

| 2025 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
 - Provider Portal (HNEDirect.com)
 - Public Site (healthnewengland.org)
 - Provider Manual
 - 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 Experience Representative
 - Email: ProviderRelations@hne.com or Mshiveley@hne.com
 - Phone 800.842.4464 Ext. 5000

- Donna Robillard– Health New England
 - Provider Experience Manager
 - Email: ProviderRelations@hne.com or Drobillard@hne.com
 - Phone 800.842.4464 Ext 5000

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 163,000 **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:

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

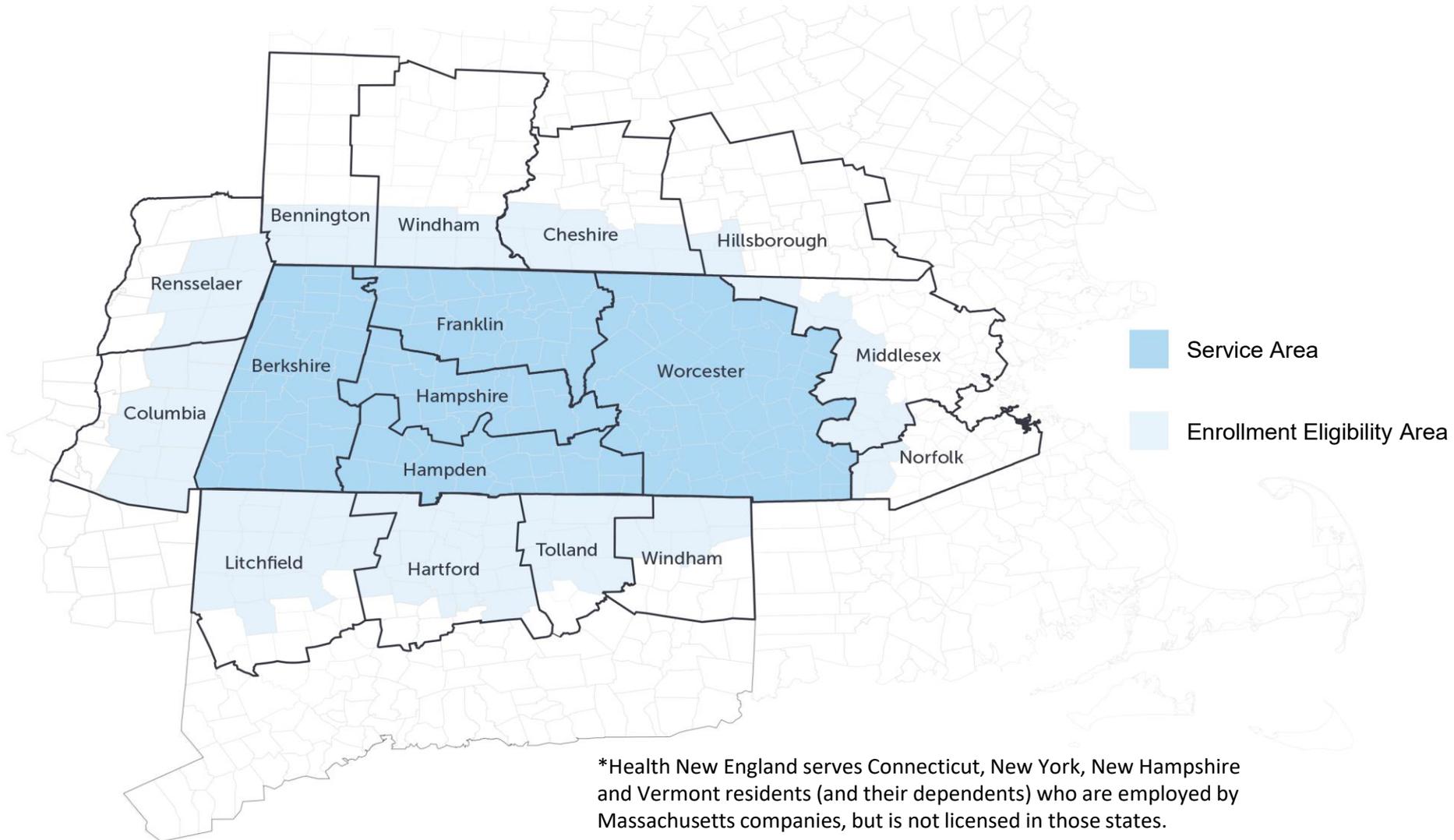
Vision:

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



*Health New England serves Connecticut, New York, New Hampshire and Vermont residents (and their dependents) who are employed by Massachusetts companies, but is not licensed in those states.

