



Commonwealth Care Alliance (Medicare-Medicaid Plan) Provider & Pharmacy Directory Rules & General Information

Introduction

This document includes rules and general information about using the Commonwealth Care Alliance (Medicare-Medicaid) *Provider and Pharmacy Directory*. It includes information about the provider and pharmacy types in Commonwealth Care Alliance’s network. The searchable directory listings (search tool) contain provider and pharmacy address and contact information as well as other details such as days and hours of operations, specialties, and skills. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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If you have questions, please call Commonwealth Care Alliance at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free. **For more information**, visit www.commonwealthonecare.org.



Disclaimers

- ❖ Commonwealth Care Alliance (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and MassHealth to provide benefits of both programs to enrollees.
- ❖ The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.
- ❖ Benefits may change on January 1 of each year.
- ❖ This Directory lists health care professionals (such as doctors, nurse practitioners, and psychologists), facilities (such as hospitals or clinics), and support providers (such as Adult Day Health and Home Health providers) that you may see as a Commonwealth Care Alliance member. We also list the pharmacies that you may use to get your prescription drugs.
- ❖ We will refer to these groups as “network providers” in this Directory. These providers signed a contract with us to provide you services.
- ❖ You can get this information for free in Spanish or speak with someone about this information in other languages for free. Call 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free.
- ❖ Este documento está disponible en español. Para hablar con un intérprete, por favor llame al 1-866-610-2273. Este es un servicio gratuito.
- ❖ You can get this information for free in other formats, such as large print, braille, or audio. Call 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free.
- ❖ We will keep your request for alternative formats and special languages on file for future mailings.

The search tool is updated frequently, but you need to know that:

- Some Commonwealth Care Alliance network providers may have been added or removed from our network very recently.
 - Some Commonwealth Care Alliance providers in our network may no longer be accepting new members. If you are having trouble finding a provider who will accept new members, call Member Services at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week and we will help you.
- To get the most up-to-date information about Commonwealth Care Alliance’s network providers in your area, visit www.commonwealthcare.org or call Member Services at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free.

Provider Directory Information

Understanding Provider Types & Care Teams

This section explains key terms you'll see in our Provider and Pharmacy Directory.

- **Providers** are health care professionals and support providers such as doctors, nurses, pharmacists, therapists, and other people who provide care and services. **Services** include medical care, long-term services and supports, supplies, prescription drugs, equipment and other services.
 - The term *providers* also includes facilities such as hospitals, clinics, and other places that provide medical services, medical equipment, and long-term services and supports.
 - Providers that are a part of our plan's network are called **network providers**.
- **Network providers** are the providers that have contracted with us to provide services to members in our plan. When you see a network provider, you usually pay nothing for covered services.
- A **Primary Care Provider (PCP)** is a physician, a nurse practitioner or a physician assistant who gives you routine health care. Your PCP will keep your medical records and get to know your health needs over time.
- **Specialists** are doctors who provide health care services for a specific disease or part of the body. There are many kinds of specialists. Here are a few examples:
 - **Oncologists** care for patients with cancer.
 - **Cardiologists** care for patients with heart conditions.
 - **Orthopedists** care for patients with certain bone, joint, or muscle conditions.
- You may need a **prior authorization** for certain number of services before you receive them. Prior authorization means that Commonwealth Care Alliance must give you approval before we will provide coverage for a specific service, item, or drug or out-of-network provider. Your PCP/Care Team works closely with Commonwealth Care Alliance to arrange for these services when necessary. If you don't get a prior authorization, Commonwealth Care Alliance may not cover the service, item, or drug.
 - Prior authorization are not needed for:
 - Emergency care;
 - Urgently needed care;
 - Kidney dialysis services that you get at a Medicare-certified dialysis facility when you are outside the plan's service area;

