
Boston Medical Center HEALTH SYSTEM

WellSense ACO – Go-Live Resources and Information

March 24, 2023



Summary

- On April 1st, WellSense will become your ACPP payer partner, which will eventually impact:
 - member enrollment (i.e. all members will be shifted to WellSense);
 - provider networks that are accessible to members;
 - key points of contact for questions related to claims and billing; and
 - tools that providers should use in order to check eligibility; confirm network status for providers; and submit prior authorizations.
- Many of these changes will be delayed and/or mitigated during the 90-day period (beginning April 1) during which the WellSense Augmented Continuity of Care Policy will be in place.
- The goal of this training is to reinforce key pieces of information and resources that will facilitate a smooth go-live on April 1. Please refer to other guidance materials as well as the more extensive ACO training for questions outside of this scope.

Reminder of available online resources

Topic	Resource	Link
Essential Go-Live Training Materials	Go-Live FAQ	WellSense-Providers – Massachusetts – 2023 ACO Launch Guidance
	Continuity of Care	WellSense-Providers – Massachusetts – Continuity of Care
	Training materials (including recorded Provider Portal trainings)	WellSense-Providers – Massachusetts – Training and Support
Primary Care Sub-capitation	WellSense overview and payment logic	WellSense-Providers - Massachusetts - Primary Care Sub-capitation
Provider Portal/ Health Trio	Provider Portal	HealthTrio connect - Boston Medical Center HealthNet Plan
Prior Auth Tools	Forms and resources	Documents and Forms Providers - Massachusetts WellSense Health Plan
	Matrix (Service type, vendor, contact info):	MA Prior Auth Matrix (wellsense.org)
	CPT lookup (medical only)	WellSense MA CPT.pdf
	HCPCS lookup (medical only)	WellSense MA HCPCS.pdf
	Pharmacy	Prescription Information WellSense Health Plans WellSense Health Plan

- **Member Eligibility and Enrollment**

- Provider network
- Continuity of Care
- Provider Portal
- Key Contacts

Member eligibility and enrollment

- Most members whose PCP is switching ACOs or health plans should have received a letter in the mail from MassHealth in early February outlining the change. This letter told them there is nothing they need to do if they would like to stay with their PCP, but it also outlined how the member can change ACOs.
- Providers can verify eligibility and enrollment in several ways:
 - [Eligibility Verification System](#)
 - WellSense Secure Provider Portal: www.WellSense.org under the MassHealth Provider Resources menu (*for WellSense members*)
 - 888-566-0008 Option 1 (automated phone system)
 - NEHEN – State Health Information Exchange (HIE)
- At the start of the new ACO period, some members may not be assigned to the correct ACO. In these situations, primary care providers should see patients and bill the insurer of record normally. Claims for members covered by a WellSense plan will be paid according to [WellSense's Augmented Continuity of Care Policy](#).
 - If the patient is or will be part of the primary care provider's panel, then they will need to switch ACOs in order to maintain access after the continuity of care period. Members will need to contact MassHealth Customer Service 800-841-2900 (TTY: 800-497-4648) or visit masshealthchoices.com to change plans.
- If the patient is enrolled in the correct ACO, but assigned to the wrong PCP, you can change assignment in the WellSense Secure Provider Portal or by calling WellSense customer service. We will also be implementing a monthly roster review process, more details to come.

Agenda

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Provider network

- There will be changes in medical and behavioral health provider networks for members that are shifting to WellSense on April 1st. In order to validate whether a particular provider is in-network, please use the following resources:
 - Medical providers: Visit WellSense’s website at wellsense.org.
 - Behavioral health providers: Visit Carelon Behavioral Health’s [website](#).
 - Pharmacy: Visit Express Scripts’ [website](#).
- If a patient has an established relationship with a provider who is now out of network, those visits will be covered by [WellSense’s Augmented Continuity of Care Policy](#). Providers may submit a prior authorization request as outlined in the policy.
- There will be no change to dental or vision hardware networks, as these are benefits that are managed by MassHealth. Treatment for medical conditions of the eye that are covered by ACOs could change, and information is available on WellSense’s website.

Agenda

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WellSense Continuity of Care (CoC) Policy

Continuity of Care Policy Component	Implications for providers
WellSense is expanding our standard CoC policy for new groups	<ul style="list-style-type: none"> WellSense’s flexibilities around out-of-network care will apply for an extended timeframe of 90 days WellSense will load prior authorizations (PAs) from the legacy carrier
WellSense will cover established healthcare services for enrollees for up to 90 days after the contract start date of April 1	<ul style="list-style-type: none"> Providers should submit prior authorization for out-of-network care if not already approved by the legacy carrier
WellSense will honor and load approved prior authorization requests from the ACO’s legacy carrier	<ul style="list-style-type: none"> Providers do not need to re-submit PA requests to WellSense if they were already approved by the legacy carrier This flexibility applies to PA managed by WellSense, as well as our delegated vendors: <ul style="list-style-type: none"> eviCore (high-end radiology, genetic testing, musculoskeletal) Carelon (behavioral health, formerly Beacon) Northwood (DMEPOS)
After June 30, 2023, WellSense’s standard Continuity of Care policy will apply	<ul style="list-style-type: none"> Our policy allows members to continue seeing out-of-network providers when medically necessary, including to avoid interruptions in care In these cases, prior authorization is required

Note: if your legacy carrier is not reviewing prior authorizations or if external specialists are not accepting them, please notify your WellSense Provider Relations consultant.

