



# Fallon and You

More than just a business partnership

# Dedicated to providing excellent service

- Highly trained Fallon Health representative assigned to each provider
- Face-to-face service
- Individual or staff education sessions—during or after regular business hours
- Provider Relations Department
  - 1-866-275-3247, option 4
  - Monday–Friday, 8:30 a.m.–5:00 p.m.

# Agenda

- What is Fallon Health?
- What are you contracted for?
- Fallon plans and products
- Fallon member benefits
- Doing business with Fallon
- Online provider tools
- Fallon keeps you connected
- Questions

# What is Fallon Health



# About Fallon Health

- **Health care services organization**
- **More than 35 years experience**
- **Mission: *Making our communities healthy***
- **Consistently rated as one of the nation's top health plans**
- **A health plan that cares, we provide:**
  - Flexibility
  - Customer-focused benefits and services
  - Support



What are you  
contracted for?



# Your contract

## Commercial plans:

- Select Care
- Direct Care
- Fallon Preferred Care
- Steward Community Care
- Tiered Choice
  - Flexibility
  - Customer-focused benefits and services
  - Support

# Your contract

## Individual plans:

- Fallon Connector QHP options
  - Direct Care
  - Fallon Preferred Care
  - Steward Community Care
- Community Care (a ConnectorCare plan)
- MassHealth
- Fallon Total Care



# Your contract

## Medicare plans:

- Fallon Senior Plan HMO
- Fallon Senior Plan HMO-POS
- Fallon Senior Plan Premier HMO
- Fallon Senior Plan Premier Preferred PPO
- Fallon Senior Plan Medicare Supplement
- Fallon Companion Care
- NaviCare HMO SNP
- NaviCare SCO
- Fallon Total Care
- Summit ElderCare

# Your contract

## Customized employer group plans:

- Harrington Advantage PPO
- The Employee Advantage
  - Tier 1 | Tier 2
- The City of Worcester Advantage—Direct Plan
- The City of Worcester Advantage—Advantage Plan
  - Tier 1 | Tier 2
- The Advantage Plan—Hanover
  - Tier 1 | Tier 2
- The Advantage Plan—EMC<sup>2</sup>
  - Tier 1 | Tier 2

# Fallon plans and products



# Direct Care

- Limited HMO provider network = high-performing network
- 12% premium savings compared to Select Care
- Members must choose a PCP from the Direct Care network
- Members must receive PCP referrals for specialty care within the Direct Care network
- To provide services to a member, you must be a Direct Care contracted provider
- Members are eligible for the Peace of Mind Program™
- Deductible and copayment plans available

*This plan provides access to a network that is smaller than Select Care. In this plan, members have access to network benefits only from the providers in Direct Care. Please utilize the provider look-up tool at [fallonhealth.org/provider](http://fallonhealth.org/provider) to determine which providers are included in Direct Care.*



# Peace of Mind Program™

- Referral program
- Allows Fallon providers to refer Direct Care patients for specialty care outside the Direct Care network of providers
- Patients receive specialty care at select Boston medical centers
  - Beth Israel Deaconess Medical Center
  - Brigham and Women's Hospital
  - Children's Hospital
  - Dana-Farber Cancer Institute
  - Massachusetts General Hospital
- Eligible members
  - Direct Care
  - The City of Worcester Advantage—Direct
  - Direct Care plans offered through the Connector



# Peace of Mind Program™

## **Prior authorization (PA) process for services**

- Member must have seen a Direct Care in-plan specialist—in the same discipline as the Peace of Mind specialist—for the same condition within the past three months.
- Member may then request a Peace of Mind Program PA from their PCP and Fallon—to one of the five Peace of Mind facilities.
- The specialty services the member is seeking must be Fallon-covered services, ordinarily available in the patient's network.
- Member's PCP must request a PA from Fallon for the member to see a Peace of Mind Program specialist. Referring physician may direct the member to call Fallon Health Customer Service for assistance at the phone number on their ID card.
- Member will receive an approval or denial letter from Fallon.

# Select Care

- Expansive HMO network
- Includes all Direct Care providers
- Members must choose a PCP from the Select Care network
- Members must receive PCP referrals for specialty care within the Select Care network
- To provide services to a Select Care member, you must be a Select Care contracted provider
- Deductible and copayment plans available

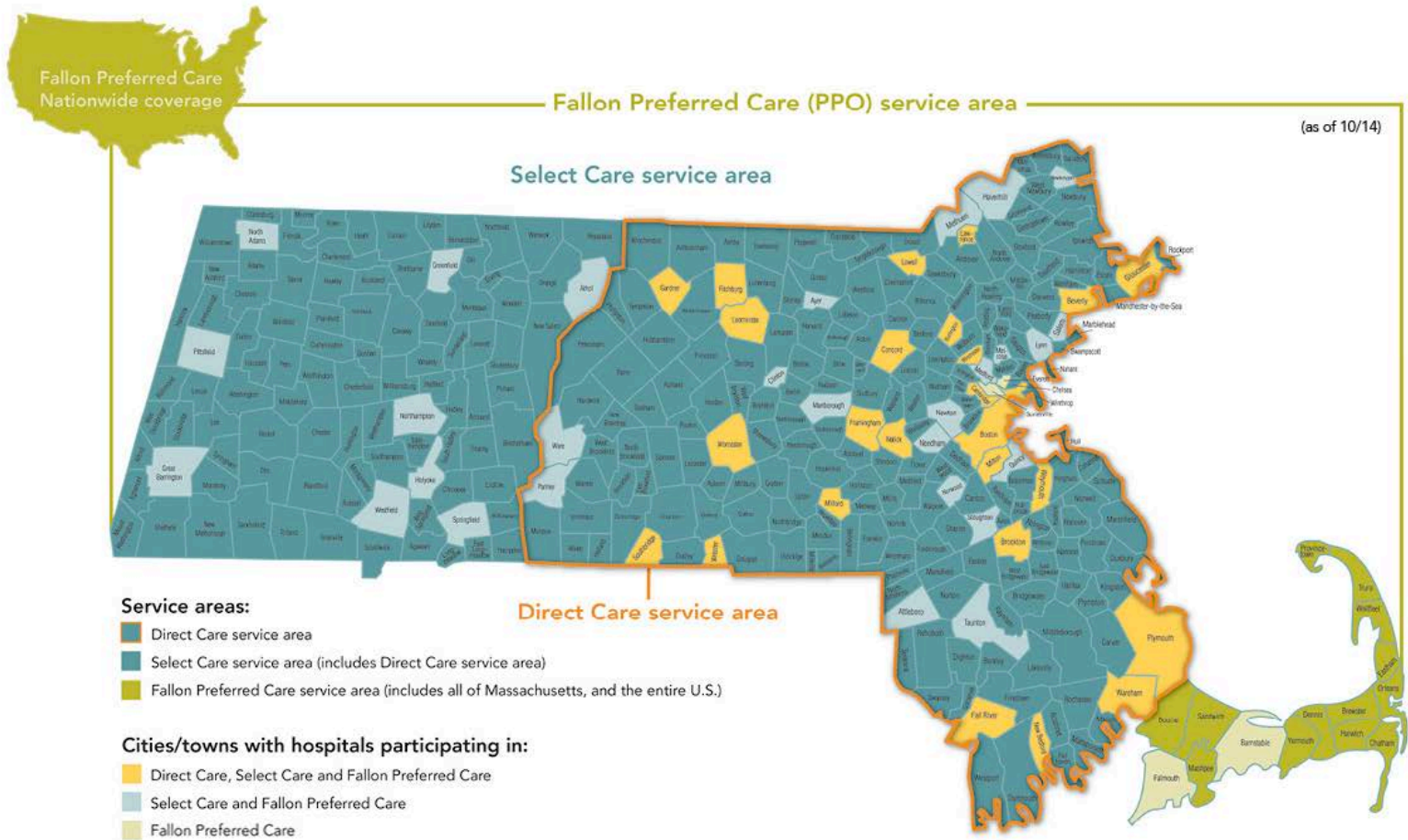
# Fallon Preferred Care (PPO)

- Offers both in- and out-of-network benefits
- Members may receive care from any provider they wish to see
- Members do not have to choose a PCP
- PCP referrals are not required for specialty care
- Access to more than 755,000 “in-network” providers
  - Fallon Preferred Care network
  - Nationwide PHCS/MultiPlan networks
- Care from an in-network provider = fewer out-of-pocket costs
- Non-contracted providers can provide out-of-network services
- Deductible and copayment plans available





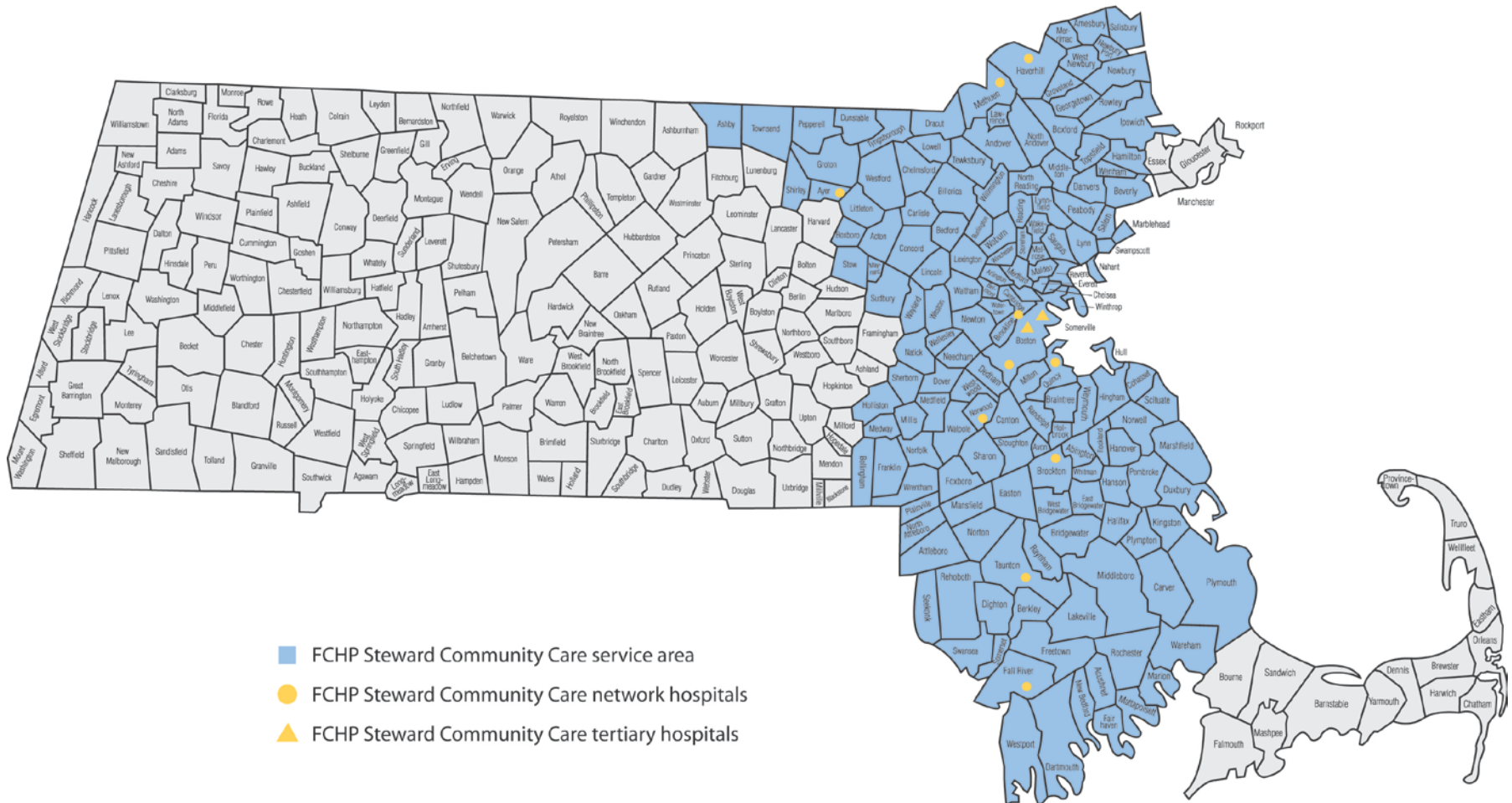
# Direct Care, Select Care and Preferred Care service areas



