




MassHealth
All Provider Bulletin 258
January 2016

TO: All Providers Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth 

RE: **Health New England's Withdrawal from the CarePlus Program**

Overview

Effective February 1, 2016, Health New England (HNE) will no longer be a managed care organization (MCO) option for MassHealth CarePlus members. Members can choose a new health plan through January 29, 2016. To learn about other health plan options and to pick a new plan, members can

1. Call the MassHealth Customer Service Center at 1-800-841-2900 Monday through Friday between 8 a.m. – 5 p.m. (TTY: 1-800-497-4648 for people who are deaf, hard of hearing, or speech disabled); or
2. Visit www.mass.gov/masshealth. Members can choose “Enroll in a Health Plan,” and then click the “Enroll Now” button to pick a new plan.

Members who do not pick a plan will be enrolled in the Primary Care Clinician Plan (PCC Plan) effective February 1, 2016. These members will get a letter letting them know the primary care provider with whom they have been enrolled. MassHealth will make every effort to assign members to their current Primary Care Provider. For HNE CarePlus members who will be joining the PCC Plan, please note that both HNE and the PCC Plan use the Massachusetts Behavioral Health Partnership (MBHP) to administer behavioral health benefits. All behavioral health providers in the HNE-MBHP network will be available once members join the PCC Plan.

Prior Authorizations

A. Transfer to the MassHealth PCC Plan

MassHealth is working with HNE to ensure a smooth transition for members and providers, including transferring prior authorizations (PAs) to the PCC Plan for services and equipment that have already been approved by HNE. Additionally, MBHP will honor PAs for behavioral health services approved during the member's time with HNE. *Please note, Prescription drug PAs will not automatically transfer to the PCC Plan.* If you have questions about prescription drug PAs, please call MassHealth at the number at the end of this bulletin.

B. MassHealth Prior Authorization Process Resources

The MassHealth PCC Plan requires providers to obtain prior authorization (PA) for certain services, prescription drugs, medical devices, and durable medical equipment.

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B. MassHealth Prior Authorization Process Resources (*cont.*)

PA requirements appear in Subchapter 6 of certain provider manuals, in provider bulletins, or in other written issuances from MassHealth. You can access the MassHealth provider manuals and provider bulletins from the MassHealth online Provider Library at www.mass.gov/masshealthpubs.

The MassHealth authorization process is online and providers can submit their prior authorization and Preadmission Screening (PAS) requests online as a single transaction using direct data entry.

For information about the Provider Online Service Center (POSC), including registration and job aids for assistance in using the POSC, please visit <https://newmmis-portal.ehs.state.ma.us/EHSProviderPortal/appmanager/provider/desktop>

C. Transfer to Another MassHealth MCO

If former HNE CarePlus members select another MCO, prior authorizations (PAs) granted by HNE for many services, prescription drugs, medical devices, and durable medical equipment will generally not be honored by the member's new MassHealth MCO plan. A new PA will be required. In addition, another MCO may require PA for services that HNE did not. Members and providers should call the MCO for details about PAs for their medical needs.

Questions

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at 1-800-841-2900, e-mail your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.