Point32Health

Insights and Updates for Providers

February 2026

Exciting news: We're upgrading our secure provider portals!

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together | Tufts Health Plan Senior Care Options | Tufts Health One Care | Tufts Medicare Preferred

We are thrilled to announce that we will be transforming our secure provider portals in the coming year to deliver a more efficient and streamlined experience for all our valued provider partners. As part of this initiative, we have partnered with Availity, a leading health care technology company, to deliver their **Availity Essentials**™ platform. Implementing this market-leading platform will allow Point32Health to provide you with a unified portal solution, making it easier than ever for you and your office staff to conduct a variety of 24/7 self-service transactions.

Say goodbye to juggling multiple logins and platforms! With the upcoming **Availity Essentials** platform, you will be able to perform electronic transactions for all our Harvard Pilgrim Health Care and Tufts Health Care products using a single login.

Availity Essentials is a multi-payer platform that allows providers to perform electronic transactions with a variety of health plans. If you already utilize **Availity Essentials**, the same login you use today will give you access to the Harvard Pilgrim and Tufts Health Plan portals once we've launched our upgraded platform.

The portals will come packed with new features and improvements for the transactions you use most including eligibility and benefits checks, claims submission and correction, prior authorization and referral, reporting, and more.

We're working diligently with Availity now and expect to begin rolling out new provider portal functionality later this year and into 2027.

Stay tuned! We will continue to share important updates and details about the portal upgrade in upcoming issues of the newsletter. As the year progresses, we'll partner with Availity to provide information on launch dates, training opportunities, and tips for maximizing the benefits of the new portal.

We are excited to bring you these improvements and are committed to making your experience as a provider easier and more productive than ever. ▲

Tufts Health One Care: Reminder on new member ID cards in 2026

Tufts Health One Care

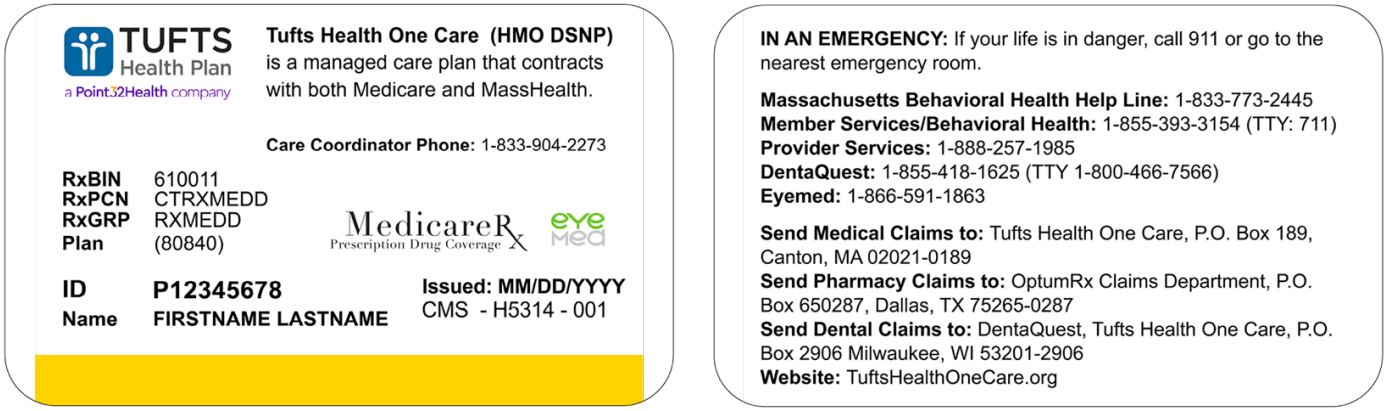
As a reminder, Tufts Health One Care became a Dual Eligible Special Needs Plan (D-SNP) as of Jan. 1, 2026. As part of this product update, all Tufts Health One Care members were assigned new member ID numbers and issued new ID cards.

To ensure uninterrupted care for members — and that your claims are processed and paid in a timely manner next year — please update your billing systems to reflect new ID numbers for One Care members, if you have not already done so.

Claims submitted for services delivered in 2026 using a prior ID number will be denied due to member ineligibility. You will need to resubmit those claims with the correct 2026 member ID number.