# Steward Community Care

- Limited HMO network plan in Eastern Massachusetts
- Includes all hospitals and providers contracted with the Steward Health Care System network
- Medically necessary services not available at a Fallon Steward Community Care facility, may be provided, with a plan PA, at these hospitals
  - Brigham and Women's Hospital
  - Massachusetts General Hospital

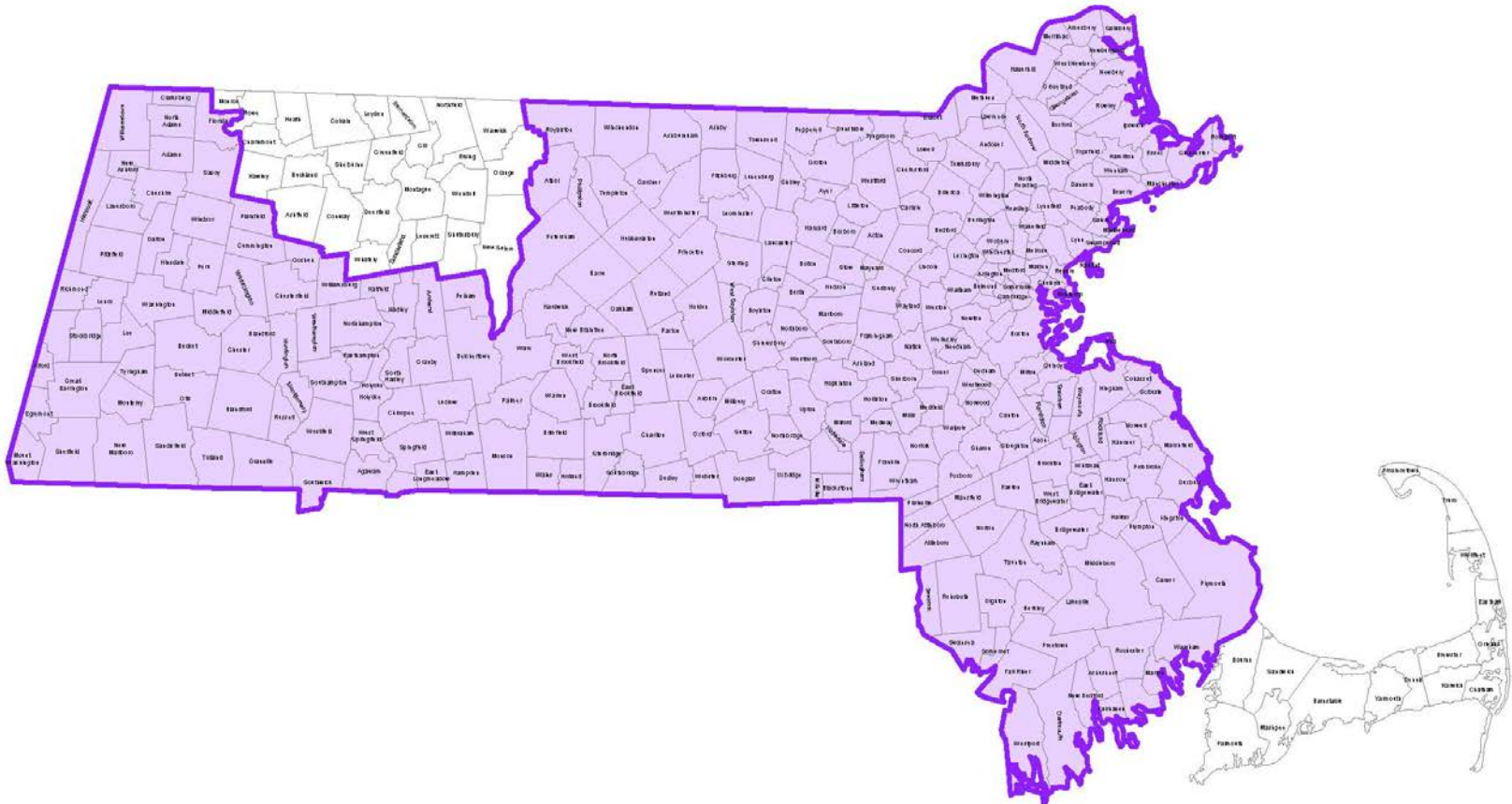
# Steward Community Care service area



# Tiered Choice

- Two plan-design options
- Three-tier network
- Providers tiered on total medical expense, not unit cost
- Currently available throughout Massachusetts, with the exclusion of the following counties: Barnstable, Dukes, Franklin and Nantucket

# Tiered Choice service area



# Advantage plans

## **The Employee Advantage (UMass Memorial Health Care)**

- Tiered network based on Select Care
- Providers categorized into one of two tiers

## **The City of Worcester Advantage**

- Two plans: Direct and Advantage
- Direct plan based on Direct Care
  - Members eligible for Peace of Mind Program™
- Advantage plan based on Select Care
  - Providers categorized into one of two tiers

## **Harrington Advantage**

- In- and out-of-network benefits



# Advantage plans

## **Hanover—The Advantage Plan**

- Tiered network based on Select Care
- Providers categorized into one of two tiers

## **EMC<sup>2</sup>—The Advantage Plan**

- Tiered network based on Select Care
- Providers categorized into one of two tiers

# MassHealth

## Central region

- Three benefit plans
  - Standard/CommonHealth
  - Family Assistance
  - CarePlus—launched in 2014
- Enrollees under age 65 who live in central region
  - All of Worcester County
  - Parts of Franklin, Hampden, Middlesex and Norfolk counties

## Northern region

- One benefit plan
  - CarePlus
- Enrollees under age 65 who live in the northern region
  - Essex County and parts of Middlesex County



# MassHealth

## **MassHealth members must**

- Choose a PCP from the Fallon MassHealth provider network
- Receive PCP referrals for specialty care—within the Fallon MassHealth network of providers

## **MassHealth determines**

- MassHealth enrollee eligibility
- MCO member enrollment and disenrollment

## **Managed Care Organizations (MCOs)**

- Receive daily electronic membership feeds from MassHealth

# MassHealth

Fallon provides all the same benefits (see two exceptions below) the member would receive under the State Primary Care Clinician plan.

- Dental services provided by MassHealth
- Exceptions
  - Emergency-related dental services
  - Oral surgery performed in an outpatient setting
  - Medically necessary to treat a medical condition
- Eye examinations and vision training are provided by Fallon
- Exceptions
  - Eyeglasses
  - Eyeglass lenses
  - Contact lenses
  - Provided by MassHealth when medically necessary

# MassHealth mandated benefits

## Fluoride varnish coverage

- Primarily intended for children up to age 3
- Allowed for children up to age 21 who don't have access to a dentist
- Procedure occurs during a pediatric preventive care visit
- Providers are required to complete a MassHealth-approved training program and maintain proof of training completion

## Special formula (enteral-nutrition products)

- MassHealth and MCOs have primary responsibility for payment
- Medically necessary special formula not covered by the Mass. Dept. of Public Health's Women, Infants and Children (WIC) nutrition program
- Standardized process for requesting PAs for these products
- Special formula can be obtained through Fallon's pharmacy network, or the following:
  - Byram Healthcare
  - Companion Health Services
  - Denmark's Home Medical
  - New England Home Therapies
  - Praxair
  - Prime Care Services

# MassHealth

- Fallon provides medical, pharmaceutical and behavioral health coverage
- Fallon provides “extra” benefits not provided by MassHealth
  - Care management and social care services
  - Nurse care line
  - Oh Baby!—free car seat, breast pump, home safety kit and reimbursement for childbirth classes—for expectant parents
  - Naturally Well—discounts on chiropractic care, acupuncture, massage therapy services, vitamins and fitness equipment
  - Quit to Win—tobacco cessation program

*Note:* All MassHealth member benefits are included in our *Provider Manual* available at [fallonhealth.org/providers](http://fallonhealth.org/providers).

# MassHealth

## Fallon's Behavioral Health Partner is Beacon Health Strategies

- Phone: 1-888-249-0478
- Fax: 1-781-994-7600
- TTY: 1-781-994-7660
- Web: [beaconhealthstrategies.com](http://beaconhealthstrategies.com)

*Special note:* MassHealth and MCOs offer services through Children's Behavioral Health Initiative (CBHI)

- [mass.gov/masshealth/childbehavioralhealth](http://mass.gov/masshealth/childbehavioralhealth)

*Website includes information on performance specifications, medically necessary criteria, presentations from CBHI and announcements about CBHI-related events.*

# Fallon MassHealth member grievances

## Members can file a grievance if

- Not satisfied with an action taken, or inaction, by Fallon
- Not satisfied with the quality of care or services received, including, but not limited to, the lack of courtesy by health care providers

## To file a grievance

- Call the Fallon MassHealth Customer Service Department
  - 1-800-341-4848
- Fallon Member Appeals & Grievances Department
  - 1-800-333-2535
- Mail letter to Fallon Health
- Speak to Fallon representative in person
- Send email to [grievance@fchp.org](mailto:grievance@fchp.org)
- Fax detailed letter to 1-508-755-7393
- Have personal representative/appointed designee file grievance (representative/appointed designee must be on file with Fallon)

