

## MGB Health Plan Orientation

Meghan Morrissey Senior Provider Network Account Executive

October 16, 2024

Mass General Brigham Health Plan includes Mass General Brigham Health Plan, Inc. and Mass General Brigham Health Plan Insurance Company.

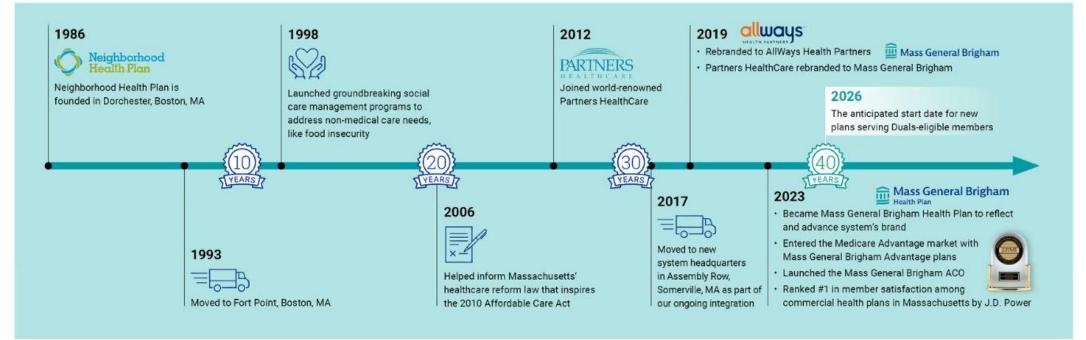
### Agenda

- Mass General Brigham Health Plan Legacy
- Membership
- 2024 Products
- Reminders
- Authorization & Referral Overview
- Provider Resources
- Questions

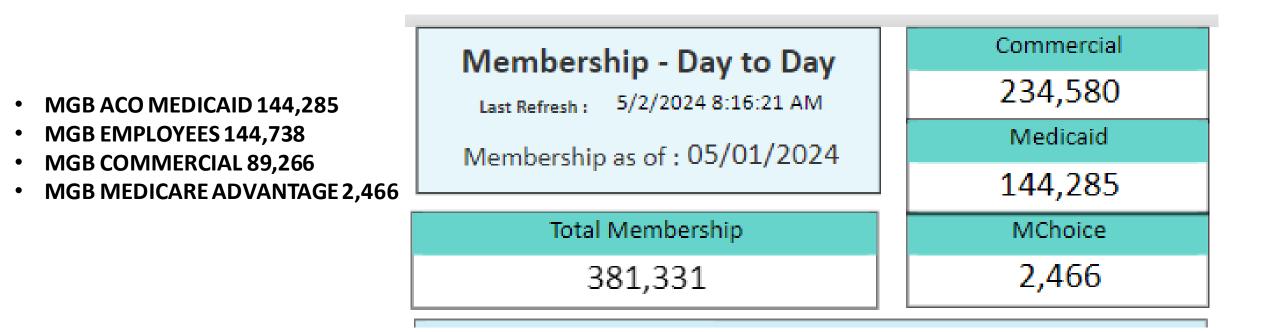
#### Building on our legacy as a community-based organization

#### Mass General Brigham Health Plan

Our legacy of integration, innovation, and growth drives us <u>forward</u>



### **Mass General Brigham Membership**



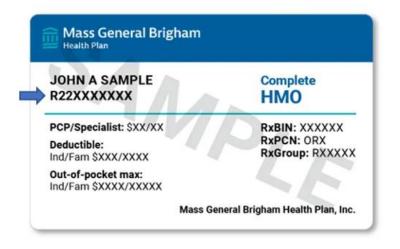
# 2024 Product Portfolio

#### 2024 Member ID Cards

For a complete overview of all our products please click on the following link. https://massgeneralbrighamhealthplan.org/providers/product-reference

Highlights:

• Reminder - Mass General Brigham Health Plan had updated member ID numbers and cards for all members effective January 1, 2024. All individuals across membership populations have the same prefix, R22, in their new ID numbers.



