

# The Commonwealth of Massachusetts

## HEALTH POLICY COMMISSION

50 MILK STREET, 8TH FLOOR Boston, Massachusetts 02109 (617) 979-1400

> DAVID M. SELTZ EXECUTIVE DIRECTOR

To: Commercial Health Insurers, Blue Cross Blue Shield of Massachusetts, and

Health Maintenance Organizations Accredited Pursuant to M.G.L. c. 1760

("carriers"); and Other Interested Parties

From: Nancy K. Ryan, Director, Office of Patient Protection

Re: Submission of Information related to Medical Necessity Criteria pursuant to

M.G.L. c. 6D, §16

Date: October 12, 2023

This Bulletin updates the Office of Patient Protection's ("OPP") guidance regarding the responsibility of carriers to provide all proprietary and non-proprietary medical necessity criteria and protocols in use to OPP pursuant to M.G.L. ch. 6D, § 16, and sets forth OPP's expectations for carrier compliance with these requirements.

OPP's previously released guidance (<u>Memorandum to Insurance Carriers</u> in 2015 and <u>Bulletin on OPP Carrier Responsibilities</u> in 2018) mandated that carriers submit all proprietary and non-proprietary medical necessity criteria currently in use to OPP as well as provide prompt updates of new or revised criteria within 30 days. OPP is updating its guidance to streamline submission requirements for non-proprietary criteria that are publicly available on carrier websites and to continue to facilitate OPP access to proprietary criteria.

### Annual Carrier Submission to OPP

Carriers shall submit an annual report to OPP, using the attached Excel template regarding their medical necessity criteria and protocols that includes the following information:

- 1. A list of the medical necessity criteria or protocols by category of treatment or service and/or specific treatment or service (i.e., exceptions within each category by specific treatment or service) used by the carrier, and for which health plans, if applicable;
  - a. Please fill out each of the three tabs in the Excel template for medical surgical criteria; behavioral health criteria, and pharmacy criteria.
- 2. For each criteria, whether the criteria is non-proprietary or proprietary;
- 3. For non-proprietary criteria, the website address(es) where detailed information on the medical necessity criteria or protocols and any new or updated medical necessity criteria or protocols may be accessed; and



## The Commonwealth of Massachusetts

## HEALTH POLICY COMMISSION

50 Milk Street, 8th Floor Boston, Massachusetts 02109 (617) 979-1400

> DAVID M. SELTZ EXECUTIVE DIRECTOR

- 4. For proprietary medical necessity criteria or protocols used by the carrier,
  - a) Name of the vendor(s) providing the criteria;
  - b) Documentation that the carrier has authorized the vendor(s) to contact OPP and provide proprietary medical necessity criteria to OPP on the carrier's behalf.
    - As required in <u>previous guidance</u>, the carrier shall authorize and direct the vendor(s) to provide access to relevant sections of the proprietary criteria to OPP on the carrier's behalf.
    - Any information necessary for OPP to access such proprietary information directly from the vendor(s) and/or communicate with the vendor(s) to access such criteria or protocols, including any new or updated criteria or protocols, may be provided by separate communication to OPP.

## Submission Deadline

Submissions for 2023 are due to OPP by November 15, 2023. Submissions should be sent by email to <a href="https://example.com/hep-opp@mass.gov">https://example.com/hep-opp@mass.gov</a> and the attached Excel spreadsheet should be included in native file format.

#### **Annual Reporting**

Carriers shall be required to submit this reporting annually to OPP on November 15. OPP will provide carriers with an updated Excel template in advance of the annual reporting deadline.

## Submission of Updates to Medical Necessity Criteria or Protocols

In addition to the annual reporting outlined above, carriers are required to submit updates to their annual reports to identify the following material changes: (1) use of new proprietary criteria (including any changes from non-proprietary to proprietary criteria or between vendors); or (2) the creation of any new non-proprietary criteria. Such material changes must be reported to OPP within 30 days, provided that the carrier shall not implement any new or amended non-proprietary criteria or protocols until the carrier's website has been updated to reflect the new or amended criteria or protocols pursuant to 958 CMR 3.202(4).

Please direct any questions to Nancy Ryan, Director of the Office of Patient Protection at nancy.k.ryan@mass.gov or 857-327-2571.