

# | 2024 Baycare Provider Breakfast

# Agenda

- Introductions
- Company Profile
  - Mission/Vision
  - Who We Serve
  - Service and Eligibility Area
- Who We Serve
- Service & Eligibility Area
- Working with Health New England
  - ID cards
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  - Provider Portal ([HNEDirect.com](http://HNEDirect.com))
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  - Provider Matters
  - Prior Authorization
  - Claims Editing
  - Interactive Voice Response (IVR)
  - Appeals
- Vendor Partnerships
- Product Updates
- Key Contacts & Specialty Partners

# Introductions

- Maryann Shiveley– Health New England
  - Provider Relations Representative
  - Email: [ProviderRelations@hne.com](mailto:ProviderRelations@hne.com) or [Mshiveley@hne.com](mailto:Mshiveley@hne.com)
  - Phone 800.842.4464 ext. 5000
- Donna Robillard– Health New England
  - Provider Relations Manager
  - Email: [ProviderRelations@hne.com](mailto:ProviderRelations@hne.com) or [Drobillard@hne.com](mailto:Drobillard@hne.com)
  - Phone 800.842.4464 ext 5000
- Patricia Allen - eviCore
  - Regional Provider Engagement Manager
  - Email: [pallen@eviCore.com](mailto:pallen@eviCore.com)

# Company Profile

- Health New England is a **non-profit health plan** owned by Baystate Health, one of the leading integrated delivery systems in Massachusetts.
- Over 167,000 **members in Western and Central MA** trust **Health New England** for their health insurance needs.
- We offer **fully and self funded commercial health plans for employers as well as Connector, Medicare Advantage, Medicare Supplement and Medicaid** plans for Individuals.
- We **partner closely with providers** to achieve superior quality outcomes for our members while maintaining competitive costs for employers.
- We take pride in the **expertise, accessibility and superior service** we are able to provide to our brokers, employers and members.

# Mission/Vision

## **Mission:**

To improve the health and lives of the people in our communities by:

- Providing Outstanding Service
- Delivering Superior Value
- Acting As A Leading Corporate Citizen

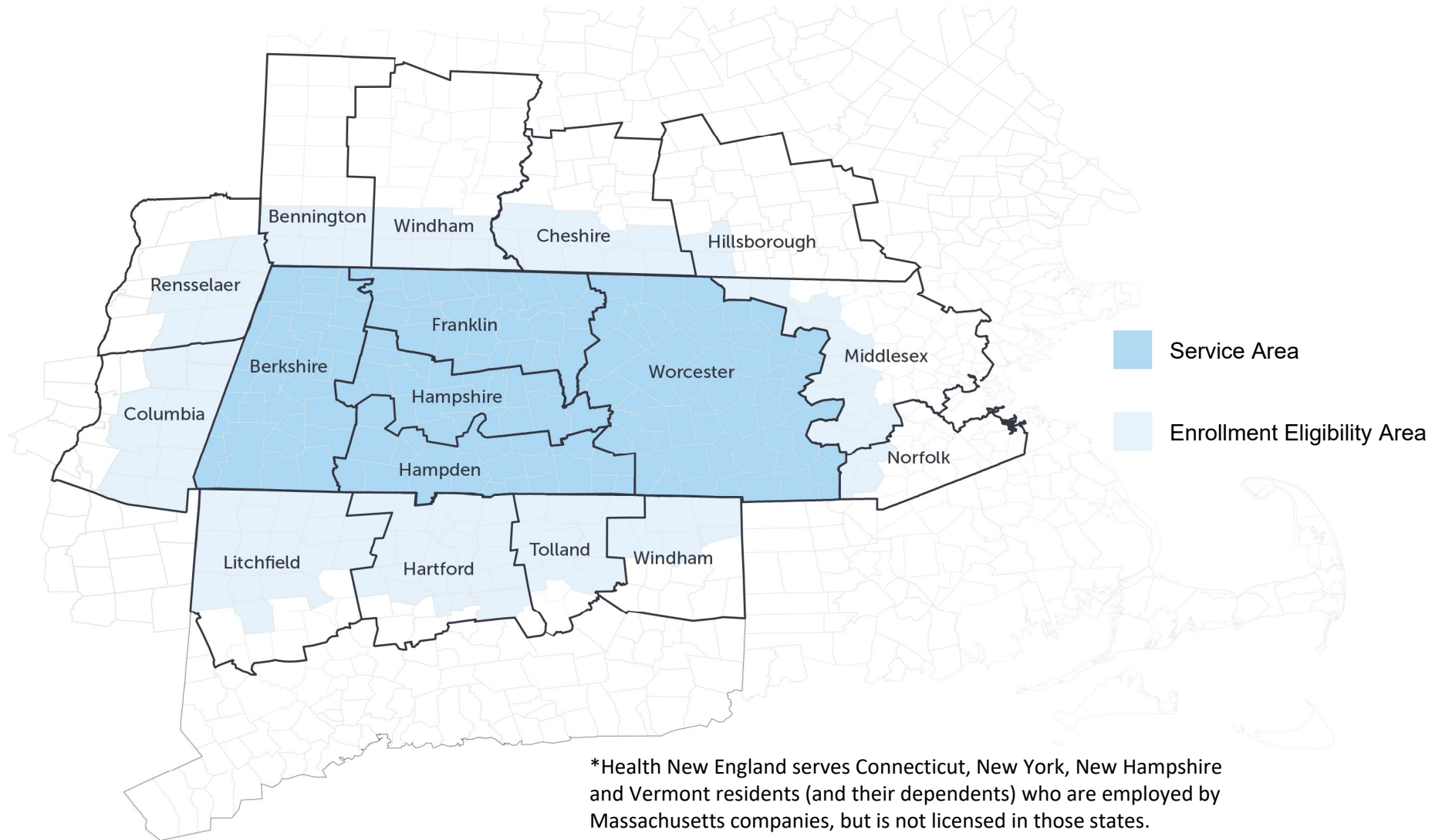
## **Vision:**

To be the most trusted, equitable, and valued health plan in the communities we serve.

# Who We Serve

- Health New England serves commercial members in Berkshire, Franklin, Hampden and Hampshire Counties in Western Massachusetts and Worcester County.
- We also cover the Medicaid population in and around Holyoke, Northampton, Springfield and Westfield.
- Health New England's Medicare Advantage coverage extends throughout Western Massachusetts.
- We also serve commercial members and their dependents who live in Connecticut and are employed by Massachusetts companies.