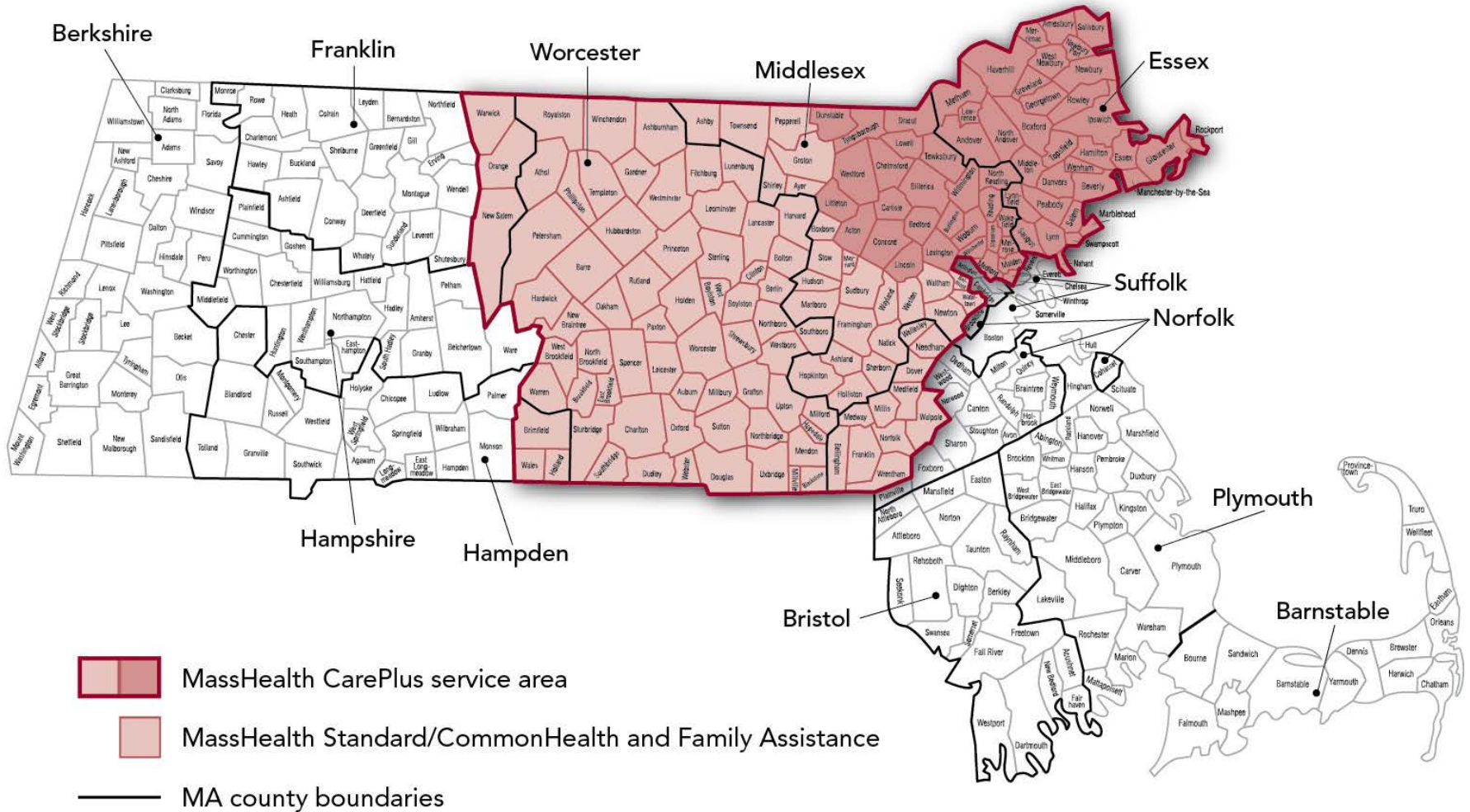
# Fallon MassHealth member appeals

## Members can file an appeal if:

- Fallon denied or decided to provide limited authorization for a service requested by the member's health care provider.
- Fallon reduced, suspended or terminated a previously authorized service
- Fallon denied, in whole or in part, payment for a Fallon covered service due to service coverage issues
- Fallon did not decide a standard or expedited service authorization request within the required timeframes
- They were unable to obtain health care services within the time frames as described in their *Member Handbook*

Members, or their appointed designees, may file an appeal using the same options as they would file a grievance.

# MassHealth service area





# Connector Qualified Health Plan options

## QHP options

- Three plans
  - Direct Care
  - Select Care
  - Steward Community Care
- Includes all network plan providers
- Service area mirrors regions in Direct Care and Select Care
  - Closely mirrors Steward Community Care service area

## QHP members

- ID card will specify network plan
- Must choose an in-network PCP
- Must receive PCP referrals for specialty care—within their plan's provider network
- Direct Care members are eligible for the Peace of Mind Program

# New! Community Care

- Offered through the Health Connector's ConnectorCare program as an individual plan
- A low-cost, micro-network product, available 1/1/2015
- Developed by Fallon Health with Reliant Medical Group and Harrington HealthCare
- Targeted at the subsidy-eligible <65 market

# New! Community Care

The network was built around Reliant Medical Group and Harrington HealthCare, supplemented with selected additional providers:

- **Community hospitals include**
  - St. Vincent Hospital, Harrington, HealthAlliance, Clinton, Marlborough, Milford
- **Tertiary Care and some Specialty Care**
  - UMass Memorial Medical Center
  - UMass Memorial specialists
  - All services rendered at UMASS require Prior Authorization

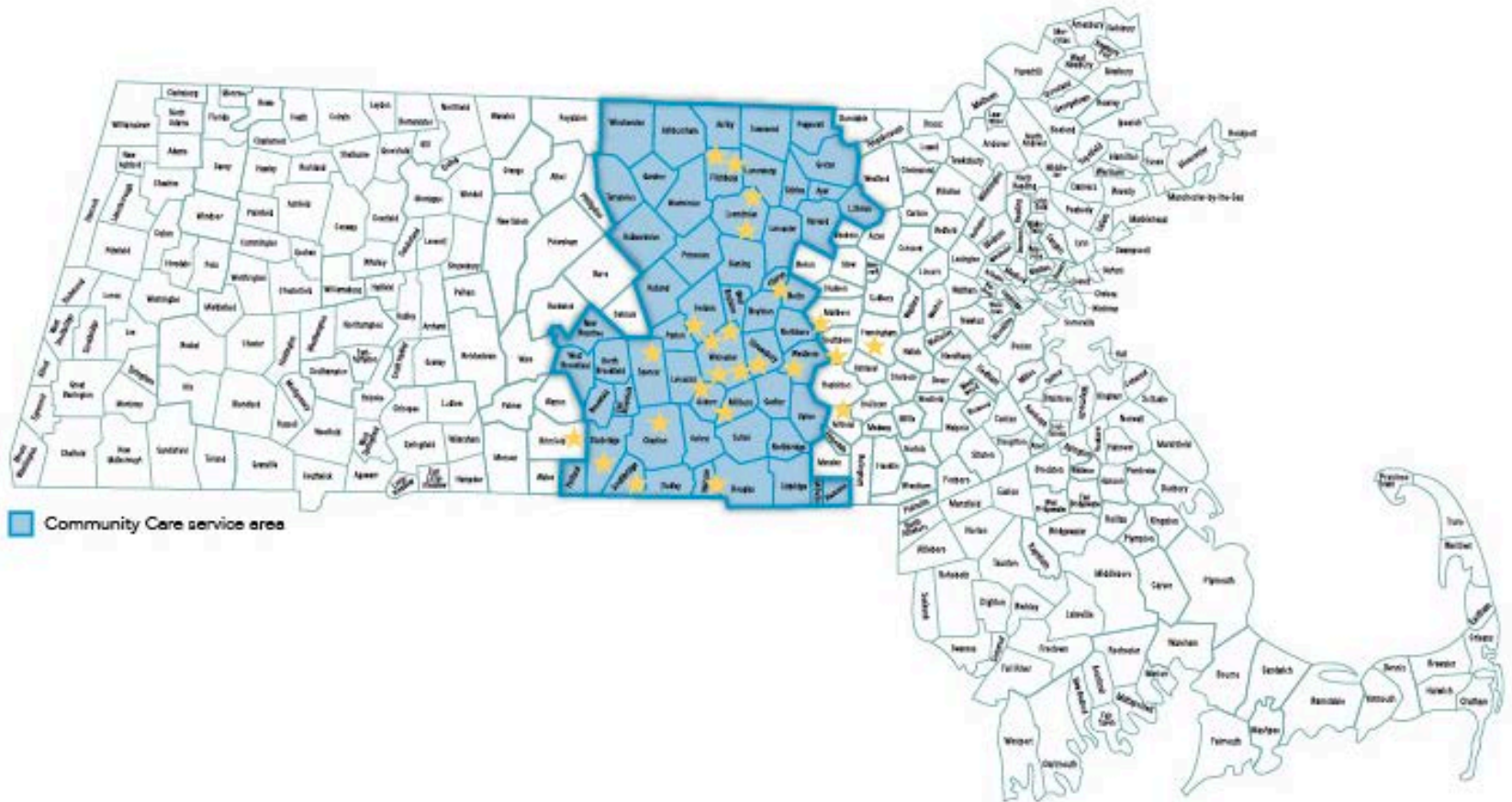
## New! Community Care

- Members of Community Care must choose a PCP from the Community Care network and must receive PCP referrals for specialty care within the Community Care network of providers.
- For all office and facility-based services identified in the Fallon Health Provider Manual, the PCP or specialist must obtain prior plan authorization, and the facility must provide notification to Fallon.
- With a prior authorization from the plan, members may receive medically necessary services that are not available at a Community Care facility from UMass Memorial for tertiary care.
- There is no Peace of Mind Program benefit with this plan.
- \$0 annual wellness visits are included with this plan.



# New! Community Care service area

The Community Care service area includes most of Worcester county, and parts of Hampden and Middlesex counties



# Fallon Senior Plan™ HMO

## Medicare Advantage plan

- More coverage than Original Medicare alone
- Plans with or without Medicare Part D prescription drug coverage
- In-network provider listing: [fallonhealth.org/providers](http://fallonhealth.org/providers)

## Eligible members

- Individual consumers
- Medicare-eligible
- Live in the service area
  - Barnstable, Bristol, Essex, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk and Worcester counties
  - Parts of Franklin County
- Must choose a PCP from the Fallon Senior Plan HMO network
- Receive PCP referrals for specialty care within provider network

# Fallon Senior Plan HMO-POS

- Medicare Advantage plans
- Members may receive certain covered services out-of-network—some at the same cost-sharing rate as in-network services
- Two plans are available:
  - Saver Enhanced Rx HMO-POS is available in all of Worcester County and parts of Franklin County (01344, 01355, 01364, 01378, 01379, 01380)
  - Plus Enhanced Rx HMO-POS is available in Hampden and Hampshire counties
- Available to individual consumers who are Medicare-eligible and live in the service area
- Members must:
  - Choose a PCP from the Fallon Senior Plan HMO-POS provider network
  - Receive PCP referrals for both in- and out-of-network specialty care
  - Receive out-of-network care from providers who accept Medicare and accept the member as a patient

# Fallon Senior Plan HMO coverage options by county

## **Plan options in Worcester County and parts of Franklin County:**

- Fallon Senior Plan Super Saver Rx
- Fallon Senior Plan Saver (No Rx)
- Fallon Senior Plan Standard (No Rx)
- Fallon Senior Plan Standard Enhanced Rx
- Fallon Senior Plan Plus Enhanced Rx
- Fallon Senior Plan Saver Enhanced Rx  
HMO-POS