| 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/XX/XX/XX*
 Chiropractic \$XX
 Behavioral Health \$XX
 Inpatient \$XX* AmbSurg \$XXX*
 *Ded Ind/Fam \$XXXX/XXXX
 IN MOOP Ind/Fam \$XXXX/XXXX

RxBIN: 610593 RxCN: 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/XX/XX/XX*
 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 RxCN: 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 \$XX/XX/XX
 Chiropractic \$XX
 Behavioral Health \$XX
 Inpatient \$X* AmbSurg \$X*
 *Ded Ind/Fam \$XXXX/XXXX
 IN MOOP Ind/Fam \$XXXX/XXXX

RxBIN: 610593 RxCN: 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 \$XX/XX/XX
 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 RxCN: 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 or my.healthnewengland.org.

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

PHARMACIES:
Call the Pharmacist Help Desk at [800-918-7545](tel: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](tel:800-310-2835).

PROVIDERS IN OTHER STATES:
For inpatient admits/prior authorizations, call [866-397-7466](tel:866-397-7466). Failure to obtain prior auth may reduce benefits.
For eligibility, benefits or claims visit <http://uhss.umr.com> or call [888-830-0179](tel: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.
Find a New England provider outside of Western Massachusetts at [866-261-6687](tel:866-261-6687) or visit multiplan.com/healthnewengland.
Nurse Advice Line - Available 24/7 at [866-389-7613](tel:866-389-7613).
Find EyeMed providers at eyemedvisioncare.com/hne or [844-203-2074](tel:844-203-2074).
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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






Commercial HMO SF:
(copy and logos at the bottom may change depending on the group/plan)



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



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

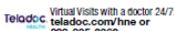
MEMBERS:
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Find a New England provider outside of Western Massachusetts at [866-261-6687](tel:866-261-6687) or visit multiplan.com/healthnewengland.
Nurse Advice Line - Available 24/7 at [866-389-7613](tel:866-389-7613).

To submit manual pharmacy claims, follow the instructions on the *Member Prescription Reimbursement Form* found at healthnewengland.org/forms.

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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 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 Group Medicare Supplement PlanType
ID: XXXXXXXXXXXX
GRP: XXXXXXXXXXXX
Plan: Group Medicare Supplement

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 X

HXXXX PBP Issue Date: MM/DD/YYYY

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

Medicaid/ACO

 BeHealthy Partnership
Beystate 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



Medicare is primary:
Submit medical claims to Medicare.

Secondary payer is:
HNE Insurance Company
One Monarch Place, Suite 1500
Springfield, MA 01144-1500

Member Services:
Local: (413) 787-0010
Toll Free: (877) 443-3314
TTY: 711

Group
Medicare
Supplement



Manage your account on our member portal at my.healthnewengland.org

Medicare is primary:
Submit medical claims to Medicare.

Secondary payer is:
HNE Insurance Company
One Monarch Place, Suite 1500
Springfield, MA 01144-1500

Member Services:
Local: (413) 787-4004
Toll Free: (800) 310-2835
TTY: 711

Medicare
Advantage



Submit Claims to:
Health New England
Medicare Advantage Plan
One Monarch Place, Suite 1500
Springfield, MA 01144-1500

Routine Vision Exam and Eyewear Allowance:
healthnewengland.org/medicare/eyemed
Toll Free (866) 723-0596 or TTY 711

Hearing Aids:
truhearing.com/select
Toll Free (844) 319-7458 TTY 711

For Questions About Prescription Drug Coverage:
Toll Free (800) 393-0395 or TTY 711

Member Services: Local (413) 787-0010 Toll Free (877) 443-3314 or TTY 711
healthnewengland.org/medicare

Medicaid/ACO



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



Emergency:
Seek emergency room care right away or call 911.

Routine or Urgent Care
Call your primary care provider (PCP). Always show your BeHealthy Partnership ID card and MassHealth ID card to your provider when getting care.

Nurse Advice Line - For 24/7 health information, call (866) 389-7613.

Mental Health and Substance Use Disorder Services
Go to any BeHealthy Partnership mental health or substance use disorder provider. You do not need to call your PCP first. For questions 24/7, call (800) 495-0086.

