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

1. BeHealthy Partnership – Accountable Care Partnership Plan

Note: EVS only displays a member’s current eligibility, not future eligibility.
2. Berkshire Fallon Health Collaborative– Accountable Care Partnership Plan

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

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

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

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

Note: MASSHEALTH STANDARD

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):

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<th>Name</th>
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<tr>
<td>BERKSHIRE FALLOON HEALTH COLLABORATI</td>
<td></td>
<td>(855) 203-4660</td>
<td>03/06/2018 to 03/06/2018</td>
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Managed Care Data (for MCO/ACO) Details:

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

Name: BERKSHIRE FALLOON HEALTH COLLABORATI
NPI: 
Phone: (855) 203-4660

Restrictive Messages:
- 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.

Member Payment Responsibility Detail:

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<tr>
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<td>Co-pay Cap Status</td>
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EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

---

**Member Information**

**Dates of Eligibility**

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

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**Eligibility Restrictive Messages**

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

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

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<td>BMC HEALTHNET PLAN COMMUNITY ALLIAN</td>
<td>(888) 566-0010</td>
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**Managed Care Data (for MCO/ACO) Details**

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

Name: BMC HEALTHNET PLAN COMMUNITY ALLIAN

NPI: (888) 566-0010
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 a 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
- Spend Down Amount
- Deductible Amount
- Co-pay Status
- Patient Paid Amount Type
- Deductible Date
- Co-pay Cap Status
- Restrictive Messages

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Close

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

New Restrictive Messages for 2018 Managed Care Health Plans

4. BMC HealthNet Plan Mercy Alliance—Accountable Care Partnership Plan

### Member Information

#### Dates of Eligibility

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

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#### 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)

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

- **Begin Date**: 03/06/2018
- **End Date**: 03/06/2018
- **Name**: BMC HEALTHNET PLAN MERCY ALLIANCE
- **NPI**: 
- **Phone**: (888) 566-0010

Restrictive Messages:

- 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.

#### Member Payment Responsibility Detail

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**Note**: EVS only displays a member’s **current** eligibility, not future eligibility.
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

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

New Restrictive Messages for 2018 Managed Care Health Plans

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

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

### Dates of Eligibility

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

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

### Eligibility 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)

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<td>BMC HEALTHNET PLAN SOUTHCOAST ALLIA</td>
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### Managed Care Data (for MCO/ACO) Details

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

**Restrictive Messages**

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.

### Member Payment Responsibility Detail

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<td>Restrictive Messages</td>
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Close | Perform Another Eligibility Check
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

7. Fallon 365 Care – Accountable Care Partnership Plan

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

### Dates of Eligibility

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

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<thead>
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### 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)

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<td>FALLON 365 CARE</td>
<td>(855) 508-3390</td>
<td>03/06/2018 03/06/2018</td>
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### Managed Care Data (for MCO/ACO) Details

- **Name:** FALLON 365 CARE
- **NPI:**
- **Phone:** (855) 508-3390

**Restrictive Messages:**

- 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.

### Member Payment Responsibility Detail

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<td>Restrictive Messages</td>
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**Close**

**Perform Another Eligibility Check**
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

8. My Care Family–Accountable Care Partnership Plan

Note: EVS only displays a member’s current eligibility, not future eligibility.
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

Note: EVS only displays a member’s current eligibility, not future eligibility.
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

Note: EVS only displays a member’s current eligibility, not future eligibility.
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

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

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**Dates of Eligibility**

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**Eligibility 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)**

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<th>Name</th>
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<th>Date Range</th>
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<tr>
<td>TUFTS HEALTH TOGETHER WITH BOSTON C</td>
<td>(888) 257-1985</td>
<td>03/06/2018 03/06/2018</td>
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**Managed Care Data (for MCO/ACO) Details**

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

Name TUFTS 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**

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Restrictive Messages

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Close

Perform Another Eligibility Check
12. Tufts Health Together with CHA– Accountable Care Partnership Plan

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

**Dates of Eligibility**

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

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**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)**

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

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

**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**

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<th>Co-pay Cap Status</th>
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</table>

Note: EVS only displays a member’s current eligibility, not future eligibility.
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

13. Wellforce Care Plan – Accountable Care Partnership Plan

Note: EVS only displays a member's current eligibility, not future eligibility.
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

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

<table>
<thead>
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<th>Date Range</th>
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### Eligibility 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)

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<td>COMMUNITY CARE COOPERATIVE (C3)</td>
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### Managed Care Data (for MCO/ACO) Details

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### List of Behavioral Health

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<td>(800) 455-0086</td>
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### Behavioral Health Detail

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<td>(800) 455-0086</td>
<td>03/04/2018 – 03/06/2018</td>
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### Member Payment Responsibility Detail

