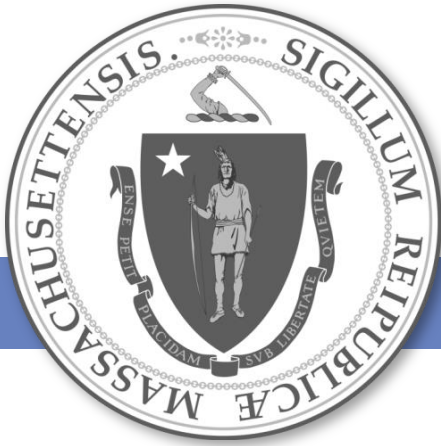


# MassHealth Payment and Care Delivery Innovation (PCDI)

## Provider Education and Communication

### Phase II: Operations



Executive Office of Health & Human Services

# Agenda



## 1. Provider Education and Communication Strategy

2. Overview of PCDI

3. Continuity of Care (CoC)

4. Eligibility Verification System (EVS)

5. Health Plan Contact Information

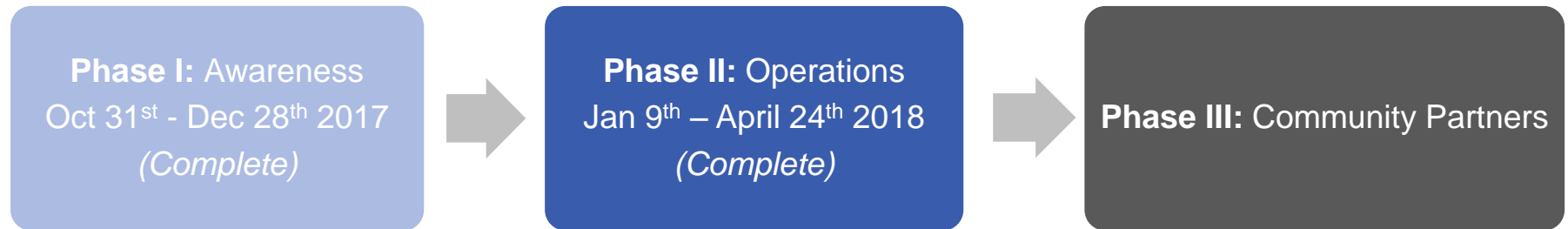
6. Member Information and Resources

7. 2018 Provider Training & Education Schedule

# Provider Education and Communication Strategy



MassHealth is conducting three phases of Payment and Care Delivery Innovation (PCDI) education and communication provider trainings:



- The objective of Phase I: Awareness was to provide all attendees with an understanding of MassHealth PCDI and its impact on providers and members
- Phase II aims to address key operational questions, and introduce new and enhanced tools to assist providers
- The Phase I and Phase II webinars can be viewed on the [MassHealth Provider PCDI Resources Web Page](https://www.mass.gov/lists/provider-pcdi-resources) at <https://www.mass.gov/lists/provider-pcdi-resources>
- Future training information regarding Phase: III Community Partners will be published to mass.gov on the [PCDI for Providers Webpage](#) when available.

To attend one of our events or to enroll in a webinar session, please register at the [MassHealth Learning and Productivity Center](#) at [www.masshealthtraining.com](http://www.masshealthtraining.com) and create your profile. Once you are registered, select the preferred webinar or event date and time available.

Visit the [PCDI Provider Training Schedule](#) webpage at <https://www.mass.gov/service-details/pcdi-provider-training-schedule> to view webinar and in-person event schedules.



# Provider Resources: Information and Training

The following web pages provide PCDI resources, materials, and information for providers:

- **MassHealth Provider Webpage:** [www.mass.gov/masshealth-for-providers](http://www.mass.gov/masshealth-for-providers)
- **MassHealth PCDI Specific Web Page for Providers:** <https://www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers>
- **MassHealth Provider PCDI Resources Web Page:** <https://www.mass.gov/lists/provider-pcdi-resources>
- **MassHealth Continuity of Care (CoC):** <https://www.mass.gov/service-details/continuity-of-care-coc>
- **MassHealth Innovations:** [www.mass.gov/hhs/masshealth-innovations](http://www.mass.gov/hhs/masshealth-innovations)
- **MassHealth Learning Management System:** Register for upcoming webinars and trainings and access to the materials for these sessions. (*Note: a valid Provider ID/Service Location number is required to access these resources*) [www.masshealthtraining.com](http://www.masshealthtraining.com)



# MassHealth PCDI for Providers Web Page

[www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers](http://www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers)

MassHealth recently launched a new web page focused on PCDI information for providers. Visit this page to receive the most recent PCDI provider updates and resources.

## Key Sections:

### First time?

- Guide: Payment & Care Delivery Innovation (PCDI) for Providers

### What would you like to do?

- Enroll in a webinar/in-person class
- Log into POSC

### What you need to know

- Webinar/in-person class schedules
- Provider PCDI Regulations
- Provider PCDI Resources

## Payment & Care Delivery Innovation (PCDI) for Providers

Information for providers about the MassHealth PCDI initiative

MassHealth is introducing new health plan options for its 1.3 million managed care eligible members in the form of accountable care organizations (ACOs). These options are designed to emphasize care coordination, member-centric care, and to align financial incentives. MassHealth will continue to offer managed care organizations (MCOs) and the Primary Care Clinician (PCC) Plan. We've created this page to help providers better understand these payment and care delivery changes as they are introduced in the coming months.

### First time?

Guide: Guide:  
Payment & Care  
Delivery Innovation  
(PCDI) for Providers +

### What would you like to do?

Featured:

Enroll in a PCDI webinar or live in-person class +

Log on to POSC to verify member's eligibility and new ACO health plan +

### What you need to know

PCDI schedule for provider webinars and in-person classes +

PCDI resources for providers +

Regulations amended for PCDI +



# Provider PCDI Resources Web Page

<https://www.mass.gov/lists/pcdi-resources-for-providers>

## What's Included

### Bulletins:

- All Provider Bulletin 272: Overview of 2018 New Health Plan Options
- All Provider Bulletin 275: MassHealth EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans

### PCDI Fact Sheets for:

- PCPs
- Specialists
- Behavioral Health Providers
- Hospitals
- LTSS and Other Covered Services

### Provider Education Tools:

- Continuity of Care Memo and FAQ Document
- EVS Quick Reference Guide and Restrictive Message Screenshots
- MassHealth Contact Matrix for 2018 Managed Care Health Plans
- Provider PCDI Phase I: Awareness and Phase II: Operations Webinars

### Links to Member Resources:

- MassHealth Health plan materials and information for members

## Provider PCDI Resources

Bulletins, fact sheets, charts, and other materials for providers related to PCDI

### IN THIS LIST

- Bulletins
- PCDI fact sheets for providers
- Provider Education Tools
- Links to member resources

### Bulletins

- All Provider Bulletin 272: MassHealth Payment and Care Delivery Innovations (PCDI) (PDF 1.25 MB)
- All Provider Bulletin 272: MassHealth Payment and Care Delivery Innovations (PCDI) (DOCX 2.65 MB)

### PCDI fact sheets for providers

- PCDI fact sheet for primary care providers (PDF 67.69 KB)
- PCDI fact sheet for specialists (PDF 69.38 KB)
- PCDI fact sheet for behavioral health providers (PDF 71.47 KB)
- PCDI fact sheet for acute care hospitals (PDF 78.58 KB)

### Provider Education Tools

- Provider PCDI Phase I: Awareness Webinar (PDF 1.07 MB)
- PCDI provider training schedule

### Links to member resources

- MassHealth Health plan materials and information for members
- Learn about the letters with the green stripes [new options for members]

# Agenda



1. Provider Education and Communication Strategy

**2. Overview of PCDI**

3. Continuity of Care (CoC)

4. Eligibility Verification System (EVS)

5. Health Plan Contact Information

6. Member Information and Resources

7. 2018 Provider Training & Education Schedule

# Overview of PCDI

- Effective March 1, 2018, MassHealth is introducing Accountable Care Organizations (ACOs) to approximately 1.2\* million managed care eligible members
- There will be three (3) types of ACO models, each designed to emphasize care coordination, member-centric care, and align financial incentives:
  - A. Accountable Care Partnership Plans
  - B. Primary Care ACO Plans; and
  - C. MCO-Administered ACO Plan
- MassHealth will also offer two Managed Care Organization (MCO) Plans, and the Primary Care Clinician (PCC) Plan as managed care options



\* Member counts are subject to change due to normal activity related to member eligibility and member choice





# Eligible Members and Health Plan Options

Managed-care eligible members are:

- Younger than age 65, without any third-party insurance coverage (*including Medicare*)
- Living in the community (*e.g. not in a nursing facility*)
- Enrolled in one of the following MassHealth coverage types: *Standard, CommonHealth, CarePlus, or Family Assistance*

Effective March 1, 2018, managed care eligible members will have the option to enroll in one of the following health plans:

- Thirteen (13) total Accountable Care Partnership Plans
- Three (3) total Primary Care ACO Plans
- Two (2) total Managed Care Organizations (MCOs)
- The Primary Care Clinician (PCC) Plan

**Note:** MassHealth members who receive MassHealth coverage through Fee-for-Service (including those over age 65 or with third-party coverage), OneCare plans, Senior Care Options (SCO) plans, or Program of All-Inclusive Care for the Elderly (PACE) organizations are not affected by PCDI.

# ACO/MCO-Covered Services



MassHealth members enrolled in ACOs and MCOs will receive certain services that are **paid for by their plan** (“ACO-Covered” or “MCO-Covered”) and certain services that are **paid for by MassHealth fee-for-service (FFS)**. Covered services may differ by coverage type. (Refer to plans for more information.)

ACO/MCO-Covered services include:

- **Physical health** services such as primary care, inpatient, outpatient, professional specialty, and emergency physical health services
- **Behavioral health** services such as inpatient, outpatient, diversionary, and emergency behavioral health services
- **Pharmacy services**, with limited exceptions
- **Other Covered Services**, including home health (except continuous skilled nursing), durable medical equipment (DME), hospice, therapy, chronic disease hospitals, rehabilitation hospitals, and nursing homes for the first 100 days of admission



# PCDI and Long-Term Services and Supports (LTSS)

The following LTSS services will continue to be paid by MassHealth fee-for-service (FFS):

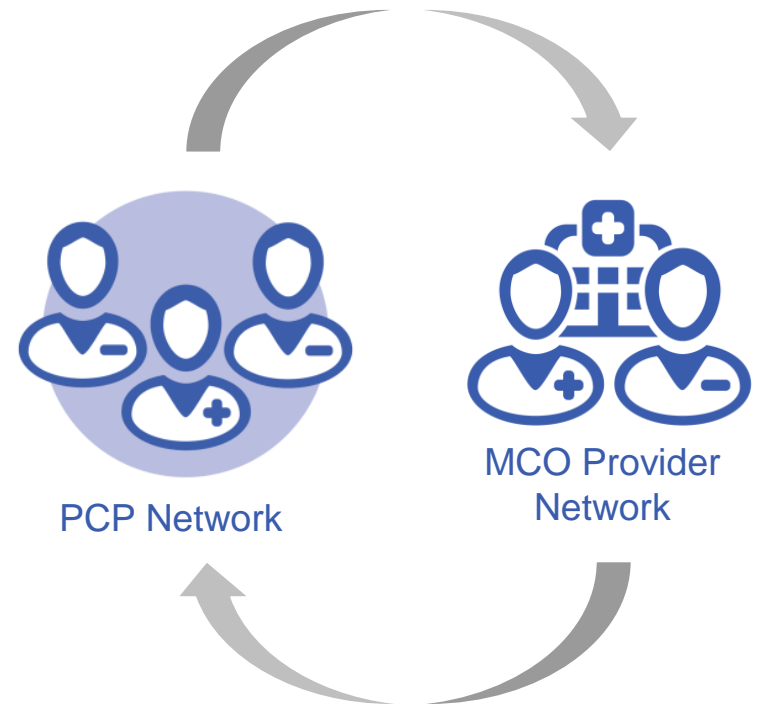
- Personal Care Attendant
- Adult Foster Care
- Group Adult Foster Care
- Adult Day Health
- Day Habilitation
- Continuous Skilled Nursing
- Long-Term (over 100 days) Nursing Facilities, and
- Long-Term (over 100 days) Chronic Disease and Rehabilitation Hospitals

These services will not be included in ACO and MCO total cost of care and capitation rates.