#### Mass General Brigham Health Plan 2024 Products

Highlights:

- Medicare Advantage launched on Jan 1, 2023
- Mass General Brigham ACO plan launched April 1, 2023
- EPO product launch January 1, 2024

For a complete overview of all our products please click on the following link.

https://massgeneralbrighamhealthplan.org/providers/product-reference

### **MGB Employee Plans**

Effective 1/1/2024, the following plans are in effect:

- Plus PPO ٠
- Select ٠

New

Core PPO ٠

Health Plan

JOHN A SAMPLE

PCP Tier 2: 18 and under \$40

Tier 1 Deductible: Ind/Fam \$ Tier 2 Deductible: Ind/Fam \$

OON Deductible: Ind/Fam \$ Tier 1 Out-of-Pocket Max: Ind/Fam \$ Tier 2 Out-of-Pocket Max: Ind/Fam \$ OON Out-of-Pocket Max: Ind/Fam \$

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PCP: \$

ER: \$

Specialist: \$

High Deductible Health Plan ٠ PPO with HSA

Administered by Mass General Brigham Health Insurance Company

Premium EPO ٠

**Mass General Brigham** 

	Mass General Brigham Health Plan	Plus PPO	Mass General Brigham Health Plan	Select
	JOHN A SAMPLE 0000000000	UnitedHealthcare* Options PPO Network	JOHN A SAMPLE 000000000	UnitedHealthcare* Options PPO Network
h Plan	PCP: \$ PCP Tier 2: 18 and under \$30 Specialist: \$ ER: \$ Tier 1 Deductible: Ind/Fam \$ Tier 2 Deductible: Ind/Fam \$ OON Deductible: Ind/Fam \$ Tier 1 Out-of-Pocket Max: Ind/Fam \$ Tier 2 Out-of-Pocket Max: Ind/Fam \$ OON Out-of-Pocket Max: Ind/Fam \$ OON Out-of-Pocket Max: Ind/Fam \$ OON Out-of-Pocket Max: Ind/Fam \$	CVS caremark RXBIN: 004336 RXPCN: ADV RXGROUP: RX1438	CO4336     Specialist: \$     Secialist: \$     Secialistecialist: \$     Secialist: \$     Secialist: \$     Secialist: \$	
Core PPO	Mass General Brigham	Premium EPO	Mass General Brigham Health Plan	HDHP PPO with HSA
Core PPO UnitedHealthcare® Options PPO Network	Mass General Brigham Health Plan JOHN A SAMPLE 0000000000	Premium EPO UnitedHealthcare® Options PPO Network		
UnitedHealthcare <sup>®</sup>	JOHN A SAMPLE	UnitedHealthcare®	JOHN A SAMPLE	with HSA UnitedHealthcare® Options PPO Networ CVS caremark RXBIN: 004336 RXPCN: ADV RXGROUP: RX1438

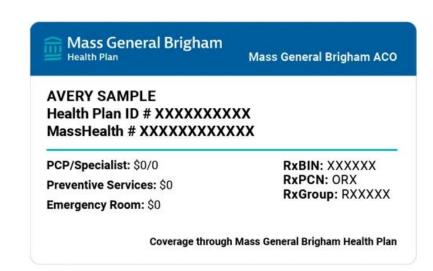


### **Mass General Brigham ACO**

## Mass General Brigham Health Plan is proud to provide MassHealth insurance coverage to members of Mass General Brigham ACO.

- Primary care services will be provided by Mass General Brigham and Mass General Brigham affiliated PCPs as well as Lawrence Health Solutions and Community Medical Associates who are affiliated with Lawrence General Hospital.
- Authorizations/Notifications for other services may be required for MGB ACO members.
- Please note applicable to Baystate Medical Providers Specialty providers only
- Referrals will **NOT** be required for **in-Network** Providers
- Referrals **will** be **required** for Out Of Network Providers.

• Authorizations <u>will not</u> be required for **High Tech Radiology** or **Cardiac Imaging** 



# Limited Network Products



#### **Select HMO**

Limited network: Health insurance plans that offer a more affordable premium by providing access to a smaller, select group of providers.

- Available to Health Connector members AND ConnectorCare members
- A contracted Select HMO PCP is required
- Limited-Service Area and High-Performance Network
- Select HMO members have in-network access to our Select HMO network exclusively.
- Limited but comprised of high quality and costeffective providers, including providers within the MGB system

Mass General Bright	AM HEALTH CONNECTOR
Health Plan	Limited Network
JOHN A SAMPLE	Select
0000000000	HMO
PCP/Specialist: \$	RXBIN:
Deductible:	RXPCN:
Ind/Fam \$	RXGROUP:
Out-of-pocket max: Ind/Fam \$	
N	Aass General Brigham Health Plan, Inc.

