

Provider Portal Overview

Agenda

- 1. Accessing Member Rosters
- 2. Accessing Site Provider Rosters
- 3. Processing a PCP Change
- 4. Provider Enrollment/Data Changes
- 5. Provider Enrollment Submission Guidelines & TaT



Provider Portal

The MGBHP provider portal is your one-stop-shop for managing your MGBHP patients. Through the portal, you have real-time access to:

- Verify patient eligibility
- Verify claims status
- Submit or check authorizations/referrals
- Access your explanation of payments (EOPs)
- View member and provider roster reports
- Update your practice information
- And much more!

If you do not have access to Our Provider Portal, you can register at:

https://provider.massgeneralbrighamhealthplan.org/



Accessing Member Rosters



Accessing the Member Roster in the Portal:

On the main page select *View a Report*.

Then select *Member Roster Report*





Viewing the Member Roster

Bass General Brigham Health Plan	Enrollment Report Viewer
Close Report	
Show Members Enrolled Under Company Product:	Show Members Assigned To PCP:
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- Once you are in the report select the line of business you are interested in viewing: *Commercial or Medicaid* ACO (or both).
- You can view members assigned to an individual PCP or view them for all of the PCPs at the site. Depending on provider setup or your access, you may have to generate a roster for each site separately.

Important: Please allow 1-2 minutes for the report to generate.

Viewing the Member Roster



Once the report generates you will be able to see information such as:

- Member Name, ID, DOB, date of enrollment & PCP effective date and more!
- This report can be exported to be viewed as in Excel, Word, PowerPoint etc. (*see red arrow*)

Accessing Site Provider Rosters



Accessing the Provider Roster in the Portal:

On the main page select *View a Report*.

Then select *Site Provider Roster Report*





Viewing the Provider Roster

Bass General Brigham Health Plan	Enrollment Report Viewer
Close Report	
As Of Date: 12/18/2023 Practice Affiliation:	Y View Report
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• Once you are in the report you can choose an As of Date to pull a current or a historical view of Provider's that are linked to the practice

Important: Please allow 1-2 minutes for the report to generate.

Viewing the Provider Roster

Close Report							
Of Date: 12/7/2023		Practice Affiliation	: Y, N		~		
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Practitioner is open to natient

provider is a PCP, Effective Date, Panel

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Status, and if they are active with the Practice

Provider Name, Primary Specialty, if the

Once the report generates you will be able to

see information such as:

- This report can be exported to be viewed as in Excel, Word, PowerPoint etc. (*see red arrow*)
- <u>Please note</u>: this is a helpful way to reconcile Provider rosters and identify any enrollment needs/changes that can be submitted via the Enrollment Tool on the Portal



On the main page select **Member Info** then **PCP Change.**



<u>Important</u>: If this option is not available you may not have permission to do so. Please speak with your site's User Administrator to have your access updated to include this function <u>Note</u>: please verify you are under a site that has PCPs attached to it. This includes satellite locations

- Choose a search option that best fits the information you have for the patient, fill in the fields, and then click search
- Verify you have the correct information and then click <u>Select</u>

Important: The fields are character and case specific



Enter any one of the following member information criteria to search for a member.



- This screen will show you all PCPs at your location
- There may be multiple pages
- You can search for a specific PCP at your location using the search box
- Choose <u>Select</u> once you find the correct PCP's name

Primary Care Provider (PCP) Changes



This is the verification Screen

- It will display the member and current assigned PCP information at the top
- Please verify the correct site and PCP is displayed in the dropdown
- Enter an effective date for the new PCP assignment
- Finally confirm consent and click submit

Primary Care Provider (PCP) Changes



<u>*Tip*</u>: It is best to choose a date that is not before or the same as the current PCP effective date. If this is done it will often cause an error and will require the Health Plan to manually process the change which may cause delays in the change showing

PCP Change Rules for MGB ACO

•The provider the member is being assigned to must have an open panel.

•The provider the member is being assigned to must accept the member's plan type.

- •PCP assignments can be backdated for up to 60 days.
 - MGB ACO New PCP must be within the same primary care site.
- •Future PCP assignments are limited to 60 days from today's date.

When applicable, PCP assignments will carry over across multiple coverage segments.
Please do not submit duplicate requests.

• We've resolved an issue that prevented retroactive changes due to member ID & Enrollment segment changes

Provider Enrollment/Data Changes



Accessing Provider Enrollment Portal

On the main page select **Enrollment** then **Overview**



Important: If this option is not available you may not have permission to do so. Please speak with your site's User Administrator to have your access updated to include this function.