If providers have questions about prior authorizations, claims, referrals, or other matters related to LTSS, they should contact MassHealth's LTSS Provider Service Center, **Optum**, by emailing [support@masshealthltss.com](mailto:support@masshealthltss.com), visiting their website, <http://www.masshealthltss.com>, or by calling **1-844-368-5184**

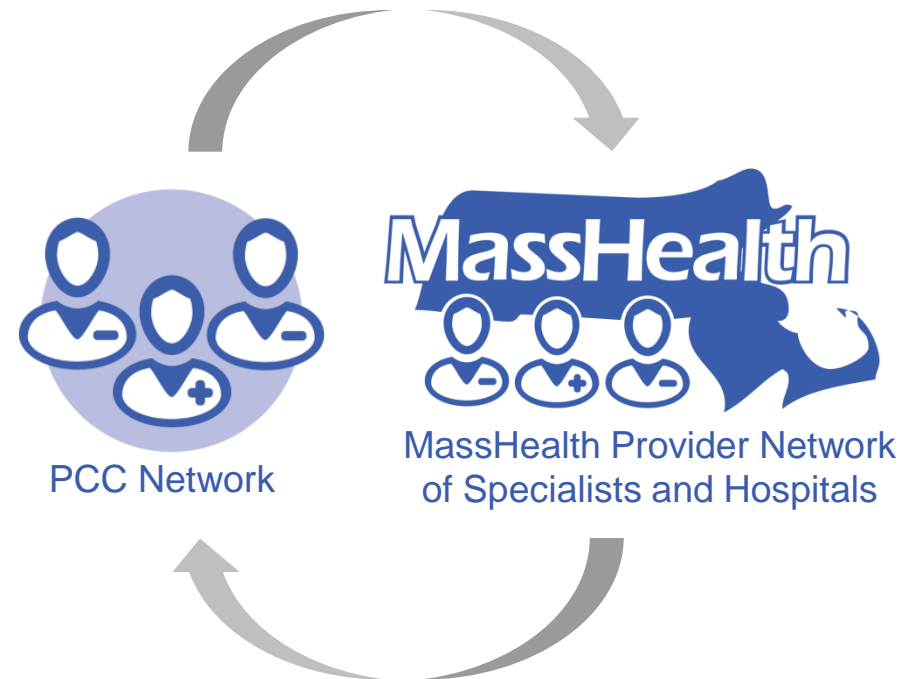
## A. Accountable Care Partnership Plans

- A network of PCPs who have exclusively partnered with one MCO to create a full network that includes PCPs, specialists, behavioral health providers, and hospitals. PCPs use the plan's network of providers to plan and coordinated care for members.
- Each of the Accountable Care Partnership Plans cover a set of service areas. Members must live in the service areas covered by the ACO to enroll in that plan.
- MassHealth has contracted with 13 Accountable Care Partnership Plans



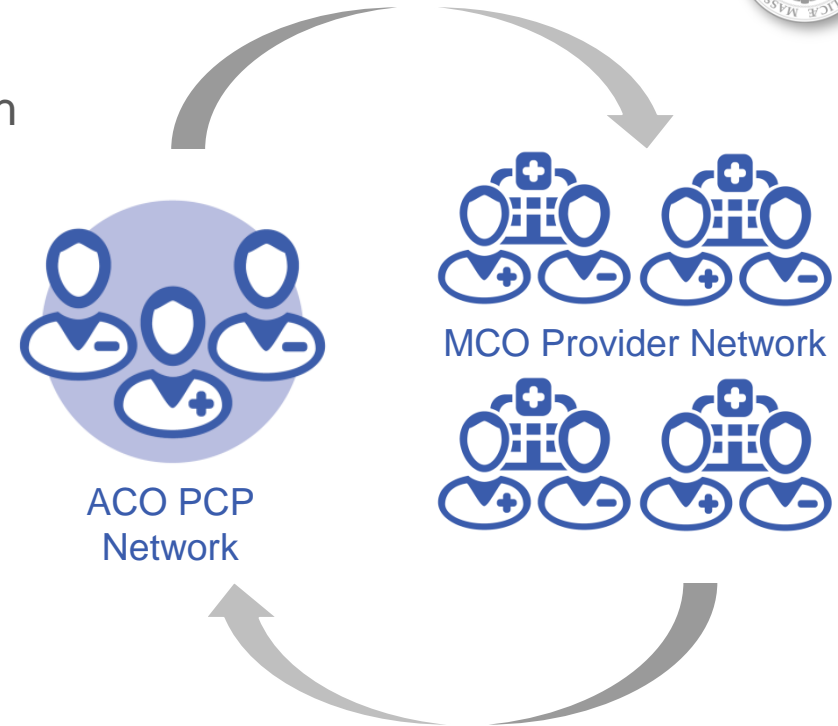
## B. Primary Care ACOs

- A network of PCCs who contract directly with MassHealth to provide integrated and coordinated care for members
- Primary Care ACOs use the MassHealth provider network of specialists and hospitals, and may have certain providers in their “referral circle” that will not require a MassHealth referral for certain services
- Primary Care ACOs use the Massachusetts Behavioral Health Partnership (MBHP) network for behavioral health services
- MassHealth has contracted with 3 Primary Care ACO Plans



## C. MCO-Administered ACOs

- A network of PCPs who may contract with one or multiple MCOs, and use the MCO provider networks to provide integrated and coordinated care for members
- MCO-Administered ACOs are not presented as an enrollment option for members because they will be attributed through their relevant MCO
- There is one MCO-Administered ACO, ***Lahey Clinical Performance Network***, participating with both MassHealth MCO Plans: Boston Medical Center (BMC) HealthNet Plan, and Tufts Health Together



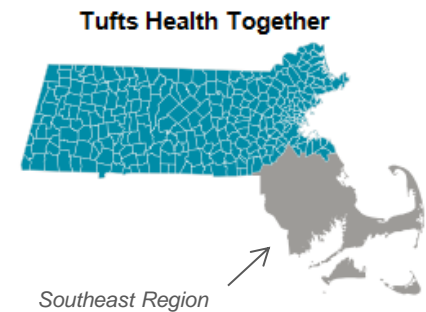
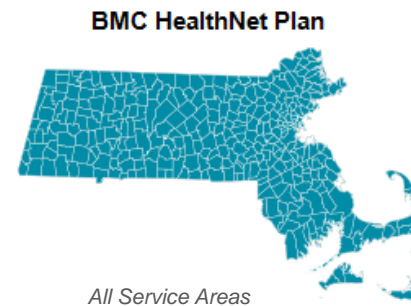


# MCOs and the PCC Plan

In addition to ACOs, members will continue to have the following managed care options effective March 1, 2018:

## Managed Care Organizations (MCOs)

- MCOs are health plans run by insurance companies that provide care through their own provider network that includes PCPs, specialists, behavioral health providers, and hospitals
- There are two MCO options: Boston Medical Center (BMC) HealthNet Plan, and Tufts Health Together
- BMC HealthNet Plan will operate statewide, and Tufts Health Together will operate in every region except Southeast, MA



## Primary Care Clinician (PCC) Plan

- The Primary Care Clinician (PCC) Plan is a statewide plan offered by MassHealth that uses the MassHealth provider network
- Behavioral health services for the PCC Plan are provided by the Massachusetts Behavioral Health Partnership (MBHP)
- Members must choose a PCC in order to enroll in a PCC Plan

# MassHealth Health Plan Options Effective March 1, 2018



## Accountable Care Partnership Plans (Model A)

<b>Be Healthy Partnership</b> - Baystate Health Care Alliance in partnership with Health New England
<b>Berkshire Fallon Health Collaborative</b> - Health Collaborative of the Berkshires in partnership with Fallon Health
<b>BMC HealthNet Plan Signature Alliance</b> - Signature Healthcare in partnership with BMC HealthNet Plan
<b>BMC HealthNet Plan Community Alliance</b> - Boston Accountable Care Organization in partnership with BMC HealthNet Plan
<b>BMC HealthNet Plan Mercy Alliance</b> - Mercy Medical Center in partnership with BMC HealthNet Plan
<b>BMC HealthNet Plan Southcoast Alliance</b> - Southcoast Health in partnership with BMC HealthNet Plan
<b>Fallon 365 Care</b> - Reliant Medical Group in partnership with Fallon Health
<b>My Care Family</b> - Merrimack Valley ACO in partnership with Neighborhood Health Plan (NHP)
<b>Tufts Health Together with Atrius Health</b> - Atrius Health in partnership with Tufts Health Plan (THP)
<b>Tufts Health Together with BIDCO</b> - Beth Israel Deaconess Care Organization (BIDCO) in partnership with Tufts Health Plan (THP)
<b>Tufts Health Together with Boston Children's ACO</b> – Boston Children's ACO in partnership with Tufts Health Plan (THP)
<b>Tufts Health Together with CHA</b> - Cambridge Health Alliance (CHA) in partnership with Tufts Health Plan (THP)
<b>Wellforce Care Plan</b> - Wellforce Care Plan in partnership with Fallon Health

MCOs	MCO-Administered ACO (Model C)
<b>Boston Medical Center (BMC) HealthNet Plan</b>	<b>Lahey Clinical Performance Network</b> (Participating with Boston Medical Center HealthNet Plan and Tufts Health Together)
<b>Tufts Health Together</b>	

PCC Plan	Primary Care ACO Plans (Model B)
Primary care clinicians in the MassHealth Network	<b>Community Care Cooperative (C3)</b>
	<b>Partners HealthCare Choice</b>
	<b>Steward Health Choice</b>





## Payer of Claims Effective March 1, 2018

Plan Type	Payer of Claims
PCC Plan	MassHealth for non-BH services ( <i>MBHP for BH services</i> )
Primary Care ACO	MassHealth for non-BH services ( <i>MBHP for BH services</i> )
MCO	MCO*
MCO-Administered ACO	MCO*
Accountable Care Partnership Plan	Partnership Plan*

\*If an MCO or Accountable Care Partnership Plan uses a Behavioral Health (BH) vendor, providers may be paid through the BH vendor for BH services.



# New Service Area Exceptions Process

Effective **April 9, 2018**, MassHealth is implemented a process to allow members, under certain specific circumstances, to join an Accountable Care Partnership Plan that does not cover the service area in which the member lives. MassHealth will allow current and future members to request a service area exception to enroll in an out-of-area Accountable Care Partnership Plan by contacting the MassHealth Customer Service Center.

Service area exceptions may be granted for the following reasons:

- The member has an established relationship with a PCP who participates in an Accountable Care Partnership Plan that does not cover the service area in which the member resides;
- The member is homeless and a specific Accountable Care Partnership Plan can better accommodate the member's support needs; or
- The member's enrollment in the Accountable Care Partnership Plan significantly supports language, communication, or cultural needs; specialized health care needs; or other accessibility needs



## Primary Care Participation and Exclusivity

- Primary care practices and ACO-participating PCPs will be exclusive to their contracted ACO—they will exclusively provide primary care to MassHealth managed care members enrolled in their ACO.
  - ACO-participating PCPs cannot participate as primary care providers in MCOs, the PCC Plan or any other ACO.
  - This exclusivity is enforced at the **practice or entity level** rather than at the individual doctor level.
- Exclusivity **does not apply** to other programs, such as:
    - MassHealth Fee-For-Service (FFS)
    - Senior Care Options (SCO)
    - One Care; or
    - Program of All-inclusive Care for the Elderly (PACE)
  - ***PCPs can continue to provide services to members in the above-mentioned plans, including fee-for-service (FFS) members, regardless of their contracts with ACOs.***
  - PCPs who are also specialists can continue to provide specialty services across managed care plans.



## Specialist, Hospital, and Other Provider Participation

- Specialists, hospitals, and other providers may contract with multiple health plans at the same time and can provide services to members in any of the health plans with whom they are contracted. The managed care assignment of the member to an MCO, ACO, or PCC Plan is crucial for specialists to understand. This will ensure that specialists provide services to members of plans that they are contracted with.
- Specialists, hospitals, and other providers may see MassHealth members enrolled in a Primary Care ACO Plan or the PCC Plan if they are a MassHealth participating provider. This is because Primary Care ACO Plans and the PCC Plan use the MassHealth Network of specialists and hospitals.
- For members enrolled in an Accountable Care Partnership Plan or an MCO, specialists will need to contract with each of these health plans to provide services to members enrolled in these plans. This is because each of the Accountable Care Partnership Plans and MCO Plans use their own respective network of providers with whom they are contracted.
- This information can be found in MassHealth [All Provider Bulletin 272](#).

# Agenda



1. Provider Education and Communication Strategy
2. Overview of PCDI
- 3. Continuity of Care (CoC)**
4. Eligibility Verification System (EVS)
5. Health Plan Contact Information
6. Member Information and Resources
7. 2018 Provider Training & Education Schedule



# Continuity of Care (CoC)

Starting March 1, 2018, new Accountable Care Organization (ACO) and Managed Care Organization (MCO) contracts will become effective to improve accountability and integration of care for MassHealth members.

MassHealth is committed to working with all relevant parties to ensure continuity of care for the many members who are moving to new plans, whether they are going to or from an ACO Partnership Plan, a Primary Care ACO, an MCO, or the Primary Care Clinician (PCC) Plan.

MassHealth has created a [Continuity of Care Homepage](#) which offers helpful information available to view and download regarding member supports throughout transition to new health plans, such as the [Continuity of Care Memo](#) and the [Continuity of Care FAQ's](#), and the [CoC Letter to Interested Parties](#)

This information is also featured on the [MassHealth Provider PCDI Resources Web Page](#) at <https://www.mass.gov/lists/provider-pcdi-resources>



## **Update: Continuity of care extended for medical services through May 31, 2018**

MassHealth is committed to working with all relevant parties to ensure continuity of care for the many members who are moving to new plans, whether they are going to or from an ACO Partnership Plan, a Primary Care ACO, an MCO, or the Primary Care Clinician (PCC) Plan.

