

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid

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Managed Care Entity Bulletin 121

DATE: August 16, 2024

TO: Managed Care Entities and Program for All-inclusive Care for the Elderly (PACE)

Organizations Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth

RE: Continued Access to Care for Covered Members Impacted by the Closing

of Carney Hospital and Nashoba Valley Medical Center

Applicable Managed Care Entities and PACE Organizations

⊠ Accountable Care Partnership Plans (ACPPs)

⊠ MassHealth's behavioral health vendor

⊠ One Care Plans

⊠ Senior Care Options (SCO) Plans

⊠ Program of All-inclusive Care for the Elderly (PACE) Organizations

Overview

The Executive Office of Health and Human Services (EOHHS), through its managed care entities (MCEs) and Program for All-inclusive Care for the Elderly (PACE) Organizations, and in partnership with hospital leaders across the state, is committed to ensuring that MassHealth members continue to have access to care.

This bulletin contains requirements for how MCEs and PACE Organizations must support members and providers impacted by the forthcoming closures of Carney Hospital and Nashoba Valley Medical Center.

We will continue to monitor the impact of the closures of Carney Hospital and Nashoba Valley Medical Center on providers and on member services and may update the timelines during which MCEs and PACE Organizations are expected to grant the flexibilities identified in this bulletin.

Assisting Enrollees with Continued Access to Care

MCEs and PACE Organizations must provide clear information about any hospital closures on their websites and provide guidance in member communications about obtaining access to care. EOHHS also expects MCEs to have telephone lines staffed with trained employees who can

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provide clear information about access to other network providers for care. This includes but is not limited to:

- Primary care
- Urgent care
- · Specialty care, and
- Other outpatient services.

MCEs and PACE Organizations must also be prepared to assist impacted members in identifying network providers that are available to schedule appointments and administer care.

Further, for 60 days after the issuance of this Bulletin, for members who are in an inpatient bed or are in active outpatient treatment at a site operating under the license of Carney Hospital or Nashoba Valley Medical Center, MCEs and PACE Organizations must be actively involved with current medical providers and members and use their best efforts to find and coordinate medically necessary care in an alternate network facility.

Members in active outpatient treatment are those receiving 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 Carney Hospital or Nashoba Valley Medical Center.

This includes but is not limited to:

- procedures or surgeries for which pre-op/pre-procedure services were already 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 rehab; and
- multi-step diagnostics that have already started and are time sensitive.

If an alternate network facility is not available in advance of the next scheduled stay or treatment, or within five business days of beginning the search, whichever is sooner, MCEs and PACE Organizations must use best efforts to locate non-network facilities that will be able to provide this care and to inform impacted members.

This bulletin applies to all inpatient and outpatient surgical treatment at a site under the license of Carney Hospital or Nashoba Valley Medical Center.

Prior Authorization Flexibilities

For 60 days after this bulletin is issued, EOHHS expects MCEs and PACE Organizations 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.

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Credentialing Flexibilities

To meet the challenges that may arise as health care providers at Carney Hospital and Nashoba Valley Medical Center look to join other health care systems, EOHHS expects all MCEs and PACE Organizations to examine their credentialing systems and develop modifications that will expedite the network credentialing for all health care providers who worked in Carney Hospital and Nashoba Valley Medical Center and are seeking to join their networks, or are seeking to modify the materials that are part of an existing credentialing file.

In establishing these policies to ensure expeditious credentialing, MCEs and PACE Organizations should continue to adhere to requirements set forth in their contracts with EOHHS, and standards set forth by NCQA and the Massachusetts Board of Registration in Medicine. MCEs and PACE Organizations are expected to develop clear materials that will explain to all such providers how to proceed through an expedited credentialing process. In addition, MCEs and PACE Organizations must work with these providers to assist with processing claims if there are delays in the credentialling of any such providers.

Additional Information

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 www.mass.gov/info-details/steward-health-care-resources.

MassHealth Website

This bulletin is available on the MassHealth Provider Bulletins web page.

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Questions?

- Call MassHealth at (800) 841-2900, TDD/TTY: 711
- Email us at provider@masshealthquestions.com

