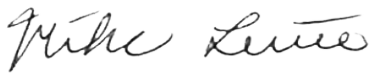




**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)

**MassHealth**  
**Managed Care Entity Bulletin 100**  
**May 2023**

**TO:** Accountable Care Partnership Plans Participating in MassHealth

**FROM:** Mike Levine, Assistant Secretary for MassHealth 

**RE:** **Accountable Care Partnership Plans—Service Area Additions and Removals Effective January 1, 2024**

**Applicable Managed Care Entities and PACE Organizations**

- ☒ Accountable Care Partnership Plans (ACPPs)
- ☐ Managed Care Organizations (MCOs)
- ☐ MassHealth's behavioral health vendor
- ☐ One Care Plans
- ☐ Senior Care Organizations (SCOs)
- ☐ Program of All-inclusive Care for the Elderly (PACE) Organizations

**Overview**

This bulletin details how Accountable Care Partnership Plans (ACPPs) may add or remove Service Areas (SAs), as defined in the Accountable Care Partnership Plan Contract with the Executive Office of Health and Human Services (EOHHS) (the Contract), to or from their current list of SAs in Appendix F of the Contract.

Proposals to add or remove SAs are due by **4 p.m. on June 5, 2023**. The effective date of any approved additions to or removals from an ACPP's Service Areas will be on or around January 1, 2024. ACPPs must also submit a response to Managed Care Entity Bulletin 101 by the due date in that bulletin to add or remove primary care providers (PCPs) from their exclusive list of PCPs who correspond with the ACPP's proposal to add or remove SAs.

All proposed additions and removals approved by EOHHS shall be made effective through an amendment to the Contract.

By providing this opportunity, EOHHS aims to support and further the goals of the MassHealth Accountable Care Organization (ACO) program, which remains focused on delivering integrated behavioral and physical health services, care management, and improved member experiences.

If an ACPP requests to remove a particular SA, EOHHS will make its best efforts to utilize its SA exception process to help current enrollees in these SAs, so they do not need to change health plans unless they want to.

## **Proposal and Process Details**

ACPPs must provide information in the order in which it appears in this bulletin and limit their response to **five** pages. Required attachments do not count toward the page limit. In some cases, ACPPs must provide the required information in a form and format provided by EOHHS. In those cases, ACPPs must use the templates provided by EOHHS. Responses must be submitted by the party holding the Contract with EOHHS (known as the Contractor in the Contract).

### **Part 1: Service Area Additions**

ACPPs requesting to add one or more new SAs must include the following information:

- A. An attachment listing the SAs that the ACPP proposes to add, using the form and format provided by EOHHS. An ACPP's list of proposed SA additions must be final when they submit it and may not be changed unless requested by EOHHS.
- B. If adding a new SA would also result in adding PCPs to the ACPP's Provider Network, the ACPP must confirm (in a statement) that the ACPP submitted a corresponding response to Managed Care Entity Bulletin 101 as described in the Overview section of this bulletin.
- C. For each proposed new SA, an estimate of the number of additional enrollees the ACPP expects to enroll. This should include a description of how the estimate was made.
- D. The following information about the ACPP's current and anticipated Provider Network.
  1. An attachment listing the names of all providers that the ACPP has in its Provider Network. The list of current providers must be grouped by provider type, in a form and format provided by EOHHS. In the alternative, the ACPP may choose to submit the names of all providers that the ACPP has in its Provider Network who are located within 60 minutes or 60 miles of each proposed new SA, organized by SA, in a form and format provided by EOHHS.
  2. For each proposed new SA, the ACPP must indicate whether it is relying on its current Provider Network to satisfy all applicable Contract requirements, including access and availability requirements set forth in Section 2.10 of the Contract, in each proposed SA.
    - a. If the ACPP is relying on its existing provider network, the ACPP must provide, as an attachment, its current Provider Network Geographic Access Reports demonstrating compliance with the requirements in Section 2.10.C of the Contract, in a form and format provided by EOHHS.
    - b. If the ACPP is not relying on its existing Provider Network and the ACPP intends to pursue adding providers to its Provider Network to satisfy all applicable requirements in the Contract, including access and availability requirements set forth in Section 2.10 of the Contract, the ACPP must provide
      - i. a list (submitted as an attachment) of providers with whom the ACPP intends to pursue a Provider Contract. This information must be grouped by provider type and presented in a form and format provided by EOHHS;