One Care member ID numbers are formatted similarly to IDs for Tufts Health Plan senior products and do not include an “01” suffix.

Here’s a **sample image** of the new Tufts Health One Care member ID:



You can also look up the updated member ID number in the secure provider portal.

Additionally, as part of the transition, any active prior authorizations with an end date after Dec. 31, 2025, were automatically transferred to the member’s new ID number. These authorizations will remain valid, and no further action is required on your part. To avoid delays and unnecessary administrative work, please do not submit a duplicate authorization request if a valid authorization already exists.

You may review authorization status via the Tufts Health Plan secure portal (refer to the MHK Portal User Guide for step-by-step instructions). ▲

New post-acute care vendor for Tufts Medicare Preferred

Tufts Medicare Preferred

We’re pleased to announce that we have partnered with Home and Community Care Transitions to enhance the management of post-acute care benefits for Tufts Medicare Preferred members in Massachusetts. (Please note that members included in a designated care management agreement with a professional medical group as indicated in this document are excluded from this program.)

Starting **April 1, 2026,** providers who serve these members will need to submit authorizations for post-acute care to Home and Community Care Transitions, who will oversee associated utilization management review processes and work closely with providers to optimize care delivery and improve patient outcomes.

This review applies to skilled nursing facility (SNF), inpatient rehab facility (IRF)/acute inpatient rehab (AIR), and long-term acute care (LTAC) services, as well as home health care services. Home and Community Care Transitions will leverage their expertise in population health and long-term care management to work collaboratively with post-acute care providers and their patients in accessing quality care in the setting that’s right for them.

Processes to be managed by Home and Community Care Transitions

For applicable members, **Home and Community Care Transitions will manage the prior authorization and concurrent/continued stay review processes in SNF, IRF/AIR, and LTAC settings.** Providers can request authorization using Access, Home and Community Care Transitions’ online provider portal, and they will conduct the appropriate medical necessity review.

Keep in mind that current approved authorizations for SNF, LTAC, and IRF/AIR admissions (obtained directly through Tufts Health Plan) will continue to be valid, and a new authorization isn’t required in these instances.

In addition, providers will need to submit notification of their patients' start of care (SOC) for **home health care services** to Home and Community Care Transitions. After the initial 30 days of home health treatment, prior authorization will be required through Home and Community Care Transitions, who will perform concurrent review, which includes clinical assessments for continued medical necessity.

Other processes shifting to Home and Community Care Transitions include issuing and sending the Notice of Medicare Non-Coverage on behalf of Tufts Medicare Preferred patients and managing the Letter of Agreement process.

Information and transactions available on our respective provider portals

In advance of the April 1 effective date, Tufts Health Plan's secure online Provider Portal will be enabled with a tool to identify specific member requirements for post-acute care prior authorization and concurrent reviews.

Home and Community Care Transitions has also developed a new resource platform known as Care Transitions Partner Hub, which offers clarity on documentation requirements for authorizations and continued stay reviews, contact details, information about the Tufts Medicare Preferred/Home and Community Care Transitions partnership, training materials, and more. ▲

ABA services: authorization and accreditation updates

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together | Tufts Health Plan Senior Care Options | Tufts Health One Care | Tufts Medicare Preferred

In the October 2025 issue of *Insights and Updates for Providers*, we offered guidance on how providers should request prior authorization for applied behavioral analysis (ABA) therapy services for Harvard Pilgrim Health Care and Tufts Health Plan members in order for the claim to match appropriately to the authorization in our system.

We have since adjusted our system to allow for greater consistency across product lines, and the result is a more streamlined submission process for authorization requests.

Requesting authorization for ABA therapy services

When requesting prior authorization for ABA therapy services **for any Point32Health member**, you should submit the request **under the billing NPI of your practice (type 2)** rather than under the NPI of the individual therapist.

This applies regardless of whether the member has a Harvard Pilgrim or Tufts Health Plan product, and whether you are submitting the request as a provider group or on behalf of a clinic, etc. We anticipate that this system update will deliver an improved and simplified provider experience resulting in more efficient claims processing.