Teladoc Virtual Visits
Visit with a doctor anytime 24/7: (800) 835-2362 or teladoc.com/hne

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



[Home](#) [Help](#) [Log Out](#) [Account Information](#)

HNEDirect Provider

Signed in as Associate hfijal / HFijal1

[Eligibility](#)

[Claims](#)

[Authorization](#)

[View Logs](#)

[Reports](#)

[Resources](#)

[Change Provider Info](#)

- HNE Providers can now view up-to-date information online including member eligibility, and member benefits, check claim status, EOPS
- *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

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]
PCP NPI [REDACTED] **PHCS PPO REGION** [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

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



[Find A Provider](#) [Find A Drug](#) [Login](#) [Menu](#)

Members	Employers	Providers	Brokers
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.

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

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 top navigation bar of the Health New England website. On the left is the Health New England logo. To its right are links for 'Find A Provider', 'Find A Drug', 'Login', and 'Menu'. Below this is a horizontal menu with four tabs: 'Members', 'Employers', 'Providers', and 'Brokers'. The 'Providers' tab is currently selected and highlighted.

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.

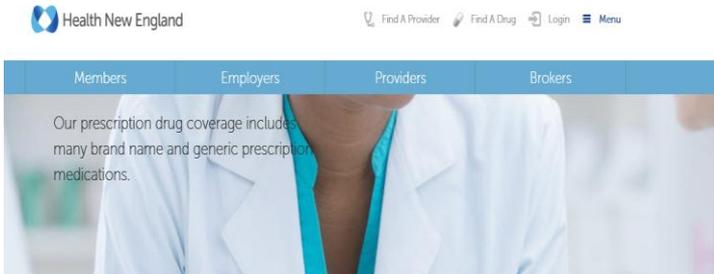
The screenshot shows the Health New England provider search interface for a PPO plan. The top navigation bar includes the Health New England logo, a search icon, and links for 'Find A Provider', 'Find A Drug', 'Login', and 'Menu'. Below the navigation bar are tabs for 'Members', 'Employers', 'Providers',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

The screenshot shows the Health New England provider search interface for an HMO plan. The top navigation bar is identical to the PPO plan view. Below the navigation bar are tabs for 'Members', 'Employers', 'Providers', and 'Brokers'. The 'Providers' tab is selected. The main content area features a 'Provider Network' dropdown set to 'HMO' with a 'CHANGE NETWORK' link. Below this is a search form with fields for 'Last name or facility name', 'Search by Location: Zip Code', and 'Within: Select a Range'. There are 'Search', 'Clear filters', and 'Advanced Search' buttons. A horizontal menu below the search form lists various provider types: 'All Providers', 'Baystate Health Providers', 'Primary Care Physicians', 'Specialist', 'Behavioral Health', 'Hospitals', 'Urgent Care Facilities', and 'Pharmacy'. Underneath, there are sections for 'Additional Search Tools' (with buttons for 'Chiropractic/Acupuncture Provider Search' and 'Altus Dental Provider').

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 1 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

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-THERO 2 SELECT
A.A.G.C. KIT IN TERODERMA
AVG PRO
A-10000
A-25
ABATEMIL
ABATINEX
ABATRION
ABATRION AF

Public Site: (Pharmacy/Medicare)

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

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 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.
- Can be found on <http://healthnewengland.org/provider> as well as our secure provider portal (<https://www.hnedirect.com>)

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 recredentialing, 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

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[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
- PA list also available under Resources on public site.
- 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 website.

Health Plan: Health New England		Health Plan Fax #: 413-233-2700		*Date Form Completed and Faxed:	
Service Type Requiring Authorization^{1, 2, 3} (Check all that apply)					
Ambulatory/Outpatient Services <input type="checkbox"/> Surgery/Procedure (SDC) <input type="checkbox"/> Infusion or Oncology Drugs		Ancillary <input type="checkbox"/> Acupuncture <input type="checkbox"/> Chiropractic <input type="checkbox"/> IV/ART <input type="checkbox"/> Non-Participating Specialist		Dental <input type="checkbox"/> Adjustive Dental Services <input type="checkbox"/> Endodontics <input type="checkbox"/> Maxillofacial Prosthetics <input type="checkbox"/> Oral Surgery <input type="checkbox"/> Restorative	
Home Health/Hospice <input type="checkbox"/> Home Health (Please circle: SN, PT, OT, ST, HHA, MSW) <input type="checkbox"/> Hospice <input type="checkbox"/> Infusion Therapy <input type="checkbox"/> Respite Care <input type="checkbox"/> Non-emergent Ground <input type="checkbox"/> Non-emergent Air		Inpatient Care/Observation <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 <input type="checkbox"/> Other—please specify:		Nutrition/Counseling <input type="checkbox"/> Counseling <input type="checkbox"/> Enteral Nutrition <input type="checkbox"/> Infant Formula <input type="checkbox"/> Total Parenteral Nutrition	
				Durable Medical Equipment <input type="checkbox"/> Prosthetic Device <input type="checkbox"/> Purchase <input type="checkbox"/> Rental Supplies <input type="checkbox"/> Rental	
				Outpatient Therapy <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Physical Therapy <input type="checkbox"/> Pulmonary/Cardiac Rehab <input type="checkbox"/> Speech Therapy	
Provider Information (*Denotes required field)					
*Requesting Provider Name and NPI#:		*Phone:		*Fax:	
*Serving Provider Name and NPI# (and Tax ID if required):		*Phone:		*Fax:	
<input type="checkbox"/> Same as Requesting Provider					
*Serving Facility Name and NPI#:		*Phone:		*Fax:	
<input type="checkbox"/> Same as Requesting Provider					
*Contact Person:		*Phone:		*Fax:	
Member Information (*Denotes required field)					
*Patient Name:		<input type="checkbox"/> Male <input type="checkbox"/> Female		*DOB:	
*Health Insurance ID: # other insurance, please specify:		*Patient Account/Control Number:			
Address:		Phone:			
Diagnosis/Planned Procedure Information (*Denotes required field)					
*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:			

