

**MA Substance Use Disorder (SUD) Mandate
MA Products**

Coverage FAQs for Inpatient and Acute Residential Treatment (ART) SUD for Fee-for-Service Facilities (FFS)

Product	Does the Mandate apply?	When does the Mandate apply?	Where does member have coverage?	When can UM begin?	Registering Care	Reporting a Discharge
MA HMO-Capitated Members	Yes	10/1/15	At their Designated Facility (DF) or FFS facility to which the DF directs member to receive treatment.	DF may begin UM on the 7th <u>consecutive</u> day of treatment if they direct coverage to Out of DF (OODF) but cannot request a review for a coverage determination until the member has had 14 <u>consecutive</u> days of treatment.	Inpatient care continues to require notification through the Precertification Department by the admitting facility. ART Level of Care (LOC): The FFS facility should notify the DF of the admission and the DF will notify Tufts Health Plan.	If the DF directs care to the FFS facility, the DF is responsible for reporting the discharge.
MA HMO – Fee-for-Service (FFS) Members	Yes	10/1/15	At a DF or a contracting facility (benefit rules apply).	The admitting facility should fax the 7 Day Treatment Form after seven days of consecutive treatment. Tufts Health Plan will begin to conduct UM on the 14 th consecutive day of treatment.	Inpatient care continues to require notification through the Precertification Department. Notification for SUD inpatient admissions is required within 48 hours of admission. ART LOC: The FFS facility should fax the Notification Form to 617.673.0302. Notification for SUD ART admissions is required within 48 hours of admission.	Discharges should be reported by faxing the Notification Form to 617.673.0302.

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MA Fully Insured Products (PPO, POS)	Yes	10/1/15	Benefit rules apply.	The admitting facility should fax the 7 Day Treatment Update Form to 617.673.0302 after seven days of consecutive treatment. Tufts Health Plan will begin to conduct UM on the 14 th consecutive day of treatment.	Inpatient care continues to require notification through the Precertification Department. Notification for SUD inpatient admissions is required within 48 hours of admission. ART LOC: The FFS facility should fax the Notification Form to 617.673.0302. Notification for SUD ART admissions is required within 48 hours of admission.	Discharges should be reported by faxing the Notification Form to 617.673.0302.
MA Self-Insured Products (EPO, PPO, POS)	Maybe. Employer group makes the decision whether to elect.	Call the Behavioral Health Department during business hours at 800.208.9565 and ask a Service Coordinator if the Mandate is in effect or ask your Case Manager with whom you review admissions at Tufts Health Plan.	If elected, benefit rules apply.	If elected, the admitting facility should fax the 7 Day Treatment Update Form to 617.673.0302 after seven days of consecutive treatment. Tufts Health Plan will begin to conduct UM on the 14 th consecutive day of treatment.	Notification through the Precertification Department. If elected notification for SUD inpatient admissions is required within 48 hours of admission. ART LOC: The FFS facility should fax the Notification Form to 617.673.0302. Notification for SUD ART admissions is required within 48 hours of admission.	Discharges should be reported by faxing the Notification Form to 617.673.0302.

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GIC Tufts Medicare Complement Plan	Yes	10/1/15	Benefit rules apply.	The admitting facility should fax the 7 Day Treatment Update Form to 617.673.0302 after seven days of consecutive treatment. Tufts Health Plan will begin to conduct UM on the 14 th consecutive day of treatment	Notification through the Precertification Department. Notification for SUD inpatient admissions is required within 48 hours of admission. ART LOC –The FFS facility should fax in the Notification Form to 617.673.0302. Notification for SUD ART admissions is required within 48 hours of admission.	Discharges should be reported by faxing the Notification Form to 617.673.0302.
GIC Tufts Medicare Preferred HMO	Yes	10/1/15 To check if a member is a Tufts Medicare Preferred HMO member through the GIC, use the secure Provider website under the Eligibility Tab where it indicates Plan Type. Plan Type= Tufts Medicare Preferred EG GIC SRX - HMO Prime Rx and Group ID=1044	Benefit rules apply.	The admitting facility should fax the 7 Day Treatment Update Form to 617.673.0302 after seven days of consecutive treatment. Tufts Health Plan will begin to conduct UM on the 14 th consecutive day of treatment.	Notification through the Precertification Department. Notification for SUD inpatient admissions is required within 48 hours of admission.	Discharges should be reported by faxing the Notification Form to 617.673.0302.

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Tufts Health Plan SCO	Yes	10/1/15 Call Tufts Health Plan SCO Provider Relations at 800.279.9022 for information.	Benefit rules apply.	On 7 th day facility should fax the 7 Day Treatment Update Form. May begin UM on 14 th <u>consecutive</u> day of treatment.	Call the Tufts Health Plan SCO Admission Notification Department.	Call the Behavioral Health Department at 800.208.9565 and ask to speak with a Program Coordinator.
USFHP	No					
Complement/ Supplement Plans	No					
Tufts Medicare Preferred HMO	No					
Tufts Freedom Health Plan	No					

What does 14 consecutive days mean? A member may begin SUD treatment at inpatient level of care and then step down to ART level of care with no breaks between levels of care and be covered for 14 days.

How should the FFS facility notify Tufts Health Plan of an inpatient admission? They should use the secure Provider website.

How should the FFS facility notify Tufts Health Plan of an ART (or PHP and IOP) admission? They should fax the Notification Form to 617.673.0302. The form can be found on the [Tufts Health Plan website](#) in the Behavioral Health section (under the Program Information tab, select Inpatient Mental Health & Substance Abuse) or in the Forms section.

How should the FFS facility notify Tufts Health Plan of a discharge? They should fax the Notification Form to 617.673.0302. The form can be found on the [Tufts Health Plan website](#) in the Behavioral Health section (under the Program Information Tab, select Inpatient Mental Health & Substance Abuse) or in the Forms section.

What is the Notification Form? The Notification Form is for FFS facilities to notify Tufts Health Plan of a SUD Intermediate Level of Care (ILOC) admission or to report a SUD discharge.

What is the 7 Day Treatment Update Form? On day 7 of seven consecutive days of treatment (Inpatient and/or ART) for FFS admissions, Tufts Health Plan may conduct UM (but cannot make a coverage determination). A 7 Day Treatment Update Form was created for facilities to fax to 617.673.0302. The form asks for some clinical information and the treatment and discharge plans.

Who makes UM determinations prior to day 14? The attending physician and the member decide together if the treatment and level of care are medically necessary.

What if the member and attending physician disagree about whether the treatment is medically necessary? The member may call Tufts Health Plan and file a grievance, but Tufts Health Plan cannot make a coverage determination if the requested level of care is for Inpatient or ART.