Accreditation requirements: reminder and update

In addition, as we highlighted previously, Point32Health is implementing a new requirement that all contracted ABA providers must obtain accreditation from a nationally recognized accrediting body specializing in ABA. The requirement supports a MassHealth initiative aimed at strengthening program integrity and improving access to services, and Point32Health expanded the scope to include all Harvard Pilgrim and Tufts Health Plan products across every state in our service area.

At the time of our original communication about this change, Point32Health had aligned accreditation deadlines with MassHealth across all states, with center-based ABA providers requiring accreditation by Jan. 1, 2027, and all other ABA providers (including new providers) requiring accreditation as of Jan. 1, 2028. We have since reevaluated our approach to better support successful implementation and have consequently extended the accreditation deadline for center-based ABAs in New Hampshire, Maine, and Vermont.

The new requirements are as follows:

- Center-based ABA providers in Massachusetts and Rhode Island must be accredited by Jan. 1, 2027.
- All other providers, including center-based ABA providers in New Hampshire, Maine, and Vermont, must be accredited by Jan. 1, 2028.

- After Jan. 1, 2028, all ABA providers (including new providers) must be accredited.

As a reminder, these new accreditation requirements do not impact the way in which providers are expected to bill or request authorization for ABA therapy services. You should continue to request prior authorization for your Point32Health patients in a manner consistent with the guidance offered above.

***Editor's note, Nov. 6, 2026*:** At the time of publication, we announced a Jan. 1, 2027 deadline for center-based ABA providers in Rhode Island. However, that deadline has been extended to Jan. 1, 2028, now aligning with New Hampshire, Maine, and Vermont. The Jan. 1, 2027 deadline still applies for center-based ABA providers in Massachusetts who participate in both Tufts Health Public Plans and Harvard Pilgrim Health Care; Massachusetts providers who do not participate in Tufts Health Public Plans have an July 1, 2027 deadline. Refer here for more.

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Provider portals offer ease and efficiency

Harvard Pilgrim Health Care Commercial | Tufts Health Direct|Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together | Tufts Health Plan Senior Care Options | Tufts Health One Care | Tufts Medicare Preferred

Unlocking efficiencies has never been easier! We encourage you to use our secure provider portals to perform common transactions for speed and efficiency. From real-time eligibility checks to hassle-free referral and authorization submissions, our portals put convenience at your fingertips.

Use HPHConnect for Harvard Pilgrim Health Care and the Tufts Health Plan secure provider portal for greater administrative ease to:

- Check member eligibility and benefits prior to initiating care
- Submit and receive specialty referrals
- Request authorizations, submit notification, and attach clinical documentation
- View a patient's personal health record (PHR)
- Find the status of a claim and conduct other claims transactions (functionality varies by portal)
- Communicate with us directly through the message center

Refer to our handy user guides for guidance on conducting transactions and details on the features available within each portal.

If you're not already registered, follow the simple steps online to register today for HPHConnect and the Tufts Health Plan Provider Portal and unlock all the convenient benefits our portals have to offer! ▲

Fee schedule updates in effect April 1

Harvard Pilgrim Health Care Commercial | Tufts Health Plan Commercial

Point32Health's fee schedules are reviewed regularly to ensure that they are comprehensive and consistent with industry standards.

We would like to offer a reminder that updates to our Harvard Pilgrim Health Care Commercial professional fee schedules, as well as our integrated Point32Health behavioral health fee schedule for both Harvard Pilgrim and Tufts Health Plan, will take effect on April 1, 2026.

Please note that the Centers for Medicare and Medicaid Services (CMS) is delayed in releasing updates to their laboratory codes and associated rates, which Point32Health reflects in our updated base fee schedules. If any fee schedule changes are necessitated when CMS releases the lab code rates, we will issue another communication to inform the network in an upcoming issue of *Insights and Updates for Providers*. ▲

Enhanced Find a Provider search for members

Harvard Pilgrim Health Care Commercial

Point32Health is glad to share that we recently enhanced Harvard Pilgrim Health Care's Find a Provider search for members. With upgraded **search options, provider comparison tools,** and a convenient **"Book Now" feature,** it's now easier than ever for members to locate provider information, so they can access the care they need.

Offering more personalization, our enhanced provider search includes expanded details to support member preferences for provider language, gender, location, and hospital affiliations. And with simpler navigation, members will feel minimal disruption using the new search, which remains accessible via Harvard Pilgrim Health Care's homepage and mobile app.