# Health New England Fully Funded HMO Service and Eligibility Area




# | Working with Health New England



# Health New England ID Cards - Commercial

**Commercial Fully Funded HMO** (small groups will have PCP not Office Visit)

 **Health New England**

Issue Date: MM/DD/YYYY  
Company Name  
ID:XXXXXXXX GRP:XXXXXXXXXX  
# NAME  
01 Jane Doe

**BENEFIT PLAN COPAYS Plan Type**  
Office Visit \$XX  
Specialist \$XX  
Emergency Room \$XXX  
RX \$XX/XX/XX/XXX/XXX\*  
Chiropractic \$XX  
Behavioral Health \$XX  
Inpatient \$XX\* AmbSurg \$XXX\*  
\*Ded Ind/Fam \$XXXX/XXXX  
IN MOOP Ind/Fam \$XXXX/XXXX

RxBIN: 610593 RxPCN: MHP RxGRP: HNE Additional Plan Details May Show Here

Questions? Call us at (413) 787-4004 or (800) 310-2835

**Commercial Fully Funded PPO**

 **Health New England**

Issue Date: MM/DD/YYYY  
Company Name  
ID:XXXXXXXX GRP:XXXXXXXXXX  
# NAME  
01 Jane Doe

**BENEFIT PLAN COPAYS Plan Type**  
Primary Care \$XX  
Specialist \$XX  
Emergency Room \$XXX\*  
RX \$XX/XX/XX/XXX/XXX\*  
Chiropractic \$XX  
Behavioral Health \$XX  
Inpatient \$XXX\* AmbSurg \$XXX\*  
\*Ded Ind/Fam \$XXXX/XXXX  
IN MOOP Ind/Fam \$XXXX/XXXX  
OON MOOP Ind/Fam \$XXXX/XXXX

RxBIN: 610593 RxPCN: MHP RxGRP: HNE Additional Plan Details May Show Here

Questions? Call us at (413) 787-4004 or (800) 310-2835

**Commercial Self Funded HMO**

**GROUP LOGO**

Issue Date: MM/DD/YYYY  
ID:XXXXXXXX GRP:XXXXXXXXXX  
# NAME  
01 Jane Doe

**BENEFIT PLAN COPAYS Plan Type**  
Office Visit \$XX  
Emergency Room \$XXX  
RX \$XXXXXXX  
Chiropractic \$XX  
Behavioral Health \$XX  
Inpatient \$X\* AmbSurg \$X\*  
\*Ded Ind/Fam \$XXXX/XXXX  
IN MOOP Ind/Fam \$XXXX/XXXX

RxBIN: 610593 RxPCN: MHP RxGRP: HNE Additional Plan Details May Show Here

Questions? Call us at (413) 233-3060 or (800) 791-7944  
Administered by HAS, Inc.

**Commercial Self Funded PPO**

**GROUP LOGO**

Issue Date: MM/DD/YYYY  
ID:XXXXXXXX GRP:XXXXXXXXXX  
# NAME  
01 Jane Doe

**BENEFIT PLAN COPAYS Plan Type**  
Office Visit \$XX  
Emergency Room \$XXX  
Pharmacy \$XXXXXXX  
Chiropractic \$XX  
Behavioral Health \$XX  
Inpatient \$XXX  
OON Ded Ind/Fam \$XXXX/XXXX  
IN MOOP Ind/Fam \$XXXX/XXXX  
OON MOOP Ind/Fam \$XXXX/XXXX


RxBIN: 610593 RxPCN: MHP RxGRP: HNE Additional Plan Details May Show Here

Questions? Call us at (413) 233-3060 or (800) 791-7944  
Administered by HAS, Inc.

# Health New England ID Cards - Commercial

## Commercial HMO FF:

(copy and logos at the bottom may change depending on the group/plan)







One Monarch Place, Suite 1500  
Springfield, MA 01144-1500

**MEMBERS:**  
Find your plan benefits and information about in-network providers at [800-310-2835](http://800-310-2835) or [my.healthnewengland.org](http://my.healthnewengland.org).

Nurse Advice Line - Available 24/7 at **866-389-7613**.  
Find EyeMed providers at [eyemedvisioncare.com/hne](http://eyemedvisioncare.com/hne) or **844-203-2074**.  
To submit manual pharmacy claims, follow the instructions on the *Member Prescription Reimbursement Form* found at [healthnewengland.org/forms](http://healthnewengland.org/forms).  
**PHARMACIES:**  
Call the Pharmacist Help Desk at **800-918-7545**.

**PROVIDERS IN CT, MA, ME, NH, RI or VT:**  
For member inpatient admission, Rx questions, or prior approvals, call **800-310-2835**.  
**PROVIDERS IN OTHER STATES:**  
For inpatient admits/prior authorizations, call **866-397-7466**. Failure to obtain prior auth may reduce benefits.  
For eligibility, benefits or claims visit <http://uhss.umn.com> or call **888-830-0179**.  
Group 78-800414  
Member ID: 373 **Member ID Appended Here**  
Payer: 39026  
Medical Claims: UHSS, PO Box 30783, Salt Lake City, UT 84130-0783

## Commercial PPO FF:

(copy and logos at the bottom may change depending on the group/plan)



One Monarch Place, Suite 1500  
Springfield, MA 01144-1500

**MEMBERS:**  
Manage your account on our member portal at [my.healthnewengland.org](http://my.healthnewengland.org).  
Find a New England provider outside of Western Massachusetts at **866-261-6687** or visit [multiplan.com/healthnewengland](http://multiplan.com/healthnewengland).  
Nurse Advice Line - Available 24/7 at **866-389-7613**.  
Find EyeMed providers at [eyemedvisioncare.com/hne](http://eyemedvisioncare.com/hne) or **844-203-2074**.  
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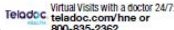


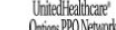


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Group 78-800414  
Member ID: 373 **Member ID Appended Here**  
Payer: 39026  
Medical Claims: UHSS, PO Box 30783, Salt Lake City, UT 84130-0783

### Care outside of New England:

Health New England PPO plan members have access to the national UnitedHealthcare Options PPO network for care outside of New England (outside of CT, MA, ME, NH, RI and VT).

Visit [healthnewengland.org/provider-search](http://healthnewengland.org/provider-search) to learn more about our provider network and view participating providers in your plan.

### Care within New England:

Members who require care within New England (within CT, MA, ME, NH, RI and VT) will continue to access care using the Health New England Commercial plan network and MultiPlan's PHCS regional network.

# Health New England ID Cards – Government Programs

Front Side:

## Individual Medicare Supplement

 Health New England | Medicare Supplement

Name: Jane Doe  
ID: XXXXXXXXXXXX  
Plan: Medicare Supplement 1A

Medicare is Primary: Bill Medicare First Issue Date: MM/DD/YYYY

Questions? Call us at (877) 443-3314 or TTY 711

## Group Medicare Supplement

 Health New England | Medicare Supplement

Name: Jane Doe  
ID: XXXXXXXXXXXX  
GRP: XXXXXXXXXXXX  
Plan: Group Medicare Supplement

Group Medicare Supplement Plan Type

Medicare is Primary: Bill Medicare First Issue Date: MM/DD/YYYY

Questions? Call us at (413) 787-4004 or (800) 310-2835

## Medicare Advantage

 Health New England | Medicare Advantage

Name: Jane Doe  
ID: XXXXXXXXXXXX  
Issuer: 80840  
7780687928  
Plan: Plan Name

Benefit Plan Copays  
PCP/Specialist \$XX/\$XX  
Behavioral Health \$XX  
Emergency Room \$XX

RxBIN: 610593  
RxPCN: HNEMEDD  
RxGrp: HNEMEDD

MedicareRx  
Prescription Drug Coverage

H XXXX PBP Issue Date: MM/DD/YYYY

Questions? Call us at (877) 443-3314 or TTY 711

## Medicaid/ACO

 **BeHealthy** Partnership  
Baystate Health Care Alliance in Partnership with Health New England

Name: Jane Doe  
ID: XXXXXXXXXXXX  
BeHealthy Partnership ID: XXXXXXXXXXXX  
Plan: BeHealthy Partnership Plan Name