## **Plan options in Barnstable, Bristol, Essex, Middlesex, Norfolk, Plymouth and Suffolk counties:**

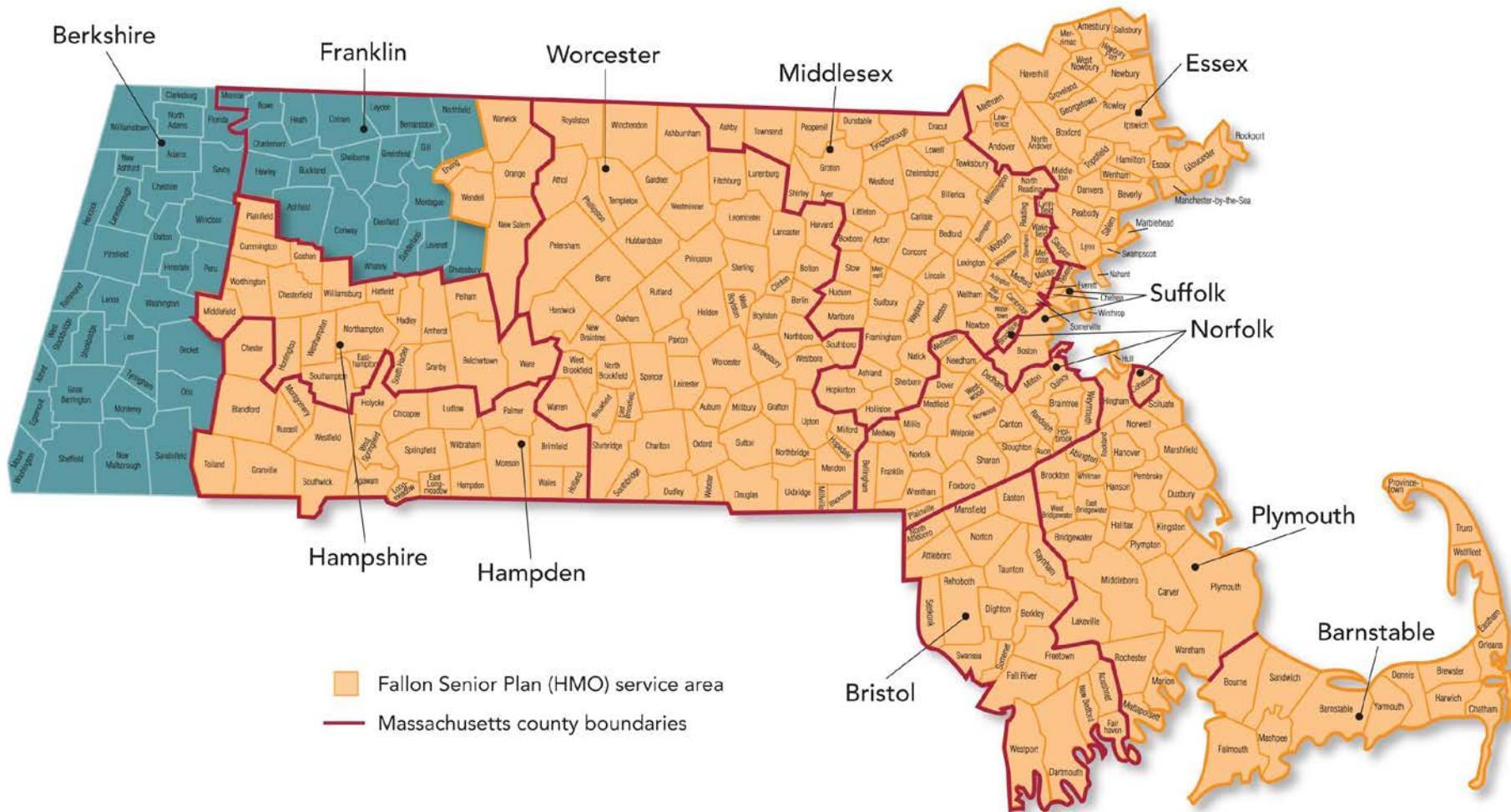
- Fallon Senior Plan Super Saver Rx
- Fallon Senior Plan Saver (No Rx)
- Fallon Senior Plan Saver Enhanced Rx
- Fallon Senior Plan Plus Enhanced Rx

## **Plan options in Hampden and Hampshire counties:**

- Fallon Senior Plan Super Saver Rx
- Fallon Senior Plan Saver (No Rx)
- Fallon Senior Plan Saver Enhanced Rx
- Fallon Senior Plan Plus Enhanced Rx HMO-POS



# Fallon Senior Plan HMO service area



# Fallon Senior Plan retiree group options

## Two plan options

- Fallon Senior Plan Premier HMO
- Fallon Senior Plan Premier Preferred PPO

## Plan details

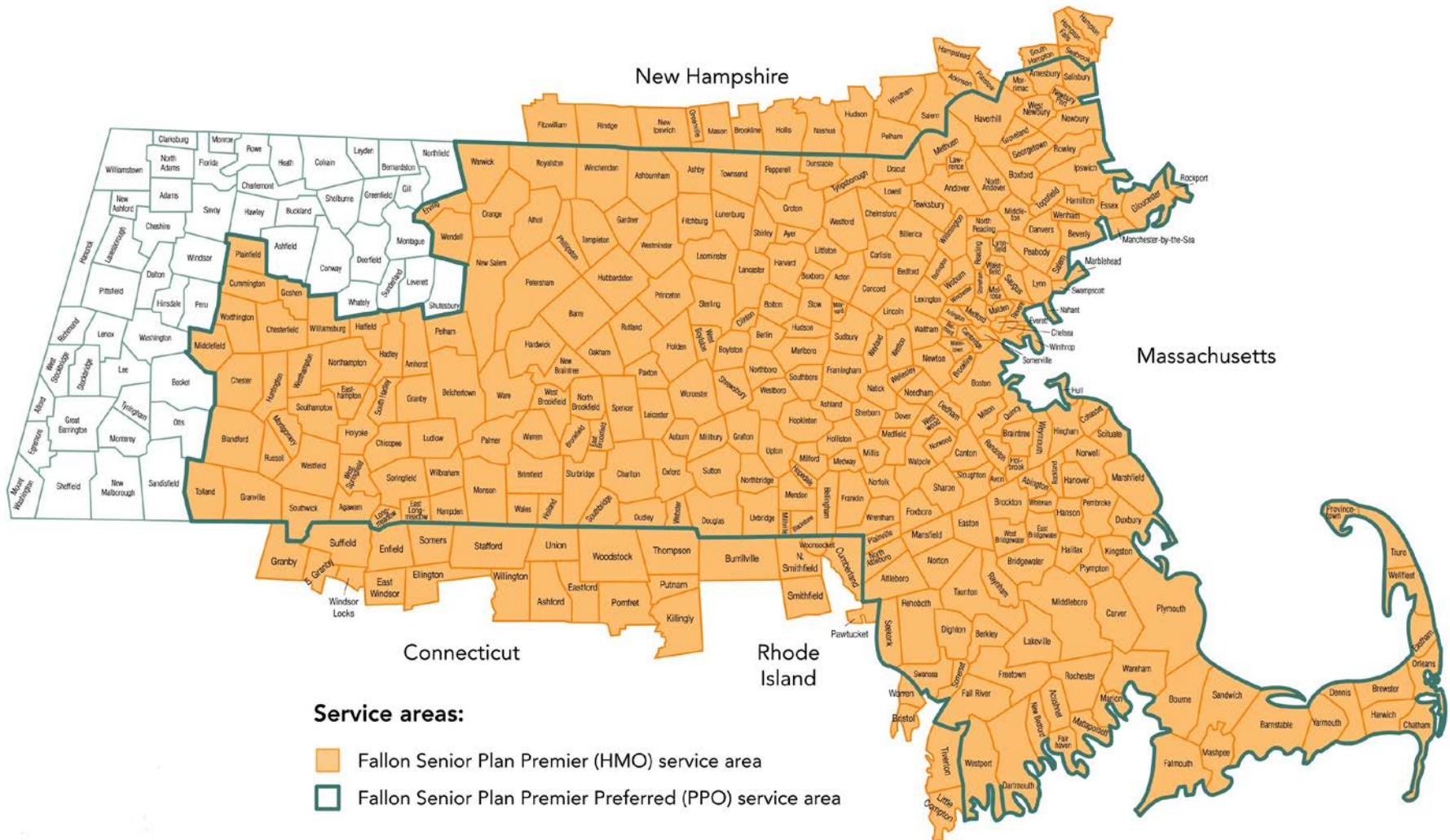
- Medicare Advantage plans
- Comprehensive prescription drug coverage included
- In-network provider listing: [fallonhealth.org/providers](http://fallonhealth.org/providers)

## Eligible members

- Medicare-eligible retirees
- Receive coverage through employer group
- Must choose a PCP from the Fallon Senior Plan Premier HMO network
- Must receive PCP referrals for specialty care within their plan's network
- PPO members may see any provider who accepts Medicare
  - No referrals needed
  - \$500 deductible and higher cost-sharing for out-of-network services

*Please note:* The Fallon Senior PPO network differs from the Commercial PPO network.

# Fallon Senior Plan Group service area



# Fallon Senior Plan Medicare supplement

## Two plan options

- Fallon Senior Plan Medicare Supplement Core
- Fallon Senior Plan Medicare Supplement 1

## Plan details

- Flexible Medigap plans
- All standard benefits covered
- Medicare Supplement Core: Part A and B deductibles must be reached before coverage is \$0 to the member

## Eligible members

- Individual consumers
- Medicare-eligible
- Not required to choose a PCP
- No network restrictions