We're pleased to launch this improved functionality for members seeking the important provider information they need. With the transition of Harvard Pilgrim's provider search to the same award-winning platform that drives our Tufts Health Plan provider search, we're continuing to align Point32Health's processes and strengthen our commitment to delivering a better and more unified experience for both members and providers. ▲

Elective inpatient medical admissions reminder

Harvard Pilgrim Health Care Commercial

As we communicated in last month's issue of *Insights and Updates for Providers*, effective for dates of service beginning April 1, 2026, for our Harvard Pilgrim Health Care Commercial members, **we will require prior authorization for elective inpatient medical admissions, including elective oncology admissions for the administration of chemotherapy drugs, and will apply level of care reviews.**

These medical necessity reviews, which will be performed using InterQual criteria, will assess whether it's more appropriate for a given service or drug to be administered in the inpatient setting or an outpatient setting.

Please keep in mind that in addition to the authorization for the elective inpatient medical admission itself, you'll need to continue to follow existing processes for any associated drugs or services requiring prior authorization — including the submission of any necessary accompanying clinical documentation. For example, while Point32Health will apply level of care reviews to the planned administration of chemotherapy drugs, the drugs themselves will still be reviewed separately by OncoHealth.

Harvard Pilgrim's Commercial Provider Manual will be updated in advance of the April 1 effective date to reflect this change.

Editor's note:
Based on further review of utilization management processes and feedback from our providers, **we have elected not to proceed with this change** and will no longer be implementing a prior authorization requirement or level of care reviews for elective inpatient medical admissions. ▲

Rhode Island Medicaid enrollment/screening

Tufts Health Together

As a reminder, if you are a Rhode Island Medicaid provider who hasn't completed screening and enrollment with the state Medicaid program, it is important to do so to ensure that you can continue participation in our Tufts Health RITogether network.

The 21st Century Cures Act requires states to screen and enroll all providers who treat Medicaid members, regardless of specialty. Providers who are not screened and enrolled risk removal from the Medicaid network.

If you haven't already, make sure to complete the RI Medicaid screening and enrollment process so that you can continue to receive reimbursement for Tufts Health RITogether members and ensure you can remain in our Tufts Health RITogether network in the future.

How to access the Medicaid enrollment/screening application:

- **Go to** the RI Medicaid Healthcare Portal to initiate a new provider application. There, you can also resume enrollment of an existing application, check the status of a submitted enrollment application, and view the Medicaid Provider Enrollment User Guide.
- **For additional information,** visit the Rhode Island Executive Office of Health and Human Services or call the Rhode Island Medicaid Customer Service Help Desk at 800-964-6211.

We encourage you to complete the process as soon as possible to avoid any interruption. ▲

Prior authorization update for prosthetics

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together | Tufts Health Plan Senior Care Options | Tufts Health One Care | Tufts Medicare Preferred

Point32Health is pleased to share that we have reevaluated our utilization management criteria related to upper and lower limb prosthetic devices and will now only require prior authorization for microprocessor/complex components of prosthetics.

Prior authorization is no longer required for the standard prosthetic build codes indicated on this document.

We've updated the following Medical Necessity Guidelines to reflect this change:

- Lower Limb Prostheses Medical Necessity Guidelines (Commercial and Public Plans)
- Upper Limb Prostheses Medical Necessity Guidelines (Commercial and Public Plans)
- Tufts Medicare Preferred (HMO and PPO) Prior Authorization, Notification, and No Prior Authorization Medical Necessity Guidelines
- Tufts Health Senior Care Options Prior Authorization, Notification, and No Prior Authorization Medical Necessity Guidelines

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Point32Health Medical Necessity Guideline updates

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together | Tufts Health Plan Senior Care Options | Tufts Health One Care | Tufts Medicare Preferred

The chart below identifies updates to our Medical Necessity Guidelines. For additional details, refer to the Medical Necessity Guidelines page on our Point32Health provider website, where you can find coverage and prior authorization criteria for our Harvard Pilgrim and Tufts Health Plan lines of business.

Updates to Medical Necessity Guidelines (MNG)			
Title	Products affected	Eff. date	Summary
Lower Limb Prostheses	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care	2/1/2026	Prior authorization will only be required for microprocessor/ complex components of prosthetics, and is no longer required for these standard prosthetic build codes.