Provider Enrollment Portal Changes

The provider enrollment tool lets you manage updates, changes, and additions to your practice

- This page will indicate the sites/locations you have access to make enrollment changes for.
 - Available sites will show in My Managed Groups
- This page will show you a timeline of your in-progress submissions



Provider Enrollment Portal Changes

Here you can choose what you'd like to change/adjust

- Practice Info
- Individual Provider info
- You can also add a new provider



Provider Enrollment Portal Individual Provider Changes

Name: Degree: NPI: This screen will show the current Provider Type: information we have loaded for the Date Of Birth: Social Security Number: Ethnicity: Gender: individual Provider Including: Email: Name Languages Spoken: NPI Primary Specialty: Specialty: Specialty Effective: Termination: Type: Status: CERTIFIED **Effective date** Status Secondary Specialties: None and more. License Number: DEA Number: License Expiration: DEA Number Expiration: If any data needs to be updated or if a Medicare Number: MMIS Number: panel needs to be modified, click the lotify Mass General Brigham Hea Notify Mass General Brigham Health Plan button **Current Transactions** Transaction Number Created Status Туре No Current Transactions

Provider Enrollment Portal Practice Changes

When choosing to make an update the screen will show the current information we have on file.

You will have the option to make note of any changes in the details field

 Please make sure to attach any required forms when requesting a change to ensure timely processing.

Group:		
Group Type: NPI	Тах І	D.
Physical Address:	Billing Addres	s:
Phone:	Fa	x:
Type Of Change:	Choose	~
Details:		
		1.
Attach File:	Choose File No file chosen	
	Submit Cancel	

Request Other Change For QUINCY PEDIATRIC ASSOCIATES

Provider Enrollment Portal Individual Provider Changes

Choose an option from the dropdown that most closely fits your request. If one does not match choose Name change and include notes in the Details box.

- Please make sure to attach any required forms when requesting a change to ensure timely processing.
- Panel Change requests do not require a form

Request Other Change For BELCHER, DAVID M.

Provider:	BELCHER, DAVID M.			
Provider Type:	PHYSICIAN			
NPI:	1578554713	Title/Degree:	MD - Medical Doctor	
Gender:	Μ	Date Of Birth:	01/06/1962	
Type Of Change:	Choose			~
Details:				
				1.
Attach File:	Choose File No file chosen			
	Submit	Cancel		
	Date Of Birth Correction	on		
	Name Change			

Provider Enrollment Submission Guidelines

<u>Please note</u>: Most requests can be submitted via the Provider Portal Enrollment Tool *exceptions are Practice Closures*

All emailed Provider Enrollment transactions should be sent to the to <u>HealthPlanPEC@MGB.ORG</u> If urgent: Please include Shannon Mulvey (<u>Smulvey@mgb.org</u>)

Panel Changes

PEC updates within 24/48 hours

Practice Closures

Notify the health plan at least 60 days in advance via both emails above If PCP, notify plan of how the providers panel should be distributed

Individual Provider Term

Notify the plan 60 days in advance.

If PCP, notify plan of how the providers panel should be distributed

Initial Provider Enrollment

TAT 30-45 days

Billing Address Changes

**As a reminder this slide is an overview of details that were discussed during the RSO meeting with Abbey. Those details are attached to the end of this deck for your reference

Submitted to PEC with W9 *Please note if you would like the Physical address, business address, or both to be updated*

Mass General Health Plan Contacts

Provider portal: Claims status, eligibility, EOP	
	Mass General Brigham Health Plan Provider Portal
Claims issues, benefits	Provider Service 855-444-4647 <u>HealthPlanproviderservice@mgb.org</u>
Portal IT support	HealthPlanprweb@mgb.org
Provider enrollment and credentialling, directory issues	HealthPlanpec@mgb.org
Medical policies, payment policies, provider manual, provider directory, drug lookup, forms	<u>Providers Mass General Brigham Health Plan</u>
Audit denial inquiries	<u>healthplanaudit@mgb.org</u>

Resources

- **Provider Portal** <u>Mass General Brigham Health Plan Provider Portal</u>
 - Member management tool, Provider enrollment, Eligibility verification etc.
- Provider Education Landing Page Provider education | Mass General Brigham Health Plan
 - Access webinars, factsheets, and other tools that make it easy to do business with us.
- Claims Landing Page <u>Claims information (massgeneralbrighamhealthplan.org</u>)
 - Access Payer ID numbers and addresses for submitting medical and behavioral health claims.
- Public Website Provider Tab Providers | Mass General Brigham Health
 - We aim to deliver an optimal provider experience with easy-to-use tools that support you, your patients, and your healthcare practice.

Stay connected

Visit the following links to register:

- Admin Newsletter Archive | Mass General Brigham Health Plan
- MGBHP blog

Administrative Newsletter (monthly)

Includes important administrative updates that make it easier for your practice to do business with us Best Practice Provider Blog (twice per week)

Get the latest in health and health insurance trends, news, and tips



Follow us on Twitter @MGBHealthPlan

Questions?

Appendix



PCP Provider Enrollment Guidelines

Provider Enrollment Updates

Through the <u>MGBHP Provider Portal</u>, Mass General Brigham Health Plan provides updated PCP assignment information daily to PCP offices.

 Discrepancies in a patient's PCP information can be systematically corrected by the PCP office through the MGBHP Provider Portal.