RxBIN: 610593 RxPCN: MHP RxGrp: HNEMH

For Pharmacy:  
Call the OptumRx  
Help Desk at  
(800) 918-7545

Issue Date: MM/DD/YYYY

Questions? Call us at (413) 788-0123 or (800) 786-9999  
For TTY, call 711

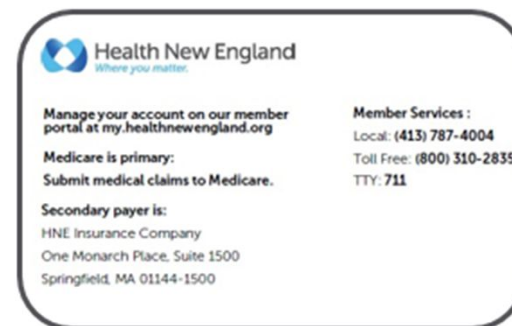
# Health New England ID Cards – Government Programs

## Back Side:

### Individual Medicare Supplement



### Group Medicare Supplement




### Medicare Advantage







### Medicaid/ACO




# Public Site: <http://healthnewengland.org/provider>

**Health New England**

 Find A Provider  Find A Drug  Login  Menu

MembersEmployersProvidersBrokers



Coding Best Practices & Tips

Find best practices and tips associated with codes, documentation, prior approvals and awareness around compliance.

Learn More >

Resources

From policies and procedures to forms and documents, visit our Resources page to help find the information you are looking for.

Learn More >

Contact Information

Find key contacts to address your questions or concerns all in one location.

Learn More >

Provider Manual

The Health New England Provider Manual contains information, guidelines, and procedures that should be followed when rendering medical service to members and which are common to managed care in general.

Learn More >

Behavioral Health

We're here to provide education and support to members experiencing mental health or substance abuse issues.

Learn More >

## POLICIES & RESOURCES

At Health New England, we are committed to keeping health care information simple and easy to access. From policies and procedures to forms and documents, you'll find what you are looking for here.

<a href="#">ACO Home Care</a>	▼
<a href="#">Advance Care and Life Planning</a>	▼
<a href="#">Alternative Pain Management</a>	▼
<a href="#">Behavioral Health/Medical Policies</a>	▼
<a href="#">Care Management Solutions</a>	▼
<a href="#">Durable Medical Equipment (DME)</a>	▼
<a href="#">Fraud, Waste and Abuse</a>	▼
<a href="#">HIPAA Transactions</a>	▼
<a href="#">Interactive Voice Response (IVR)</a>	▼
<a href="#">Kidney Health Management</a>	▼
<a href="#">Magellan Site of Service</a>	▼
<a href="#">Massachusetts Food Assistance and Resources</a>	▼
<a href="#">Medical Guidelines</a>	▼
<a href="#">Neonatal Intensive Care Unit or Special Care Nursery Population Health Management</a>	▼
<a href="#">No Surprises Act</a>	▼
<a href="#">Non-Participating Providers</a>	▼
<a href="#">Payment Policies</a>	▼
<a href="#">Rx Savings Solutions</a>	▼
<a href="#">Skilled Nursing and Rehabilitation Facilities Guide</a>	▼



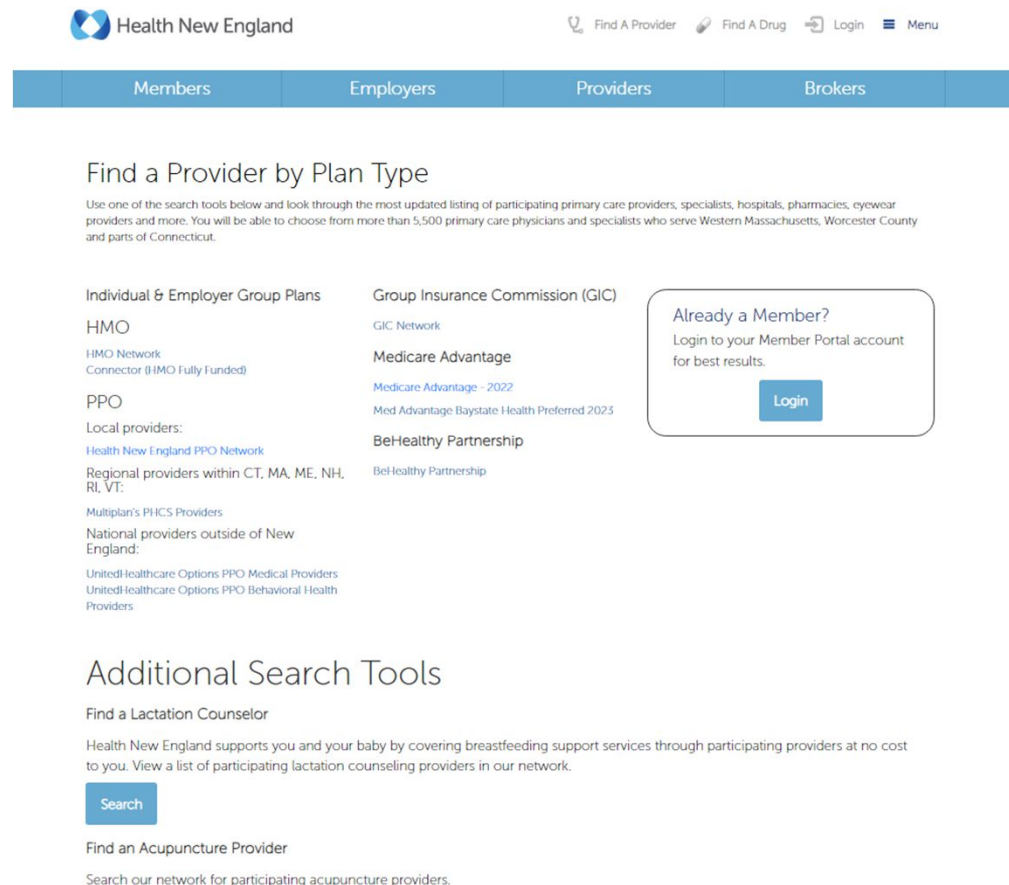
# Public Site: (Provider Search)

## http://healthnewengland.org/provider

**Click at Top:** Find A Provider

**Search By:** Plan Type

***“Already a Member?” Option:***  
allows a Member to search for a provider within their protected portal. Easy links to PHCS/Multiplan



The screenshot shows the Health New England website's provider search interface. At the top, the Health New England logo is on the left, and navigation links for 'Find A Provider', 'Find A Drug', 'Login', and 'Menu' are on the right. Below this is a blue navigation bar with tabs for 'Members', 'Employers', 'Providers', and 'Brokers'. The 'Providers' tab is selected. The main heading is 'Find a Provider by Plan Type'. Below this, a paragraph explains that users can search through a listing of primary care providers, specialists, hospitals, pharmacies, etc. The page is divided into two columns of links. The left column lists 'Individual & Employer Group Plans' (HMO, PPO), 'Local providers', 'Regional providers', 'Multiplan's PHCS Providers', and 'National providers'. The right column lists 'Group Insurance Commission (GIC)', 'Medicare Advantage', and 'BeHealthy Partnership'. A 'Login' button is visible in a box on the right. Below the main content, there are sections for 'Additional Search Tools', including 'Find a Lactation Counselor' and 'Find an Acupuncture Provider', each with a brief description and a 'Search' button.

