

Provider Bulletin

Senior Whole Health, LLC
November 2024



IMPORTANT NOTICE FOR ALL NETWORK PROVIDERS 1/1/2025 Changes and General Network Updates- November 5, 2024

Thank you for being a valued part of our Senior Whole Health (“SWH”) Provider Network. SWH regularly reviews our policies and procedures to further align with state, federal, and industry standards. Please be advised of the following changes effective January 1, 2025. For additional information, please review SWH’s Q4 2024 Provider Newsletter on [swhma.com](https://www.swhma.com). Our quarterly newsletters include important information and changes applicable to our provider community.

2025 Prior Authorization Updates

Prior Authorization (PA) requirements are reviewed on a quarterly basis. SWH publishes all Prior Authorization requirements via our Prior Authorization Lookup Tool (“Look Up Tool”), as well as downloadable versions for quick reference. Please note that Prior Authorization requirements for dual-eligible members (Medicare and Medicaid beneficiaries) should be evaluated at the individual line of business. Please continue to use the PA Lookup Tool available on the website for the most up-to-date information.

Effective 1/1/25

- PA requirements will be removed in the Medicaid and Medicare lines of business for continuous glucose monitors (CGMs) and supplies when used in insulin-dependent or gestational diabetes. Appropriate ICD 10 codes will be required quantity limits will also be enforced per policy. Molina will allow PA for individual considerations outside of those diagnosis.
- PA requirements will be removed for cyclophosphamide products J9071 and J9072 to align with PA requirements for analogous products.
- PA requirements will be added for the administrative services associated with Spravato (esketamine) administration to align with the PA requirements of product itself due to safety risk.
- PA requirements will be added for several very high-cost skin substitutes that carry a high potential risk for misuse.
- CMS has released new codes for Q1 2025 and PA requirements for healthcare administered drugs and gene therapies will continue to apply under the new codes.

SWH Benefit Updates

Senior Whole Health has an array of exciting benefits to offer in 2025 including expanded dental benefits, vision with the MassHealth amount included and Transportation now including 80 one-way trips for non-medical transportation. In addition to \$0 monthly plan premium with \$0 co pays other member benefits include a pre-funded debit card to pay for covered over – the – counter items and groceries. Member OTC benefit cards will be switching to NationsBenefits for 2025. Members will receive new already activated cards starting 11/15/24 with a full catalog highlighting what they can use it for except for food. Members can purchase healthy food and produce. SWH also offers a separate utilities reimbursement. All plans include best in class clinical management.

*Specific benefits subject to member eligibility.

General Provider Network Updates

One Care Network Announcement

Senior Whole Health is excited to announce MassHealth has informed us of a One Care contract award effective January 1, 2026. One Care is an additional insurance plan offered through MassHealth which services MassHealth and Medicare eligible individuals aged 21-64. To participate in this line of business a signed amendment is needed. If you have not yet been contacted by your Contract Manager, please reach out to SWHNetworkRequests@Molinahealthcare.com to begin this process of adding this product to your existing agreement.

Steward Health Care

Senior Whole Health will remain par with the announced new owners of the Steward hospitals effective 10/1/24 and the Steward Physician Group effective 11/1/2024. There are no anticipated network impacts, outside of the facility closures that occurred at Carney Hospital and Nashoba Valley Medical Center in Q3 2024.

As a reminder for any physician and group changes please utilize the PIF form [here](#) or submit through CAQH [here](#).

Telehealth Reminder

Providers must follow applicable CMS guidelines and State-level requirements for Telehealth claims. SWH follow's MH Provider [Bulletin 355](#) that has defined categories of service ineligible for delivery via telehealth including ambulance services, anesthesia, chiropractic, hearing aid

services, inpatient hospital services, lab/pathology, nursing facility services, personal care services, orthotic services, prosthetic service, renal dialysis clinic services, surgery services, transportation services, and radiology. All telehealth claims for Senior Whole Health Members must be submitted to Senior Whole Health with correct codes for the plan type in accordance with applicable billing guidelines. For additional guidance, please refer to the resources located at telehealth.hhs.gov/providers.

Senior Whole Health Member ID Update

Effective 9/1/24 new members enrolling will receive ID #'s that will begin with "83" and be a 13-digit member ID number. This is a change on a rolling basis for any new members enrolling 9/1 and thereafter including members that make any plan changes. Member IDs will exceed the standard 6-digit ID that you see for existing members. As a result of this effort, you may notice SWH IDs expand beyond the standard 6-digit IDs. Please ensure that you reference the provided SWH ID, found on the member's ID card or via Availity, for all submissions to the Plan.

Availity Essentials Provider Portal

The Availity Essentials Portal continues to expand as Senior Whole Health's partner to reduce administrative resources and burden for providers. The Care Coordination Portlet is set to go live 1/9/2025. Expanded features within the CCP include role-based member roster, member profile, member alerts/messages, comprehensive care team details, etc. The claim reconsideration request dropdown is set to be removed from the message this payor tool. If you would like to submit a claim reconsideration, please click the "Dispute Claim" button and select "Reconsideration" from the "Request Reason" dropdown. Recent updates to Availity include managing claims with a reconsideration/appeal option and a refreshed and updated authorization method for SWH providers. For the most recent updates including recorded trainings please visit availity.com/molinahealthcare or reach out to your local SWH Provider Services Manager for further assistance.

MAPD Plan Change

SWH will discontinue non-D-SNP (MAPD) plans (in Massachusetts) in 2025. SWH is making this change to optimize and prioritize offerings for its duals population, which is an area of primary focus for SWH. Senior Whole Health's non-D-SNP (MAPD only) plans will be discontinued on December 31, 2024. Members will receive a letter notifying them of this change and SWH will work to aid in member's transition.