Agenda

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WellSense has added flexibilities to the pharmacy transition timelines in order to ensure continuity of care

Pharmacy Transition Stream	Member Impact	Member Communication
Retail network	Members will have 90 days (by 7/5) to transfer prescriptions to a pharmacy in the ESI/WS narrow retail network (Walgreens excluded). Prior to 7/5, members will have access to ESI's broad retail network (Walgreens included).	Retail network disruption letter (first round by 5/1, second round by 6/1). ²
Specialty network	Members will have fill allowances for their specialty drug at any in-network <u>retail</u> pharmacy until 7/5 (for up to 96 days supply of medication). After this, members will need to use an in-network <u>specialty</u> pharmacy.	Specialty network disruption letter (first round by 5/1, second round by 6/1), and specialty fill allowance letter after first fill at retail pharmacy.
Formulary	MH UPPL formulary will be effective 4/1 for all members. New members will be granted a transition period until 7/5 that will allow existing prescriptions that may otherwise require PA to pay temporarily	Formulary disruption letter (first round by 5/1, second round by 6/1).
Open drug authorizations	Medical benefit drug authorizations will be transferred once received. Prescription benefit drug authorizations will be loaded until 10/1/23 OR until the current expiration date (whichever is sooner). ³	Formulary disruption letter (first round by 5/1, second round by 6/1).

1. Timelines subject to change as MH clarifies details of intent surrounding continuity of care rules on pharmacy
 2. Second round of member communication will be based off of WS claims data since 4/1
 3. WS's ability to load open prescription authorization information is conditional on the quality of data received from MH.

Agenda

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WellSense's Provider Portal is an essential tool for providers to access and utilize

- WellSense's Provider Portal is an essential tool and allows providers to:
 - Submit claims
 - Confirm member eligibility and PCP assignment
 - Locating member identification number
 - Re-assign members as necessary
 - Submit prior authorizations
- For more information about how to access the portal and utilize it, please view guides and video tutorials on the WellSense website: <https://www.wellsense.org/providers/ma/training-and-support>.
 - Follow-up with your Provider Relations consultant if you have any additional questions.

Agenda

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Directing questions and concerns to the right resources is important for timely resolution (1/2)

Topic	Common Questions	Important Reminders	Contact Information
Claims	<ul style="list-style-type: none"> Claims issue (incl. PC Subcap) 	<ul style="list-style-type: none"> Claims which meet the criteria for the PC Sub Cap will be zero paid but should be submitted as usual. More details on the PC Subcap payment logic defined by MassHealth and implemented by WS can be found here: https://www.wellsense.org/providers/ma/sub-capitation 	<p>Provider Services 888-566-0008</p>
Prior Auth	<ul style="list-style-type: none"> Not able to submit authorization Member/patient can't get through to the call center 	<ul style="list-style-type: none"> WS is offering flexibilities for no auth and out-of-network denials for first 90 days WS will honor and load approved prior authorization requests from the ACO's legacy carrier 	<p>General: Provider.info2@wellsense.org</p>
Provider Enrollment	<ul style="list-style-type: none"> Provider is out of network 	<ul style="list-style-type: none"> WellSense will cover established healthcare services for enrollees for up to 90 days after the contract start date of April 1 	
Pharmacy	<ul style="list-style-type: none"> Pharmacy out of network Drug not covered on formulary 	<ul style="list-style-type: none"> Members will have 90 days (by 7/5) to transfer prescriptions to a pharmacy in the ESI/WS narrow retail network Members will have a specialty fill allowances at any in-network <u>retail</u> pharmacy beginning on 4/1. After 7/5, members will need to use an in-network <u>specialty</u> pharmacy. Members will be granted a transition period until 7/5 that will allow existing prescriptions that may otherwise require PA to pay temporarily 	<p>Provider Services line direct to ESI (Express Scripts), available 24/7 888-566-0008 (option 4)</p>

Directing questions and concerns to the right resources is important for timely resolution (2/2)

Topic	Common Questions	Important Reminders	Contact Information
Member enrollment	<ul style="list-style-type: none"> Member wants to change PCP Question about covered services 	<ul style="list-style-type: none"> No members/patients action needed if they plan to stay with same provider and health plan There will be no change in member benefits WellSense will be sending more information and ID cards over the upcoming weeks 	Member services: 1-888-566-0010 MemberQuestions@wellsense.org
	<ul style="list-style-type: none"> Member wants to update demographic information Patient not covered by MassHealth ACO coverage Members wants to change ACOs 		MassHealth Customer Service 1-800-497-4648 (TTY) M-F: 9am-5pm
Behavioral Health	<ul style="list-style-type: none"> Member in Crisis 	<ul style="list-style-type: none"> The Behavioral Health Help Line is a state-wide, payer-blind solution available to support all individuals of all ages. 	Behavioral Health Help Line 1-833-773-2445 Available 24/7
	<ul style="list-style-type: none"> Urgent Appointment Assistance Carelon Clinical Escalations 		Carelon provider services: 1-866-444-5155
Durable Medical Equipment	<ul style="list-style-type: none"> Prior auth and DME questions 	<ul style="list-style-type: none"> Northwood is the delegated vendor that administers Durable Medical Equipment benefits on behalf of WellSense 	Northwood provider services: 866-802-6471 provideraffairs@northwoodinc.com northwoodinc.com

WellSense will be available to support urgent access to care issues the weekend of April 1 and 2. Members and providers should call the customer service phone numbers found on ID cards and the website.