Health New England

Find A Provider Find A Drug Login Menu

Members Employers Providers Brokers

### Find a Provider by Plan Type

Use one of the search tools below and look through the most updated listing of participating primary care providers, specialists, hospitals, pharmacies, eyewear providers and more. You will be able to choose from more than 5,500 primary care physicians and specialists who serve Western Massachusetts, Worcester County and parts of Connecticut.

**Individual & Employer Group Plans**

- HMO
  - HMO Network
  - Connector (HMO Fully Funded)
- PPO
  - Local providers:
    - Health New England PPO Network
  - Regional providers within CT, MA, ME, NH, RI, VT:
  - Multiplan's PHCS Providers
  - National providers outside of New England:
    - UnitedHealthcare Options PPO Medical Providers
    - UnitedHealthcare Options PPO Behavioral Health Providers

**Group Insurance Commission (GIC)**

- GIC Network
- Medicare Advantage
  - Medicare Advantage - 2022
  - Med Advantage Baystate Health Preferred 2023
- BeHealthy Partnership
  - BeHealthy Partnership

**Already a Member?**  
Login to your Member Portal account for best results.  
[Login](#)

### Additional Search Tools

**Find a Lactation Counselor**  
Health New England supports you and your baby by covering breastfeeding support services through participating providers at no cost to you. View a list of participating lactation counseling providers in our network.  
[Search](#)

**Find an Acupuncture Provider**  
Search our network for participating acupuncture providers.

# Public Site: (Provider Search)

## <http://healthnewengland.org/provider>

***Depending on plan type, this page allows you to search the provider. In the case with a PPO plan, it allows you to search the extended network.***

The screenshot shows the Health New England website's provider search interface for a PPO plan. At the top, the logo and navigation links (Find A Provider, Find A Drug, Login, Menu) are visible. Below the navigation bar, there are tabs for Members, Employers, Providers, and Brokers. The 'Providers' tab is selected. The main search area includes a 'Provider Network' dropdown set to 'PPO' with a 'CHANGE NETWORK' link. Below this are input fields for 'Last name or facility name', 'Search by Location: Zip Code', and 'Within: Select a Range'. There are buttons for 'Search', 'Clear filters', and 'Advanced Search'. A horizontal menu below these buttons lists various provider types: All Providers, Baystate Health Providers, Primary Care Physicians, Specialist, Behavioral Health, Hospitals, Urgent Care Facilities, and Pharmacy. Under 'Additional Search Tools', there are links for 'Chiropractic/Acupuncture Provider Search' and 'Altus Dental Provider'. Further down, there are sections for 'Regional providers within CT, MA, ME, NH, RI, VT' (with a link to 'PHCS MultiPlan Provider') and 'National providers outside of New England' (with a link to 'UnitedHealthcare Options PPO Medical Providers' and another to 'UnitedHealthcare Options PPO Behavioral Health Providers').

The screenshot shows the Health New England website's provider search interface for an HMO plan. The layout is identical to the PPO version, but the 'Provider Network' dropdown is set to 'HMO' with a 'CHANGE NETWORK' link. The search fields and buttons remain the same. The horizontal menu for provider types is also identical. The 'Additional Search Tools' section is present, but the links for 'Chiropractic/Acupuncture Provider Search' and 'Altus Dental Provider' are not visible in this view.

# Public Site: (Provider Search/Medicare)

## <http://healthnewengland.org/medicare>

**Click: Find a Doctor** at the top and the site will help you find the provider of your choice.

The screenshot shows the top navigation bar with the Health New England logo and 'Medicare' link. Below it are links for 'Shop for Insurance', 'Find a Doctor', and 'Access My Benefits'. A search bar is present. The main content area features a 'Phone Scam Alert' and a 'COVID-19 Information and Alerts' section. The primary headline is 'DO YOU HAVE THE RIGHT PLAN?' with a subtext 'There's never been a better time to look at your Medicare coverage.' and a 'Shop and Compare Plans' button. Below this are three columns: 'Questions About Medicare?' with a 'Medicare Questions?' button, 'Free Medicare Information' with a 'Request Today' button, and 'Medicare Webinars' with a 'Register Now' button.

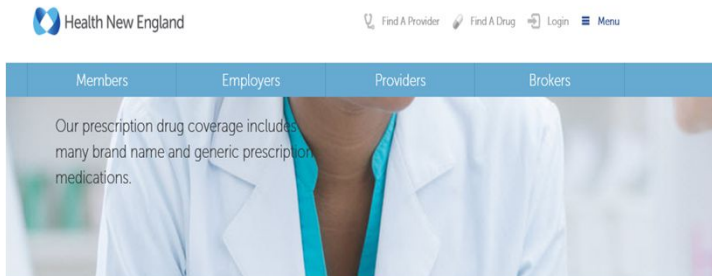
The screenshot shows the 'Find a Provider' page. The navigation bar is identical to the previous page. The main headline is 'FIND A PROVIDER' with a subtext 'We make it easy to find doctors, hospitals, and other health care providers in Health New England's network.' Below this are two buttons: 'Search Providers' and '2021 Provider Directory (PDF)'. The main content area features a large image of a man's face. Below the image is the text 'Find an in-network Doctor, Hospital, Specialist, Behavioral Health Provider or Urgent Care Facility'. To the right is a 'Helpful Links' section with 'Medicare Advantage Hospital Network' and 'Request Printed Materials' links. At the bottom, there is a footer with contact information, social media links, and a 'Last updated on 10/1/20' note.



# Public Site: (Pharmacy)

## http://healthnewengland.org/provider

**Click at top:** Find a Drug



### Is Your Drug Covered?

Some drugs may have to be approved before the plan covers them. This can apply to medicines that should be used only for certain medical conditions or are more costly than other drugs proven to be just as effective. For these drugs to be covered, health care providers must answer certain questions.

Search the requested drug. If pre-authorization is needed, the prescriber must complete the correct form with the appropriate clinical information completed.

### Formulary/Drug Look Up - Effective 1/1/2022

Below you will find information about our formularies and how to look up prescription drugs covered under your plan. Please refer to your member ID card to identify which pharmacy plan type you have.

Providers: Find clinical criteria/policies below.

3-Tier Pharmacy Plans	▼
5-Tier Pharmacy Plans	▼
MassHealth/BeHealthy Partnership	▼
Clinical Policies and Medication Request Forms	▼

**Click appropriate tier pharmacy plan**

**Click ID card to search formulary**

3-Tier Pharmacy Plans ▼

5-Tier Pharmacy Plans ▲

Health New England's 5-Tier pharmacy plan option has 5 levels of copays and is cost-effective for members. The additional tiers call for higher copays on specialty drugs. Members are able to access quality care and Health New England's vast formulary of low-cost generics and 50 preventive care medications. The average member cost for a generic drug is less than \$7.

TIER 1 = Generic  
TIER 2 = Brand/Formulary  
TIER 3 = Brand/Non-Formulary  
TIER 4 = Formulary Specialty Drugs  
TIER 5 = Non-Formulary Specialty Drugs

For more information about your pharmacy coverage, please see your plan documents.

If you have Health New England's 5-Tier pharmacy plan option, you will see 5 copay amounts listed next to "Pharmacy" on your Member ID card – see sample ID card below.