# New Products

## **Complete Access EPO**

#### National Network:

- Mass General Brigham Health Plan's network in MA and NH
- UnitedHealthcare Options PPO network outside of MA/NH
- Optum, one of the nation's largest behavioral health providers, plus Lyra Health
- Optum Rx, national network of pharmacies
- Plus:
  - Urgent care centers
  - Retail walk-in clinics
  - 24/7 nurse advice line
  - 24/7 On Demand virtual visit urgent care

#### How our EPO works:

- In MA and NH, a PCP is required, and referrals are needed for most specialty services
- Members do not have OON/unauthorized coverage
- Emergency services covered worldwide\*

Mass General Brigham Health Plan				
JOHN A SAMPLE 0000000000	Complete Access EPO			
PCP/Specialist: \$ Deductible: Ind/Fam \$ Out-of-pocket max: Ind/Fam \$	RXBIN: RXPCN: RXGROUP: UnitedHealthcare® Options PPO Network Mass General Brigham Health Plan, Inc.			

# Reminders

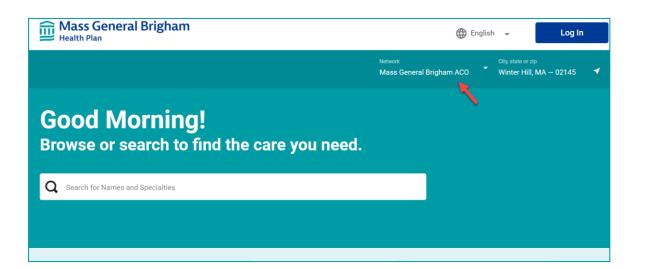
#### Help us keep our Provider directory information accurate

- For a compete listing of participating provider please use the MGBHP Provider Directory: <u>Home</u> (sapphirethreesixtyfive.com)
  - Provider demographic information in our Provider Directory must reflect accurate data at all times and should mirror the information members may receive directly from the practice or via patient appointment call centers.
  - **To report any changes to demographic data** or to your address, panel status (open or closed) for each individual provider, institutional affiliations, phone number, or other practice data requests should be reported via the Mass General Brigham Health Plan Provider Portal

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**provider.massgeneralbrighamhealthplan.org or** by submitting a **Provider Change** via the **Provider-Enrollment-Form** to Mass General Brigham Health Plans **Provider Enrollment Team** by email at **HealthPlanPEC@mgb.org**.

- **On a quarterly basis,** providers should review and verify the accuracy of their demographic data displayed in our Provider Directory.
- **Timely notice of Provider Changes** As a reminder, notification of address, acceptance of new patients, provider terminations, and other demographic information changes should be submitted at least 30 days in advance



### **PCP changes via the Provider Portal**



When submitting a PCP change through the provider portal, make sure to follow these tips to prevent any potential errors:

- Verify member's eligibility prior to submitting a PCP change.
- The provider the member is being assigned to must have an open panel.
- The provider the member is being assigned to must accept the member's plan type.
- PCP assignments can be backdated for up to 60 days.
- Please do not submit duplicate requests and allow up to 7 business days for the PCP change to process.

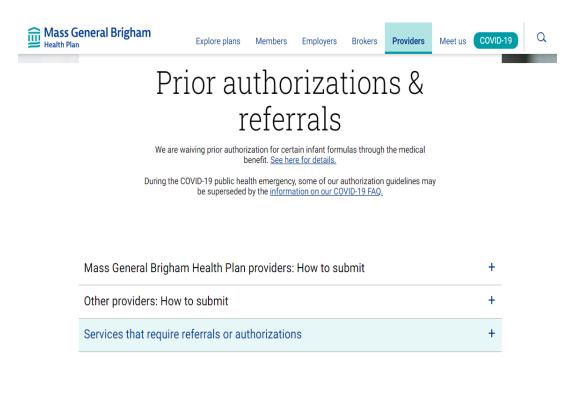
# Authorization & Referral Overview



#### **Prior Authorizations & Referrals Tools and Resources**

- Authorization guidelines available at: <u>https://massgeneralbrighamhealthplan.org/providers</u> <u>/authorization-guidelines</u>
- Webinar to authorization training: <u>MGBHP Auth</u> <u>Training Webinar</u>
- We will continue to manage our UM for our contracted providers.
- Mass General Brigham Health Plan continues to provide care management for our members

Services that require referrals or authorizations
Log into the provider portal for member-specific information
View a PDF of all services that require referrals, authorizations, or notifications 
View the Medicare Advantage prior authorization and notification guidelines 
View a PDF of durable medical equipment, medical supplies, oxygen related equipment, orthotics prosthetics and hearing aids that require prior authorization

