466-7566 TTY Hours: Monday-Friday, excluding holidays 8:00 A.M. – 6:00 P.M.

Provider Training

For all providers, *except pharmacy and dental* providers, MassHealth has contracted with MAXIMUS to perform provider services, including *training*.

To schedule a training or an individual consultation about
billing for MassHealth services (except pharmacy and dental):

MassHealth Provider Training P.O. Box 9118 Hingham, MA 02043 617-988-8974 (fax) providersupport@mahealth.net

For *pharmacy providers*, MassHealth has contracted with ACS to perform provider services, including training.

To schedule a training or individual consultation about billing for MassHealth *pharmacy* services:

To schedule a training or individual consultation about billing for MassHealth *dental* services:

ACS State Healthcare ATTN: MassHealth 131 Tremont Street, 4th Floor Boston, MA 02111 617-423-1237 617-423-9846 (fax) <u>masshealth.providerrelations@acs-inc.com</u>

MassHealth Dental 12121 N. Corporate Parkway Mequon, WI. 53092 1-800-207-5019 1-800-466-7566 TTY Hours: Monday-Friday, excluding holidays 8:00 A.M. – 6:00 P.M. inquiries@masshealth-dental.net

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Publications

The following is a list of sources where requests can be directed for various MassHealth publications.

Please submit a written request on your company letterhead and include your provider number, tax identification number, and street address. Please note that the first replacement copy of a provider manual is provided free of charge. There will be a charge for additional copies.

All current MassHealth regulations and recent bulletins are available for viewing on the MassHealth Web site at <u>www.mass.gov/masshealthpubs</u>. Click on Provider Library.

Provider manuals

REVS user guides

Available online at <u>www.mass.gov/masshealthpubs</u> or by contacting: MassHealth Provider Enrollment and Credentialing P.O. Box 9118 Hingham, MA 02043 1-800-841-2900 617-988-8973 (fax) Hours: Monday-Friday, excluding holidays 8:00 A.M. - 5:00 P.M. providersupport@mahealth.net

Available online at <u>www.mass.gov/masshealthpubs</u> or by contacting: REVS Helpdesk 1-800-462-7738 Hours: Monday-Friday, excluding holidays 8:00 A.M. - 5:00 P.M. REVSHelpdesk@eds.com

Transmittal letters and provider bulletins

Requests must be made in writing. Include your provider number, address, telephone number, the exact title of the publication, and the date of the issuance.

Available online at <u>www.mass.gov/masshealthpubs</u> or by writing to: MassHealth ATTN: Publications P.O. Box 9118 Hingham, MA 02043 617-988-8973 (fax) providersupport@mahealth.net

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Claim forms, prior authorization forms (excluding dental), andMother forms and publicationsARequests must be made in writing. Include your providerP

number, address, telephone number, and the exact title of the form.

Fee schedules

It is helpful if you know the Code of Massachusetts Regulations (CMR) citation that applies to your provider type. There is a charge for each publication. DHCFP also has the regulations available on disk.

Please write to the State Bookstore address if you cannot access the Internet.

ICD-9-CM, CPT, and HCPCS Code Books are available from the following sources:

(Have your credit card ready. In addition, ICD-9-CM Code Books are available from some bookstores.)

MassHealth ATTN: Forms Distribution P.O. Box 9118 Hingham, MA 02043 617-988-8973 (fax)

Division of Health Care Finance and Policy (DHCFP) 2 Boylston Street Boston, MA 02116 617-988-3100 www.mass.gov/dhcfp

State Bookstore State House, Room 116 Boston, MA 02133 617-727-2834

Ingenix 13931 Willard Road Chantilly, VA 20151 1-800-765-6588 801-536-1009 (fax)

American Medical Association Order Department P.O. Box 930876 Atlanta, GA 31193-0876 1-800-771-7199 863-582-6845 (fax)

Some provider forms are available online at:

www.mass.gov/masshealth

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Third-Party Liability Other Health Insurance

MassHealth's TPL Unit maintains the file that identifies other health insurance that a member may have. Other insurance information comes from various sources. If you receive written evidence (such as an explanation of benefits or a letter from an employer) that a member has other health insurance, different insurance than what is listed on the file, or no longer has health insurance coverage, please send the information to the TPL Unit.

Mail or fax the insurance information to:	MassHealth
(Please enclose copies of written evidence, if possible.)	TPL Unit
	P.O. Box 9212
	Chelsea, MA 02150
	617-357-7604 (fax)

Medicare/Senior Plan Updates

MassHealth's Medicare Unit maintains the file that identifies Medicare or a third-party liability (TPL) senior plan that a member may have. If you receive written evidence (such as a health insurance card) that a member has Medicare or a senior plan/Medicare replacement policy, has a different insurance than what is listed on the file, or no longer has insurance coverage, please send the information to the Medicare Unit. This does not apply to a member whose benefits have been exhausted. It applies only to members who have terminated their enrollment, or transferred to another senior plan.

Mail or fax the insurance information to:	MassHealth
(Please enclose copies of written evidence, if possible.)	Medicare Unit
	The Schraffts Center
	529 Main Street, 3rd Floor
	Charlestown, MA 02129
	617-886-8133 (fax)

Home Health Services

Home health agency providers must obtain and send an EOB whenever a member with commercial health insurance has a change in medical condition or health-insurance-coverage status. Providers may not send MassHealth a single annual EOB for services denied by a commercial insurer. Providers must submit the EOB to MassHealth *within 10 days* of receiving notification of denial from the insurer. The EOB must include the member's MassHealth identification number.

Mail or fax a copy of the EOB to:

MassHealth Home Health Claims The Schraffts Center 529 Main Street, 3rd Floor Charlestown, MA 02129 617-886-8133 (fax)

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Vision-Care Materials

All completed order forms for vision care materials must be either mailed or faxed to:	MassCor Optical Laboratories P.O. Box 466 Gardner, MA 01440 1-888-482-7331 1-888-698-2020 (fax) 1-888-420-2047 (fax)
To check the status of an order for vision care materials:	MassCor Optical Laboratories 1-888-482-7331 1-888-420-2047 (fax) Monday-Friday: 9:00 A.M. – 4:00 P.M.