Updates to Medical Necessity Guidelines (MNG)			
Title	Products affected	Eff. date	Summary
Upper Limb Prostheses	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care	2/1/2026	Prior authorization will only be required for microprocessor/ complex components of prosthetics, and is no longer required for these standard prosthetic build codes.
Tufts Medicare Preferred (HMO and PPO) Prior Authorization, Notification, and No Prior Authorization Medical Necessity Guidelines Tufts Health Senior Care Options Prior Authorization, Notification, and No Prior Authorization Medical Necessity Guidelines	Tufts Medicare Preferred, Tufts Health Plan Senior Care Options	2/1/2026	Prior authorization will only be required for microprocessor/ complex components of upper limb prosthetics, and is no longer required for these standard prosthetic build codes.
Medicare Noncovered Investigational Services	Tufts Medicare Preferred, Tufts Health Plan Senior Care Options	2/1/2026	Removed CPT code 27278 from the policy, as we will now cover this code in alignment with CMS's local coverage determination.
Noncovered Investigational Services	Tufts Health One Care	2/1/2026	Removed CPT codes 27278 and 0080U from the policy, as we will now cover these codes in alignment with CMS's local coverage determination.
Noncovered Investigational Services	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether	2/1/2026	Bladder EpiCheck test added to the policy to reflect that it is no longer covered.
Power Wheelchair	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct	2/1/2026	Removed limitation on "Power seat elevation system, any type," which now reports to the covered CPT code E2298.
Implantable Neurostimulators	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health Together, Tufts Health RITogether, Tufts Health One Care	2/1/2026	Minor revisions to criteria for sacral nerve stimulators related to urinary retention. Added criteria for sacral nerve stimulators related to Fecal Incontinence.

Updates to Medical Necessity Guidelines (MNG)			
Title	Products affected	Eff. date	Summary
AposTherapy System	Tufts Health Plan Commercial, Tufts Health Direct	2/1/2026	Removed Tufts Health Plan Commercial and Tufts Health Direct as applicable products for this MNG.
Non-Emergent Ambulance Transportation for Tufts Medicare Preferred (HMO and PPO)	Tufts Medicare Preferred	2/1/2026	Prior authorization is no longer required for hospital-to-SNF transfers. We will continue to evaluate prior authorization requirements in the future and will provide appropriate notice in the event that authorization is reinstated.
Children's Behavioral Health Initiative – Family Based Intensive Treatment (FIT)	Tufts Health Together	1/1/2026	Minor criteria changes to align with 1/1/2026 updates to MassHealth criteria.
Children's Behavioral Health Initiative In-Home Behavioral Services Children's Behavioral Health Initiative In-Home Therapy (IHT) Services Children's Behavioral Health Initiative Therapeutic Mentoring (TM) for Tufts Health Together	Tufts Health Together	1/1/2026	Minor criteria changes to align with 1/1/2026 updates to MassHealth criteria, and MNGs updated to include references to family based intensive treatment.
Bariatric Surgery	Tufts Health Together, Tufts Health One Care	1/1/2026	CPT code 43889 now covered with prior authorization.

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Point32Health medical drug program updates

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together | Tufts Health Plan Senior Care Options | Tufts Health One Care | Tufts Medicare Preferred

The chart below identifies updates to our medical benefit drug program. For additional details, refer to the Medical Necessity Guidelines associated with the medical drug in question, which you can find on our Point32Health (the parent company of Harvard Pilgrim Health Care and Tufts Health Plan) Medical Benefit Drug Medical Necessity Guidelines page.

Alternatively, some medical drugs are managed through an arrangement with OncoHealth when utilized for oncology purposes for Harvard Pilgrim members. You can find information about this program on the

OncoHealth page in the Vendor Programs section of Point32Health's provider website and you can access the prior authorization policies for these drugs directly on OncoHealth's webpage for Harvard Pilgrim.

Tufts Health Together utilizes MassHealth's Unified Formulary for pharmacy medications and select medical benefit drugs; for drug coverage and criteria refer to the MassHealth Drug List.