Here are the most important things for you to know:

- These changes apply to MassHealth managed care members (generally, this includes members under age 65 who do not have another primary insurer, either commercial or Medicare, and are not in a long-term facility).
- During the continuity of care period all existing prior authorizations for services and for provider referrals will be honored by the member's new plan. Members can continue to see their existing providers for at least 30 days, even if those providers are not in their new plan's network.
- Providers who are not in the new plan's network must contact the new plan to make appropriate payment arrangements
- In some cases, the continuity of care period may be extended. For example, members who are pregnant can continue seeing their existing OB/GYN providers throughout their pregnancy and up to six weeks postpartum
- We are asking all plans, providers, and assisters to support members in receiving all needed health care services during this transition.
- Members can contact their new plan now to let them know of any ongoing treatments or scheduled appointments
- Providers will be able to see new plan information in the MassHealth Eligibility Verification System (EVS) effective March 1, 2018. They can contact the new plan at that time for new authorization requests, or with any questions or concerns about providing services.
- MassHealth and all ACOs and MCOs have escalation protocols in place for continuity of care issues that may arise.

Please make all efforts to ensure that members continue to have access to all needed health services during this transition.

# Continuity of Care (CoC) Continued



In addition to the general principles listed for all members, MassHealth has worked with its ACOs and MCOs to identify members who may need extra help during this transition. They include people who:

- are pregnant;
- have significant health care needs or complex medical conditions;
- have autism spectrum disorder;
- have significant mental health or substance use needs;
- are receiving Children's Behavioral Health Initiative (CBHI) services;
- are receiving ongoing services such as dialysis, home health, chemotherapy and/or radiation, or hepatitis C treatments; or
- are hospitalized.



# Continuity of Care (CoC) Continued



## How MassHealth, ACOs, and MCOs Will Support Member Transitions

Accountable Care Partnership Plans and MCOs are taking the following steps to support member transitions across all covered services.

- Using data to identify highest risk enrollees;
- Providing authorization information, extending existing prior authorizations, or otherwise making accommodations for existing services, treatments, and medications;
- Relaxing referral and prior authorization requirements, where applicable;
- Performing member outreach; and
- Sharing and using medical, behavioral health, and care management information to ensure continuous care during the transition.

# Continuity of Care (CoC) Continued



## How MassHealth, ACOs, and MCOs Will Support Member Transitions

For Primary Care ACOs and the PCC Plan, MassHealth will perform the functions listed on the previous slide, including coordination with our behavioral health vendor. Accountable Care Partnership Plans and MCOs may also

- Enter into single case agreements or out-of-network agreements with providers who are providing services for members but are not part of the new network;
- Contract with critical providers as network providers; or
- Extend continuity of care arrangements in certain cases

Accountable Care Partnership Plans and MCOs must inform their members if a continuity of care arrangement that has been made for them is short-term (e.g. a time-limited, single case agreement) or long-term in nature (e.g. a network provider agreement). This information will allow members to make informed choices about their plan enrollment options.

# Continuity of Care (CoC) – Important Information for All Providers



## Use the Eligibility Verification System to Determine a Member's Plan

All providers will be able to access plan enrollment information for their patients. Starting March 1, 2018, EVS will reflect the new plan information for MassHealth members. For more information about new EVS messaging, please go to the [MassHealth's Payment & Care Delivery Innovation for Providers Web page](#).

# Continuity of Care (CoC) – Important Information for All Providers



## Prior Authorizations for Medical Services During Transition

To the extent possible, MassHealth and all MCOs in effect before March 1, 2018, have shared prior authorization information with new plans for members who are transitioning. MassHealth and the new plans have been working to add known prior authorizations into their systems to prepare for new enrollees.

The following are the key general principles around prior authorizations during the continuity of care period:

- Authorizations approved by another plan before the effective date of the member's enrollment in a new plan will be honored by the new plan through the end of the authorization period or up until the end of the continuity of care period, whichever is first.
- Authorizations that expire before the end of the 30-day continuity of care period will need to be reauthorized by the new plan, subject to the medical necessity determination of the new plan.
- Services that are scheduled, but not authorized, for a date of service on or after March 1, 2018, must be authorized by the new plan after March 1, 2018.

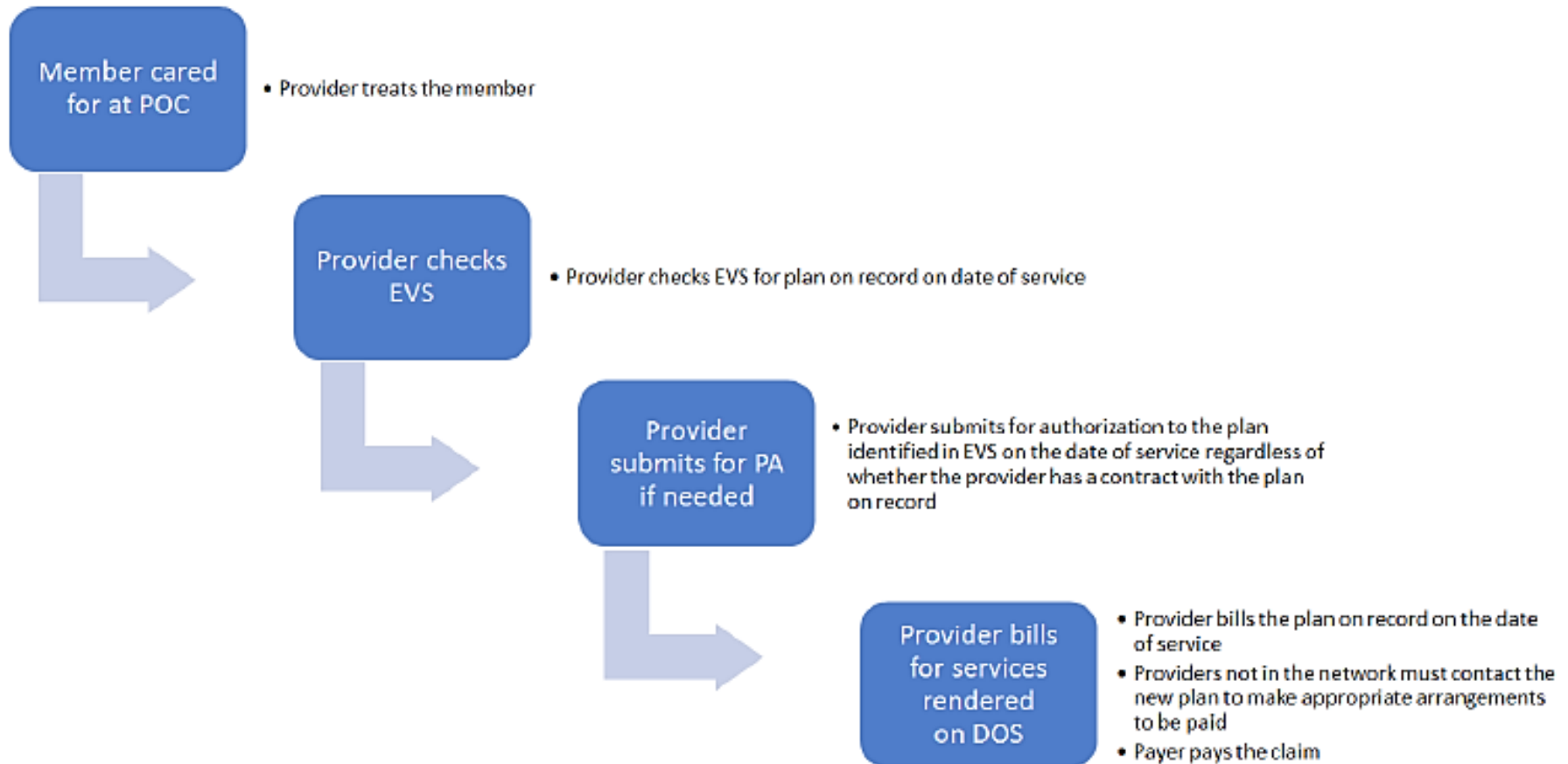
# Continuity of Care (CoC) – Important Information for All Providers



## Prior Authorizations for Medical Services During Transition Continued

- Members may continue to see the rendering provider of the authorized service during their continuity of care period, regardless of whether that provider is in the network of the new plan. Providers not in the network must contact the new plan to make appropriate arrangements to be paid.
- For members newly enrolling in a Primary Care ACO or the PCC Plan, MassHealth has made every effort to ensure that prior authorizations for individuals have been entered into the MassHealth claims system. However, if a member receives services as part of an existing prior authorization during the continuity of care period, and the claim for those services is denied for a reason related to prior authorization, providers should contact MassHealth Customer Service.
- For enrollees of an Accountable Care Partnership Plan or MCO, please contact the plan about denied claims described above.

# Continuity of Care (CoC) – Important Information for All Providers



General flow for addressing prior authorizations through transition

# Continuity of Care (CoC) – Important Information for All Providers



## Knowing Your Networks

Providers should tell their patients about their affiliations with the new plans so members know if special arrangements for continued care need to be made in the short-term, and so they can make informed long-term decisions about their plan enrollment choices. Providers should verify which provider networks they belong to. Providers wishing to join an Accountable Care Partnership Plan, MCO, or the MassHealth Primary Care ACO and PCC Plan network should call the customer service number(s) starting on slide 64 of this presentation.

PCPs who are participating in an ACO may only be PCPs for MassHealth members enrolled in that ACO (this does not apply for the provision of Medication Assisted Treatment (MAT) for individuals with substance use disorder). However, all other providers can be in multiple networks, if appropriate provider enrollment arrangements are agreed to and made with the plan.



# Continuity of Care (CoC)

## Behavioral Health

There are three behavioral health contractors among all of the managed care plans:

- Beacon Health Options is the behavioral health contractor for Accountable Care Partnership Plans affiliated with BMC HealthNet, Fallon, and Neighborhood Health Plan as well as the BMC Health Net MCO.
- Tufts Health Plan provides its own behavioral health network for its Accountable Care Partnership Plans and its MCO.
- Massachusetts Behavioral Health Partnership (MBHP) provides the behavioral health network for all Primary Care ACOs, the PCC Plan, and Health New England/Be Healthy Partnership Plan.

It is essential that behavioral health providers reach out to payers to ensure that extra care is taken to continue critical services during transition. Members in active mental health or substance use treatment must be allowed to continue with their providers and treatments throughout the continuity of care period. Behavioral health providers should reach out to plans for longer term arrangements. EVS messaging will be very clear about which entity is responsible and pays for behavioral health services for any given member.





# Continuity of Care (CoC)

## Pharmacy Services

MassHealth, Accountable Care Partnership Plans, and MCOs are working to add approved prior authorizations into their pharmacy claims systems for members who are transitioning between plans. However, it is possible that some pharmacy claims may still require prescriber outreach or prior authorization at the time of service. Pharmacies should take the following actions to ensure that no member is without medically necessary medications during the transition period.

Specifically:

- If a prescription has no remaining refills, the pharmacy must contact the prescriber to get authorization for a new prescription.
- If a prior authorization exists and has not expired, the authorization will be honored by the new plan for the continuity of care period or until the end date of the authorization, whichever is first.
- If a prior authorization has expired, the pharmacy must notify the member of the prior authorization's expiration and contact the prescriber to give them the necessary information to submit to the appropriate new plan. Please note that the pharmacist can bill an emergency override for the medication (for a minimum 72-hour supply) while the prescriber works on the authorization.



# Continuity of Care (CoC)

## Pharmacy Services Continued

If a prescription lacks a required prior authorization, the pharmacy must notify the member of the prior authorization requirement and contact the prescriber to give them the necessary information to submit to the appropriate new plan. The pharmacist can bill an emergency override for the medication (for a minimum 72-hour supply) while the prescriber works on the authorization.

For any questions or concerns related to emergency overrides, prior authorizations, or claims for pharmacy services, pharmacies or prescribers can contact the following:

- For members enrolled in a Primary Care ACO plan or the PCC Plan, call the Drug Utilization Review (DUR) program at 1-800-745-7318
- For members enrolled in an Accountable Care Partnership Plan or an MCO Plan, call the program contact on the denied claim or authorization, or contact the plan directly.
- [Contact information for all 2018 MassHealth managed care health plans](#) is listed beginning on slide 66 of this deck and is available to view and download on the [Provider PCDI Resources Webpage](#)



# Continuity of Care (CoC)

## **Durable Medical Equipment, Home Health, Therapies, Orthotics, Prosthetics, Oxygen and Respiratory Supplies, Hospice, and Nursing Facility Stays Less Than 100 Days**

It is most important that providers reach out to payers to make sure that extra care is taken to continue essential services during transition. Members in active treatment must be allowed to continue with their providers and treatments throughout the continuity of care period.