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- Services from a women’s health specialist; or
 - Preventive services.
- Additionally, if you are eligible to get services from Indian health providers, you may see these providers without a referral. We must pay the Indian health provider for those services even if they are out of our plan’s network.
- More information on prior authorization is available in Chapter 3 of the Member Handbook.
- You will have a **Care Team** that you choose. Your **Care Team** includes a group of people you choose to be involved in your care. A Care Team will get to know your needs and work with you to help you create and carry out a Personal Care Plan. Your Care Team will talk with you about the services that are right for you. Everyone on the Care Team works together to make sure your care is coordinated. This means that they make sure that you get all of the tests, labs, and other care that you need, and the results are shared with the appropriate providers. It also means that your PCP should know all medicines you take so that he or she can reduce any negative effects. Your PCP will always get your permission before sharing your medical information with other providers.

Members of your Care Team may include:

- A Care Manager helps you manage your medical providers and services. Your Care Manager works with you, the health plan, and your Care Team to make sure you get the care you need.
- Your **Primary Care Provider**
- A **Long-Term Services and Supports (LTS) Coordinator** to help you find and access support services available to you in the community. Both the Care Manager and LTS Coordinator can work as a part of your Care Team to make sure you get the care you need.
- Others if necessary.

Your Care Team or our Member Services will also help you find other providers of medical, behavioral health, or long-term services and supports if you need to see a specialist or other health care provider. That way, you will see the right provider to help you with your concerns.

Choosing a Primary Care Provider (PCP)

First, you will need to choose a Primary Care Provider. You can choose any PCP in our network who is accepting new members.

To choose a PCP, go to the list of providers on page 1 and choose a provider:

- that you use now, **or**
- who has been recommended by someone you trust, **or**

- whose offices are easy for you to get to.
- When you first enroll in Commonwealth Care Alliance, you can keep seeing your current PCP and your other providers for 90 days, or until you and your Care Team complete a comprehensive assessment of your needs and goals and develop your Individualized Care Plan. After that, if you do not choose a PCP in our network, Commonwealth Care Alliance will choose one for you.
- If you want help in choosing a PCP, please call Member Services at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free. Or, visit www.commonwealthonecare.org.
- If you have questions about whether any service or care that you want or need is covered, talk to your Care Team or call Member Services and ask **before** you get the service or care.

Getting long-term services and supports

As a Commonwealth Care Alliance member, you will be able to get long-term services and supports (LTSS), such as personal care, homemaking, companion, day programs, adult foster care, and transportation amongst others. Long-term services and supports are help for people who need assistance to do everyday tasks like taking a bath, getting dressed, making food, and taking medicine. Most of these services are provided at your home or in your community but could be provided in a nursing home or hospital.

If you need LTSS, an LTS Coordinator can help you and your Care Team determine what options are available to support you in the way you want. You always have the right to have an LTS Coordinator on your Care Team.

Your LTS Coordinator (also known as a Long-Term Services and Supports Coordinator) and/or Care Manager will talk to you and discuss what different types of services are available and which might be right for you. Your Care Manager or LTS Coordinator will also help you find an appropriate provider and arrange for these services to be provided to you. In order to get long-term services and supports, you will need a prior authorization from Commonwealth Care Alliance.

Please see Benefit Chart in Chapter 4 of your Member Handbook, for more information on covered services and prior authorization requirements.

Using Commonwealth Care Alliance’s Network

You must get all of your covered services from providers within our network. These providers have an agreement to work with us and provide you services. If you go to providers who are not in Commonwealth Care Alliance’s network (**without prior authorization or approval from us**), **you will have to pay the bill.**

The only exceptions to this rule are when you need urgent or emergency care or dialysis and cannot get to a provider in the plan, such as when you are away from home. You can also go

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outside the plan for other non-emergency services if Commonwealth Care Alliance gives you permission first. Also, when you first enroll in Commonwealth Care Alliance, you can keep seeing your current providers for 90 days, or until you and your Care Team complete a comprehensive assessment of your needs and goals and develop your Individualized Care Plan. For a full list of services that require prior authorization, please see the Benefits Chart in Chapter 4, Section D.

