



**COMMONWEALTH OF MASSACHUSETTS**  
**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

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ACTING COMMISSIONER OF INSURANCE

**BULLETIN 2024-09**

**To:** Commercial Health Insurers, Health Maintenance Organizations, and Blue Cross and Blue Shield of Massachusetts, Inc.

**From:** Kevin P. Beagan, Acting Commissioner of Insurance

A handwritten signature in blue ink that reads "Kevin P. Beagan".

**Date:** August 16, 2024

**Re:** Continued Access to Care for Covered Persons Impacted by the Closing of Carney Hospital and Nashoba Valley Medical Center

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The Division of Insurance (“Division”) issues this Bulletin 2024-09 to Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc., and Health Maintenance Organizations (“Carriers”) to identify the Division’s expectations regarding the need to relax prior authorization and credentialing procedures in response to the closing of Carney Hospital and Nashoba Valley Medical Center.

The Division understands that changes announced regarding the closing of Carney Hospital and Nashoba Valley Medical Center may cause significant concern for patients about access to care. Updates about changes to Steward’s health care delivery system can be found by contacting the Department of Public Health at (833) 305-2070 or visiting [mass.gov/info-details/steward-health-care-resources](https://www.mass.gov/info-details/steward-health-care-resources).

**Steps Necessary to Assist Covered Persons with Continued Access to Care**

The Division expects Carriers to have systems established to provide clear information on their websites and provide guidance in member newsletters and e-mails about obtaining access to care. Carriers are also expected to have telephone lines staffed with trained employees who can provide clear information about access to network providers for care, including but not limited to primary care, urgent care, specialty and other outpatient services specifically related to these facility closures. When requested, Carrier staff should assist impacted consumers in identifying network providers that are available to schedule appointments and administer care.

For persons who are in inpatient beds or are in active outpatient treatment within the physical structure of the closing Carney Hospital and Nashoba Valley Medical Center facilities, for 60 days after the issuance of this Bulletin, Carriers are expected to be actively involved with current medical providers and patients and use their best efforts to find and coordinate medically necessary

care in an alternate network facility.<sup>1</sup> If an alternate network facility is not available in advance of the next scheduled stay or treatment or within five business days of initiating the search, whichever is sooner, Carriers are expected to use their best efforts to locate non-network facilities that will be able to provide this care and to inform impacted persons that they will only be subject to their plan's in-network cost-sharing.

### **Flexibility in Health Carrier Administrative Processes**

For a period lasting 60 days after the issuance of this Bulletin, the Division expects Carriers to take steps to forego prior authorization reviews for any previously approved surgeries, procedures and behavioral health or non-behavioral health admissions at Carney Hospital and Nashoba Valley Medical Center that need to be transferred to another facility upon notice of the updated location and date of service. This Bulletin applies to all inpatient and outpatient surgical treatment that was scheduled to take place within the physical structure of Carney Hospital and Nashoba Valley Medical Center. Acute care hospitals, mental health hospitals, including freestanding psychiatric and substance use disorder facilities, and post-acute care facilities are expected to notify Carriers about any inpatient admissions within 24 hours of a patient being admitted for care, and to provide updates, at a minimum of every five (5) days, to enable Carriers to support discharge planning.

### **Credentialing**

Within their managed care systems, all Carriers have procedures to credential providers who are within their health care networks. These procedures are part of the managed care systems that the Division accredits under the authority of M.G.L. c. 176O and 211 CMR 52.00. In order to meet the challenges that may be caused as health care providers who worked in Carney Hospital and Nashoba Valley Medical Center look to join other health care systems the Division expects all Carriers to examine their credentialing systems and develop modifications that will expedite the network credentialing for all health care practitioners who are seeking to be newly credentialed by a Carrier, or who are seeking to modify the materials that are part of an existing credentialing file. In establishing these policies to ensure expeditious credentialing, Carriers should continue to adhere to standards set forth by NCQA and the Massachusetts Board of Registration in Medicine. Carriers are expected to develop clear communications that will explain to all such practitioners how to get assistance with an expedited credentialing process.

In addition, the Division expects Carriers to work with providers to assist with processing claims if there are delays in the credentialing of any such providers.

### **Carriers Acting As Administrators**

Given the public health issues associated with the closures of Carney Hospital and Nashoba Valley Medical Center, when Carriers are acting as administrators for employment-sponsored non-insured health benefit plans, the Division expects Carriers to encourage plan sponsors to take steps that are consistent with the provisions of this Bulletin 2024-09. Plan sponsors should be made aware of the public health risks to all Massachusetts residents, and Carriers should do all they can

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<sup>1</sup> For purposes of this Bulletin, active outpatient treatment is defined as services that would have been provided by a Carney Hospital or Nashoba Valley Medical Center licensed site for which there is a treatment plan that has started but has not concluded by the time the service is no longer available at the Carney or Nashoba facility. (Such services would include but not be limited to: procedures/surgeries for which pre-operative/pre-procedure services have already been provided; services for which multiple visits are required as part of a treatment plan, such as chemotherapy or physical therapy; services required following an inpatient stay, surgery, or procedure such as cardiac rehabilitation; or multi-step diagnostics that have already started and are time-sensitive.)

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to encourage plan sponsors to take steps to provide administrative relief for providers, hospitals, and post-acute care facilities for 60 days after the issuance of this Bulletin.

The Division will continue to monitor the impact of the closures of Carney Hospital and Nashoba Valley Medical Center with respect to the availability of services for insured members and may update the timelines during which Carriers are expected to grant the flexibilities identified in this Bulletin.

If you have any questions about this Bulletin, please contact Niels Puetthoff, Director of the Bureau of Managed Care, at (617) 521-7326.