Providers should reach out to plans for longer term arrangements. EVS messaging will be very clear about which entity is responsible and pays for any services for any given member.

Information about prior authorizations and existing services has been shared to the extent possible for members enrolled in an Accountable Care Partnership Plan or MCO. Existing authorization periods must be honored by plans receiving new enrollees.

If the member enrolls in a Primary Care ACO or the PCC Plan, and a prior authorization is necessary, these providers should submit claims for the first 30 days of service to MassHealth via the Provider Online Service Center (POSC). MassHealth has made every effort to ensure that prior authorizations for individuals served by these provider types have been entered into our system. However, if a member receives services as part of an existing prior authorization in the first 30 days and the claim for those services is denied, providers can contact the LTSS Provider Service center at 1-844-368-5184.



# Continuity of Care (CoC)

## Long-Term Services and Supports Provided Through MassHealth

MCOs and ACOs are not currently responsible for the delivery of the following long-term services and supports:

- Adult Foster Care;
- Group Adult Foster Care;
- Adult Day Health;
- Personal Care Attendant;
- Day Habilitation;
- Nursing Facility Stays after 100 days; and
- Chronic Disease and Rehabilitation Hospitals after 100 days.

These services are provided directly by MassHealth and are available to eligible MassHealth members. Providers should continue to refer MassHealth members who they believe are eligible for these services to individual Adult Foster Care, Group Adult Foster Care, Adult Day Health, and Day Habilitation providers and Personal Care Management agencies as they do today. For more information about these and other long term services and supports please consult <https://www.massoptions.org/massoptions/find-community-long-term-supports-and-services>.

# Continuity of Care (CoC)



## Inpatient Hospitalization – Medical and Behavioral Health

Inpatient hospitalizations and 24-hour diversionary services for behavioral health that have been authorized by the plan in effect before March 1, 2018, must be honored by the new plan.

MassHealth (for Primary Care ACOs and the PCC Plan), Accountable Care Partnership Plans, and MCOs must pay for any inpatient stays that were authorized by the member's plan in effect before March 1, 2018, and that are in place at the time of transition. The new plan becomes responsible for payment for days in the hospital on the effective date of enrollment in the plan. The new plan is also responsible for conducting concurrent review, as well as coordinating discharge planning and follow-up care with the hospital. Inpatient hospital providers should reach out to new plans for inpatient hospitalizations that were scheduled, but not yet submitted and reviewed for authorization by the previous plan. If the new plan has an authorization requirement, the request should be submitted to the new plan for review. Similarly, authorizations that are pending, but not yet finalized, should be submitted to the new plan for review.

Inpatient stays and 24-hour diversionary services must continue to be covered by the new plan until the member is medically cleared for discharge.



# Continuity of Care (CoC)

## What Members Can Do If They Have Concerns About Their Care During the Transition

Members who have concerns or questions about their continuity of care are encouraged to work with their new plans and health care providers to confirm or obtain authorizations for health care services that they are receiving at the time of transition. There are a number of steps members may take to ensure a smooth transition if they have concerns or specific health needs:

- Contact their new plan. Members should let their new plan know about any planned visits with their primary care provider, specialists, and behavioral health providers, as well as any authorized hospitalizations and medications they are currently taking. The member's new plan can verify if existing providers will be covered beyond the continuity of care period, help the member find new providers if necessary, and coordinate any prior authorizations needed.
- Contact their primary care providers, specialists, and behavioral health providers to let them know about their new health plan. The providers should verify if they are part of that new health plan's provider network, or if they are in another health plan's network.
- Contact MassHealth at 1-800-841-2900. If members want help selecting or enrolling in a plan that contracts with a particular provider, MassHealth can provide that information, and help the member select and change plans. Members should also call MassHealth if they have an urgent situation that is not being addressed by their new plan.



# Continuity of Care (CoC)

## Escalation Protocols for Continuity of Care Concerns

Even with all best efforts, it is not possible to know in advance of all situations in which members will require assistance during this transition. For example:

- Members may face new, urgent medical situations;
- Members may be new to MassHealth and have unknown medical needs;
- Claims data used to help determine a member's health needs may be unavailable;
- Data may not reflect a particular urgency that is felt by a given member; or
- Members may have had trouble understanding information provided in any written notices from MassHealth or their new plan.

For these reasons, MassHealth has established continuity of care escalation protocols with ACOs and MCOs for continuity of care concerns or issues during the transition. Members, and those assisting members, should contact the new plan for any continuity of care concerns or issues. Contact information for the new plans starts on slide 66.

In addition, member appeals processes will continue to be available, both through the new plan and through MassHealth's Board of Hearings. If the plan chooses to modify or terminate a prior authorization or prior approval, the plan must treat the modification or termination as an Adverse Action and follow the appeal rights policy and procedures, including advance notice by the plan to the member and aid paid pending the outcome of the appeal at the Board of Hearings.

# Agenda



1. Provider Education and Communication Strategy
2. Overview of PCDI
3. Continuity of Care (CoC)
- 4. Eligibility Verification System (EVS)**
5. Health Plan Contact Information
6. Member Information and Resources
7. 2018 Provider Training & Education Schedule





# Eligibility Verification System (EVS)

- Providers should continue to check member enrollment and eligibility using EVS\* on the Provider Online Service Center (POSC)
- Providers reduce the risk of denied claims by using EVS to verify member enrollment and eligibility prior to providing services to MassHealth members
- There are two types of Restrictive Messages that appear on EVS:
  - Eligibility Restrictive Messages (No Changes)
  - Managed Care Data Restrictive Messages (Enhanced)
- The Managed Care Data Restrictive Messages have been enhanced to identify which type of health plan a member is enrolled in, and their contact information for inquiries regarding:
  - Billing (medical and behavioral health claims)
  - Service authorizations (medical and behavioral health services)
  - Behavioral Health vendors

View and download the [\*\*EVS Quick Reference Guide\*\*](#), [\*\*EVS Screenshot Examples\*\*](#), and [\*\*Health Plan Contact Matrix\*\*](#) for all 2018 managed care health plans on the [\*\*Provider PCDI Resources webpage\*\*](#) at <https://www.mass.gov/lists/provider-pcdi-resources>

If you have questions about how to check a member's eligibility, please refer to the [\*\*Verify Member Eligibility Job Aid\*\*](#) to learn how to access and check member eligibility using EVS on the POSC at <https://www.mass.gov/how-to/check-member-eligibility>

\*Note: EVS only displays a member's **current** eligibility, not future eligibility.

# EVS – Eligibility Tab



May 26, 2017

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Related Links

Welcome

Mass.Gov Home State Agencies State Online Services

MassHealth Provider Online Service Center

Member Information Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID 123456789100

Date Range	Eligibility Status
05/24/2017 05/24/2017	MASHEALTH STANDARD

Close Perform Another Eligibility Check

1. To verify the coverage type a member has, click on the *Eligibility* tab.

2. Click on the hyperlink of the Date Range\* entered for details regarding the member's coverage.

\*Note: EVS only displays a member's **current** eligibility, not future eligibility.

# Screenshot Examples of New EVS Restrictive Messages for 2018 Managed Care Health Plans



## 1. BeHealthy Partnership – Accountable Care Partnership Plan

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**Dates of Eligibility**

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 03/06/2018 to 03/06/2018.

**Eligibility Restrictive Messages**

Restrictive Messages      991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

**List of Managed Care Data (for MCO/ACO)**

Name	NPI	Phone	Date Range
→ BEHEALTHY PARTNERSHIP		(800) 786-9999	03/06/2018 03/06/2018

**Managed Care Data (for MCO/ACO) Details**

Begin Date	03/06/2018	End Date	03/06/2018
Name BEHEALTHY PARTNERSHIP			
NPI		Phone	(800) 786-9999

1573 / 688 BeHealthy Partnership member. BeHealthy Partnership is an Accountable Care Partnership Plan. BeHealthy Partnership is Baystate Health Care Alliance in partnership with Health New England.

Restrictive Messages      1574 / 689 For medical service questions call Health New England at 1-800-786-9999.

1575 / 690 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

1576 / 691 For claims, policy, or billing questions, call Health New England at 1-800-786-9999.

**Member Payment Responsibility Detail**

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close
Perform Another Eligibility Check

**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>



## 2. Berkshire Fallon Health Collaborative– Accountable Care Partnership Plan

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**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member Information		Eligibility	
<b>Dates of Eligibility</b>			
Click on the Date Range to view Eligibility information for Member ID			
Date Range	Eligibility Status		
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD		
The information below refers to the <b>MASSHEALTH STANDARD</b> coverage for 03/06/2018 to 03/06/2018.			
<b>Eligibility Restrictive Messages</b>			
Restrictive Messages	991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.		
<b>List of Managed Care Data (for MCO/ACO)</b>			
Name	NPI	Phone	Date Range
→ <a href="#">BERKSHIRE FALLON HEALTH COLLABORATI</a>		(855) 203-4660	03/06/2018 03/06/2018
<b>Managed Care Data (for MCO/ACO) Details</b>			
Begin Date	03/06/2018	End Date	03/06/2018
Name BERKSHIRE FALLON HEALTH COLLABORATI			
NPI		Phone	(855) 203-4660
Restrictive Messages	<p>1577 / 692 Berkshire Fallon Health Collaborative member. Berkshire Fallon Health Collaborative is an Accountable Care Partnership Plan. Berkshire Fallon Health Collaborative is Health Collaborative of the Berkshires in partnership with Fallon Health.</p> <p>1578 / 693 For medical service questions call Fallon Health at 1-855-203-4660.</p> <p>1579 / 694 For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7184.</p> <p>1580 / 695 For claims, policy, or billing questions, call Fallon Health at 1-855-203-4660.</p>		
<b>Member Payment Responsibility Detail</b>			
Patient Paid Amount	Patient Paid Amount Type		
Spend Down Amount			
Deductible Amount	Deductible Date		
Co-pay Status	Co-pay Cap Status		
Restrictive Messages			
<a href="#">Close</a>		<a href="#">Perform Another Eligibility Check</a>	



## 3. BMC HealthNet Plan Community Alliance– Accountable Care Partnership Plan

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Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSEALTH STANDARD

The information below refers to the MASSEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN COMMUNITY ALLIAN		(888) 566-0010	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 03/06/2018 End Date 03/06/2018

Name BMC HEALTHNET PLAN COMMUNITY ALLIAN

NPI Phone (888) 566-0010

Restrictive Messages

1581 / 696 BMC HealthNet Plan Community Alliance member. BMC HealthNet Plan Community Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Community Alliance is Boston Accountable Care Organization (ACO) in partnership with BMC HealthNet.

1582 / 697 For medical service questions call BMC HealthNet Plan at 1-888-566-0010.

1583 / 698 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.

1584 / 699 For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close

Perform Another Eligibility Check

**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>





## 4. BMC HealthNet Plan Mercy Alliance– Accountable Care Partnership Plan

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**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member Information		Eligibility	
<b>Dates of Eligibility</b>			
Click on the Date Range to view Eligibility information for Member ID			
Date Range	Eligibility Status		
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD		
The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.			
<b>Eligibility Restrictive Messages</b>			
Restrictive Messages	991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.		
<b>List of Managed Care Data (for MCO/ACO)</b>			
Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN MERCY ALLIANCE		(888) 566-0010	03/06/2018 03/06/2018
<b>Managed Care Data (for MCO/ACO) Details</b>			
Begin Date	03/06/2018		End Date 03/06/2018
Name BMC HEALTHNET PLAN MERCY ALLIANCE			
NPI		Phone (888) 566-0010	
<div style="border: 2px dashed red; padding: 10px;"> <p>1585 / 700 BMC HealthNet Plan Mercy Alliance member. BMC HealthNet Plan Mercy Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Mercy Alliance is Mercy Medical Center in partnership with BMC HealthNet Plan.</p> <p>Restrictive Messages</p> <p>1586 / 701 For medical service questions call BMC HealthNet Plan at 1-888-566-0010.</p> <p>1587 / 702 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.</p> <p>1588 / 703 For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.</p> </div>			
<b>Member Payment Responsibility Detail</b>			
Patient Paid Amount	Patient Paid Amount Type		
Spend Down Amount			
Deductible Amount	Deductible Date		
Co-pay Status	Co-pay Cap Status		
Restrictive Messages			
<a href="#">Close</a>		<a href="#">Perform Another Eligibility Check</a>	



