

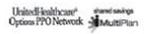
## Overview

We're pleased to partner with you in Connecticut. The following tips may be helpful for you as you begin working with Harvard Pilgrim.

## Open Access HMO

The Open Access HMO plans do not require members to select a PCP and no referral is required to see a contracted specialist. Covered services may be subject to a copayment or deductible then copayment. Some preventive care services are covered with no member cost sharing. Benefits and cost-sharing vary among employer groups.

	<b>Harvard Pilgrim Health Care of Connecticut</b>	<b>OPEN ACCESS HMO</b>
ID#:	HP##### - ##	
Name:	JOHN Q SAMPLE	
Copay:	OV: \$XX ER: \$XX	
RX:	\$XX/XX/XX%* MAIL \$XX/XX/XX%* [*RX COINSURANCE APPLIES]	
	[Deductible may apply.] Visit <a href="http://www.harvardpilgrim.org">www.harvardpilgrim.org</a> for plan details.	
		
	BIN 003585 PCN 35000	

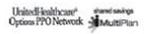
<b>Notice to Members</b>	<b>Notice to Providers</b>
<ul style="list-style-type: none"> <li>For Member Services, call: 888-333-HPHC (4742)</li> <li>For Mental Health and Substance Abuse services, call United Behavioral Health at: 888-777-HPHC (4742)</li> <li>In a medical emergency, go to the nearest emergency facility or call 911 or other local emergency number</li> <li>If hospitalized, notify the Plan within 48 hours</li> </ul>	<ul style="list-style-type: none"> <li>Out-of-area emergency services will be paid by the Plan</li> <li>In MA, ME, NH, CT, RI, VT: 800-708-4414</li> <li>or <a href="http://www.harvardpilgrim.org">www.harvardpilgrim.org</a></li> <li>Medical Claims: Payer ID: 04271</li> <li>HPHC, PO Box 699183, Quincy, MA 02269-9183</li> <li>Other States: 800-699-5254</li> <li>United Health Shared Services Medical Claims: Payer ID 39026</li> <li>Group Number: 11-123456</li> <li>PO Box 30783, Salt Lake City, UT 84130-0783 • <a href="http://www.uhs.com">www.uhs.com</a></li> </ul>
Please refer to your evidence of coverage for a full description of your benefits. <a href="http://www.harvardpilgrim.org">www.harvardpilgrim.org</a>	  

**CT Products**  
Harvard Pilgrim is offering PPO and Open Access HMO products in Connecticut.

## PPO

These plans offer two levels of coverage: in-network and out-of-network. Most services are subject to a deductible. Some preventive care services are covered with no member cost sharing. Benefits and cost-sharing vary among employer.

	<b>HPHC Insurance Company</b>	<b>PPO</b>
ID#:	HPP##### - ##	
Name:	JANE E SAMPLE	
Copay:	\$0 SELECT PREVENTIVE SERVICES ONLY IN NETWORK DEDUCTIBLE: \$XXXX OUT OF NETWORK DEDUCTIBLE: \$XXXX	
RX:	[RX SUBJECT TO IN NETWORK DEDUCTIBLE] [XX% RX COINSURANCE APPLIES AFTER DED]	
	[Deductible may apply.] Visit <a href="http://www.hphc.org">www.hphc.org</a> for plan details.	
		
	BIN 003585 PCN 35000	

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Please refer to your evidence of coverage for a full description of your benefits. <a href="http://www.hphc.org">www.hphc.org</a>	  

## Recognizing Our Members and Verifying Eligibility

You can recognize a Harvard Pilgrim member through the individual's member ID card, which includes the Harvard Pilgrim logo on the top. Check the front of the member's ID card for plan, ID number, and cost-sharing information. You may verify eligibility electronically (see "E-business," on reverse), by telephone (866-691-8882) or by email ([provider\\_callcenter@harvardpilgrim.org](mailto:provider_callcenter@harvardpilgrim.org)).

## Requesting Authorizations

Harvard Pilgrim requires prior authorization for select procedures and services. You may request a prior authorization electronically (see "E-business," on reverse) or by contacting Harvard Pilgrim's Referral Authorization Unit at 866-691-8882 by phone or 800-232-0816 by fax.

## Submitting Claims

Claims may be filed electronically using *HPHConnect*, or EDI-Direct, your clearing-houses (see "E-business," on reverse) or by paper. The filing limit for claims is 90 days from the date of service. For electronic claims submission, Harvard Pilgrim's Payer ID number is 04271. Paper claims should be mailed to:

Harvard Pilgrim Health Care, Inc.  
Claims Processing  
P.O. Box 699183  
Quincy, MA 02269-9183

## Claims Adjustments and Appeals

Providers have the right to request claims adjustments or appeal claims. The time frame for appealing a claim denial is 90 days from the date of the denial on the explanation of benefits/payment. Please mail all provider claim appeals with an appeals form and the necessary documentation to:

Harvard Pilgrim Health Care, Inc.  
P.O. Box 699183  
Quincy, MA 02269-9183

You can find Harvard Pilgrim's claims appeal form in our *Provider Manual*.

## E-business

Harvard Pilgrim's easy-to-use electronic tools support a variety of self-service e-channels to perform a full range of transactions, including:

- Verifying patient eligibility
- Sending specialty referrals and receiving a timely response
- Submitting and tracking claims
- Reviewing the status of authorization requests, and more

You can use *HPHConnect*, or EDI-Direct for your electronic transactions. Our eligibility and claims status inquiry transactions are CAQH CORE I and II certified. *HPHConnect*, our acclaimed web-based portal, includes analytics to help providers manage accounts receivable, identify trends, and drill down to claim details. To register, visit [www.harvardpilgrim.org/providers](http://www.harvardpilgrim.org/providers), call 866-691-8882, or email [provider\\_e-business\\_services@hphc.org](mailto:provider_e-business_services@hphc.org).

### Electronic Funds Transfer

Harvard Pilgrim also offers electronic funds transfer (EFT) to providers through PaySpan Health. Payspan allows you to direct your payments electronically to a bank account and to receive electronic 835 ERAs and explanation of payment (EOP) directly from PaySpan. Through PaySpan's self-service environment, you can also review current or past payments. To register with PaySpan, call 877-331-7154 and select option 1 or visit [www.payspanhealth.com/RequestRegCode/](http://www.payspanhealth.com/RequestRegCode/). If you are already registered with PaySpan, you can update your existing PaySpan account to include Harvard Pilgrim. For help in doing so, email [providersupport@payspan-health.com](mailto:providersupport@payspan-health.com) or call PaySpan Provider services at 877-331-7154, option 1.

## Important Resources

### Connecticut Provider Website

Visit [www.harvardpilgrim.org/providers](http://www.harvardpilgrim.org/providers) and click on the "CT Expansion" link.

### Provider Manual

The online *Provider Manual* represents the most up-to-date information on Harvard Pilgrim's current products, programs, policies and procedures. It includes information on network operations, care delivery management, member care, product administration, billing and reimbursement, appeals, payment policies, and provider forms, including the Provider Change and Provider Appeal forms.

### Network Matters

Posted online each month, this electronic provider newsletter provides 60-day advance notice of substantial changes. To receive your copy by email, go to [www.harvardpilgrim.org/providers](http://www.harvardpilgrim.org/providers), click on "Register for *Network Matters*," and type your email address into the box in the upper right corner.

### Education Programs

Our provider website offers provider training modules, including a video training presentation for Connecticut providers.

## Contacting Us

Connecticut Provider Service Center — 866-691-8882

Harvard Pilgrim Health Care  
1600 Crown Colony Drive  
Quincy, MA 02169-9777