

Mass General Brigham ACO Frequently Asked Questions

1. There is already a Mass General Brigham Accountable Care Organization (ACO) so what does this transition mean?

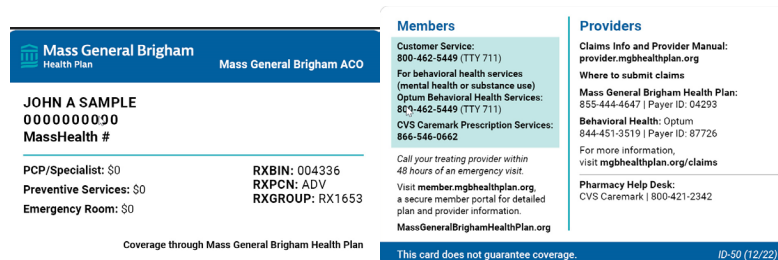
Mass General Brigham ACO currently partners with MassHealth as the payer. Starting April 1, 2023, Mass General Brigham (the delivery system) will partner with Mass General Brigham Health Plan for ACO patients. Members who have Mass General Brigham Accountable Care Organization (ACO) today will remain with Mass General Brigham Accountable Care Organization (ACO) unless they opt for another plan/provider.

2. When will this transition happen?

This transition will be effective on April 1, 2023.

3. Will patients have new ID cards?

Yes, members will receive new ID cards to reflect Mass General Brigham Health Plan contact information.



4. Will there be a change to the network?

Yes, the network will now be the Mass General Brigham Health Plan ACO Network. For a complete list of providers within the Mass General Brigham ACO network please [visit our directory](#).

5. Will my existing contract with Mass General Brigham Health Plan be valid under the new ACO product?

Yes, your existing commercial contract with Mass General Brigham Health Plan will still be valid. To confirm your participation in the Mass General Brigham Health Plan ACO please reference [our provider directory](#).

- 6. How do I confirm if I am participating in the Mass General Brigham Health Plan ACO network?**
You can confirm your participation by utilizing [our provider directory](#) by calling 855-444-4647 or by emailing providerservice@allwayshealth.org.
- 7. Will members require a Primary Care Provider?** Yes, primary care services will be provided by Mass General Brigham and Mass General Brigham affiliated PCPs as well as Lawrence Health Solutions and Community Medical Associates who are affiliated with Lawrence General Hospital.
- 8. Will members have access to Behavioral Health coverage?** Yes, members will now use the Optum network.
- 9. Where will members obtain Pharmacy benefits?** Yes, pharmacy benefits will now be administered through CVS.
- 10. Are authorizations required for the MGB ACO members?**
Yes, please review the [prior authorization requirements/grid here](#). Authorization requests should be submitted via the [Mass General Brigham Health Plan Provider Portal](#)
- 11. What if my members/patients are in care management? Will that continue?**
Yes, members will continue in care management programs. As we have more information about Community Partners, we will update providers on any potential impacts and create a plan as needed.
- 12. Can I check eligibility for Mass General Brigham Health Plan ACO members via the provider portal?**
Yes, all eligibility can be checked by visiting the [Mass General Brigham Health Plan Provider Portal](#)
- 13. Is there a separate customer service line for Mass General Brigham ACO members?**
Providers can continue to utilize the existing Provider Services line by calling 855-444-4647 or by emailing providerservice@allwayshealth.org.
- 14. Will there be any changes to the claims mailing address?**
No, there is no change for paper claim submission. Providers should refer to the following [claims landing page](#).
- 15. Will the electronic payer ID be the same for Mass General Brigham Health Plan ACO?**
The electronic payer ID will remain the same.
- 16. Will there be a change to the time frame for claim submission for this product?**
We plan to adhere to the current standard filing rules, which is 90 days unless otherwise specified in your contract. Providers should refer to their contracts for any questions.