## 5. BMC HealthNet Plan Signature Alliance– Accountable Care Partnership Plan

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**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member Information		Eligibility	
<b>Dates of Eligibility</b>			
Click on the Date Range to view Eligibility information for Member ID			
Date Range	Eligibility Status		
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD		
The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.			
<b>List of Managed Care Data (for MCO/ACO)</b>			
Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN SIGNATURE ALLIAN		(888) 566-0010	03/06/2018 03/06/2018
<b>Managed Care Data (for MCO/ACO) Details</b>			
Begin Date	03/06/2018	End Date	03/06/2018
Name BMC HEALTHNET PLAN SIGNATURE ALLIAN			
NPI		Phone (888) 566-0010	
<div style="border: 2px dashed red; padding: 10px;"> <p><b>Restrictive Messages</b></p> <p>1589 / 704 BMC HealthNet Plan Signature Alliance member. BMC HealthNet Plan Signature Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Signature Alliance is Signature Healthcare in partnership with BMC HealthNet Plan.</p> <p>1590 / 705 For medical service questions call BMC HealthNet Plan at 1-888-566-0010.</p> <p>1591 / 706 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.</p> <p>1592 / 707 For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.</p> </div>			
<b>Member Payment Responsibility Detail</b>			
Patient Paid Amount	Patient Paid Amount Type		
Spend Down Amount			
Deductible Amount	Deductible Date		
Co-pay Status	Co-pay Cap Status		
Restrictive Messages			
<a href="#">Close</a>		<a href="#">Perform Another Eligibility Check</a>	



## 6. BMC HealthNet Plan Southcoast Alliance– Accountable Care Partnership Plan

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**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member Information		Eligibility	
<b>Dates of Eligibility</b>			
Click on the Date Range to view Eligibility information for Member ID			
Date Range	Eligibility Status		
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD		
The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.			
<b>Eligibility Restrictive Messages</b>			
Restrictive Messages	991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.		
<b>List of Managed Care Data (for MCO/ACO)</b>			
Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN SOUTHCOAST ALLIA		(888) 566-0010	03/06/2018 03/06/2018
<b>Managed Care Data (for MCO/ACO) Details</b>			
Begin Date	03/06/2018	End Date	03/06/2018
Name	BMC HEALTHNET PLAN SOUTHCOAST ALLIA		
NPI		Phone	(888) 566-0010
Restrictive Messages	<p>1593 / 708 BMC HealthNet Plan Southcoast Alliance member. BMC HealthNet Plan Southcoast Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Southcoast Alliance is Southcoast Health in partnership with BMC HealthNet Plan.</p> <p>1594 / 709 For medical service questions call BMC HealthNet Plan at 1-888-566-0010.</p> <p>1595 / 710 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.</p> <p>1596 / 711 For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.</p>		
<b>Member Payment Responsibility Detail</b>			
Patient Paid Amount	Patient Paid Amount Type		
Spend Down Amount			
Deductible Amount	Deductible Date		
Co-pay Status	Co-pay Cap Status		
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<a href="#">Close</a>		<a href="#">Perform Another Eligibility Check</a>	





7. Fallon 365 Care – Accountable Care Partnership Plan

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**Note:** EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member InformationEligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
➔ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
➔ FALLON 365 CARE		(855) 508-3390	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameFALLON 365 CARE

NPIPhone(855) 508-3390

Restrictive Messages1597 / 712 Fallon 365 Care member. Fallon 365 Care is an Accountable Care Partnership Plan. Fallon 365 Care is Reliant Medical Group in partnership with Fallon Health.  
1598 / 713 For medical service questions call Fallon Health at 1-855-508-3390.  
1599 / 714 For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7182.  
1600 / 715 For claims, policy, or billing questions, call Fallon Health at 1-855-508-3390.

Member Payment Responsibility Detail

Patient Paid AmountPatient Paid Amount Type

Spend Down Amount

Deductible AmountDeductible Date

Co-pay StatusCo-pay Cap Status

Restrictive Messages

ClosePerform Another Eligibility Check



8. My Care Family– Accountable Care Partnership Plan

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Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
MY CARE FAMILY	(800) 462-5449		03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameMY CARE FAMILY

NPIPhone (800) 462-5449

Restrictive Messages

1601 / 716 My Care Family member. My Care Family is an Accountable Care Partnership Plan. My Care Family is Merrimack Valley Accountable Care Organization (ACO) in partnership with Neighborhood Health Plan (NHP).  
1602 / 717 For medical service questions call Neighborhood Health Plan (NHP) at 1-800-462-5449.  
1603 / 718 For behavioral health service questions and authorizations, call Beacon Health Options at 1-800-414-2820.  
1604 / 719 For claims, policy, or billing questions, call Neighborhood Health Plan (NHP) at 1-800-462-5449.

Member Payment Responsibility Detail

Patient Paid AmountPatient Paid Amount Type

Spend Down Amount

Deductible AmountDeductible Date

Co-pay StatusCo-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

**Note:** EVS only displays a member’s *current* eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Proprietary & Confidential

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9. Tufts Health Together with Atrius Health – Accountable Care Partnership Plan

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**Note:** EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member InformationEligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID \*

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH ATRIUS H		(888) 257-1985	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameTUFTS HEALTH TOGETHER WITH ATRIUS H

NPINPIPhone(888) 257-1985

Restrictive Messages

1605 / 720 Tufts Health Together with Atrius Health member. Tufts Health Together with Atrius Health is an Accountable Care Partnership Plan. Tufts Health Together with Atrius Health is Atrius Health in partnership with Tufts Health Plan (THP).  
1606 / 721 For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.  
1607 / 722 For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.  
1608 / 723 For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid AmountSpend Down AmountDeductible AmountCo-pay StatusRestrictive Messages

Patient Paid Amount TypeDeductible DateCo-pay Cap Status

Close

Perform Another Eligibility Check

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10. Tufts Health Together with BIDCO – Accountable Care Partnership Plan

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**Note:** EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member InformationEligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH BIDCO		(888) 257-1985	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameTUFTS HEALTH TOGETHER WITH BIDCO

NPINPIPhone(888) 257-1985

Restrictive Messages

1609 / 724 Tufts Health Together with BIDCO member. Tufts Health Together with BIDCO is an Accountable Care Partnership Plan. Tufts Health Together with BIDCO is Beth Israel Deaconess Care Organization (BIDCO) in partnership with Tufts Health Plan (THP).  
1610 / 725 For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.  
1611 / 726 For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.  
1612 / 727 For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid AmountPatient Paid Amount Type

Spend Down Amount

Deductible AmountDeductible Date

Co-pay StatusCo-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

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11. Tufts Health Together with Boston Children’s ACO – Accountable Care Partnership Plan

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Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID \*

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH BOSTON C		(888) 257-1985	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameTUFTS HEALTH TOGETHER WITH BOSTON C

NPI

Phone(888) 257-1985

Restrictive Messages

1613 / 728 Tufts Health Together with Boston Children’s ACO member. Tufts Health Together with Boston Children’s ACO is an Accountable Care Partnership Plan. Boston Children’s Accountable Care Organization (ACO) in partnership with Tufts Health Plan (THP).  
1614 / 729 For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.  
1615 / 730 For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.  
1616 / 731 For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid AmountSpend Down AmountDeductible AmountCo-pay StatusRestrictive Messages

Patient Paid Amount TypeDeductible DateCo-pay Cap Status

Close

Perform Another Eligibility Check

**Note:** EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

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12. Tufts Health Together with CHA– Accountable Care Partnership Plan

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**Note:** EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASHEALTH STANDARD

The information below refers to the MASHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH CHA		(888) 257-1985	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018

End Date03/06/2018

NameTUFTS HEALTH TOGETHER WITH CHA

NPI

Phone(888) 257-1985

Restrictive Messages

1618 / 732 Tufts Health Together with CHA member. Tufts Health Together with CHA is an Accountable Care Partnership Plan. Tufts Health Together with CHA is Cambridge Health Alliance (CHA) in partnership with Tufts Health Plan (THP).  
1619 / 733 For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.  
1620 / 734 For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.  
1621 / 735 For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close

Perform Another Eligibility Check

Proprietary & Confidential

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13. Wellforce Care Plan – Accountable Care Partnership Plan

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Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID \*

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ WELLFORCE CARE PLAN		(855) 508-4715	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameWELLFORCE CARE PLAN

NPIPhone (855) 508-4715

Restrictive Messages

1622 / 736 Wellforce Care Plan member. Wellforce Care Plan is an Accountable Care Partnership Plan. Wellforce Care Plan is Wellforce in partnership with Fallon Health.

1623 / 737 For medical service questions call Fallon Health at 1-855-508-4715.

1624 / 738 For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7183

1625 / 739 For claims, policy, or billing questions, call Fallon Health at 1-855-508-4715.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

**Note:** EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>



# Screenshot Examples of New EVS Restrictive Messages for 2018 Managed Care Health Plans

## 1. Community Care Cooperative (C3) – Primary Care ACO Plan

**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
03/06/2018 – 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Phone	Date Range
HAPPY HEALTH MEDICAL	HAPPY HEALTH MEDICAL	(888) 123-4567	3/06/2018 - 3/06/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date03/06/2018End Date03/06/2018

Legal NameHAPPY HEALTH MEDICAL

Site/DBA NameHAPPY HEALTH MEDICALSite Phone(888) 123-4567

Site Address1 CENTER PL  
BOSTON, MA 02114

Restrictive Messages687 / 687 COMMUNITY CARE COOPERATIVE MEMBER. COMMUNITY CARE COOPERATIVE IS A PRIMARY CARE ACO. CALL PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Managed Care Data (for MCO/ACO)

Legal Name	NPI	Phone	Date Range
COMMUNITY CARE COOPERATIVE (C3)		(866) 676-9226	3/06/2018 – 3/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameNPICOMMUNITY CARE COOPERATIVE (C3)Phone(866) 676-9226

Restrictive Messages1626 / 740 Community Care Cooperative (C3) member. Community Care Cooperative is a Primary Care ACO.  
1627 / 741 For medical service questions Community Care Cooperative (C3) at 1-866-676-9226.  
1628 / 742 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

List of Behavioral Health

Legal Name	NPI	Phone	Date Range
MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	3/06/2018 – 3/06/2018

Behavioral Health Detail

Begin Date03/06/2018End Date03/06/2018

Provider NameNPIMASSACHUSETTS BEH HLTH PRT1548385057Provider Phone(800) 495-0086

Restrictive Messages76 / 525 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Member Payment Responsibility Detail

Patient Paid AmountPatient Paid Amount Type

Spend Down AmountDeductible Date

Deductible AmountCo-pay Status

Co-pay StatusRestrictive Messages





# Screenshot Examples of New EVS Restrictive Messages for 2018 Managed Care Health Plans

## 2. Partners HealthCare Choice – Primary Care ACO Plan

**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
03/06/2018 – 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Phone	Date Range
HAPPY HEALTH MEDICAL	HAPPY HEALTH MEDICAL	(888) 123-4567	3/06/2018 - 3/06/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date03/06/2018End Date03/06/2018

Legal NameHAPPY HEALTH MEDICAL

Site/DBA NameHAPPY HEALTH MEDICALSite Phone(888) 123-4567

Site Address1 CENTER PL

AddressBOSTON, MA 02114

Restrictive Messages686 / 686 PARTNERS HEALTHCARE CHOICE MEMBER. PARTNERS HEALTHCARE CHOICE IS A PRIMARY CARE ACO. CALL PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Managed Care Data (for MCO/ACO)

Legal Name	NPI	Phone	Date Range
PARTNERS HEALTHCARE CHOICE		(800) 231-2722	3/06/2018 – 3/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NamePARTNERS HEALTHCARE CHOICEPhone(800) 231-2722

NPI

Restrictive Messages1629 / 743 Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO.  
1630 / 744 For medical service questions Partners HealthCare Choice at 1-800-231-2722.  
1631 / 745 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

List of Behavioral Health

Legal Name	NPI	Phone	Date Range
MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	3/06/2018 – 3/06/2018

Behavioral Health Detail

Begin Date03/06/2018End Date03/06/2018

Provider NameMASSACHUSETTS BEH HLTH PRTProvider Phone(800) 495-0086

NPI1548385057

Restrictive Messages76 / 525 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Member Payment Responsibility Detail

Patient Paid AmountSpend Down AmountDeductible AmountCo-pay StatusRestrictive Messages

Patient Paid Amount TypeDeductible DateCo-pay Cap Status



3. Steward Health Choice – Primary Care ACO Plan

Note: EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

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Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
03/06/2018 – 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Phone	Date Range
HAPPY HEALTH MEDICAL	HAPPY HEALTH MEDICAL	(888) 123-4567	3/06/2018 - 3/06/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date

03/06/2018

End Date

03/06/2018

Legal Name

HAPPY HEALTH MEDICAL

Site/DBA Name

HAPPY HEALTH MEDICAL

Site Phone

(888) 123-4567

Site Address

1 CENTER PL  
BOSTON, MA 02114

Restrictive Messages

685 / 685 STEWARD HEALTH CHOICE MEMBER. STEWARD HEALTH CHOICE IS A PRIMARY CARE ACO. CALL PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Managed Care Data (for MCO/ACO)

Legal Name	NPI	Phone	Date Range
STEWARD HEALTH CHOICE		(855) 860-4949	3/06/2018 – 3/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date

03/06/2018

End Date

03/06/2018

Name

STEWARD HEALTH CHOICE

Phone

(855) 860-4949

NPI

Restrictive Messages

1632 / 746 Steward Health Choice member. Steward Health Choice is a Primary Care ACO.

1633 / 747 For medical service questions Steward Health Choice at 1-855-860-4949.