Click the 5-Tier sample ID card to search for a drug in the 5-Tier pharmacy formulary.

Click [here](#) to access the 5-Tier Pharmacy formulary booklet.

MassHealth/BeHealthy Partnership ▼

Clinical Policies and Medication Request Forms ▼

**Searchable Prescription Drug List**

Prescription Drug List

Print

Drug Name Therapeutic Class Status Tier

Search the list of FDA-approved drugs and coverage for each by entering a drug name below.

Last Update: March, 2022

Drug name

Example: Lipitor, Amoxicillin

Index by drug name

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

A

A & D

A = D PERSONAL CARE WIPES

A-TWO 2-DIGIT

A-A-G-C-KT IN TERODERMA

AVG PRO

A-10000

A-25

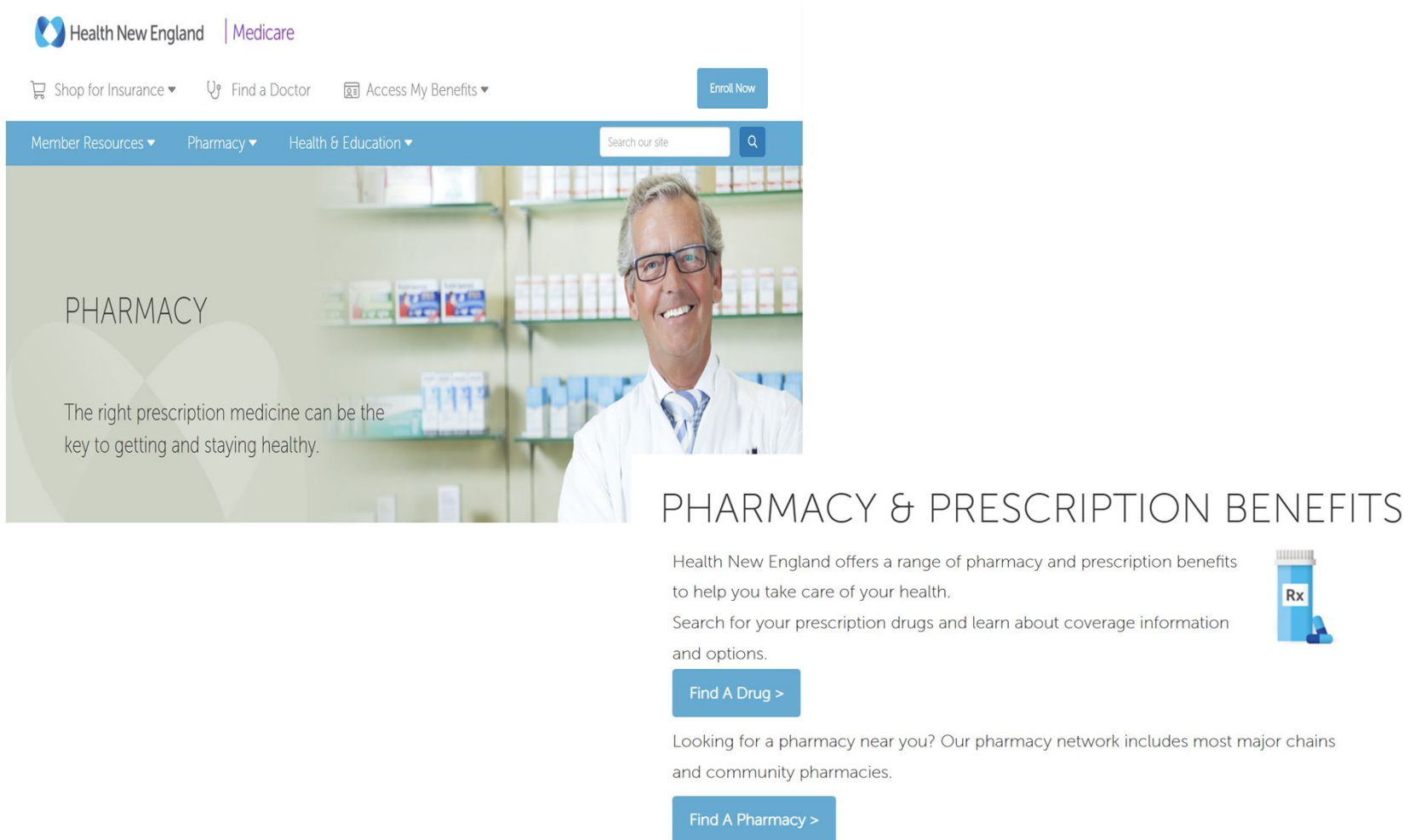
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# Public Site: (Pharmacy/Medicare)

<http://healthnewengland.org/medicare/pharmacy/find-a-pharmacy>



Health New England | Medicare

Shop for Insurance ▼ Find a Doctor Access My Benefits ▼ Enroll Now

Member Resources ▼ Pharmacy ▼ Health & Education ▼ Search our site

## PHARMACY

The right prescription medicine can be the key to getting and staying healthy.

## PHARMACY & PRESCRIPTION BENEFITS

Health New England offers a range of pharmacy and prescription benefits to help you take care of your health.

Search for your prescription drugs and learn about coverage information and options.

[Find A Drug >](#)

Looking for a pharmacy near you? Our pharmacy network includes most major chains and community pharmacies.

[Find A Pharmacy >](#)

# Provider Portal: <https://www.hnedirect.com>



- HNE Providers can now view up-to-date information online including claim status, member eligibility, and member benefits
- *HNEDirect* is a secure online portal that allows providers to get answers to questions 24 hours a day, 7 days a week
- Providers who have questions about this provider portal or interested in registering for access, may contact *800.842.4464, ext.3311* or *[hnedirect@hne.com](mailto:hnedirect@hne.com)*

## Coming Soon:

- *Request PA on portal*

# Provider Portal: <https://www.hnedirect.com>

**Member Eligibility Information**  
Eligibility Detail for [REDACTED]

Health New England HNE Commercial

Name [REDACTED] Member ID [REDACTED]  
Address [REDACTED] DOB [REDACTED]  
PCP [REDACTED] Gender [REDACTED]  
PCP HNE ID [REDACTED] Network [REDACTED] PHCS PPO REGION  
PCP NPI [REDACTED]

[Chart of Benefits](#) [View Claims](#) [Benefit History](#) [Submit Claim](#) [Deductible/OOPM](#)

**Benefit Plan Information**

Office Visit	\$20
Emergency Room	\$150
Pharmacy	\$15/30/50
Chiropractic	\$20
Behavioral Health	\$20
Inpatient	\$00* AmbSurg \$00*
*500 Deductible	
Routine Eye Exam	\$0
Routine Gyn Exam	\$0
PT/OT	\$20*

Plan Type [REDACTED] Group [REDACTED]  
Effective Date [REDACTED] End Date [REDACTED]  
Benefit Package [REDACTED] Relationship [REDACTED]  
Anniversary Date [REDACTED]

The above table lists copayments only for those covered services which members ask about most often. The copayments listed are for services with HNE Providers only (unless services are prior approved by HNE Health Services).

Under some plans, the services listed above also may be subject to deductibles, coinsurance, higher copayments, or reductions of benefits.