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

Clear Form

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

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. Fax 413-233-2709

[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>			
Provider Information			
*Provider Name:		*Contact Name:	
*National Provider Identifier (NPI):		*Contact Phone Number:	
Contact Fax Number:	Contact E-mail Address:		
*Contact Address:			
Member / Claim Information			
*Member ID:		*Member Name:	
*Date(s) of Service (MM/DD/YY):			
*Claim Number:		*Denial Code:	
*Review Type			
Enter X in one box, and/or provide comment below, to reflect purpose of review submission.			
<input type="checkbox"/>	Contract term(s): The provider believes the previously processed claim was not paid in accordance with negotiated terms.		
<input type="checkbox"/>	Coordination of Benefits: The requested review is for a claim that could not fully be processed until information from another insurer has been received.		
<input type="checkbox"/>	Corrected Claim: 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"/>	Duplicate Claim: The original reason for denial was due to a duplicate claim submission.		
<input type="checkbox"/>	Filing Limit: The claim whose original reason for denial was untimely filing.		
<input type="checkbox"/>	Payer Policy - Clinical: The provider believes the previously processed claim was incorrectly reimbursed because of the payer's clinical policy.		
<input type="checkbox"/>	Payer Policy - Payment: The provider believes the previously processed claim was incorrectly reimbursed because of the payer's payment policy.		
<input type="checkbox"/>	Pre-Certification/Notification or Prior Authorization or Reduced Payment: 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"/>	Referral Denial: The claim whose original reason for denial was invalid or missing primary care physician (PCP) referral.		
<input type="checkbox"/>	Request for additional information: 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"/>	Retraction of Payment: The provider is requesting a retraction of entire payment or service line (e.g., not your patient, service not performed, etc.).		
<input type="checkbox"/>	MassHealth: 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"/>	Other:		
Comments (Please print clearly below):			
Attach all supporting documentation to the completed "Request for Claim Review Form".			

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

| Product Information

New Policies or Products:

- **New vendors:** Virta- Nutritional Therapy for Weight Loss and Diabetes Reversal
 - NationsVision – Vision and prescription eyewear to MA members.
- **New benefit:** Doula coverage and network buildout
- Small Employer Group Bronze plans will now be HSA compatible, previously it was only High-Deductible Health Plans (HDHPs)
- Complying with recent Federal and Division of Insurance Bulletin releases:
 - Post Partum Maternal Health coverage
 - Fertility Preservation
 - Opioid Antagonists & Substance abuse Recovery Coaches
 - Prescriptions for Chronic Conditions
 - Continued Down Syndrome Treatment
 - Gender Affirming Care
 - Maternal Health Bill

New Policies or Products



HNE will **not** be covering GLP1s for weight loss after 01/01/26, we will continue to cover specific medications for weight loss.