# Medicare supplement service area



# Fallon Companion Care

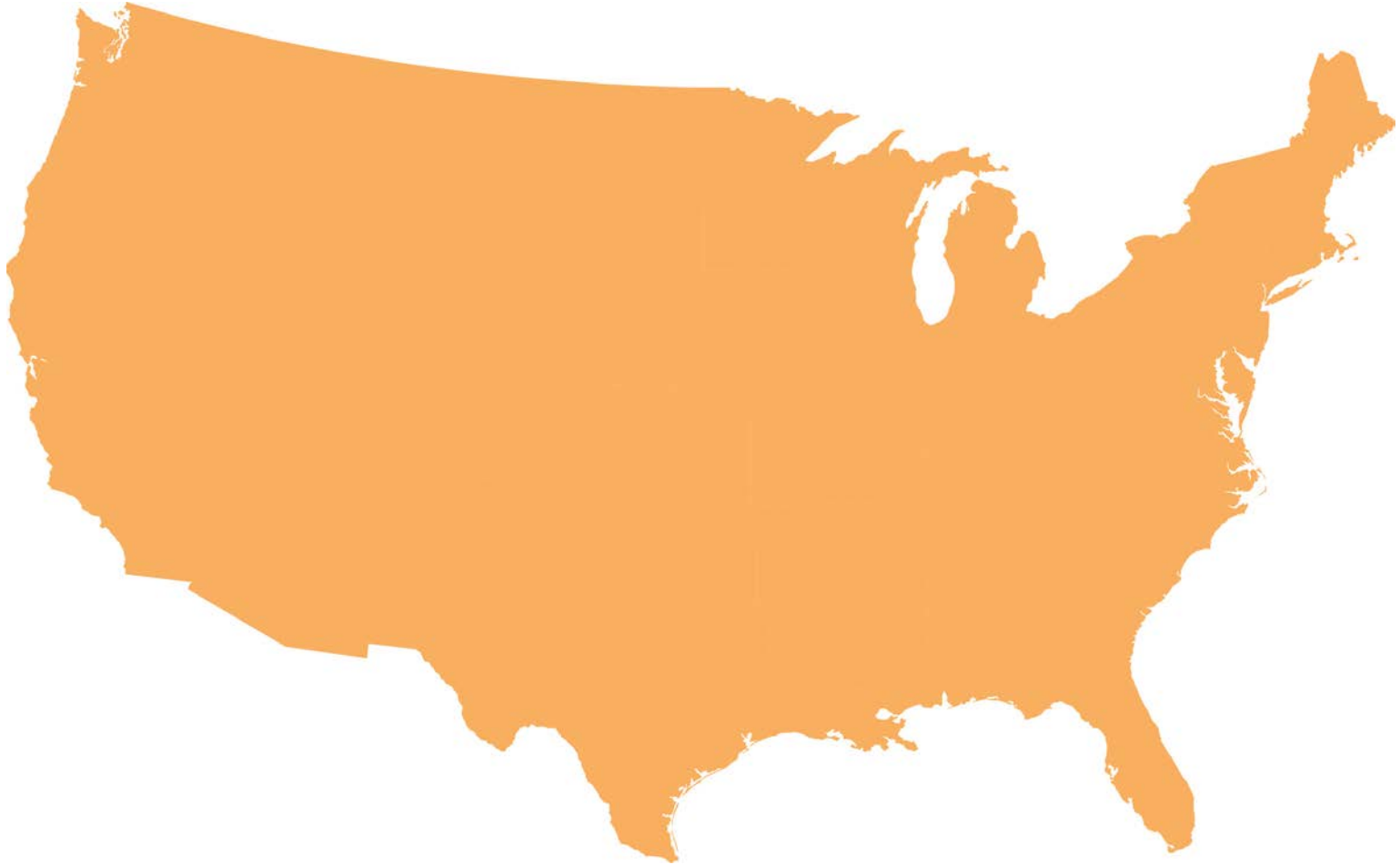
## Plan options and features

- Prescription drug coverage plan option
- No prescription drug coverage plan option
- No network restrictions
- Pays for members deductibles, copayments and coinsurance

## Eligible members

- Receive coverage through an employer
- Medicare-eligible
- Not required to choose a PCP
- Do not need referrals for specialty care

# Fallon Companion Care service area



# NaviCare®

## Two plan options

- Medicare Advantage HMO Special Needs Plan (SNP)
- Senior Care Options (SCO) program

## Plan details

- Health care program for low-income seniors age 65 and older
- Combines health care services covered through MassHealth Standard and Medicare Parts A, B and D (Rx)—and more
- Authorize, deliver and coordinate all services
  - Primary, acute and specialty care, community and institutional long-term care, behavioral health, medical transportation, Rx coverage and supportive care at home

## Eligible members

- Must choose a PCP from the NaviCare network of providers
- Receive PCP referrals for specialty care—within provider network
- Do not pay coinsurance or copayments



# NaviCare primary care team

The individuals below work together to make sure that NaviCare members get all the care they need.

Team member	Responsibilities
Primary care physician	<ul style="list-style-type: none"> <li>• Directs care and provides routine medical services</li> <li>• Refers member for specialty care</li> <li>• Orders prescriptions, supplies, equipment and home services</li> </ul>
Navigator	<ul style="list-style-type: none"> <li>• Organizes member benefits and services</li> <li>• Advocates for the member to receive needed care</li> <li>• Helps the member make medical appointments and arranges rides</li> <li>• Visits the member at home</li> </ul>
Behavioral health clinician (as needed)	<ul style="list-style-type: none"> <li>• Visits member and assesses emotional and psychological needs</li> <li>• Facilitates short-term counseling</li> <li>• Works with behavioral health provider to coordinate services</li> </ul>
Nurse case manager or advanced practitioner	<ul style="list-style-type: none"> <li>• Assesses clinical needs</li> <li>• Teaches member about relevant conditions and medications</li> <li>• Helps ensure that the member gets needed care in a hospital or health care facility and upon discharge</li> </ul>
Facility liaison (for members living in assisted-living, long-term care or rest-home settings)	<ul style="list-style-type: none"> <li>• Connects the NaviCare primary care team with the care team at the member's facility</li> </ul>
Geriatric support service coordinator (for members who live at home)	<ul style="list-style-type: none"> <li>• Evaluates needs for services to help member remain at home</li> <li>• Coordinates those services for member</li> <li>• Helps member with necessary paperwork</li> <li>• Connects member with resources for elders</li> </ul>

# NaviCare® HMO SNP/SCO

## **NaviCare HMO SNP member eligibility**

- 65 years or older
- Live in the service area
- Have MassHealth Standard
- Have Medicare Parts A & B

## **NaviCare SCO member eligibility**

- 65 years or older
- Live in the service area
- Have MassHealth Standard

**NaviCare accepts enrollments throughout the year.  
Members can enroll or disenroll at any time.**

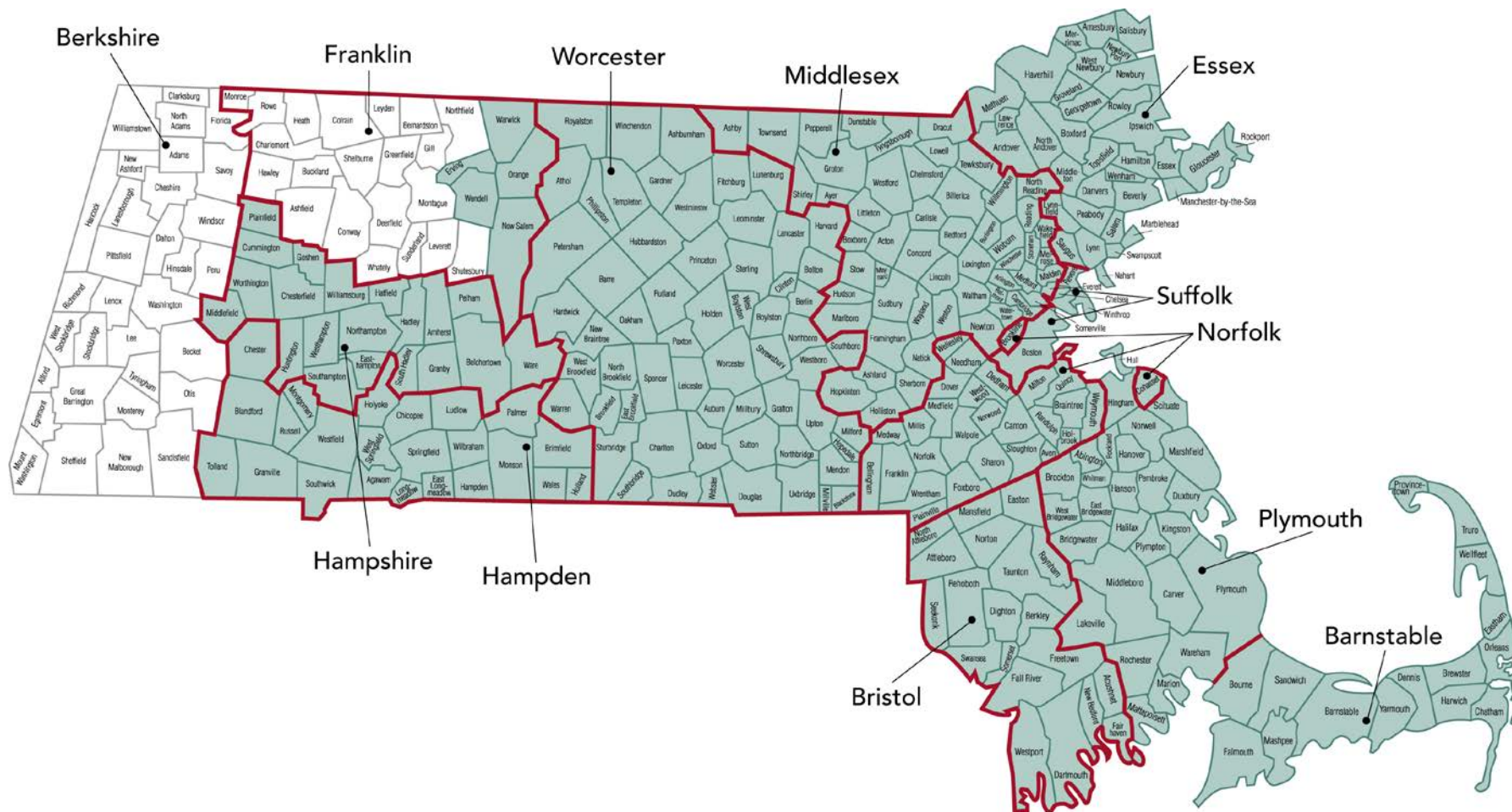
# What's covered?



- **No premiums**
- **No copayments**
- **No coinsurance**

- ✓ Annual wellness exam
- ✓ Certain over-the-counter and prescription drugs
- ✓ Transportation to medical appointments, with plan authorization
- ✓ Vision services and eyeglasses
- ✓ Hearing services and hearing aids including batteries
- ✓ Dental care and dentures
- ✓ Mental health services
- ✓ Chiropractic services
- ✓ Care management and social services
- ✓ Home visits from Primary Care Team
- ✓ Adult day health
- ✓ Community-based and personal care services