All benefits may be limited as described in the Member Agreement. Some services may require prior approval from HNE. For these services, if Members do not obtain a prior approval, and it is not approved in advance by HNE, coverage for the services may be reduced or denied.

If you would like information about a service that is not listed, or for more information about this member's Plan, please contact HNE Member Services at 413-787-4004.

- Verify member eligibility
- Look up a member by:
  - Name/date of birth
  - ID/date of birth
- View demographics
- View PCP
- View how much the member has used towards their deductible by clicking on *Deductible OOPM*
- View benefits and effective date

# Provider Manual

- Contains State and Federal requirements, accrediting organizational changes, guidelines and procedures when rendering medical services to members
- Material changes to this manual, requires notification and then takes effect 60 days from distribution
  - Current initiative underway throughout HNE, updates coming January 2021
- Can be found on <http://healthnewengland.org/provider> as well as our secure provider portal (<https://www.hnedirect.com>)

The screenshot displays the Health New England website. At the top, the logo and navigation links (Find A Provider, Find A Drug, Login, Menu) are visible. Below the navigation bar, there are four tabs: Members, Employers, Providers, and Brokers. The Providers tab is selected, showing a section titled "Purpose" which states that the manual is a reference tool for physicians, facility, and ancillary office staff. Below this, there is a link to "Access the Provider Manual" with a note to click on sections to learn more. Two boxes are present: "Member Information" and "Network Operations", each with a "Learn More" link and a right arrow. On the right side of the page, there is a sidebar with a "Questions?" section, a phone number (800) 842-4464 ext. 5000, and a button for "Other Contact Options".

Health New England

Find A Provider Find A Drug Login Menu

Members Employers Providers Brokers

This manual contains information intended for all Health New England (HNE) providers, including Medicare and Medicaid providers. To the extent that any provision of this HNE manual is inconsistent with any provision of your contract with HNE, the terms of the contract shall control. To the extent that any provision of this HNE manual is inconsistent with any provision of our HNE Member Agreement, the terms of the member agreement shall control.

**Purpose**

This Provider Manual has been developed as a reference tool for physician, facility and ancillary office staff who serve HNE members. References to Health New England or HNE in this manual also apply to its affiliate, HNE Advisory Services, Inc. Use this manual to find information on a range of products including the HNE HMO, POS, and PPO plans.

**Access the Provider Manual**

Click on the sections below to learn more. To view a full copy of the Provider Manual, [click here](#).

**Member Information**

Information on member rights and responsibilities, determining eligibility, and other member information.

[Learn More](#) →

**Network Operations**

Information on provider communications, provider collection policy, credentialing, coordination of benefits and subrogation, quality management, clinical standards, administrative procedures, professional credentialing and recertification, serious reportable events and never events.

[Learn More](#) →

**Questions?**

Call (800) 842-4464 ext. 5000

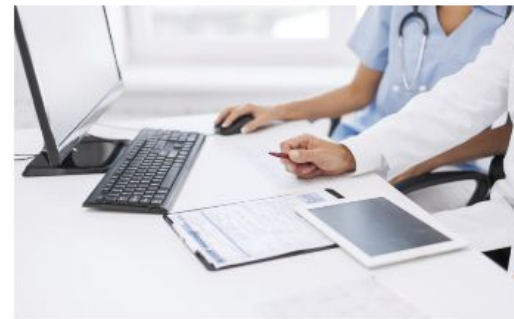
If providers have questions or recommendations about the information in this Provider Manual, they should contact Provider Relations. Representatives are available Monday-Friday from 8:00 am to 4:00 pm.

[Other Contact Options](#)

*ProviderMatters*, which allows providers to receive an email notification when important information is added, such as:

- New HNE Products and Services
- HNE/Industry News and Information
- Notice of Policy Changes
- Pharmacy Updates
- Policy/Administrative Reminders
- Semi-Annual Notice of Benefit Changes

Provider Update – April 2019



Posted on April 3, 2019

Dear Providers: We are happy to share with you the enclosed April 2019 update related to various Health New England programs and changes that may have an impact on your patients and/or your practice. On a regular basis, Health New England reviews our clinical criteria for our Behavioral Health and Medical policies as well as the [...]

No Comments

Categories: [Provider Newsletter](#)

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[→ April Payment Policy Update](#)  
[→ Claims Edit](#)

ARCHIVES

Select Month ☐

# ProviderMatters

You can get to 'Provider Matters' at our public site, <http://healthnewengland.org/provider>



## HNEDIRECT

Login to our provider portal, HNE Direct, for information about administrative procedures, plan changes, and more.



## EOP/NEGATIVE BALANCE SEARCH

We've made it easier to view your Explanation of Payments and Negative Balance Reports included in one document.



## PROVIDERMATTERS

Our ProviderMatters news site on HNEtalk.com includes updates on Health New England policies, news and important reminders.



## FORMS

From Behavioral Health Services to Clinical Requests, you'll find what you need in our Provider Forms Library.



# Prior Authorization


- Guidelines for procedures and services requiring prior authorization, can be found in the *Provider Manual under Medical Management*
- To verify a specific service, procedure, or treatment requiring prior authorization, contact HNE Health Services directly at (413) 787-4000, extension 5027 or (800) 842-4464, extension 5027, or HNE Member Services at (800) 310-2835
- Form can be located at <http://healthnewengland.org/forms>

**Standardized Prior Authorization Request Form**  
COMPLETE ALL INFORMATION ON THE "STANDARDIZED PRIOR AUTHORIZATION FORM".  
 INCOMPLETE SUBMISSIONS MAY BE RETURNED UNPROCESSED.

Please direct any questions regarding this form to the plan to which you submit your request for claim review.  
 The Standardized Prior Authorization Form is not intended to replace payer specific prior authorization procedures,  
 policies and documentation requirements. For payer specific policies, please reference the payer specific websites.

