



April 24, 2024

RE: Provider Manual Updates for MA and RI Medicare, SCO and One Care

Dear Participating Provider,

Commonwealth Care Alliance is committed to partnering with you to continuously improve our processes. We have made the following updates to our provider manual.

Authorization Requirements

- All requests, except behavioral health and inpatient/observation admissions—must be faxed to **855-341-0720** using the standard prior authorization request form along with the necessary clinical documentation to support the request.
- Behavioral health prior authorization service requests must be faxed to **855-341-0720** using the appropriate form for the service requested along with the necessary clinical documentation to support the request.
- Inpatient/observation admissions authorization service requests must be faxed to **855-811-3467** using the standard authorization request form for the service requested along with the necessary clinical documentation to support the request.
- Please use CCA's standard prior authorization form when making authorization requests.
 - Massachusetts – [View and download forms](#)
 - Rhode Island – [View and download forms](#)
 - *Admission notification is required within 24 to 48 hours of facility admission.*
- CCA Massachusetts utilizes Patient Ping, a secure, third party admission and discharge notification software system.
 - CCA Massachusetts will create the admission authorization once notified of the member's admission for facilities who contract and participate in the use of Patient Ping, preventing late authorizations.
 - If you do not contract with patient ping, admission notification is required within 24-48 hours of facility admission
- CCA Massachusetts does not require submission of clinical information for those facilities which have granted electronic medical record (EMR) access to CCA staff for medical necessity (MN) review (except for members who have restricted EMR access. Clinical submission is still required for these members.)
 - Providers must review their contracts to determine EMR agreements.
 - All facilities which have not granted CCA EMR access are required to submit clinical information timely for MN review.



- Please go to CCA's provider portal to check the status of your authorization request; [CCA provider portal](#).
 - For assistance with the portal, contact provider services at 866-420-9332

Discharge Notification and Planning

We believe it is critical that the member or member's authorized representative, CCA, the admitting provider, and the Primary Care Physician (PCP) are all in agreement about the treatment plan and next steps by the time the member is to be discharged from a facility.

The facility or admitting physician is required to contact CCA and provide clinical information to support discharge decisions for:

- Requests for facility stay extensions (Note: Contact must be made prior to the expiration of the approved days)
- Requests to move members to a different level of care
- Discharge plans that include any of the following:
 - Home health services or specialized durable medical equipment
 - Multiple medications
 - Programs for lifestyle changes like weight management, nutrition, smoking cessation, exercise, diabetes education, or stress management
- Facilities are requested to submit all discharge documentation within 24 hours of members discharge; including medication list, after visit summary, and completed discharge summary if available to the Transitions of Care Department via fax 855-811-3467.

For information on CCA's Medical Necessity Guidelines (MNGs), please visit:

<https://www.commonwealthcarealliance.org/ma/providers/medical-policies/medical-necessity-guidelines/>

Thank you for your continued commitment to providing the highest-quality care to our CCA members.

Sincerely,

Transitions of Care Department