The primary way to notify Mass General Brigham Health Plan of enrollment changes is through the <u>MGBHP</u> <u>Provider Portal</u>.

Requests that can be submitted through the provider portal include:

- **Enroll** a new clinician into your group (TAT 30-45 days)
- **Terminate** an existing clinician from your group (TAT 60 days)
- **Open and close your panels** (updates completed within 24/48 hrs)
- □ Provider demographic changes (for billing address changes please include W9)

Key Submission Guidelines

For all urgent matters related to provider enrollment or if you require additional assistance, please email <u>Healthplanpec@mgb.org</u> and cc the Supervisor of Enrollment: Shannon Mulvey – <u>smulvey@mgb.org</u>

Panel Updates/Changes:

- Submit via MGBHP Provider Portal or via email.
- HP PEC completes updates within 24/48 hours.

Individual Provider Termination:

- Must notify the Health Plan 60 days in advance.
- Submit via MGBHP Provider Portal or via email.
- Notify Health Plan where the provider's panel should be distributed.

Practice/Group Closure:

- Must notify the Health Plan 60 days in advance.
- Submit via email only to the <u>HP PEC team</u> and cc <u>Shannon Mulvey (Supervisor of enrollment)</u>.
- Notify Health Plan where the provider's panel should be distributed.

Individual Provider Terminations

For **providers terminating from a practice**, Mass General Brigham Health Plan requires written notification at least <u>60</u> days prior to the practitioner's termination date unless otherwise agreed upon.

The notification must be submitted through the Provider Enrollment Portal within the <u>Mass General Brigham</u> <u>Health Plan Provider Portal</u>, on the standardized provider information change form, or using a similar document on the provider's stationery that includes at a minimum:

- □ The provider's name
- NPI number
- □ Effective date of termination
- □ Reason for termination
- □ If PCP, panel re-assignment instructions
- □ Signature and title of the person submitting the notification

Once the request is completed by the MGBHP Provider Enrollment & Credentialing team, an email confirmation is sent back to the person who submitted the request.

Providers are also able to notify the HP Provider Enrollment & Credentialing team via email: <u>healthplanpec@mgb.org</u>

Individual Provider Terminations - Scenarios

Individual provider at a site is moving from being an active PCP with a panel to the following:

- As a covering provider without an active panel MGBHP will remove that provider's panel and remove them from the <u>MGBHP Provider Directory</u>. MGBHP would reassign provider's panel based on the practice instructions; practice must supply this information.
 - If the provider is the only active PCP at the site, then this is considered a practice closure.
- Terms from site or from the ACO MGBHP will remove that provider's panel, terminate them from site and remove them from the <u>MGBHP Provider Directory</u>. MGBHP would reassign provider's panel based on the practice instructions; practice must supply this information.
 - If the provider is the only active PCP at the site, then this is considered a practice closure.
- Moves to Specialist MGBHP will remove that provider's panel and remove them from the <u>MGBHP Provider</u> <u>Directory</u>. MGBHP would reassign provider's panel based on the practice instructions; practice must supply this information.
 - If the provider is the only active PCP at the site, then this is considered a practice closure.

Practice/Group Closure

If a practice is closing, Mass General Brigham Health Plan requires written notification at least <u>60</u> days prior to the termination date unless otherwise agreed upon. This allows for timely notification to the members impacted by the closure.

The notification to MGBHP must be <u>submitted via email</u> to the HP Provider Enrollment & Credentialing team at <u>healthplanpec@mgb.org</u>. Please also include the Supervisor of Provider Enrollment Shannon Mulvey <u>smulvey@mgb.org</u>.

The standardized provider information change form, or a similar document on the provider's stationery is required that includes at a minimum:

- □ The practice name
- □ NPI number/TIN
- □ Effective date of closure
- □ Reason for closure
- □ If PCP practice, panel re-assignment instructions*
- □ Signature and title of the person submitting the notification
- Draft of <u>member notification letter</u> for Health Plan & Mass Health approval

*The practice is required to notify the members of the anticipated closure. It is vital that MGBHP is informed on where the members are to be assigned at least 45 days in advance. If this is not provided by the 45 days, then MGBHP will auto-assign these members.

Summary Recap: Provider Enrollment Submission Guidelines

Please note: Most requests (exceptions are Practice Closures) can be submitted via the Provider Portal Enrollment Tool

All emailed Provider Enrollment Transactions should be sent to the HP PEC team (<u>HealthPlanPEC@mgb.org</u>) If urgent: Please include Shannon Mulvey (<u>Smulvey@mgb.org</u>)

Panel Changes

HP PEC updates are processed within 24/48 hours.

Practice Closures

Notify the Health Plan at least 60 days in advance via both emails above. Notification to the Health Plan must include how the provider's panel should be distributed.

Individual Provider Term

Notify the Health Plan 60 days in advance. Notification to the Health Plan must include how the provider's panel should be distributed.

Initial Provider Enrollment

TAT 30-45 days in advance of provider's effective date.

Billing Address Changes

Submitted to HP PEC with W-9