

The Beacon Bulletin

Provider Relations // February 2018

IMPORTANT: PLEASE READ THIS BULLETIN CAREFULLY AND SHARE IT WITH ALL APPROPRIATE CLINICAL AND ADMINISTRATIVE STAFF.

IMPORTANT ADDENDUM TO MASSHEALTH CONTINUITY OF CARE ALERT: CONTINUITY OF CARE FOR BEHAVIORAL HEALTH CARE

BEACON IS IMPLEMENTING A 90 DAY CONTINUITY OF CARE FOR BEHAVIORAL HEALTH SERVICES FOR MEMBERS TRANSITIONING INTO BEACON PARTNERED PLANS ON MARCH 1, 2018

CONTINUITY OF CARE

Starting March 1, 2018, new Accountable Care Organization (ACO) and Managed Care Organization (MCO) contracts will become effective to improve accountability and integration of care for MassHealth members. These new plans include:

- 13 new Accountable Care Partnership Plans;
- 3 new Primary Care Accountable Care Organizations (ACOs);
- 2 Managed Care Organizations (MCOs); and
- MassHealth's Primary Care Clinician (PCC) Plan.

Accountable Care Partnership Plans and MCOs have their own network of providers, including behavioral health providers. Primary Care ACOs and the PCC Plan use the MassHealth provider network for medical services and the Massachusetts Behavioral Health Partnership (MBHP) network for behavioral health services.

Members whose primary care provider (PCP) of record is affiliated with an ACO (either Accountable Care Partnership Plan or Primary Care ACO) received information about that ACO and were prospectively enrolled into that ACO. All prospective enrollments are effective on March 1, 2018, unless the member makes a different choice.

For more information on the MassHealth transition to ACOs and new plan options, visit <https://www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers> or <https://www.mass.gov/masshealth-health-plan-choices-starting-march-1-2018>



Beacon is working closely with health plans to ensure minimal disruption for both members and providers. This notice covers members moving into a Fallon Health, BMC Healthnet or Neighborhood Health Plan Accountable Care Partnership Plan or Managed Care Plan.

Continuity of Care:

Continuity of Care (COC) allows members to continue to see their current behavioral health provider, regardless if that provider is in network or out of network with Beacon, without a prior authorization. The COC period starts upon the effective date of the member’s enrollment into a new ACO plan.

Health Plans:

	FALLON HEALTH	BMC HEALTHNET	NEIGHBORHOOD HEALTH PLAN OF MA
ACCOUNTABLE CARE PLAN/ MCO	<i>Berkshire Collaborative Fallon 365 Care Wellforce Care Plan</i>	<i>Community Alliance Mercy Alliance Signature Alliance Southcoast Alliance BMC Healthnet MCO</i>	<i>My Care Family</i>

Continuity of Care Timeframes:

INPATIENT	<i>Beacon will honor any open active authorizations and complete reviews for medical necessity</i>
DIVERSIONARY	<i>90 Days for members with enrollment date of 3/1/18; 30 days for members with enrollment date 3/2/18 or later</i>
OUTPATIENT	<i>90 Days for members with enrollment date of 3/1/18; 30 days for members with enrollment date 3/2/18 or later</i>
CBHI	<i>90 days from member’s enrollment date regardless of the member’s enrollment date</i>
ABA	<i>90 days from member’s enrollment date regardless of the member’s enrollment date</i>



Open Authorizations:

If a member currently has an open active authorization, Beacon will honor that authorization. Beacon will request and transfer all open active authorizations for members moving between Fallon, BMCHP, NHP and MBHP from the health plans prior to March 1st, 2018. Providers should receive an authorization approval letter as confirmation once the authorization has been entered.

If a member's open authorization is not on file or if the member is transferring to a Beacon plan from Tufts Health Plan, a provider can call during the COC period, and an authorization will be entered.

Authorizations for outpatient, diversionary, CBHI and ABA services are not required during the COC period, but authorizations for inpatient services are still required.

Out of Network Providers:

Providers who are currently seeing a member, but are not in network with Beacon for the member's new ACO plan on member's enrollment date, can continue to provide services to the member and bill the member's new plan without a single case agreement during the COC period. If a provider desires to continue to see the member beyond the COC period a new SCA must be requested.

If a provider desires to come in network with Beacon, they can call the provider line at 781-496-4769 or visit <https://www.beaconhealthoptions.com/providers/becoming-a-beacon-provider/>.

If providers do not come in network with Beacon, a member can request in network referrals or appointment assistance.

Single case agreements will still be required for inpatient out of network providers.

Inpatient Providers:

If a member is inpatient and moving from Fallon, BMCHP or NHP, Beacon will transfer clinical information and open authorizations into the member's new file. If a continued stay is needed after the current authorized last day, inpatient providers will need to call Beacon for a continued stay review.

If a member is transferring from MBHP or Tufts, inpatient providers are required to call Beacon to request an authorization be entered. Beacon will need to know the date of admission, previous insurance carrier, and current authorized covered day in order to create precertification and honor the existing authorization. If continued stay is needed after the current authorized last day, inpatient providers will need to call Beacon for a continued stay review.

If a member is inpatient for Substance Use Disorder Services (DDAT, CSS, Detox) at the time of transition to the new ACO plan, then a new Notice of Admission will need to be entered via Eservices. The provider will then follow Beacon's normal process for continued stay review if additional days are needed.

Diversions Providers:

During the COC period, diversionary providers can provide diversionary services and bill the new plan without prior authorization regardless if the provider is in network with Beacon.

Diversions providers should call during the COC period if they are seeking additional units/days beyond the COC period, and a continued stay review for medical necessity criteria will be completed.

Outpatient Providers:

During the COC period, outpatient providers can provide outpatient services and bill the plan without prior authorizations regardless if the provider is in network with Beacon.

Initial Encounters will reset for members moving into a new health plan or into an ACO plan. The provider will not need an authorization until the 12 sessions are exhausted.

For providers that currently have an active outpatient authorization with an end date after the COC period and the member is moving from Fallon, BMCHP, NHP or MBHP, the authorization will be transferred into the member's new file.

If the member is moving from Tufts or an authorization approval letter was not received, please contact Beacon for authorization before the end of the COC period.

CBHI Providers:

CBHI Providers have received a separate notification outlining the CBHI continuity of care process.

Applied Behavioral Analysis (ABA) Providers:

During the 90-day COC period for ABA, providers can provide ABA services and bill the new plan without prior authorizations regardless if the provider is in network with Beacon.

For providers that currently have an active ABA authorization with an end date after the 90-day COC period and the member is moving from Fallon, BMCHP, NHP or MBHP, the authorization will be transferred into the member's new file.

If the member is moving from Tufts or an authorization approval letter was not received, please contact Beacon for authorization before the end of the COC period.

If current authorization expires before the end of the 90-day COC period, please contact Beacon for authorization.

ADDITIONAL INFORMATION

Visit www.beaconhealthstrategies.com and choose Provider, then Provider Tools, or email provider.relations@beaconhealthoptions.com for questions about claims, authorizations or other matters.

Beacon's Provider eServices

Save Time. Save Resources. Get Priority Service.

Check member eligibility & benefits. Submit claims & authorization requests; View status.

Register for **eServices** Now! <https://provider.beaconhs.com>