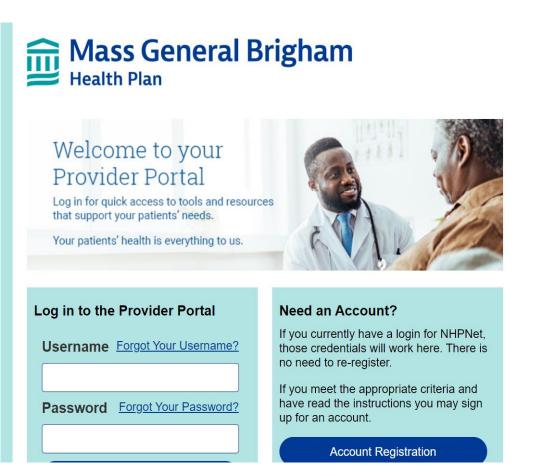


#### **Provider Portal**

The MGB HP provider portal is your one-stopshop for managing your MGB HP patients. Through the portal, you have real-time access to:

- Verify patient eligibility
- Verify claims status
- Submit or check authorizations/referrals
- Access your explanation of payments (EOPs)
- View member and provider roster reports
- Update your practice information
- And much more!

If you do not have access to Our Provider Portal, you can register at: <u>Mass General Brigham Health</u> <u>Plan Provider Portal</u>



### **Provider Portal Authorization Overview**

Prior authorization verification tool: Code Checker

- Through the Provider Portal, you can verify PA requirements based on a member's specific plan
- Obtain PA requirements by entering in a valid CPT/HCPCS code
- Save time and validate prior authorization requirements before you submit a new request

To access the prior authorization verification tool in Provider Portal, go to **Authorizations**  $\rightarrow$  **Overview**  $\rightarrow$ **Check authorization requirements by code**.

- Access to Vendor Portals
- Submit Authorizations
- View authorization status
- InterQual criteria lookup





#### Authorizations overview

Learn about the tools and resources available on each page in the Authorization menu.

#### NovoLogix portal

Access our medical specialty drug authorizations, managed through the CVS Health-NovoLogix Portal.

View the full NovoLogix authorization guidelines (PDF)

#### Submit an authorization

Submit your medical authorizations here. You can view our full authorization guidelines using the links below.

- Prior authorization, notification, and referral guidelines (PDF)
- Check authorization requirements by

#### View authorization status

Check the status of submitted and pending authorizations across your organization.

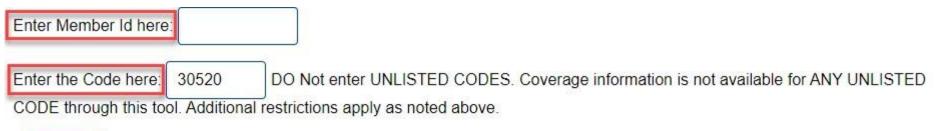
Tips to improve your prior authorization experience

#### InterQual criteria lookup

Check authorization requirements using a valid member ID and CPT/HCPCS code.

### **Outpatient Prior Authorization Code Checker**

- Search by Member ID# and Code
- Coverage and prior authorization requirements will display
- Do not use the Code Checker for Unlisted Codes





Code	Description	ls Covered	Is PA Required
30520	SEPTOPLASTY/SUBMUCOUS RESECJ W/WO CARTILAGE GRF	YES	YES / MASS GENERAL BRIGHAM HEALTH PLAN

Confirmation of coverage and prior authorization does not guarantee payment, which is based on member eligibility on the date of service, plan design, specific payment policies, individual provider contract terms and fee schedules. Mass General Brigham Health Plan applies standard industry billing and coding rules to claims.

## **Helpful Tips**

• Have the clinical information (medical chart) available

Review the patient's medical chart to assemble documented clinical indications for the requested service (e.g., review history/physical, testing conducted prior to service, treatment plan). If the authorization pends, you will need to upload the clinical information.

- Answer questions based on the patient's clinical information (medical chart) If the appropriate answer isn't available, select "Other clinical information" and add a comment
- Add Reviewer Comments at the question level to document clinical details
- **Review notes within the criteria**; they serve as a valuable resource in accurately conducting a review by:
  - Explaining criteria rationale
  - Defining medical terminology
  - Detailing new clinical knowledge/evidence

#### **Important Information**

If you do not have access to the Mass General Brigham Health Plan Provider Portal, you can register at: <u>Mass General Brigham Health Plan Provider Portal</u>

Check out the Provider Portal resource page: <u>Provider Portal Resources</u>

- Frequently asked questions about registration
- Information about the role of the User Administrator
- Links to user guides and tip sheets

For information regarding authorization guidelines: <u>Authorization Guidelines</u>