1634 / 748 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

List of Behavioral Health

Legal Name	NPI	Phone	Date Range
MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	3/06/2018 – 3/06/2018

Behavioral Health Detail

Begin Date

03/06/2018

End Date

03/06/2018

Provider Name

MASSACHUSETTS BEH HLTH PRT

Provider Phone

(800) 495-0086

NPI

1548385057

Restrictive Messages

76 / 525 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Member Payment Responsibility Detail



# Screenshot Examples of New EVS Restrictive Messages for 2018 Managed Care Health Plans

## Primary Care Clinician (PCC) Plan

**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
03/06/2018 – 03/06/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages

121 / 121 DIRECT ALL INQUIRIES ABOUT ELIGIBILITY TO SOCIAL SERVICE WORKER.  
246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D).  
186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Phone	Date Range
HAPPY HEALTH MEDICAL	HAPPY HEALTH MEDICAL	(888) 123-4567	3/06/2018- 3/06/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date

03/06/2018

End Date

03/06/2018

Legal Name

HAPPY HEALTH MEDICAL

Site/DBA Name

HAPPY HEALTH MEDICAL

Site Address

1 CENTER PL  
BOSTON, MA 02114

Site Phone

(888) 123-4567

Restrictive Messages

461 / 461 PRIMARY CARE CLINICIAN PLAN (PCC) PLAN MEMBER. CALL PCC FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).  
1636 / 749 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

List of Behavioral Health

Legal Name	NPI	Phone	Date Range
MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	3/06/2018 – 3/06/2018

Behavioral Health Detail

Begin Date

03/06/2018

End Date

03/06/2018

Provider Name

MASSACHUSETTS BEH HLTH PRT

Provider NPI

1548385057

Provider Phone

(800) 495-0086

Restrictive Messages

76 / 525 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Member Payment Responsibility Detail

Patient Paid Amount

Patient Paid Amount Type

Spend Down Amount

Deductible Amount

Deductible Date

Co-pay Status

Co-pay Cap Status

Restrictive Messages

# Screenshot Examples of New EVS Restrictive Messages for 2018 Managed Care Health Plans



## 1. BMC HealthNet Plan – Managed Care Organization (MCO) Plan

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Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN		(888) 566-0010	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 03/06/2018

End Date 03/06/2018

Name BMC HEALTHNET PLAN

NPI

Phone (888) 566-0010

Restrictive Messages

1059 / 618 BMC HealthNet Plan member. BMC HealthNet Plan is an MCO.  
747 / 021 For medical service questions call BMC HealthNet Plan at 1-888-566-0010. For behavioral health service questions and authorizations call Beacon Health Strategies at 1-888-217-3501.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

**Note:** EVS only displays a member's **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>





2. Tufts Health Together – Managed Care Organization (MCO) Plan

- > [Home](#)
- > [Provider Search](#)
- > [Manage Batch Files](#)
- > [Manage Service Authorizations](#)
- > [Manage Correspondence and Reporting](#)
- > [Manage Members](#)
  - > [Eligibility](#)
    - > [Verify Member Eligibility](#)
    - > [Inquire Eligibility Request](#)
    - > [Enrollment](#)
    - > [Long Term Care](#)
  - > [Manage Claims and Payments](#)
  - > [Manage Provider Information](#)
  - > [Administer Account](#)
  - > [Reference Publications](#)
  - > [EHR Incentive Program](#)
  - > [News & Updates](#)
  - > [Related Links](#)

Note: EVS only displays a member’s **current** eligibility, not future eligibility.

View and download the [EVS Quick Reference Guide](#) and [Health Plan Contact Matrix](#) for 2018 managed care health plans on the [Provider PCDI Resources webpage](#)

<https://www.mass.gov/lists/provider-pcdi-resources>

Member InformationEligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 03/06/2018 03/06/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 03/06/2018 to 03/06/2018.

Eligibility Restrictive Messages

Restrictive Messages991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER		(888) 257-1985	03/06/2018 03/06/2018

Managed Care Data (for MCO/ACO) Details

Begin Date03/06/2018End Date03/06/2018

NameTUFTS HEALTH TOGETHER

NPINPIPhone(888) 257-1985

Restrictive Messages

1138 / 616 Tufts Health Together member. Tufts Health Together is an MCO.  
1146 / 056 For medical and behavioral health service questions and authorizations call Tufts Health Together at 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid AmountPatient Paid Amount Type

Spend Down Amount

Deductible AmountDeductible Date

Co-pay StatusCo-pay Cap Status

Restrictive Messages

ClosePerform Another Eligibility Check

# EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans



Accountable Care Partnership Plans		
<b>Plan Name: BeHealthy Partnership</b>		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1573	688	BeHealthy Partnership member. BeHealthy Partnership is an Accountable Care Partnership Plan. BeHealthy Partnership is Baystate Health Care Alliance in partnership with Health New England.
1574	689	For medical service questions call Health New England at 1-800-786-9999.
1575	690	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.
1576	691	For claims, policy, or billing questions, call Health New England at 1-800-786-9999.
<b>Plan Name: Berkshire Fallon Health Collaborative</b>		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1577	692	Berkshire Fallon Health Collaborative member. Berkshire Fallon Health Collaborative is an Accountable Care Partnership Plan. Berkshire Fallon Health Collaborative is Health Collaborative of the Berkshires in partnership with Fallon Health.
1578	693	For medical service questions call Fallon Health at 1-855-203-4660
1579	694	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7184.
1580	695	For claims, policy, or billing questions, call Fallon Health at 1-855-203-4660.
<b>Plan Name: BMC HealthNet Plan Community Alliance</b>		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1581	696	BMC HealthNet Plan Community Alliance member. BMC HealthNet Plan Community Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Community Alliance is Boston Accountable Care Organization (ACO) in partnership with BMC HealthNet.
1582	697	For medical service questions call BMC HealthNet Plan at 1-888-566-0010.
1583	698	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1584	699	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.

# EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans



Accountable Care Partnership Plans (con't.)		
<b>Plan Name: BMC HealthNet Plan Mercy Alliance</b>		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1585	700	BMC HealthNet Plan Mercy Alliance member. BMC HealthNet Plan Mercy Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Mercy Alliance is Mercy Medical Center in partnership with BMC HealthNet Plan.
1586	701	For medical service questions call BMC HealthNet Plan at 1-888-566-0010.
1587	702	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1588	703	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.
<b>Plan Name: BMC HealthNet Plan Signature Alliance</b>		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1589	704	BMC HealthNet Plan Signature Alliance member. BMC HealthNet Plan Signature Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Signature Alliance is Signature Healthcare in partnership with BMC HealthNet Plan.
1590	705	For medical service questions call BMC HealthNet Plan at 1-888-566-0010.
1591	706	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1592	707	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.
<b>Plan Name: BMC HealthNet Plan Southcoast Alliance</b>		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1593	708	BMC HealthNet Plan Southcoast Alliance member. BMC HealthNet Plan Southcoast Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Southcoast Alliance is Southcoast Health in partnership with BMC HealthNet Plan.
1594	709	For medical service questions call BMC HealthNet Plan at 1-888-566-0010.
1595	710	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1596	711	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.

# EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans



## Accountable Care Partnership Plans (con't.)

### Plan Name: Fallon 365 Care

EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1597	712	Fallon 365 Care member. Fallon 365 Care is an Accountable Care Partnership Plan. Fallon 365 Care is Reliant Medical Group in partnership with Fallon Health.
1598	713	For medical service questions call Fallon Health at 1-855-508-3390.
1599	714	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7182.
1600	715	For claims, policy, or billing questions, call Fallon Health at 1-855-508-3390.

### Plan Name: My Care Family

EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1601	716	My Care Family member. My Care Family is an Accountable Care Partnership Plan. My Care Family is Merrimack Valley Accountable Care Organization (ACO) in partnership with Neighborhood Health Plan (NHP).
1602	717	For medical service questions call Neighborhood Health Plan (NHP) at 1-800-462-5449.
1603	718	For behavioral health service questions and authorizations, call Beacon Health Options At 1-800-414-2820.
1604	719	For claims, policy, or billing questions, call Neighborhood Health Plan (NHP) at 1-800-462-5449.

### Plan Name: Tufts Health Together with Atrius Health

EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1605	720	Tufts Health Together with Atrius Health member. Tufts Health Together with Atrius Health is an Accountable Care Partnership Plan. Tufts Health Together with Atrius Health is Atrius Health in partnership with Tufts Health Plan (THP).
1606	721	For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.
1607	722	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1608	723	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.



# EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans



Accountable Care Partnership Plans (con't.)		
Plan Name: Tufts Health Together with BIDCO		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1609	724	Tufts Health Together with BIDCO member. Tufts Health Together with BIDCO is an Accountable Care Partnership Plan. Tufts Health Together with BIDCO is Beth Israel Deaconess Care Organization (BIDCO) in partnership with Tufts Health Plan (THP).
1610	725	For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.
1611	726	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1612	727	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.
Plan Name: Tufts Health Together with Boston Children's ACO		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1613	728	Tufts Health Together with Boston Children's ACO member. Tufts Health Together with Boston Children's ACO is an Accountable Care Partnership Plan. Boston Children's Accountable Care Organization (ACO) in partnership with Tufts Health Plan (THP).
1614	729	For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.
1615	730	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1616	731	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.
Plan Name: Tufts Health Together with CHA		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1618	732	Tufts Health Together with CHA member. Tufts Health Together with CHA is an Accountable Care Partnership Plan. Tufts Health Together with CHA is Cambridge Health Alliance (CHA) in partnership with Tufts Health Plan (THP).
1619	733	For medical service questions call Tufts Health Plan (THP) at 1-888-257-1985.
1620	734	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1621	735	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.
Plan Name: Wellforce Care Plan		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1622	736	Wellforce Care Plan member. Wellforce Care Plan is an Accountable Care Partnership Plan. Wellforce Care Plan is Wellforce in partnership with Fallon Health.
1623	737	For medical service questions call Fallon Health at 1-855-508-4715.
1624	738	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7183.
1625	739	For claims, policy, or billing questions, call Fallon Health at 1-855-508-4715.

# EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans



## Primary Care ACO Plans

### Plan Name: Community Care Cooperative (C3)

EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
687	687	COMMUNITY CARE COOPERATIVE MEMBER. COMMUNITY CARE COOPERATIVE IS A PRIMARY CARE ACO. CALL PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
1626	740	Community Care Cooperative (C3) member. Community Care Cooperative is a Primary Care ACO.
1627	741	For medical service questions call, Community Care Cooperative (C3) at 1-866-676-9226.
1628	742	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
76	525	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

### Plan Name: Partners HealthCare Choice

EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
686	686	PARTNERS HEALTHCARE CHOICE MEMBER. PARTNERS HEALTHCARE CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
1629	743	Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO.
1630	744	For medical service questions call, Partners HealthCare Choice at 1-800-231-2722.
1631	745	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
76	525	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

### Plan Name: Steward Health Choice

EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
685	685	STEWARD HEALTH CHOICE MEMBER. STEWARD HEALTH CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
1632	746	Steward Health Choice member. Steward Health Choice is a Primary Care ACO.
1633	747	For medical service questions call, Steward Health Choice at 1-855-860-4949.
1634	748	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
76	525	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

# EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans



Primary Care Clinician (PCC) Plan		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
461	461	PRIMARY CARE CLINICIAN (PCC) PLAN MEMBER. CALL PCC FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
76	525	For behavioral health service questions and authorization, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.
1636	749	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

Managed Care Organization (MCO) Plans		
Plan Name: BMC HealthNet Plan		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1059	618	BMC HealthNet Plan member. BMC HealthNet Plan is an MCO.
747	021	For medical service questions call BMC HealthNet Plan at 1-888-566-0010. For behavioral health service questions and authorizations call Beacon Health Strategies at 1-888-217-3501.
Plan Name: Tufts Health Together		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text
1138	616	Tufts Health Together member. Tufts Health Together is an MCO.
1146	056	For medical and behavioral health service questions and authorizations call Tufts Health Together at 1-888-257-1985.