- You may change providers within the network at any time, except to a PCP from another group or practice, then it would be effective the 1st of the following month. If you have been going to one network provider, you do not have to keep going to that same provider. You may change your PCP for any reason. Also, it's possible that your PCP might leave our plan's network. In that case, you would have to find a new PCP.
- Commonwealth Care Alliance works with all the providers in our network to accommodate the needs of people with disabilities. As applicable, the list of network providers in this Directory includes information about the accommodations they provide. If you need to see a provider and are not sure if they offer the accommodations you need, Commonwealth Care Alliance can help you. Talk to your Care Team for assistance.

Pharmacy Directory Information

Understanding the Pharmacy Directory & CCA's Network

These network pharmacies are pharmacies that have agreed to provide prescription drugs to you as a member of the plan.

Commonwealth Care Alliance is happy to help you find a network pharmacy that meets your needs. For instance, we can help you find pharmacies that:

- Are accessible by public transit
- Have pharmacists that speak your language
- Offer specific accommodations

Please contact Commonwealth Care Alliance Member Services at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week for assistance.

- Commonwealth Care Alliance members must use network pharmacies to get prescription drugs.
 - You must use network pharmacies except in emergency or urgent care situations. If you go to an out-of-network pharmacy for prescriptions when it is not an emergency, you will have to pay out of pocket for the service. Read the Commonwealth Care Alliance Member Handbook for more information.
- Some network pharmacies may not be listed in this Directory.
 - This directory is updated often, but some network pharmacies may have been added or removed from our plan very recently.

For up-to-date information about Commonwealth Care Alliance network pharmacies in your area, please visit our web site at www.commonwealthcare.org or call Member Services at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free.

To get a complete description of your prescription coverage, including how to fill your prescriptions, please read the Member Handbook and Commonwealth Care Alliance's *List of Covered Drugs*. For the most up-to-date List of Covered Drugs, please visit our web site at www.commonwealthcare.org or call Member Services at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free.

Identifying pharmacies in our network

Along with retail pharmacies, your plan's network of pharmacies includes:

- Mail-Order Pharmacies
- Home infusion pharmacies
 - You can go to any of the Home Infusion pharmacies in our network, as they service all counties in your plans service area. For more information about the Home Infusion services available please contact the pharmacy directly.
- Long-term care (LTC) pharmacies
 - Residents of a long-term care facility, such as a nursing home, may access their prescription drugs covered under Commonwealth Care Alliance through the facility's pharmacy or another network pharmacy. You can go to any of the Long-Term Care pharmacies in our network, as they service all counties in your plans service area.

→ You are not required to continue going to the same pharmacy to fill your prescriptions. You can go to any of the pharmacies in our network.

Long-term supplies of prescriptions

- **Mail-Order Programs.** We offer a mail-order program that allows you to get up to a 90-day supply of your prescription drugs sent directly to your home. Maintenance drugs are prescription drugs that you use on an ongoing basis, for a chronic or long term medical condition. There is no copay for mail order drugs.
 - If a prescriber initiates a prescription on your behalf, the mail order pharmacy is required to obtain consent from you prior to shipping or delivery any medications. You can get prescription drugs shipped to your home through our network mail order delivery program. Typically, you should expect to get your prescription drugs within 14 days from the time that the mail order pharmacy gets the order. If you do not get your prescription drug(s) within this time, if you would like to cancel an automatic order, or if you need to ask for a refund for prescriptions you got that you

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did not want or need, please contact us at 1-866-610-2273 (TTY: call MassRelay at 711), 8 a.m. – 8 p.m., 7 days a week. The call is free.

- **90-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 90-day supply of covered maintenance prescription drugs. Maintenance drugs are prescription drugs that you use on an ongoing basis, for a chronic or long term medical condition. There is no copay for mail order drugs.