# NaviCare service area



# Summit ElderCare®

## Program of All-Inclusive Care for the Elderly (PACE)

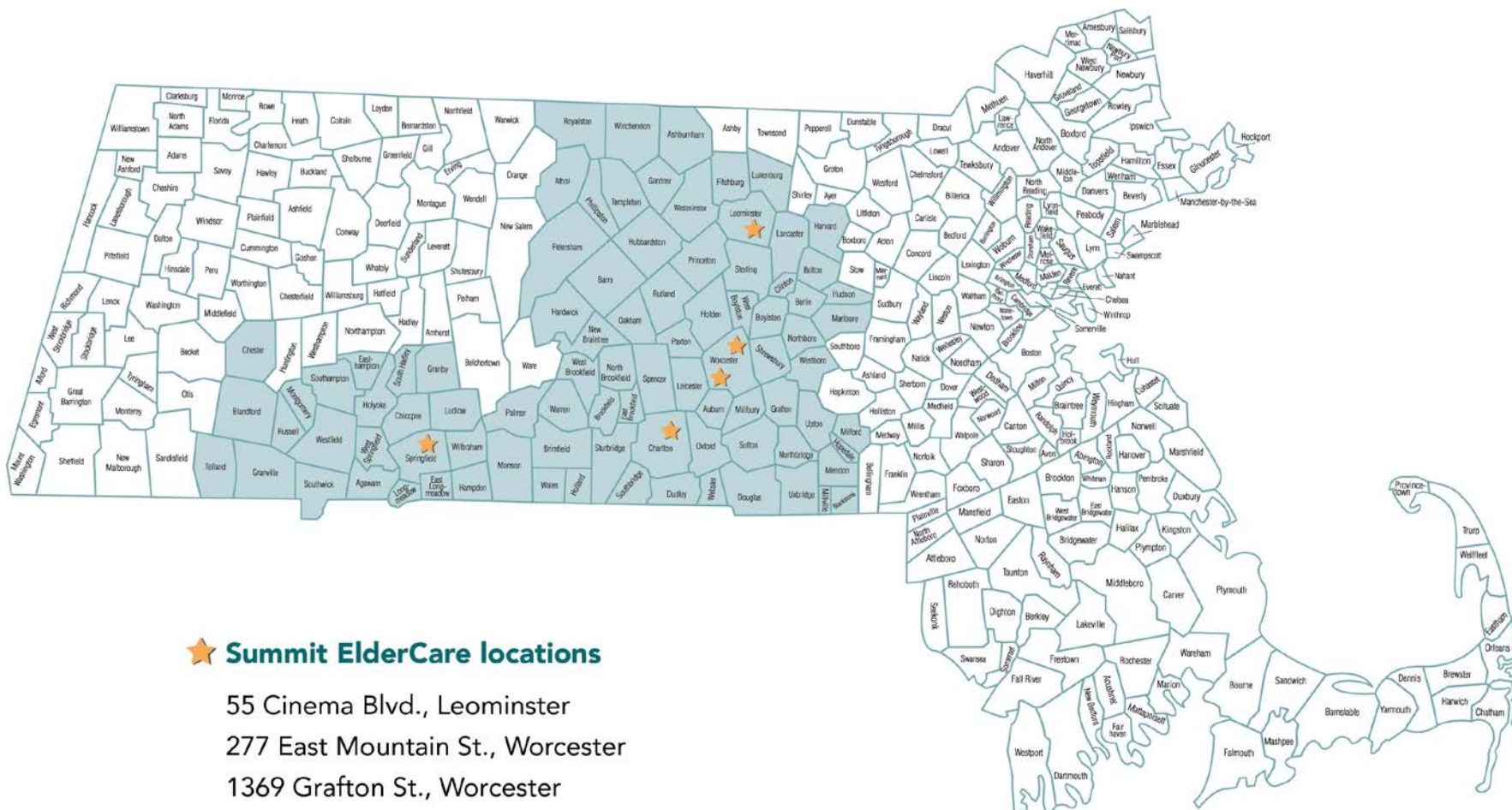
- Innovative choice in health care
- Alternative to nursing home living
- Interdisciplinary geriatric care team develops individualized plans for each participant
  - Assists participants with living healthy, productive lives in the comfort of a home-based setting
  - Develops a plan of care
    - Works with the participant's family members and caregivers
    - Considers health, family and personal situations

## Eligible participants

- Age 55+
- Live in service area
- Nursing home certifiable
- Deemed safe in the community



# Summit ElderCare® service area



## ★ Summit ElderCare locations

55 Cinema Blvd., Leominster  
 277 East Mountain St., Worcester  
 1369 Grafton St., Worcester  
 88 Masonic Home Road, Charlton  
 101 Wason Ave., Springfield

# Fallon Total Care<sup>sm</sup>

## A One-Care plan

- Coordinated medical, prescription and support care
- Provides benefits covered by MassHealth Standard and Medicare Parts A, B and D (Rx)
- Members do not pay copayments or coinsurance

## Eligible members

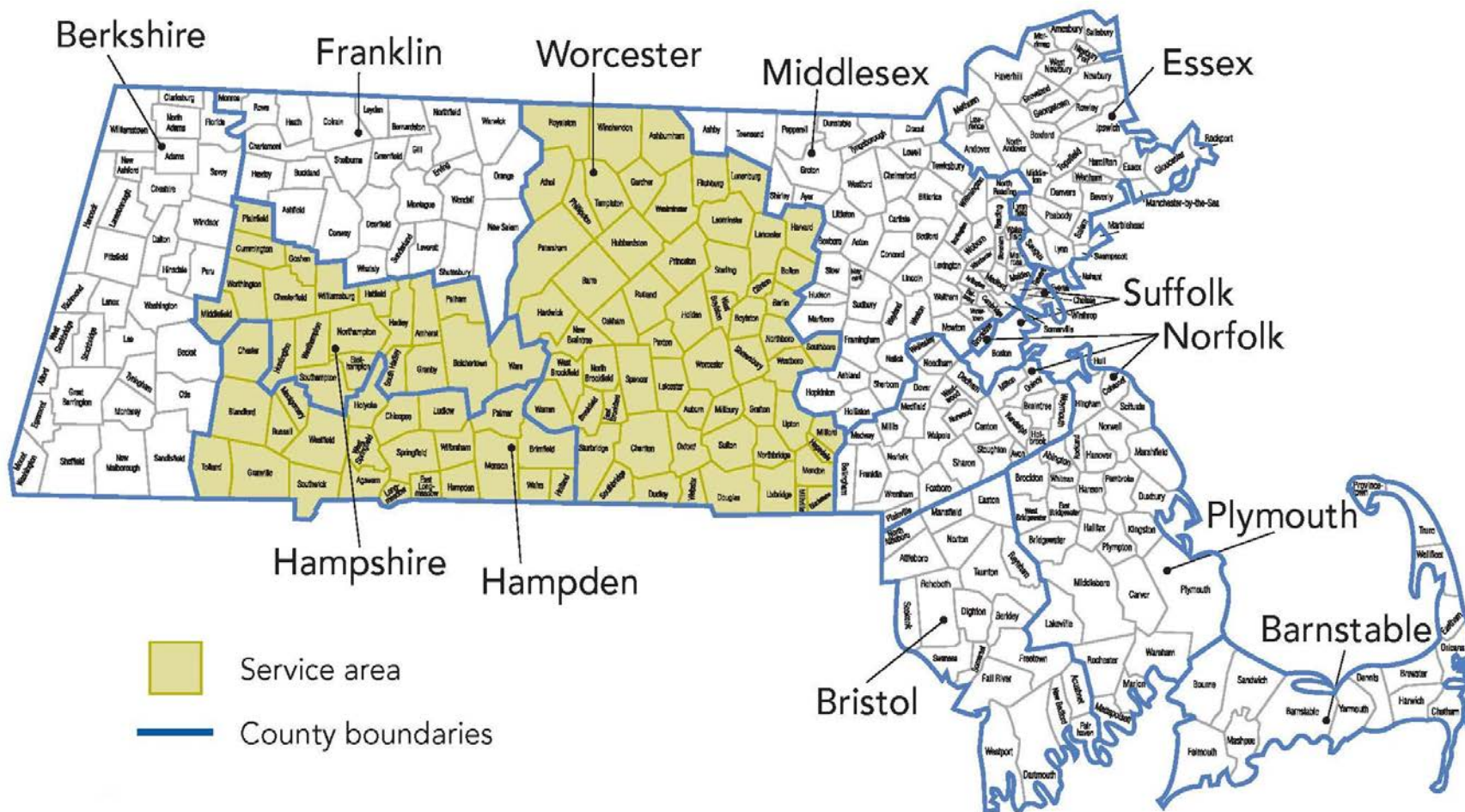
- Individuals ages 21-64
- Eligible for both Medicare and MassHealth Standard or CommonHealth
- Live in the service area
  - Hampden, Hampshire and Worcester counties
- Must choose a PCP from the network of providers
- Receive PCP referrals for specialty care—within the provider network

# Fallon Total Care Model of Care





# Fallon Total Care service area



# Fallon member benefits



# Member benefits and healthy extras

## It Fits!

- Most-flexible fitness benefit in the state
- \$400/family or \$200/individual annually
  - Gym memberships—to a gym of choice
  - Fitness, dance, swim classes
  - School and town sports
  - Ski passes and lift tickets
  - Weight Watchers®
  - New home cardiovascular fitness equipment

## The Healthy Health Plan

- Up to \$200 for being—and becoming—healthy
- Subscribers and their adult dependents

## Fallon SmartShopper

- An incentive program created to help Fallon Health members save money on their health care choices.
- Meets ACA and Massachusetts requirements to provide real time cost-transparency information to members

*Program eligibility and benefits may vary by employer, plan and product.*



# Member benefits and healthy extras

## Oh Baby!

- For expecting parents
- Free car seat, portable electric breast pump, prenatal vitamins & more
- Reimbursement for childbirth classes

## Naturally Well

- Discounts on chiropractic care, acupuncture and massage therapy services, vitamins and fitness equipment

## SilverSneakers®

- Free gym membership
- For members of Fallon Senior Plan and NaviCare only

## Eyewear

- Discounts on prescription glasses, contact lenses, nonprescription sunglasses and laser vision correction
- EyeMed network of contracted providers

*Program eligibility and benefits may vary by employer, plan and product*

# EyeMed Vision Care®

## **Manages Fallon's vision and eyewear benefits**

- Processes claims for
  - Optometrists
  - Optical shops
  - Routine ophthalmology
- All other claims go to Fallon

## **EyeMed Provider Relations**

- 1-888-581-3648
- Option 1

# Member self-referral

## Within product network

- OB/GYN visits
  - Annual preventive gynecological visit
  - Medically necessary evaluations and treatment
  - Obstetrical visits
- Mammogram
- Oral surgery (impacted teeth only)
- Routine eye exam
  - Once every 12 months
  - Services through EyeMed Vision Care®
- Outpatient mental health/substance abuse
  - Visits 1-8
  - Beacon Health Strategies (1-888-421-8861)

# Doing business with Fallon



# Fallon credentialing process

## HealthCare Administrative Solutions, Inc. (HCAS) member

- Fax HCAS enrollment form\*, W-9 and/or signature page
  - 1-508-368-9902
  - Form available at [hcasma.org](http://hcasma.org)
    - “Credentialing Resources”  
“HCAS Provider Enrollment Form”  
under Resource Document heading
- If no existing Council for Affordable Quality Healthcare (CAQH) ID number, one will be mailed within 5-10 business days
- Register and login to CAQH at [caqh.org](http://caqh.org) to complete the Integrated Massachusetts Application (IMA)
- For questions or assistance with IMA process call CAQH at 1-888-599-1771

*\* Enrollment form must be completed by contract administrator.*



# PCP referral procedure

PCPs provide member referral for in-network specialty care—if patient requires services outside of the PCP's scope of practice

## PCP referral process

- Refer member to specialist in the member's plan network
- Contact the specialist by telephone, fax, mail or script
- Provide member's name, NPI number, referral reason and number of visits
- With specialist, document referral in member's medical records
  - Fallon reserves the right to audit medical records to ensure specialty referral was obtained; lack of proof may result in claims retractions
- Specialist verifies member's eligibility
  - Fallon online eligibility tool
  - POS device
  - Contact Fallon Provider Relations
- Specialist treats member—according to the PCP's request—and exchanges clinical information with PCP