To view and download the EVS Quick Reference Guide, visit the Provider PCDI Resources page at <https://www.mass.gov/lists/provider-pcdi-resources>

# Agenda



1. Provider Education and Communication Strategy
2. Overview of PCDI
3. Continuity of Care (CoC)
4. Eligibility Verification System (EVS)
- 5. Health Plan Contact Information**
6. Member Information and Resources
7. 2018 Provider Training & Education Schedule








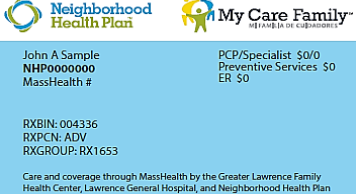
# MassHealth Contact Matrix for 2018 Managed Care Health Plans



Accountable Care Partnership Plans	Customer Service	Behavioral Health Services	Member Card Image
<b>Be Healthy Partnership</b> Baystate Health Care Alliance <i>in partnership with Health New England</i> <a href="http://www.behealthypartnership.org">www.behealthypartnership.org</a>	 <b>Health New England</b> <i>Where you matter.</i> <b>1-800-786-9999</b>	<b>Massachusetts Behavioral Health Partnership (MBHP)</b> <a href="http://www.masspartnership.com">www.masspartnership.com</a> <b>1-800-495-0086</b>	
<b>Berkshire Fallon Health Collaborative</b> Health Collaborative of the Berkshires <i>in partnership with Fallon Health</i> <a href="http://www.fallonhealth.org/Berkshires">www.fallonhealth.org/Berkshires</a>	 <b>1-855-203-4660</b>	<b>Beacon Health Options</b> <b>1-888-877-7184</b>	
<b>BMC HealthNet Plan Community Alliance</b> Boston Accountable Care Organization (ACO) <i>in partnership with</i> BMC HealthNet Plan <a href="http://www.bmchp.org/community">www.bmchp.org/community</a>	 <b>1-888-566-0010</b>	<b>Beacon Health Strategies</b> <b>1-888-217-3501</b>	
<b>BMC HealthNet Plan Mercy Alliance</b> Mercy Medical Center <i>in partnership with</i> BMC HealthNet Plan <a href="http://www.bmchp.org/mercy">www.bmchp.org/mercy</a>	 <b>1-888-566-0010</b>	<b>Beacon Health Strategies</b> <b>1-888-217-3501</b>	









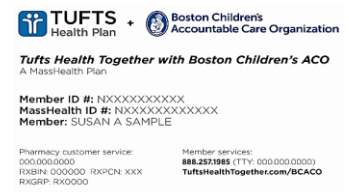





# MassHealth Contact Matrix for 2018 Managed Care Health Plans



Accountable Care Partnership Plans	Customer Service	Behavioral Health Services	Member Card Image
<b>BMC HealthNet Plan Signature Alliance</b> Signature Healthcare <i>in partnership</i> with BMC HealthNet Plan <a href="http://www.bmchp.org/signature">www.bmchp.org/signature</a>	 <b>1-888-566-0010</b>	<b>Beacon Health Strategies</b> <b>1-888-217-3501</b>	
<b>BMC HealthNet Plan Southcoast Alliance</b> Southcoast Health <i>in partnership</i> with BMC HealthNet Plan <a href="http://www.bmchp.org/southcoast">www.bmchp.org/southcoast</a>	 <b>1-888-566-0010</b>	<b>Beacon Health Strategies</b> <b>1-888-217-3501</b>	
<b>Fallon 365 Care</b> Reliant Medical Group <i>in partnership</i> with Fallon Health <a href="http://www.fallonhealth.org/365care">www.fallonhealth.org/365care</a>	 <b>1-855-508-3390</b>	<b>Beacon Health Options</b> <b>1-888-877-7182</b>	
<b>My Care Family</b> Merrimack Valley ACO <i>in partnership</i> with Neighborhood Health Plan (NHP) <a href="http://www.mycarefamily.org">www.mycarefamily.org</a>	 <b>1-800-462-5449</b>	<b>Beacon Health Options</b> <b>1-800-414-2820</b>	

# MassHealth Contact Matrix for 2018 Managed Care Health Plans




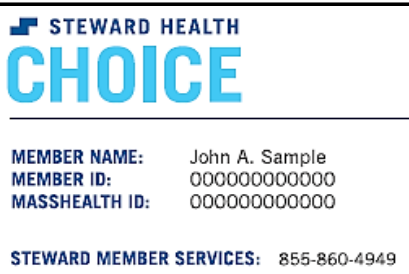


Accountable Care Partnership Plans	Customer Service	Behavioral Health Services	Member Card Image
<b>Tufts Health Together with Atrius Health</b> Atrius Health <i>in partnership</i> with Tufts Health Plan (THP) <a href="http://www.TuftsHealthTogether.com/atriushealth">www.TuftsHealthTogether.com/atriushealth</a>	 <b>1-888-257-1985</b>	 <b>1-888-257-1985</b>	
<b>Tufts Health Together with BIDCO</b> Beth Israel Deaconess Care Organization (BIDCO) <i>in partnership</i> with Tufts Health Plan (THP) <a href="http://www.TuftsHealthTogether.com/BIDCO">www.TuftsHealthTogether.com/BIDCO</a>	 <b>1-888-257-1985</b>	 <b>1-888-257-1985</b>	
<b>Tufts Health Together with Boston Children's ACO</b> Boston Children's ACO <i>in partnership</i> with Tufts Health Plan (THP) <a href="http://www.TuftsHealthTogether.com/BCACO">www.TuftsHealthTogether.com/BCACO</a>	 <b>1-888-257-1985</b>	 <b>1-888-257-1985</b>	
<b>Tufts Health Together with CHA</b> Cambridge Health Alliance (CHA) <i>in partnership</i> with Tufts Health Plan (THP) <a href="http://www.TuftsHealthTogether.com/CHA">www.TuftsHealthTogether.com/CHA</a>	 <b>1-888-257-1985</b>	 <b>1-888-257-1985</b>	
<b>Wellforce Care Plan</b> Wellforce <i>in partnership</i> with Fallon Health <a href="http://www.fallonhealth.org/wellforce">www.fallonhealth.org/wellforce</a>	 <b>1-855-508-4715</b>	<b>Beacon Health Options</b> <b>1-888-877-7183</b>	



# MassHealth Contact Matrix for 2018 Managed Care Health Plans





Primary Care ACO Plans*	Customer Service	Behavioral Health Services	Member Card Image
<b>Community Care Cooperative (C3)*</b> <a href="http://www.c3aco.org">www.c3aco.org</a>	 <b>1-866-676-9226</b>	<b>Massachusetts Behavioral Health Partnership (MBHP)</b> <a href="http://www.masspartnership.com">www.masspartnership.com</a> <b>1-800-495-0086</b>	
<b>Partners HealthCare Choice*</b> <a href="http://www.partners.org/for-patients/ACO/Partners-HealthCare-Choice-Medicaid.aspx">http://www.partners.org/for-patients/ACO/Partners-HealthCare-Choice-Medicaid.aspx</a>	 <b>1-800-231-2722</b>	<b>Massachusetts Behavioral Health Partnership (MBHP)</b> <a href="http://www.masspartnership.com">www.masspartnership.com</a> <b>1-800-495-0086</b>	
<b>Steward Health Choice*</b> <a href="http://www.stewardhealthchoice.org">www.stewardhealthchoice.org</a>	 <b>1-855-860-4949</b>	<b>Massachusetts Behavioral Health Partnership (MBHP)</b> <a href="http://www.masspartnership.com">www.masspartnership.com</a> <b>1-800-495-0086</b>	


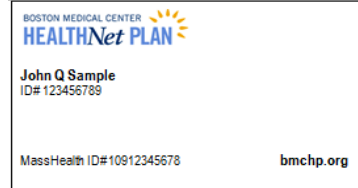



**\*Note:** To enroll in a Primary Care ACO, members must also select a PCP in that ACO's network. PCPs may not be available in all service areas.



# MassHealth Contact Matrix for 2018 Managed Care Health Plans



PCC Plan*	Customer Service	Behavioral Health Services	Member Card Image
<b>Primary Care Clinician (PCC) Plan*</b> <a href="http://www.mass.gov/service-details/primary-care-clinician-pcc-plan-for-masshealth-members">http://www.mass.gov/service-details/primary-care-clinician-pcc-plan-for-masshealth-members</a>	 <b>1-800-841-2900</b>	<b>Massachusetts Behavioral Health Partnership (MBHP)</b> <a href="http://www.masspartnership.com">www.masspartnership.com</a> <b>1-800-495-0086</b>	
<b>*Note:</b> <ul style="list-style-type: none"> <li>To enroll in the PCC Plan, members must also select a PCP in the MassHealth network. PCPs may not be available in all service areas.</li> <li>PCC Plan members can enroll in an ACO or MCO at any time.</li> <li>Community Partners, who provide long-term services and supports, are not available in the PCC Plan.</li> <li>Behavioral Health Community Partners are only available for PCC Plan members who also participate in Community Based Flexible Supports (CBFS), a Massachusetts Department of Mental Health program.</li> </ul>			

MCO Plans	Customer Service	Behavioral Health Services	Member Card Image
<b>BMC HealthNet Plan</b> <a href="http://www.bmchp.org">www.bmchp.org</a>	 <b>1-888-566-0010</b>	<b>Beacon Health Strategies</b> <b>1-888-217-3501</b>	
<b>Tufts Health Together</b> <a href="http://www.tuftshealthtogether.com">http://www.tuftshealthtogether.com</a>	 <b>1-888-257-1985</b>	 <b>1-888-257-1985</b>	

# Agenda

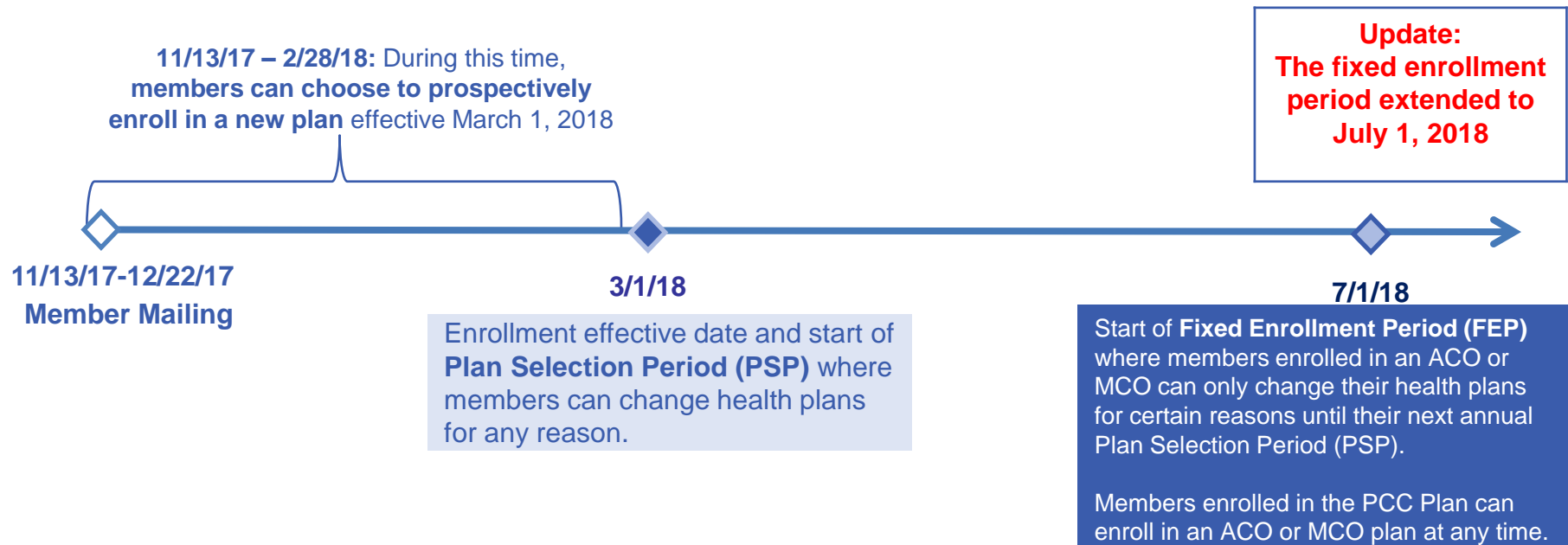


1. Provider Education and Communication Strategy
2. Overview of PCDI
3. Continuity of Care (CoC)
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- 6. Member Information and Resources**
7. 2018 Provider Training & Education Schedule



# Important Member Choice Dates

Below are important dates for managed care eligible members with enrollments effective March 1, 2018



- All managed care members have a new plan selection and fixed enrollment period every year
- After March 1, 2018, a new managed care member's Plan Selection Period will be the first **90 days** after the effective date of enrollment to a new Plan, and Fixed Enrollment will be the remaining **275 days** of the year
  - For example, a new managed care eligible member who enrolls into a new Plan effective 6/1/18, will be in their Plan Selection Period from 6/1/18 to 8/29/18, and their Fixed Enrollment Period from 8/30/18 to 5/31/19
- Member enrollment changes made during the Plan Selection Period will take 2 to 3 days to process
- Members enrolled in the PCC Plan can enroll in an ACO or MCO plan at any time.

# Member Resources



## New MassHealth Choices

- MassHealth website with information to search and compare plan choices, learn the importance of selecting a PCP, links to provider directories, and enroll online
- [www.masshealthchoices.com](http://www.masshealthchoices.com)



## Member Materials

- Enrollment Guide, member mailings, Fact Sheets, and other helpful resources
- <https://masshealthchoices.com/member-materials>



## MassHealth Customer Service Center

- Enhanced call center staff to support enrollment activity, member calls, and questions
- 1-800-841-2900
- TTY: 1-800-497-4648



# New MassHealth Choices

[www.MassHealthChoices.com](https://www.MassHealthChoices.com) allows members to **Learn**, **Compare** and **Enroll** in a plan

The screenshot shows the homepage of the MassHealthChoices website. At the top, there is a navigation bar with links for 'Get answers', 'Words to know', 'Member materials', 'Contacting health plans', and 'Contacts and links'. Below this is a large banner image of a family blowing bubbles. Overlaid on the banner is a white box with the 'MassHealth' logo and a 'Welcome to MassHealth' message. Below the welcome message are three main sections: 'Learn', 'Compare', and 'Enroll', each with a dropdown arrow and a brief description. At the bottom of the page, there are three columns of content: 'In-person help near you', 'It's time to enroll!', and 'Get answers'. The 'In-person help near you' section includes a link to 'Find in-person help >'. The 'It's time to enroll!' section features an image of a child using a laptop. The 'Get answers' section lists common questions about the MassHealth program, such as 'What is the MassHealth program?', 'What is an Accountable Care Organization (ACO)?', 'What is a Managed Care Organization (MCO)?', and 'What is the Primary Care Clinician (PCC) Plan?', followed by a 'Learn more >' link.