Health Plan: Health New England		Health Plan Fax #: 413-233-2700		*Date Form Completed and Faxed:	
<b>Service Type Requiring Authorization<sup>1,2,3</sup> (Check all that apply)</b>					
<b>Ambulatory/Outpatient Services</b> <input type="checkbox"/> Surgery/Procedure (SDC) <input type="checkbox"/> Infusion or Oncology Drugs		<b>Ancillary</b> <input type="checkbox"/> Acupuncture <input type="checkbox"/> Chiropractic <input type="checkbox"/> IV/ART <input type="checkbox"/> Non-Participating Specialist		<b>Dental</b> <input type="checkbox"/> Adjustive Dental Services <input type="checkbox"/> Endodontics <input type="checkbox"/> Maxillofacial Prosthetics <input type="checkbox"/> Oral Surgery <input type="checkbox"/> Restorative	
<b>Home Health/Hospice</b> <input type="checkbox"/> Home Health (Please circle: <input type="checkbox"/> HH, <input type="checkbox"/> PT, <input type="checkbox"/> ST, <input type="checkbox"/> HHSA, <input type="checkbox"/> MSW) <input type="checkbox"/> Hospice <input type="checkbox"/> Infusion Therapy <input type="checkbox"/> Respite Care		<b>Inpatient Care/Observation</b> <input type="checkbox"/> Acute Medical/Surgical <input type="checkbox"/> Long Term Acute Care <input type="checkbox"/> Acute Rehab <input type="checkbox"/> Skilled Nursing Facility <input type="checkbox"/> Observation		<b>Nutrition/Counseling</b> <input type="checkbox"/> Counseling <input type="checkbox"/> Enteral Nutrition <input type="checkbox"/> Infant Formula <input type="checkbox"/> Total Parenteral Nutrition	
<b>Transportation</b> <input type="checkbox"/> Non-emergent Ground <input type="checkbox"/> Non-emergent Air		<input type="checkbox"/> Other—please specify: _____			
<b>Provider Information (*Denotes required field)</b>					
*Requesting Provider Name and NPI#:		*Phone:		Fax:	
<input type="checkbox"/> Same as Requesting Provider *Serving Provider Name and NPI# (and Tax ID if required):		*Phone:		Fax:	
<input type="checkbox"/> Same as Requesting Provider *Serving Facility Name and NPI#: <input type="checkbox"/> Same as Requesting Provider		*Phone:		Fax:	
*Contact Person:		*Phone:		Fax:	
<b>Member Information (*Denotes required field)</b>					
*Patient Name:		<input type="checkbox"/> Male <input type="checkbox"/> Female		*DOB:	
*Health Insurance ID#: # other insurance, please specify:		*Patient Account/Control Number:		Phone:	
Address:					
<b>Diagnosis/Planned Procedure Information (*Denotes required field)</b>					
*Principal Diagnosis Description:		*Principal Planned Procedure (Description and CPT/HCPCS Code):			
ICD-10 Code:		# of Units Being Requested: <input type="checkbox"/> Hours <input type="checkbox"/> Days <input type="checkbox"/> Months <input type="checkbox"/> Visits <input type="checkbox"/> Dose			
Secondary Diagnosis Description:		Secondary Planned Procedure (Description and CPT/HCPCS Code):			
ICD-10 Code:		# of Units Being Requested: <input type="checkbox"/> Hours <input type="checkbox"/> Days <input type="checkbox"/> Months <input type="checkbox"/> Visits <input type="checkbox"/> Dose			
*Service Start Date:		*Service End Date:			

<sup>1</sup> Please attach plan specific templates that are required for supporting clinical documentation.  
<sup>2</sup> Not all services listed will be covered by the benefits in a member's health plan product.  
<sup>3</sup> This form does not replace payer specific prior authorization requirements.



Massachusetts Administrative Simplification Collaborative-Standardized Prior Authorization Request Form V1.1  
 May 2012



# Claims Editing

## Claim review against industry rules and coding guidelines

- National Coverage Determination (NCD) and Local Coverage Determination (LCD) Rules
- Rules and edits are consistent with CPT, ICD, CMS, and Health New England Payment Policies

## Helpful links:

- [CMS National and Local Coverage Determinations Indexes](#)
- • [NGSMedicare.com](#) > In the “**Continue as Guest**” Box, select Part B Provider and your state
- <https://healthnewengland.org/Providers/Resources>, Click “Payment Policies”

# Interactive Voice Response (IVR)

Self-serve option to check:

- Member Benefits & Member Eligibility 800.842.4464 ext 5046
- Claim Status & Appeal Status 800.842.4464 ext 5026

At time of call, have the following available:

- Provider Tax ID Number
- NPI
- Member Name
- Member ID Number
- Date of Birth
- Dates of Service
- Billable Amount

System will allow you to attempt 3 times, and will connect you to a live representative if you are unsuccessful.

# Provider Appeals (Dispute of Payment)

- Provider has a right to ask HNE to review a claim post payment.
- Filing limit is 6 months from date of service or date of discharge.
- Coordination of Benefits (COB) disputes are managed by the *Revenue Assurance and Risk Management Department*. Reference Provider Manual for timeframes.

[Reset Form](#)

### Request for Claim Review Form

COMPLETE ALL INFORMATION REQUIRED ON THE "REQUEST FOR CLAIM REVIEW FORM".  
INCOMPLETE SUBMISSIONS WILL BE RETURNED UNPROCESSED.

Please direct any questions regarding this form to the plan to which you submit your request for claim review.

Today's Date (MM/DD/YY):		Health Plan Name:	
<i>*Denotes required field(s)</i>			
<b>Provider Information</b>			
*Provider Name:		*Contact Name:	
*National Provider Identifier (NPI):		*Contact Phone Number:	
Contact Fax Number:		Contact E-mail Address:	
*Contact Address:			
<b>Member / Claim Information</b>			
*Member ID:		*Member Name:	
*Date(s) of Service (MM/DD/YY):			
*Claim Number:		*Denial Code:	
<b>*Review Type</b>			
Enter X in one box, and/or provide comment below, to reflect purpose of review submission.			
<input type="checkbox"/>	<b>Contract term(s):</b> The provider believes the previously processed claim was not paid in accordance with negotiated terms.		
<input type="checkbox"/>	<b>Coordination of Benefits:</b> The requested review is for a claim that could not fully be processed until information from another insurer has been received.		
<input type="checkbox"/>	<b>Corrected Claim:</b> The previously processed claim (paid or denied) requires an attribute correction (e.g., units, procedure, diagnosis, modifiers, etc.). Please specify the correction to be made:		
<input type="checkbox"/>	<b>Duplicate Claim:</b> The original reason for denial was due to a duplicate claim submission.		
<input type="checkbox"/>	<b>Filing Limit:</b> The claim whose original reason for denial was untimely filing.		
<input type="checkbox"/>	<b>Payer Policy, Clinical:</b> The provider believes the previously processed claim was incorrectly reimbursed because of the payer's clinical policy.		
<input type="checkbox"/>	<b>Payer Policy, Payment:</b> The provider believes the previously processed claim was incorrectly reimbursed because of the payer's payment policy.		
<input type="checkbox"/>	<b>Pre-Certification/Notification or Prior Authorization or Reduced Payment:</b> The request for a claim whose original reason for denial or reimbursement level was related to a failure to notify or pre-authorize services or exceeding authorized limits.		
<input type="checkbox"/>	<b>Referral Denial:</b> The claim whose original reason for denial was invalid or missing primary care physician (PCP) referral.		
<input type="checkbox"/>	<b>Request for additional information:</b> The requested review is in response to a claim that was originally denied due to missing or incomplete information (NCC Codes, Home Infusion Therapy).		
<input type="checkbox"/>	<b>Retraction of Payment:</b> The provider is requesting a retraction of entire payment or service line (e.g., not your patient, service not performed, etc.).		
<input type="checkbox"/>	<b>MassHealth:</b> The MassHealth provider has received a Final Deadline Exceeded error message. MassHealth providers must only use this review type to submit claims for review to MassHealth. Use of this form for submission of claims to MassHealth is restricted to claims with service dates exceeding one year and that comply with regulation 130CMR 450.323.		
<input type="checkbox"/>	<b>Other:</b>		
<b>Comments (Please print clearly below):</b>			
Attach all supporting documentation to the completed "Request for Claim Review Form".			

Massachusetts Administrative Simplification Collaborative-Request for Claim Review V1.1

# Provider Appeal (Dispute of Payment)

## Zelis Appeal Process:



Zelis evaluates provider claims for adherence to industry-recognized guidelines, and to ensure compliance with payment policies and standard coding practices.

The Explanation of Payment (EOP) will indicate that Zelis evaluated the claim and identified non-standard coding practices.

