Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:
Limited Services Clinics

Applies to:

Commercial Products

☒ Harvard Pilgrim Health Care Commercial products
☒ Tufts Health Plan Commercial products

Public Plans Products

☒ Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
☒ Tufts Health Together – MassHealth Accountable Care Partnership Plans
☒ Tufts Health RITogether – A Rhode Island Medicaid Plan
☒ Tufts Health One Care – A dual-eligible product

Senior Products

☒ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
☒ Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy

Point32Health reimburses contracted limited service providers in a licensed retail setting according to the ancillary provider agreement.

Prerequisites

Applicable Point32Health referral, notification and authorization policies and procedures apply. Refer to the appropriate sections within the Provider Manuals for more information.

General Benefit Information

Services are pursuant to the member's benefit plan documents and are subject to applicable member out-of-pocket cost (e.g., copayment, coinsurance, deductible). Member eligibility and benefit specifics should be verified prior to initiating services.

Use of non-contracted labs may have the unintended consequence of subjecting the member to unnecessary services not ordered by the treating provider or other unreasonable financial exposure. In such circumstances, Point32Health may hold the ordering provider accountable for any inappropriate behavior on the part of the nonparticipating lab that has been selected.

Point32Health Reimburses

- Durable medical equipment dispensed by the limited service provider, when included in provider agreement
- Specific CPT codes representing minor health care issues

Point32Health Does *Not* Reimburse

- Discrete facility charges
- Handling fees, routine blood draws, special reports, or telephone management billed with evaluation and management codes
- Routine and preventive services when provided in a retail setting
- Services that are not provided or dispensed by a contracted limited service provider
- Any other service that is not defined in the provider agreement

Provider Billing Guidelines and Documentation

Coding

Reference your ancillary provider agreement for specific codes and services that are covered.

Other Information

- Limited service providers must use a CMS-1500 claim form or electronic 837P to bill for services, using Place of Service (POS) 17- Walk-in retail clinic. The assigned provider ID number should be entered in both Provider ID and Payee ID indicator fields.
- Facility reimbursement is included in the professional fee and will be denied when billed separately; the member is not liable for these charges.

Related Policies and Resources

Payment Policies

- Durable Medical Equipment (DME) and Medical Supplies
- Evaluation and Management
- Vaccination and Immunization

Publication History

09/01/2026: Annual policy review; administrative updates
09/01/2025: Annual policy review; administrative updates
08/30/2024: Annual policy review; no changes
11/01/2023: Policy moved to new template, includes all lines of business

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.