Home | MassHealth x

Secure | <https://masshealthchoices.com>

Apps Managed bookmarks For quick access, place your bookmarks here on the bookmarks bar. Import bookmarks now...

SEARCH CHANGE TEXT SIZE ENGLISH SPANISH

Get answers Words to know Member materials Contacting health plans Contacts and links

**MassHealth**

**Welcome to MassHealth**

Changes are coming to the MassHealth program! Starting on **March 1, 2018**, MassHealth will offer new health plans for you to choose from. Use this website to explore your options.

**Learn**

Learn about the MassHealth program and your available health plan choices

**Compare**

Compare health plans and providers

**Enroll**

Enroll in a health plan

**In-person help near you**

We are here to help you enroll. We can tell you about MassHealth's new health plan options, answer your questions, and help you choose health plans and providers.

[Find in-person help >](#)

**It's time to enroll!**

**Get answers**

What is the MassHealth program?

What is an Accountable Care Organization (ACO)?

What is a Managed Care Organization (MCO)?

What is the Primary Care Clinician (PCC) Plan?


[Learn more >](#)





# MassHealth Choices – Compare Plans

The Compare Plans tool helps members find which MassHealth health plans are available where they live. To get started, all they have to do is enter their ZIP code.

[Q SEARCH](#) [CHANGE TEXT SIZE](#) [ENGLISH](#) [SPANISH](#)



[Learn](#)   
*Learn about the MassHealth program and your available health plan choices*

[Compare](#)   
*Compare health plans and providers*

[Enroll](#)  
*Enroll in a health plan*


[Get answers](#)  
[Words to know](#)  
[Member materials](#)  
[Contacting health plans](#)  
[Contacts and links](#)

[Home](#) | [Compare](#) | [Compare plans](#)

## Compare plans

- MassHealth is adding more health plan choices as of March 1, 2018. Use this tool to see which new plans will be available where you live
- Enter your ZIP code below to see the plans you can choose where you live
- Compare the extra benefits each plan offers. All plans offer the same basic benefits plus extra benefits. Extra benefits differ for each plan.
- Choose the best health plan for you

Enter your ZIP code:



[Go](#)

[Words to know](#) | [Contacts and links](#) | [Non-discrimination](#) | [Sitemap](#) | [Privacy Policy](#)

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Enter your ZIP code:  [Go](#)

[Compare plans \(choose 2 or 3\)](#) [Compare >](#)





# MassHealth Choices – Compare Health Plans

Members can see how plans compare to one another in a side-by-side view. They can review plan details such as: plan descriptions, member card images, digital tools, pregnancy benefits, healthy kids programs, healthy living and health education programs, and view links to provider directories and hospital affiliations. Please note, the PCP provider look-up that is accessible directly on this site is only for ACO PCPs.

Your selections: Pittsfield [Change selections](#)

## Berkshire Fallon Health Collaborative

**Toll free number:** 1-855-203-4660  
**TTY:** 711  
**Behavioral health number:** 1-888-877-7184  
Available Monday - Friday, 8 a.m. to 6 p.m.  
[www.fallonhealth.org/Berkshires](http://www.fallonhealth.org/Berkshires)

[View basic plan benefits >](#)

### Description of plan

The Berkshire Fallon Health Collaborative (BFHC) is a partnership between Fallon Health, Berkshire Health Systems and Community Health Programs. BFHC is committed to providing our members with the right care, at the right time, in the right place.

### Member card



**MEMBERS**  
Customer Service: 1-855-203-4660 (Toll Free)  
Toll-free: 1-800-TELADOC (1-800-835-3263)  
Berkshire Health Options: 1-888-877-7184 (Toll Free)

## BMC HealthNet Plan

**Toll free number:** 1-888-566-0010  
**Behavioral health number:** 1-888-217-3501  
Available Monday - Friday, 8 a.m. to 6 p.m.  
[www.bmchp.org](http://www.bmchp.org)

[View basic plan benefits >](#)

### Description of plan

Healthy is easier when you have a community to back you up. We get to know you and your family's needs. We connect you to care and local resources. We support you on your road to healthy. Because healthy happens where you are.

### Member card



## Community Care Cooperative (C3)

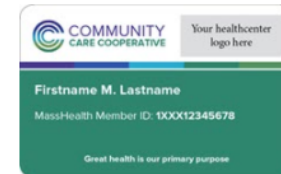
**Toll free number:** 1-866-676-9226  
**TTY:** 711  
**Behavioral health number:** 1-800-495-0086  
Available Monday - Friday, 9 a.m. to 5 p.m.  
[www.C3aco.org](http://www.C3aco.org)

[View basic plan benefits >](#)

### Description of plan

Community Care Cooperative (C3) members get primary care at a community health center. Members have access to most MassHealth specialists and hospitals. For a list of our health centers, go to: [www.C3aco.org](http://www.C3aco.org).

### Member card



**MEMBERS**  
Customer Service: 1-866-676-9226 (Toll Free)  
Toll-free: 1-800-495-0086 (Toll Free)  
Community Health Options: 1-888-877-7184 (Toll Free)



# MassHealth Choices – Searching for Providers

If one scrolls to the bottom of each health plan profile, they will find a section that provides **Provider Directory Links**. This section will direct the member to the right place to search for Primary Care Providers, Specialists, and Behavioral Health Providers in that plan's network.

## BMC HealthNet Plan

**Toll free number:** 1-888-566-0010  
**Behavioral health number:** 1-888-217-3501  
Available Monday - Friday, 8 a.m. to 6 p.m.  
[www.bmchp.org](http://www.bmchp.org)

[View basic plan benefits >](#)

## Primary Care Clinician (PCC) Plan

**Toll free number:** 1-800-841-2900  
**TTY:** 1-800-497-4648  
**Behavioral health number:** 1-800-495-0086  
<https://www.mass.gov/service-details/primary-care-clinician-pcc-plan-fo...>

[View basic plan benefits >](#)

## Tufts Health Together with BIDCO

**Toll free number:** 1-888-257-1985  
**TTY:** 1-888-391-5535  
**Behavioral health number:** 1-888-257-1985  
Available Monday - Friday, 8 a.m. to 5 p.m.  
[www.TuftsHealthTogether.com/BIDCO](http://www.TuftsHealthTogether.com/BIDCO)

[View basic plan benefits >](#)



Scroll



Scroll



### Provider directory links

**Primary Care:** <https://www.bmchp.org/utility-nav/find-a-provider/masshealth>

**Specialists:** <https://www.bmchp.org/utility-nav/find-a-provider/masshealth>

**Behavioral Health:**  
<https://www.beaconhealthoptions.com/members/find-health-care-providers/>

### Provider directory links

**Primary Care:**  
<https://masshealth.ehs.state.ma.us/providerdirectory/>

**Specialists:**  
<https://masshealth.ehs.state.ma.us/providerdirectory/>

**Behavioral Health:**  
<https://masshealth.ehs.state.ma.us/providerdirectory/>

### Provider directory links

**Primary Care:** [www.masshealthchoices.com/compare/find-primary-care-provider](http://www.masshealthchoices.com/compare/find-primary-care-provider)

**Specialists:** <https://tuftshealthplan.com/bidco>

**Behavioral Health:** <https://tuftshealthplan.com/bidco>

### Hospital affiliation information

[Click here to view the hospitals that are available in this plan.](#)

### Hospital affiliation information

The PCC Plan uses the MassHealth network of hospitals. Please go to [www.mass.gov/masshealth](http://www.mass.gov/masshealth) for a list of hospitals.

### Hospital affiliation information

[Click here to view the hospitals that are available in this plan.](#)



# MassHealth Provider Directory for Members

Members will use these resources to search for different kinds of providers depending on which plan they choose.

Health Plan Type	Primary Care Providers	Specialists	Behavioral Health Providers
Accountable Care Partnership Plan	MassHealth Choices <a href="#">Find a Primary Care Provider Tool</a>	Health Plan's Provider Directory*	Health Plan's Provider Directory*
Primary Care ACO	MassHealth Choices <a href="#">Find a Primary Care Provider Tool</a>	<a href="#">MassHealth Provider Directory on mass.gov</a>	<a href="#">Massachusetts Behavioral Health Partnership</a>
Managed Care Organization (MCO)	Health Plan's Provider Directory*	Health Plan's Provider Directory*	Health Plan's Provider Directory*
Primary Care Clinician (PCC) Plan	<a href="#">MassHealth Provider Directory on mass.gov</a>	<a href="#">MassHealth Provider Directory on mass.gov</a>	<a href="#">Massachusetts Behavioral Health Partnership</a>

\*Links to a Health Plan's Provider Directory will be available through the "Compare Plans" section of MassHealth Choices.

# MassHealth Provider Directory









URL: <https://masshealth.ehs.state.ma.us/providerdirectory/>

This tool allows members to find providers participating in the PCC plan and the three Primary Care ACO Plans:

- Partners Health Care Choice
- Steward Health Choice
- Community Care Cooperative (C3)

The table at the top will direct members to the correct resources to search for primary care, specialist, or behavioral health providers.

**Important:** This site is **not** for members in the following plans: ACO Partnership Plan, MCO, SCO, PACE, or One Care.

Search for providers in one of these plans:		Primary Care	Specialists	Behavioral Health
	<b>MassHealth Network</b> Also for age 65+ and those with secondary insurance	SCROLL DOWN	SCROLL DOWN	<a href="#">CLICK HERE</a> 
	<b>Primary Care Clinician (PCC) Plan</b>	SCROLL DOWN	SCROLL DOWN	<a href="#">CLICK HERE</a>
	<b>Partners HealthCare Choice*</b>	<a href="#">CLICK HERE</a>	SCROLL DOWN	<a href="#">CLICK HERE</a>
	<b>Steward Health Choice*</b>	<a href="#">CLICK HERE</a>	SCROLL DOWN	<a href="#">CLICK HERE</a>
	<b>Community Care Cooperative*</b>	<a href="#">CLICK HERE</a>	SCROLL DOWN	<a href="#">CLICK HERE</a>

\*These are the Primary Care ACO health plans. These health plans are not available for enrollment until **March 1, 2018**.

# MassHealth Provider Directory – Provider Search



Members can choose the plan they are interested in from the dropdown menu

Then, they can search for provider by provider type, service, or hospital

They can search by location  
or

Keyword search - where they can enter the name of a provider

**Search all MassHealth providers**

**Filter by Health Plan:**  
Health Plan:

**Type of Provider:**  
Primary Care:  
  
- OR -  
Specialty:  
  
- OR -  
Service:  
  
- OR -  
Hospital or Facility:

**Location:**  
Search by city or zip code:  
  
Example: Amherst or 01002

**Keyword Search:**  
Search for provider by name:  
  
Example: 'Smith, John' or 'Geiger Gibson Community Health Center'

**Search providers with expertise and experience with disabilities**

  
A Program of the Eunice Kennedy Shriver Center  


\*This information was obtained from surveys administered by a third party. It is not a complete list of MassHealth providers. If you have any questions about this tool, please use the [Contact Us](#) link on the [Disabilityinfo.org](#) site.

# Agenda



1. Provider Education and Community Strategy
2. Overview of PCDI
3. Continuity of Care (CoC)
4. Eligibility Verification System (EVS)
5. Provider Resources
6. Member Information and Resources

## **7. 2018 Provider Training & Education Schedule**



## 2018 Provider PCDI Training Sessions

- The Phase I and Phase II webinars can be viewed on the [MassHealth Provider PCDI Resources Web Page](https://www.mass.gov/lists/provider-pcdi-resources) at <https://www.mass.gov/lists/provider-pcdi-resources>
- Future training information regarding Phase: III Community Partners will be published to mass.gov on the [PCDI for Providers Webpage](#) when available.

To attend one of our events or to enroll in a webinar session, please register at the [MassHealth Learning and Productivity Center](http://www.masshealthtraining.com) at [www.masshealthtraining.com](http://www.masshealthtraining.com) and create your profile. Once you are registered, select the preferred webinar or event date and time available.

Visit the [PCDI Provider Training Schedule](https://www.mass.gov/service-details/pcdi-provider-training-schedule) webpage at <https://www.mass.gov/service-details/pcdi-provider-training-schedule> to view webinar and in-person event schedules.