### What if a facility doesn't agree with Zelis findings?

Corrected claims and/or appeals should be sent to Zelis at the following address:

Zelis Claims Integrity, Inc.  
2 Crossroads Drive  
Bedminster, NJ 07921  
Attn: Provider Services

Please be sure to submit the following documents with your inquiry:

- Formal/written correspondence or cover letter that explains the nature of your inquiry.
- The original HCFA or UB claim form, including all disputed and non-disputed charges.
- Explanation of Benefits (EOB)
- PDF and TIFF formats can be submitted. (For Health New England submission of appeals via the Zelis portal.)

Please note:

- All appeals must be submitted to Zelis within one year of payment.
- Zelis will respond to your appeal, no later than 30 days from receipt of appeal.

Zelis can be contacted via Email: [providerservices.integrity@zelis.com](mailto:providerservices.integrity@zelis.com)

Zelis can be contact by phone at (866) 489-9444 between 8:30 AM to 5:00 PM EST.

Zelis Fax: (855) 250-3338

# | Product Information

# Medicare Supplement Plan

More of our Medicare Members are purchasing a Medicare Supplement through Health New England.

Original Medicare is primary.  
Health New England Medicare Supplement secondary.

Submit claims to Medicare and the claim will cross over to Health New England

## Health New England Medicare Supplement

### Health New England Medicare Supplement Members

Welcome to Health New England Medicare Supplement! To ensure a smooth transition to your new plan coverage, please use the information in this document when scheduling appointments and visiting a provider for the first time as a Health New England Medicare Supplement member.



### Important Information to Share with Your Providers

- Your Health New England Medicare Supplement plan provides secondary coverage to your Original Medicare Parts A & B coverage.
- Your Health New England Medicare Supplement plan covers the same services that Original Medicare Parts A & B cover, and helps pay the balance left after Original Medicare payment.
- To learn what Original Medicare covers, visit [Medicare.gov](https://www.medicare.gov) or download the Medicare.gov "What's Covered" app from your smartphone or tablet app store.
- As a Health New England Medicare Supplement member, you can see any provider who accepts Medicare in the U.S. and its territories. You do not require a referral to see a specialist. Health New England Medicare Supplement does not have specific contracts with providers.
- When calling to schedule an appointment with a provider, please let them know that you have Original Medicare and a Medicare Supplement plan through Health New England. *(You will need to bring both cards to your appointment – see sample cards below.)*



### Member Questions?

Call Health New England Member Services at (413) 787-0010 or toll-free at (877) 443-3314 (TTY: 711). Our representatives are available 8:00 a.m. – 8:00 p.m., Monday – Friday (Oct. 1 – Mar. 31: 8:00 a.m. – 8:00 p.m., 7 days a week).

### Provider Questions?

Health New England's Provider Relations team can be reached Monday – Friday, 8:00 a.m. – 5:00 p.m., at (800) 842-4464, ext. 5000, or visit [healthnewengland.org/provider](https://healthnewengland.org/provider).

# | Vendor Partnerships

# Vendor Partnerships - Audits

## Amenity (Nurse Audit)

- Institutional and Professional Coding & Clinical Review

## Zelis

- High dollar claim review
- Vendor to perform what was already in place/more efficient
- Communication was sent out February 2019
- Reviewing claims starting at \$35K
- May request medical records for high dollars \$100k
- Process of claim review is approximately 7 – 10 business day





# Vendor Partnerships – Care Management / Pharmacy

- Healthmap Solutions
  - Care Management benefit
  - Identifies member with potential kidney disease or end-stage renal disease
- Rx Savings Solution
  - Pharmacy savings solution
  - Works with providers to identify cost-effective medication
- Optum
  - Pharmacy Benefit Manager
  - Acupuncture network
  - Transplant assistance
- Evicore
  - Authorization management for genetic lab, high cost imaging, sleep studies
- Northwood
  - Network of providers supplying durable medical equipment & supplies
  - Management of authorization

# Vendor Partners – Care Management / Pharmacy

- Prime Therapeutics Management LLC (formally Magellan RX-effective 09/16/24)
  - Directs members to the most cost-effective, clinically appropriate location to receive their infusion(s) of select specialty medications
  - Commercial Fully Funded members between the ages of 18 and 64, receiving infusions at outpatient hospital settings
  - Need to meet medical necessity based on program description
  - Policies and FAQ's found here <https://healthnewengland.org/Providers/Resources>
- Progeny
  - Vendor partner specializing in Neonatal Intensive Care Unit (NICU) management
  - Assist in Utilization Management and Care Management Services
  - Commercial Members

## | Key Contacts & Specialty Partners

# Key Contacts

## General Contact Information

(413) 787-4000 | (800) 842-4464  
healthnewengland.org  
Health New England  
One Monarch Place, Suite 1500  
Springfield, MA 01144-1500

## Health Services (Behavioral Health)

(413) 787-4000 | (800) 842-4464 Ext. 5028  
For questions regarding:

- Prior approval
- Out-of-plan requests
- Case management

## Health Services (Medical)

(413) 787-4000 | (800) 842-4464 Ext. 5027  
For questions regarding:

- Prior approval
- Out-of-plan requests
- Case management

## HNEDirect Provider Portal

(413) 787-4000 | (800) 842-4464 Ext. 3311  
Email questions to: [HNEDirect@hne.com](mailto:HNEDirect@hne.com)  
For questions regarding:

- Login or password assistance
- Portal functionality

## Member Services/Enrollment

(413) 787-4000 | (800) 842-4464 Ext. 5025  
For questions regarding:

- Benefits
- Eligibility
- Copayment

## Provider Claims Servicing Unit

(413) 787-4000 | (800) 842-4464 Ext. 5026  
For questions regarding:

- General claim inquiries

## Provider Contracting

Fax/Phone: (413) 233-3175  
Email questions to: [PContracting@hne.com](mailto:PContracting@hne.com)  
For questions regarding:

- Contracting status

## Provider Credentialing

(413) 787-4000 | (800) 842-4464 Ext. 3980  
Email questions to: [ProvCred@hne.com](mailto:ProvCred@hne.com)  
For questions regarding:

- Credentialing status

## Provider Enrollment

(413) 787-4000 | (800) 842-4464 Ext. 5038  
Email questions to: [PEnrollment@hne.com](mailto:PEnrollment@hne.com)  
For questions regarding:

- Provider demographic information
- Tax ID/billing information/ERA enrollment/1099 information


## Provider Relations





(413) 787-4000 | (800) 842-4464 Ext. 5000  
[healthnewengland.org/provider-contact](http://healthnewengland.org/provider-contact)  
Email questions to: [ProviderRelations@hne.com](mailto:ProviderRelations@hne.com)  
For questions regarding:

- Reimbursement issues
- Complex claims issues
- Educational visit requests

# Health New England Specialty Partners

<https://healthnewengland.org/provider/partners>

 Health New England

 Find A Provider  Find A Drug  Login  Menu


Members


Employers


Providers


Brokers


Contact Information


 Chiropractic Services


 Chronic Kidney Disease and Kidney Health Management


 Durable Medical Equipment


 High Cost Claims Review

 Inpatient Claim Review

 Medicaid Behavioral Health Services

 Medicare Advantage End Stage Renal

 Outpatient Imaging Services, Genetic Testing and Sleep Studies

 Pharmacy Services

# | Questions