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

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

#### New Restrictive Messages for 2018 Managed Care Health Plans

2. Partners HealthCare Choice – Primary Care ACO Plan

#### Dates of Eligibility

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

#### Eligibility Restrictive Messages

- **Restrictive Messages:** Some restrictions apply.
  - 
  - 

#### List of Managed Care Data (for PCC/PCCB)

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<td>(888) 123-4567</td>
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#### Managed Care Data (for PCC/PCCB) Details

- **Begin Date:** 03/06/2018
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- **Legal Name:** HAPPY HEALTH MEDICAL
- **Address:** 1 CENTER PL, BOSTON, MA 02114

#### Managed Care Data (for MCO/ACO)

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<td>PARTNERS HEALTHCARE CHOICE</td>
<td>(800) 231-2722</td>
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#### Managed Care Data (for MCO/ACO) Details

- **Begin Date:** 03/06/2018
- **End Date:** 03/06/2018
- **Legal Name:** PARTNERS HEALTHCARE CHOICE

#### Restrictive Messages

- **1029 / 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

<table>
<thead>
<tr>
<th>Legal Name</th>
<th>NPI</th>
<th>Phone</th>
<th>Date Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>MASSACHUSETTS BEH HLTH PRT</td>
<td>1548295057</td>
<td>(800) 455-0066</td>
<td>03/06/2018 - 03/06/2018</td>
</tr>
</tbody>
</table>

#### Behavioral Health Details

- **Begin Date:** 03/06/2018
- **End Date:** 03/06/2018
- **Provider Name:** MASSACHUSETTS BEH HLTH PRT
- **NPI:** 1548295057

#### Member Payment Responsibility Detail

<table>
<thead>
<tr>
<th>Patient Paid Amount</th>
<th>Patient Paid Amount Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spend Down Amount</td>
<td>Deductible Date</td>
</tr>
<tr>
<td>Deductible Amount</td>
<td>Co-pay Cap Status</td>
</tr>
<tr>
<td>Co-pay Status</td>
<td>Restrictive Messages</td>
</tr>
</tbody>
</table>
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

3. Steward Health Choice – Primary Care ACO Plan

**Dates of Eligibility**

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

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Eligibility Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/06/2018 – 03/06/2018</td>
<td>MASSHEALTH STANDARD</td>
</tr>
</tbody>
</table>

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

**Eligibility Restrictive Messages**

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

**List of Managed Care Data (for PCC/PCCB)**

<table>
<thead>
<tr>
<th>Legal Name</th>
<th>Site Name</th>
<th>Phone</th>
<th>Date Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>HAPPY HEALTH MEDICAL</td>
<td>HAPPY HEALTH MEDICAL</td>
<td>(617) 123-4567</td>
<td>03/06/2018 – 03/06/2018</td>
</tr>
</tbody>
</table>

**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
1 CENTER PL Site

**Restrictive Messages**

686 / 686 PARTNERS HEALTHCARE CHOICE MEMBER. PARTNERS HEALTHCARE CHOICE IS A PRIMARY CARE ACO. CALL PCG ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.11B(U).

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

<table>
<thead>
<tr>
<th>Legal Name</th>
<th>NPI</th>
<th>Phone</th>
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</tr>
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<tbody>
<tr>
<td>PARTNERS HEALTHCARE CHOICE</td>
<td>03/06/2018 – 03/06/2018</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

Legal Name PARTNERS HEALTHCARE CHOICE
NPI 1630 / 744 Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO.

**Restrictive Messages**

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 1-800-541-2500.

**List of Behavioral Health**

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</tbody>
</table>

**Behavioral Health Details**

Provider Name MASSACHUSETTS BEH HLTH PRT
Provider NPI 1542235057

**Restrictive Messages**

76 / 525 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-2056.

**Member Payment Responsibility Detail**

<table>
<thead>
<tr>
<th>Patient Paid Amount</th>
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**EVS Screenshot Examples**

**New Restrictive Messages for 2018 Managed Care Health Plans**

**Primary Care Clinician (PCC) Plan**

### Dates of Eligibility

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

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### Eligibility 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).

185 / 185 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

### List of Managed Care Data (for PCC/PCCB)

<table>
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<tr>
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</tr>
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<tr>
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<td>HAPPY HEALTH MEDICAL</td>
<td>(888) 123-4567</td>
<td>03/06/2018 – 03/06/2018</td>
</tr>
</tbody>
</table>

### 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

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<td>1548355057</td>
<td>(800) 455-0086</td>
<td>03/06/2018 – 03/06/2018</td>
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</table>

### Behavioral Health Detail

- **Begin Date**: 03/06/2018
- **End Date**: 03/06/2018
- **Provider Name**: MASSACHUSETTS BEH HLTH PRT
- **Provider NPI**: 1548355057
- **Provider Phone**: (800) 455-0086

**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**

**Spend Down Amount**

**Deductible Amount**

**Co-pay Status**

**Restrictive Messages**

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*Note: EVS only displays a member’s current eligibility, not future eligibility.*
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

Note: EVS only displays a member’s current eligibility, not future eligibility.
EVS Screenshot Examples
New Restrictive Messages for 2018 Managed Care Health Plans

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

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