COMMONWEALTH OF MASSACHUSETTS
Office of Consumer Affairs and Business Regulation
DIVISION OF INSURANCE
1000 Washington Street, Suite 800 • Boston, MA 02118-6200
(617) 521-7794 • FAX (617) 521-7475
TTY/TDD (617) 521-7490
http://www.mass.gov/doi

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

GREGORY BIALECKI
SECRETARY OF HOUSING AND ECONOMIC DEVELOPMENT

BARBARA ANTHONY
UNDERSECRETARY

JOSEPH G. MURPHY
COMMISSIONER OF INSURANCE

BULLETIN 2011-10

TO: Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc. and Health Maintenance Organizations Offering or Renewing Insured Health Products in the Merged Market in Massachusetts

FROM: Joseph G. Murphy, Commissioner of Insurance

DATE: May 27, 2011

RE: Implementation of Limited, Regional and Tiered Provider Network Plans under 211 CMR 152.00

The Division of Insurance ("Division") issues this Bulletin to instruct commercial health insurers, Blue Cross and Blue Shield of Massachusetts, Inc. and Health Maintenance Organizations ("Carriers") regarding compliance with 211 CMR 152.00, *Health Benefit Plans Using Limited, Regional or Tiered Networks* for both new and existing health benefit plans using limited, regional or tiered provider networks. The Division has promulgated 211 CMR 152.00 pursuant to recent amendments to Massachusetts General Laws Chapter 176J, made by Chapters 288 and 359 of the Acts of 2010.

Products with an Effective Date on or after September 1, 2011

Individual or group health benefit plans using limited, regional or tiered provider networks which are either (1) marketed to be issued or renewed with an effective date on or after September 1, 2011, or (2) actually issued or renewed with an effective date on or after September 1, 2011, shall be in full compliance with the provisions of 211 CMR 152.00.

The Commissioner of Insurance may, by issuing a written waiver, allow a Carrier to delay plan compliance with 211 CMR 152.00 if the Carrier applies for approval of the same by no later than June 27, 2011.

Products with an Effective Date before September 1, 2011

Individual or group health benefit plans issued or renewed with an effective date prior to September 1, 2011 shall be in full compliance with the requirements of 211 CMR 152.00 upon renewal.

Questions regarding this Bulletin should be directed to Nancy Schwartz, Director of the Bureau of Managed Care at the Division of Insurance at (617) 521-7347.