**MassHealth**  
**Managed Care Entity Bulletin 100**  
**May 2023**  
**Page 3 of 5**

- ii. the ACPP's strategy for pursuing such Provider Contracts, so that the result satisfies all applicable requirements in the Contract, including access and availability requirements in Section 2.10 of the Contract, in each proposed SA;
  - iii. attachments of letters of intent or other written acknowledgement, if any, between the ACPP and any provider with whom the ACPP is pursuing a Provider Contract. The information must be grouped by Provider type and proposed SA; and
  - iv. an attachment of the ACPP's anticipated Provider Network Geographic Access Reports demonstrating compliance with the requirements in Section 2.10. of the Contract. This Report must be in a form and format provided by EOHHS and completed as if the ACPP is successful in contracting with all the providers the ACPP lists in response to Section D.2.b.i of Part 1 of this MCE bulletin.
- E. A description of how the ACPP will comply with Section 2.6.E.1 of the Contract in the proposed SA, including:
  - 1. A list of the Behavioral Health (BH) and Long-Term Services and Supports (LTSS) CPs the ACPP plans to subcontract with to serve the proposed SA; and
  - 2. A signed letter of intent or memorandum of understanding (MOU) from each BH and LTSS CP.
- F. Any challenges the ACPP anticipates in meeting applicable requirements in the Contract, such as those in Section 2.8 or 2.10 of the Contract, in any of the proposed new SAs, and the steps the ACPP plans to take to mitigate such challenges.
- G. A description of how the ACPP will continue to assess its ongoing compliance with access and availability requirements in Section 2.10 of the Contract, in all SAs (current and proposed).

## **Part 2: Service Area Removals**

ACPPs requesting to remove one or more SAs must include the following information:

- A. A list of SAs that the ACPP proposes to remove from its list of SAs in Appendix F of the Contract. For each proposed SA, the ACPP must explain its reasoning for wanting to remove the SA and a description of the ACPP's efforts to contract with providers in that SA;
- B. If removing an SA would also result in removing PCPs from the ACPP's Provider Network, a statement confirming that the ACPP submitted a corresponding response to Managed Care Entity Bulletin 101 as described in the Overview section of this bulletin;
- C. If removing an SA would also result in other changes to the ACPP's Provider Network (such as removing other Providers (other than PCPs) from the ACPP's Provider Network), the ACPP must provide

**MassHealth**  
**Managed Care Entity Bulletin 100**  
**May 2023**  
**Page 4 of 5**

1. a description of anticipated Provider Network changes; and
  2. an attachment of the ACPP's anticipated Provider Network Geographic Access Report. The report must show compliance with the requirements in Section 2.10 of the Contract. This Report must be in a form and format provided by EOHHS and completed as if the ACPP is successful in implementing the changes it proposes in response to Section C.1 of Part 2 of this MCE bulletin.
- D. A description of the ACPP's commitment to and process for notifying enrollees in advance of the SA being removed, including a notice of any associated changes in the ACPP's Provider Network, particularly whether enrollees will maintain access to their current PCPs; and
- E. The number of enrollees living in the SA.

### **EOHHS Review**

In reviewing an ACPP's request to add or remove SAs, EOHHS may approve, disapprove, or require modification, in whole or in part, of the ACPP's request. EOHHS will use reasonable judgment to determine whether the proposed additions or removals will support the goals of the ACO program, will be in the best interests of enrollees, and will meet the needs of EOHHS. In making such determination, EOHHS may consider factors that include but are not limited to

- impact on enrollees;
- impact on enrollment choices for enrollees;
- impact on network adequacy;
- the ACPP's plans for notifying impacted parties; and
- overall ACPP geographic penetration in the Commonwealth.

EOHHS may contact ACPPs to clarify any information submitted in response to this bulletin.

### **Submission Deadline and Questions**

ACPPs that want to add or remove SAs must respond with the information specified above by **4 p.m. on June 5, 2023**, via email to [aco.program@mass.gov](mailto:aco.program@mass.gov) with the subject line "[ACPP Name] Proposed Service Area Additions/Removals Submission."

ACPPs may submit questions about the process to [aco.program@mass.gov](mailto:aco.program@mass.gov) by **May 17, 2023**. ACOs should copy their Contract Manager on any emails. EOHHS will review questions and may prepare written responses that EOHHS determines to be of general interest. EOHHS also may accept questions during ACO office hours.

### **MassHealth Website**

This bulletin is available on the [MassHealth Provider Bulletins](#) web page.

[Sign up](#) to receive email alerts when MassHealth issues new bulletins and transmittal letters.

## **Questions**

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900 or email your inquiry to [provider@masshealthquestions.com](mailto:provider@masshealthquestions.com).