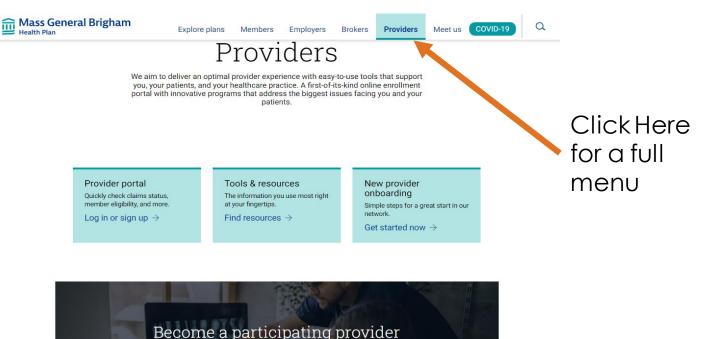
For additional support and registration inquiries, email us at <u>HealthPlanprweb@mgb.org</u>.

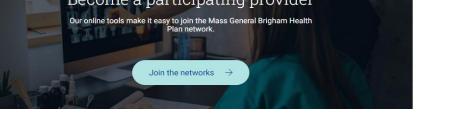
# **Provider Resources**



### Mass General Brigham Health Plan Provider Page

- <u>https://massgeneralbrighamhealthplan.org/providers</u>
- Our public site has important information and resources for providers, such as:
  - Authorization guidelines
  - Claims Information
  - Medical Policies
  - Medical Specialty and Pharmacy Policies
  - Payment Policies
  - Care Management Information
  - Provider Resources
  - Product Reference
  - Provider Administrative Newsletter



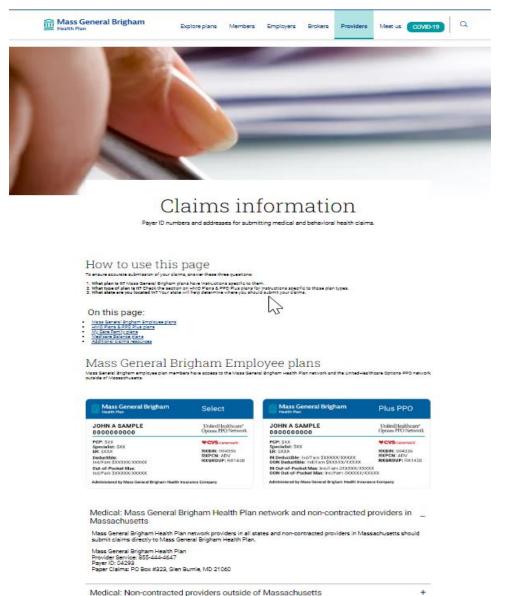


## **Claims Information Page**

#### https://massgeneralbrighamhealthplan.org/ providers/claims

#### **Highlights:**

- Clear guidance for where to send claims
- ID card images to help you identify plans
- Provider Refund/Claims Retraction FAQ
- Request for Claim Review Form



Behavioral health

### **MGB Health Plan provider resources**

- **MGB HP conducted virtual trainings** for operational staff on the utilization authorization process which are available on the Provider Education Landing Page
- **Provider Portal** <u>Mass General Brigham Health Plan Provider Portal</u>
  - Member management tool, Provider enrollment, Eligibility verification etc.
- Provider Education Landing Page Provider education | Mass General Brigham Health Plan
  - Access webinars, factsheets, and other tools that make it easy to do business with us.
- **Claims Landing Page -** <u>Claims information (massgeneralbrighamhealthplan.org</u>)
  - Access Payer ID numbers and addresses for submitting medical and behavioral health claims.
- **Public Website Provider Tab** <u>Providers | Mass General Brigham Health</u>
  - We aim to deliver an optimal provider experience with easy-to-use tools that support you, your patients, and your healthcare practice.

#### **Mass General Health Plan Contacts**

Provider Portal: Claims status, eligibility, EOP

Claims issues, benefits

Portal IT support Provider enrollment and credentialling, directory issues

Medical policies, payment policies, provider manual, provider directory, drug lookup, forms

Audit denial inquiries

<u>Mass General Brigham Health Plan Provider Portal</u> Provider Service 855-444-4647 <u>Health Planprovider Service@mgb.org</u> <u>Health Planprweb@mgb.org</u> <u>Health Planpec@mgb.org</u>

Providers | Mass General Brigham Health Plan

healthplanaudit@mgb.org



#### **Stay connected**

Visit **https://massgeneralbrighamhealthplan.org/admin-newsletter** to register

#### Administrative Newsletter (monthly)

Includes important administrative updates that make it easier for your practice to do business with us

#### Best Practice Provider Blog (twice per week)

Get the latest in health and health insurance trends, news, and tips



#### Follow us on Twitter @MGBHealthPlan