New prior authorization programs		
Drug/MNG	Plan & additional information	Eff. date
Ryoncil (remestemcel-L)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health RITogether Ryoncil (J4302) is now covered with prior authorization for for the treatment of steroid-refractory acute graft versus host disease (SR-aGvHD) in pediatric patients 2 months of age and older.	2/1/2026
Encelto (revakinagene taroretcel-lwey)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health RITogether Encelto (J3403) is now covered with prior authorization for the treatment of adults with idiopathic macular telangiectasia type 2 (MacTel).	2/1/2026
Updates to existing prior authorization programs		
Drug/MNG	Plan & additional information	Eff. date
Elevidys (delandistrogene Moxeparvovec-rokl)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health RITogether In the August issue of *Insights and Updates for Providers*, Point32Health announced that we would no longer offer coverage of the gene therapy Elevidys for the treatment of Duchenne muscular dystrophy effective July 22, 2025, due to potential safety concerns announced by the U.S. Food and Drug Administration (FDA). We have since re-reviewed this medication according to updated FDA label recommendations, and **we are resuming coverage of Elevidys (J1413) effective immediately with updated prior authorization criteria.**	2/1/2026
Lenmeldy (atidarsagene autotemcel)	Harvard Pilgrim Commercial, Tufts Health Plan Commercial, Tufts Health Direct, Tufts Health RITogether Minor revisions to criteria language.	2/1/2026

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Reminder: preferred biosimilars to Humira and Stelara

Tufts Health Together

As a reminder, as of Jan. 5, 2026, several adalimumab and ustekinumab biosimilars are preferred on MassHealth's formulary. Humira and Stelara will continue to be covered through March 31, 2026, to allow Tufts Health Together members sufficient time to transition to one of the following:

- **Preferred biosimilars to Humira:** Hadlima (adalimumab-bwwd) and adalimumab-adaz
- **Preferred biosimilars to Stelara:** Pyzchiva (ustekinumab-ttwe) and Imuldosa (ustekinumab-srlf). In addition, Steqeyma (ustekinumab-stba) will be accessible at parity with preferred ustekinumab biosimilars.

Effective April 1, 2026, Humira and Stelara will be designated as non-preferred and will be subject to a step therapy requirement: members will be required to have tried and failed all preferred biosimilars before coverage will be granted for Humira or Stelara. A new prior authorization will be required for patients who have not switched to a preferred biosimilar.

Hadlima and adalimumab-adaz, and Pyzchiva and Steqeyma are approved by the Food and Drug Administration (FDA) as interchangeable with Humira and Stelara respectively and can be substituted at the pharmacy without requiring a new prescription. Imuldosa is not FDA-approved as interchangeable with Stelara and will therefore require a new prescription. ▲

Pharmacy coverage changes

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial

You can refer to this chart to review changes and updates related to Point32Health's Pharmacy Medical Necessity Guidelines.

Drug status changes			
Drug	Plan	Eff. date	Policy & additional information
New-to-Market Drugs	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, Tufts Health Direct	4/1/2026	Non-Formulary Exceptions New-to-market Pharmacy benefit drugs will be excluded from coverage. For members with a life-threatening condition, exceptions requests may be granted in accordance with the criteria identified on the Non-Formulary Exceptions Pharmacy Medical Necessity Guidelines. *Editor's note: this initiative was delayed to a June 1, 2026 effective date.*
Drugs moving to non-formulary status			
Drug	Plan	Eff. date	Policy & additional information
Tresiba	Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial	4/1/2026	Tresiba Tresiba will be moved to non-formulary status on the Select and Value formularies.

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Point32Health Payment Policy updates

Harvard Pilgrim Health Care Commercial | Tufts Health Direct | Tufts Health Plan Commercial | Tufts Health RITogether | Tufts Health Together | Tufts Health Plan Senior Care Options | Tufts Health One Care | Tufts Medicare Preferred

Please refer to the chart below for information on new and updated Payment Policies. For details, access the policies listed below by visiting the Payment Policies section of our Point32Health provider website.

Updates to Payment Policies			
Title	Products affected	Eff. date	Additional information
Non-Covered Services	Harvard Pilgrim Health Care	1/1/2026	HCPCS codes G0660-G0668 for remote evaluation and management services added to the policy as non-covered.
Radiology	Harvard Pilgrim Health Care	1/1/2026	Minor administrative coding updates.

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