*If a specialist decides that he or she cannot provide needed service(s) to member, the specialist must consult with the member's PCP—who will initiate a new referral to the appropriate specialist.*

# PCP referral procedure

- Specialist submits claim to Fallon
- PCP's NPI on claim—as proof of referral

14. DATE OF CURRENT ILLNESS (First symptoms) OR INJURY (Accident) OR PREGNANCY (LMP) MM DD YY		15. IF PATIENT HAS HAD SAME OR SIMILAR ILLNESS, GIVE FIRST DATE MM DD YY		16. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION FROM MM DD YY TO MM DD YY	
17. NAME OF REFERRING PHYSICIAN OR OTHER SOURCE DR. JOHN SMITH		17a.		18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY	
		17b. NPI 0123456789			
19. RESERVED FOR LOCAL USE (Relate items 1,2,3 or 4 to item 24e by line)				20. OUTSIDE LAB? \$ CHARGES <input type="checkbox"/> YES <input type="checkbox"/> NO	
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY 1. _____ 3. _____ 2. _____ 4. _____				22. MEDICAID RESUBMISSION CODE ORIGINAL REF. NO. 23. PRIOR AUTHORIZATION NUMBER	

- Incomplete referral information will result in denial
- PCP referrals accepted retroactively
- Up to 120 days from date of service

# Physical therapy and chiropractic referral procedure

PCP must provide written prescription to member and/or provider

	For physical therapy referrals	For chiropractic referrals
<b>Script should include:</b>	<ul style="list-style-type: none"><li>• Referring provider's name and address</li><li>• Member's name and identification number</li><li>• Referral issue date</li><li>• Primary diagnosis code</li></ul> <p><i>Please note:</i> Fallon Senior Plan HMO members require prior authorization for PT/OT services after the sixth visit.</p>	
<b>Claim submission process:</b>	PT claims do not require submission of prescription, and should be submitted to Fallon.	Chiropractor needs to submit a copy of the prescription to American Specialty Health Network when submitting the initial claim.

# Prior authorization process

The requesting physician must obtain prior authorization for the following:

- All elective inpatient admissions
- All services with out-of-product, tertiary, non-contracted and/or Peace of Mind Program™ providers or facilities
- All unlisted CPT-4 and unspecified HCPCS codes
- Anesthesia for GI endoscopic procedures
- Elective hospital/facility same-day surgery and ambulatory procedures on the procedure codes list
- Genetic testing
- High-tech imaging
- Hospice
- Infertility/assisted reproductive technology
- Neuropsychological testing
- Non-emergent ambulance
- Office-based procedures identified on the procedure codes list—available at [fallonhealth.org/providers](http://fallonhealth.org/providers)
- Oral surgery services and treatment
- Oxygen
- Plastic reconstructive surgery and treatment
- Sleep diagnostics and therapy
- Specified durable medical equipment, prosthetics and orthotics
- Transplant evaluation

# Radiology prior authorization program

## Authorization program for all outpatient imaging studies\*

- MRI/MRA, CT/CTA, nuclear cardiac imaging (NCM), 3D imaging, PET
- MedSolutions is administrator—our medical management partner
- Request authorization number
  - Online: [medsolutionsonline.com](https://medsolutionsonline.com)
  - Fax: 1-888-693-3210  
Forms available online or by calling customer service
  - Phone: 1-888-693-3211, 8 a.m.–9 p.m.
- Services performed without prior authorization will be denied
- Note: Imaging studies performed during an inpatient admission or ER visit are not included in this program

*\* Program effective for all Fallon Health members except: Fallon Companion Care, MassHealth, NaviCare and Summit ElderCare.*

# SmartChoice

## Voluntary high-tech radiology program

- MRIs and CT scans only
- Designed to offer savings to Fallon's Commercial\* fully-insured members
- Encourages providers and members to use lower-cost facilities
- Administered by MedSolutions
- Process:
  - Prior authorization requested by provider
  - If provider selects a higher-cost facility, SmartChoice representatives recommend a lower-cost option to the provider
  - SmartChoice will also reach out to the member to inform them of their options

*\* Program does not apply to Steward Community Care members and members with a Reliant Medical Group PCP.*

# Sleep diagnostic and therapy prior authorization

## Fallon partners with Sleep Management Solutions (SMS)

- Sleep diagnostic and sleep therapy management services
- SMS contracts with providers who provide services on behalf of Fallon
- Request a service
  - Phone: 1-866-827-2469
  - Fax: 1-866-536-3618
  - Web: [sleepsms.com](https://sleepsms.com)
- All Fallon products included, except
  - The Employee Advantage
  - Harrington Advantage PPO
  - Fallon Companion Care
  - FSP Medicare Supplement
  - Summit ElderCare
  - NaviCare
- Questions?
  - Sleep Management Solutions
  - 1-888-497-5337

*Services performed without prior authorization will be denied.*

# Prior authorization procedure

## Submit Standardized Request for Prior Authorization form

- Fax to Fallon's Care Review Department
  - 1-508-368-9700
  - Urgent fax: 1-508-368-9133
  - Inpatient Care Services Fax: 1-508-368-9175
  - NaviCare fax: 1-508-368-9822
  - FTC fax: 1-774-317-6232
- Fallon will send determination to:
  - Requesting physician
  - PCP
  - Member
- Fallon will not process retroactive prior authorizations



# Rx prior authorization requests

## CVS Caremark is the pharmacy benefit manager and implements PA process for all Fallon products

- Make PA process more efficient to better serve providers and members
- CVS Caremark processes PA requests for patient self-administered drugs including oral medications (pharmacy benefit)
- Process for patient-administered drugs (pharmacy benefit)
  - **Online** through Caremark's ePA tool
    - [www.caremark.epa](http://www.caremark.epa)
  - **Fax** CVS Caremark based on member's plan
    - Commercial: 1-866-836-0730
    - Medicare Part D, Fallon Total Care and Fallon Health Weinberg: 1-855-633-7673
    - MassHealth: 1-866-255-7569
  - **Call** Fallon Provider Relations
    - 1-866-275-3247, option 5

*Fallon continues to process medical benefit drugs including home infusion (physician-administered drugs).*

# Formulary Management

**CVS Caremark is the pharmacy benefit manager and implements PA process for all Fallon products (see previous slide)**

- **Online Formulary**
  - Commercial plans and Fallon Senior Plans
  - **Available at [fchp.org](http://fchp.org)**

# Paper claims

**Filing limit is 120 days or as stated in your contract**

- Fallon Health  
P.O. Box 15121  
Worcester, MA 01615-0121
- Fallon Total Care  
P.O. Box 15041  
Worcester, MA 01615

# Electronic claims

## Direct submission to Fallon

- Faster turnaround time
- Eliminates need for clearinghouse
- No transaction fee
- EDI coordinators: 1-866-275-3247, option 6

# Electronic claims

## Clearinghouses

- **Emdeon:** 1-800-845-6592  
Payor ID #22254 for professional and institutional  
FTC Payor ID # 45559 for professional and institutional
- **Capario:** 1-800-792-5256  
Payor ID #22254 for professional  
FTC Payor ID #45559 for professional
- **Relay Health:** 1-800-735-2963, option 3 or relayhealth.com  
Payor ID #3801 for professional; Payor ID #1576 for institutional  
FTC Payor ID #6744 for professional; FTC Payor ID #6643 for institutional

# Claims adjustments

## **Claims can be corrected and resubmitted**

- DOB, DOS, procedure code, diagnosis code, invoice required, submission of operative notes
- Submit within 120 days of the original Remittance Advice Summary (RAS)

## **Paper claims**

- Complete Request for Claim Review form
- [fallonhealth.org/providers](http://fallonhealth.org/providers)
- Clearly mark as a “Corrected Claim”
- Mail form and corrected claim  
Fallon Health  
Attn: Request for Claim Review  
P.O. Box 15121  
Worcester, MA 01615-0121
- Fax: 1-508-368-9890

# Electronic claims adjustments

- UB and CMS 1500 claim adjustments
- Use replacement claim bill type ending in 7

Adjust claim must have

- Same client/account number as original claim
- Same billing provider/pay to
- All claim lines need to be resubmitted

Adjustment examples

- Procedure and diagnosis code changes
- Removing or adding charges
- Updating a member
- Updating an authorization after original claim was processed

For more information, contact Fallon's EDI Coordinators  
1-866-275-3247, option 6

*Claim must have finalized status in order to submit adjustment.*

# EFTs and ERAs

- Electronic Funds Transfers (EFTs)
- Electronic Remittance Advices (ERAs)
- Offered through partnership with PaySpan Health
- Contracted providers should register with PaySpan Health
- Access remittance/vouchers online
- Reconciliation of payments online
- Decrease time of secondary billing

*\* To reduce paper, Fallon will no longer supply paper Remittance Advices to registered providers.*



# Provider appeals

If you disagree with the determination made by Fallon (e.g., lack of medical necessity, prior authorization issues, late submission, etc.), an appeal may be submitted

- Universal Request for Claim Review form
  - [fallonhealth.org/providers](http://fallonhealth.org/providers)
- Requests must be submitted within 120 days of original RAS\*
- Must be submitted in writing
- All pertinent documentation substantiating request
- Appeal determinations will be final and binding and in keeping with the provisions of your contract with Fallon Health

*\* Appeals submitted after 120 days from the date of the original RAS will be denied.*

# Universal request for claim review

## Mail

Fallon Health

Attn: Request for Claim Review/Provider Appeals

P.O. Box 15121

Worcester, MA 01615-0121

## Fax

1-508-368-9890

# Universal request for claim review

# Fallon's provider portal



# Online provider tools

## Access to

- Eligibility verification
- Claims metrics reports
- Secure file transfers
- PCP panel reports
- Referral monitoring report

## To register

- Download registration packet
  - [fallonhealth.org/provider](http://fallonhealth.org/provider) or [fallontotalcare.org/provider](http://fallontotalcare.org/provider)
- Fax completed form
  - 1-508-797-4292
- Mail

Fallon Health  
Attn: EDI Coordinator  
10 Chestnut St.  
Worcester, MA 01608-2810
- Receive username and password within two to four weeks

# Provider tools—eligibility verification

- Verify patient eligibility
  - Date of service
  - 120 days back
  - 90 days forward
- Verify products
- Verify copayments and deductibles
- Search by Member ID, or name and date of birth
  
- Eligibility can also be verified via
  - PCP panel report
  - Emdeon's website (POS device also available)
  - Fallon Provider Relations
    - 1-866-275-3247, option 1

# Provider tools—eligibility verification

## Eligibility verification


[Eligibility help](#)

Welcome to Fallon Community Health Plan's online eligibility verification. To begin, simply enter the FCHP Member ID# and the Date of service, or choose "Search by name and date of birth." Your response will identify if your patient is covered by FCHP as of today for the date of service requested. Please be advised that enrollment transactions may occur retroactively, and that confirmation of eligibility is not a guarantee of payment or authorization of medical services. All services are subject to coverage, benefit, network and contract policies and exclusions.