- Individual and Small Groups coverage ends on 1/1/2026.
- Large group with fewer than 100 actively enrolled subscribers - coverage ends on their renewal date in 2026.
- Large group with more than 100 actively enrolled subscribers - have the choice to purchase a rider to continue coverage beyond their 2026 renewal date.
- *To verify benefit coverage, please reach out to Member Services*

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

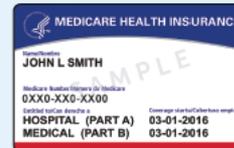
Health New England Medicare Supplement Members

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.

| 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 FAQs 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
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
For questions regarding:

- Contracting status

Provider Credentialing

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

- Credentialing status

Provider Enrollment

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

- Reimbursement issues
- Complex claims issues
- Educational visit requests

Health New England Specialty Partners

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



[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](#)

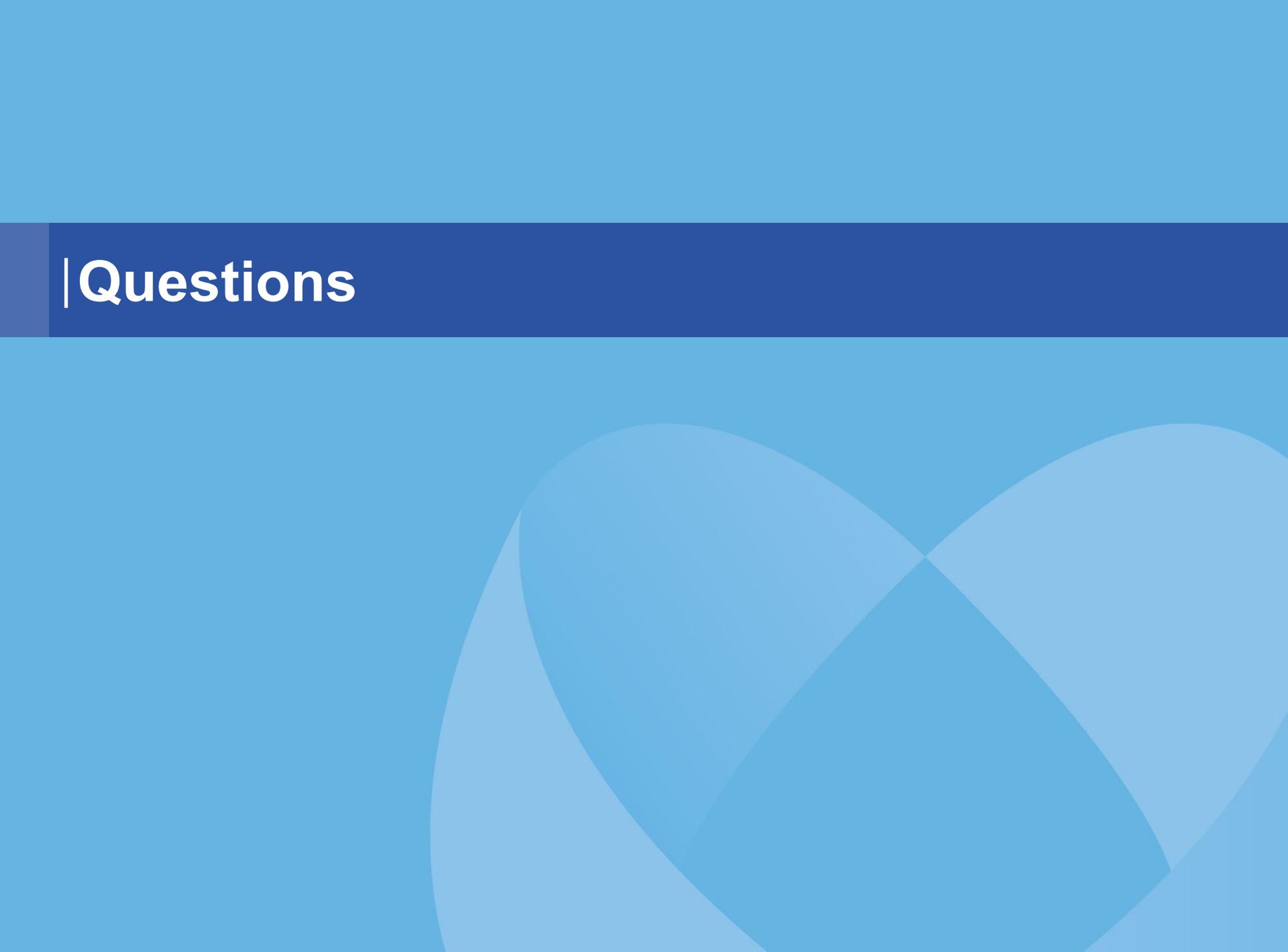
[Medicaid Behavioral Health Services](#)

[Medicare Advantage End Stage Renal](#)

[Outpatient Imaging Services, Genetic Testing and Sleep Studies](#)

[Pharmacy Services](#)

| Questions

The background of the slide is a solid light blue color. In the lower half, there are several large, overlapping circles in various shades of blue, creating a decorative, abstract pattern. A dark blue horizontal bar is positioned at the top, containing the text '| Questions' in white.