

Good afternoon,

RE: Enrollment/Dis-enrollment Issue

### **Issue Description**

Following the March 1<sup>st</sup> launch of the ACO/MCO model, a large number of members were inadvertently dis-enrolled from their plans due to a system defect. As a result of this defect, providers and plans accessing the Eligibility Verification System (EVS) may have noticed that some members who were enrolled in an ACO or MCO as of 3/1/2018 appeared to be in fee-for-service (FFS). In these situations, EVS showed that the member was eligible for services, and in some cases, the member's behavioral health segment was blank.

Most of members affected were automatically re-enrolled into the same plan over a two-day period. Others lost eligibility or changed plans, and therefore will not have enrollment restored to the same plan.

MassHealth has identified the defect and developed steps for providers to address the eligibility gap for those members who were inadvertently dis-enrolled:

1. For individuals who were showing FFS eligible on the DOS and incurred a service on the FFS non-Covered list between 3/1-3/16, bill the plan on record located in EVS as of 3/16. (See of Impacted Services List Below.
2. No authorization will be required for the services on this list.
3. Providers whose system requires an auth # in order to transmit the claim may use the 8-digit code 00000000 in the authorization field on the claim.
4. Submit all claims that may have been being held back for these utilizers and any others as soon as possible.
5. For providers who are unable to access EVS, please contact MassHealth's Customer

Service at 1-800-841-2900 with the member's identification number to obtain

member's plan assignment if the member is not able to provide.