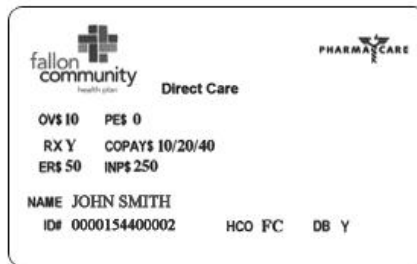
Please Note: You may search for a date of service 120 days prior and 90 days forward from today's date.

Fields with an asterisk (\*) are required.

Member ID #:  [Search by Name and Date of Birth](#)

Date of Service:  

Sample Member ID card front



# Provider tools—eligibility verification

This information is being viewed on: 4/20/2012

Eligibility results			
As of today, this member is eligible for the date of service requested.			
Member ID #:	[REDACTED]	Date of service:	4/20/2012
Name:	[REDACTED]	Date of birth:	[REDACTED]
Address:	[REDACTED]		
<hr/>			
Plan:	SELECT CARE HMO	Effective date of current plan:	1/1/2012
PCP:	[REDACTED]	NPI #:	[REDACTED]
Health care option:	[REDACTED]	PCP phone number:	[REDACTED]
<hr/>			
Individual Deductible:	1000.00	Family Deductible:	2000.00
Office copay:	20.00	Specialist copay:	20.00
ER copay:	100.00	OB copay:	20.00
Physical Exam copay:	0.00	Pedi Physical Exam copay:	0.00
Chiro copay:	20.00	Mental Health copay:	20.00
Substance Abuse copay:	20.00	Vision copay:	20.00
<hr/>			
Deductibles or coinsurance may apply to certain services			
This information is being viewed on: 4/20/2012			



# Provider tools—claims metric reports

## **Available only to contracted Fallon providers**

- Measure Fallon's performance
  - Claims turnaround time
  - Adjudication rates
- Review claims profile
- View and download customized reports

# Provider tools—claims metric reports

## Claims metric report summary

[Back to previous page](#)

This information was last updated on: 4/19/2012

This information is being viewed on: 4/20/2012

Summary statistics are based upon the prior 12 weeks of claims processing activity.

### Claims metric report summary:

Total # of claims received	2913
Total # of claims approved/paid	2546
Total # of claims in process	261
Total # of claims rejected	48
% of total claims received that are rejected	1.65%
Average # of days from service date until FCHP received claim	5
Average # of days from received date until FCHP processed claim	16
Average # of days from received date until FCHP RAS date	29

### Rejection details:

Reject Reasons	# of claims Rejected	% of claims reject for this reason
Denied-member not enrolled on dos	26	54.17%
Denied-duplicate claim line	13	27.08%
Denied-paid by other insurance	1	2.08%

# Provider tools—PCP reports

## **PCP panel reports**

- For PCPs only
- View and download customized reports
- Access to your provider(s) only
  - View members of your panel
  - See additions and deletions to your panel

## **PCP referral monitoring reports**

- View specialists rendering service(s) to your patients

## **Secure file transfers**

- Protect personal health information
- Secure transactions

Also available at  
[fallonhealth.org/provider](http://fallonhealth.org/provider) and [fallontotalcare.org/provider](http://fallontotalcare.org/provider)

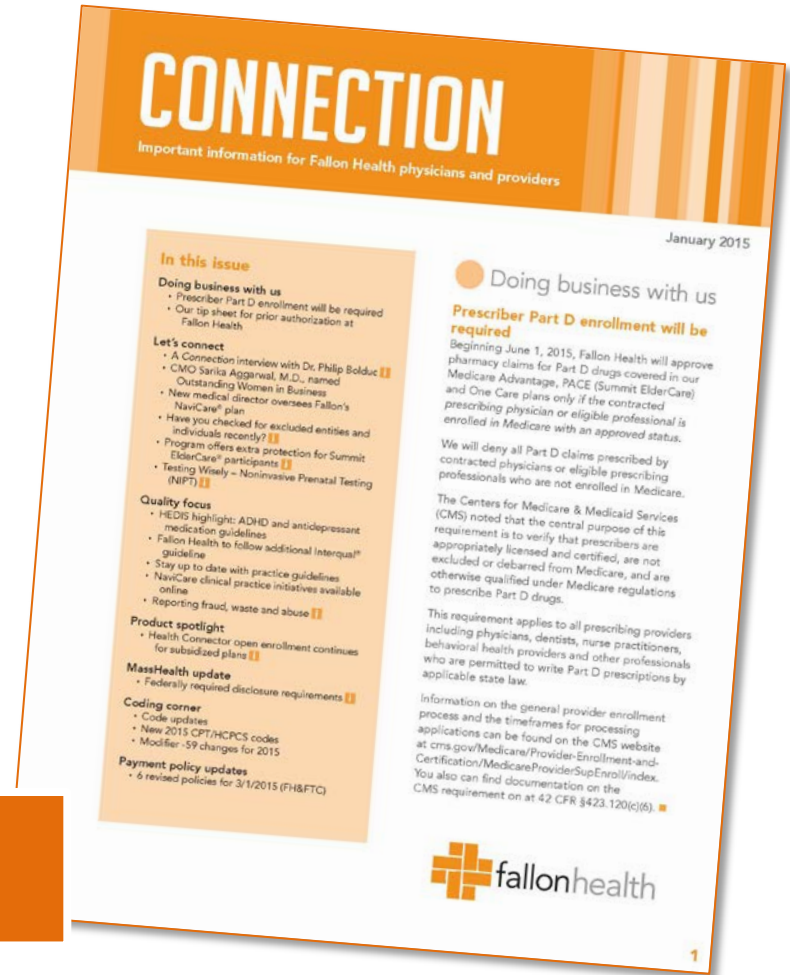
- Procedure code look-up
- Provider look-up
- Provider Manual
- Forms
- News and announcements
- Fallon Health Product Reference Guide
- Request information
- Contact us
- *Connection* newsletter

# Fallon keeps you connected

## Connection

- Bimonthly newsletter
- Updates
- New information
- Online version includes
  - Policies
  - Additional information
  - Archived information

*To stay connected, send your email address to [askfchp@fchp.org](mailto:askfchp@fchp.org)*



# Contacting Fallon



# Your Fallon Health points of contact

## ■ **Provider Relations Representative:**

- {Name}
- {Phone number}
- {email address}

## ■ **Nurse Case Manager:**

- {Name}
- {Phone number}
- {email address}

## ■ **Contract Manager:**

- {Name}
- {Phone number}
- {email address}



# Your Fallon Health points of contact

## Fallon Provider Relations | 1-866-275-3247

- Prompt 1 | **Customer Service** *(to determine member eligibility or benefit information)*
- Prompt 2 | **Claims**
- Prompt 3 | **Referrals, Prior Authorizations or Case Management**
- Prompt 4 | **Provider Relations**
- Prompt 5 | **Pharmacy Services**
- Prompt 6 | **EDI Coordinators**





# Your Fallon Total Care points of contact

## ■ **Provider Relations Representative:**

- {Name}
- {Phone number}
- {email address}

## ■ **Nurse Case Manager:**

- {Name}
- {Phone number}
- {email address}

## ■ **Contract Manager:**

- {Name}
- {Phone number}
- {email address}



# Your Fallon Total Care points of contact

## Fallon Provider Relations | {phone #?}

- Prompt 1 | **Customer Service** *(to determine member eligibility or benefit information)*
- Prompt 2 | **Claims**
- Prompt 3 | **Referrals, Prior Authorizations or Case Management**
- Prompt 4 | **Provider Relations**
- Prompt 5 | **Pharmacy Services**
- Prompt 6 | **EDI Coordinators**



# Questions?



Thank you!



# Appendix



# Direct Care hospitals

- ✓ Addison Gilbert Hospital, Gloucester
- ✓ Beth Israel Deaconess Hospital, Milton
- ✓ Beth Israel Deaconess Hospital, Plymouth
- ✓ Beverly Hospital, Beverly
- ✓ Brigham and Women's Faulkner Hospital, Boston
- ✓ Charlton Memorial Hospital, Fall River
- ✓ Emerson Hospital, Concord
- ✓ Harrington HealthCare at Hubbard, Webster
- ✓ Harrington Memorial Hospital, Southbridge
- ✓ HealthAlliance Hospitals, Fitchburg and Leominster
- ✓ Heywood Hospital, Gardner
- ✓ Lahey Hospital and Medical Center, Burlington
- ✓ Lahey Medical Center, Peabody
- ✓ Lawrence General Hospital, Lawrence
- ✓ Lowell General Hospital, Main Campus, Lowell
- ✓ Massachusetts Eye & Ear Infirmary, Boston
- ✓ MetroWest Medical Center, Framingham and Natick
- ✓ Milford Regional Medical Center, Milford
- ✓ Mount Auburn Hospital, Cambridge
- ✓ New England Baptist Hospital, Boston
- ✓ Saint Luke's Hospital, New Bedford
- ✓ Saint Vincent Hospital, Worcester
- ✓ Signature Healthcare Brockton Hospital, Brockton
- ✓ South Shore Hospital, Weymouth
- ✓ Tobey Hospital, Wareham
- ✓ Tufts Medical Center, Boston
- ✓ Winchester Hospital, Winchester

# Direct Care medical groups

- ✓ Acton Medical Associates
- ✓ Allied Pediatrics of Greater Brockton, Inc.\*
- ✓ Brockton Area Primary Care, LLC\*
- ✓ Cape Ann Medical Center
- ✓ Cape Ann Pediatrics
- ✓ Central Massachusetts Independent Physician Association, LLC
- ✓ Charles River Medical Associates
- ✓ Greater Lawrence Family Health Center
- ✓ Harrington PHO
- ✓ Highland Healthcare Associates IPA
- ✓ Jordan Physician Associates
- ✓ Lahey Clinic Physicians
- ✓ Lawrence General IPA
- ✓ Lowell General PHO
- ✓ Mass Bay Medical Associates, LLC\*
- ✓ Metrowest Quality Care Alliance\*
- ✓ Milton Primary Care, LLC\*
- ✓ Mount Auburn Cambridge IPA
- ✓ Northeast PHO
- ✓ Pediatric Associates of Brockton, Inc.\*
- ✓ Pentucket Medical
- ✓ Plymouth Bay Primary Care, LLC\*
- ✓ Primary Care Medical Associates, LLC\*
- ✓ Reliant Medical Group
- ✓ Saint Vincent Medical Group
- ✓ Signature Healthcare Bridgewater Goddard Park Medical Associates
- ✓ Signature Healthcare Brockton Hospital and affiliated providers
- ✓ South Shore PHO
- ✓ Southboro Medical Group
- ✓ Southcoast Physicians Network
- ✓ Tufts Medical Center Physicians Organization, Inc.\*
- ✓ Woburn Pediatric Associates, LLC\*

*\*A New England Quality Care Alliance Group (NEQCA)*

