

Referral Policy and Procedures

Who Requires Referrals

Evidence of referrals for specialty care is required for members enrolled in Harvard Pilgrim's Stride (HMO/HMO-POS) plans.

Members may self-refer to in-network providers for routine eye exams, routine OB/GYN services, Medicare Preventive Services, and emergency care. For more on Medicare Preventive Services, please refer to our Stride (HMO) Summary of Benefits.

Specialty Care Referral

Referring Provider Role

The PCP refers the member to a specialist in the Medicare Advantage network for medically necessary care. Through the referral, the PCP communicates the scope of the services and the number of visits approved to the specialist (e.g., one consult only, a consult and treatment, etc.).

Referral to a non-participating provider (i.e., outside the Harvard Pilgrim Stride (HMO/HMO-POS) network) requires an authorization.

Servicing Provider Role

The specialist treats the member according to the PCP's request (scope and number of visits) and exchanges clinical information with the member's PCP. When possible, behavioral health providers are expected to obtain member consent to exchange relevant treatment information with the PCP, as appropriate, for the coordination of the member's care.

Behavioral Health Self-Referral

Harvard Pilgrim Stride (HMO) members may self-refer to Harvard Pilgrim's Behavioral Health Access Center (888-777-4742) to initiate behavioral health services. Referral from the PCP is not required.

Behavioral health practitioners and providers play a major role in ensuring that the appropriate exchange of information is coordinated.

Harvard Pilgrim expects behavioral health practitioners and providers to:

- Discuss the importance of communicating relevant information to the PCP and other treating physicians.
- Ask members routinely to authorize the release of relevant information to the PCP and other treating physicians as needed to effectively coordinate care.

If the member consents, the behavioral health practitioner is responsible for:

- Providing relevant information (including diagnosis, proposed treatment plan, and medication) to the PCP or treating physician.
- Documenting the authorization and communication in the permanent record.

Covering PCP Referral

When a covering PCP (i.e., a PCP other than the member's PCP) provides services to a member:

- A referral is not required if the PCP providing services is participating in the Harvard Pilgrim Medicare network.
- A referral is required if the PCP providing services is **not** participating in the Harvard Pilgrim Medicare network.

Secondary Referral

If a specialist decides that a member needs care that the specialist cannot provide, the specialist must consult with the member's PCP, who will initiate a new referral to the appropriate specialist.

Standing Referral

A standing referral may be made when a member's PCP determines that it is appropriate for a participating specialist to routinely treat a patient for a condition that may be chronic or require continuing attention, and:

- The participating specialist agrees to a treatment plan for the member and provides the PCP with all necessary clinical and administrative information on a regular basis.
- The health services to be provided are consistent with the terms of the member's coverage.

Verifying PCP of Record

Member's PCP

The PCP is responsible for verifying member eligibility and the member's PCP of record by one of these methods:

- Accessing electronic online member eligibility information on the Stride Provider Portal.
- Calling the Stride Provider Service Center at 888-609-0692

If the PCP determines that he or she is not the member's PCP of record, he/she is responsible for bringing that to the attention of the member so the member can contact Harvard Pilgrim to correct the information by calling our Stride Member Services team at 888-609-0692. Representatives are available Oct. 1–March 31 from 8 a.m. to 8 p.m. 7 days a week and April 1–Sept. 30 from 8 a.m. to 8 p.m. Monday through Friday. A PCP cannot be retroactively assigned to a member. Until the change is made, the treating provider must evidence a referral from the PCP of record on any claim for service.

Specialist

The specialist should verify that the PCP name and identification number on the referral is the member's PCP of record by:

- Accessing electronic online member eligibility information on the Stride Provider Portal.
- Calling the member's PCP

If the PCP's name and identification number differ from the referral information, you need to determine if the provider listed on the referral is a covering PCP who participates in the Harvard Pilgrim Medicare Advantage network by:

- Accessing our online Provider Directory
- Calling the member's PCP

Specialists: Filing Evidence of a Referral

Specialist claims for most services require evidence of a referral from the member's PCP indicating that the specialist provided care at the request of the member's PCP.

Enter the following information on the CMS-1500 claim form as evidence of a referral

Box	Enter
17	Referring PCP's name
17b	Referring PCP's National Provider Identifier (NPI) ¹

Please note that Harvard Pilgrim provider identification numbers assigned to PCPs may not be the provider's UPIN number.

Failure to include complete referral information, including accurate referring provider name and Harvard Pilgrim provider identification number or National Provider Identifier (NPI) on the claim, will result in an administrative denial.

PUBLICATION HISTORY

01/01/12	removed First Seniority Freedom information
07/24/17	updated "servicing provider role" section
04/01/20	updated sections: Who Requires a Referral, Initiating a Referral (evidence of referral sufficient for ME and NH), and Specialists: Filing Evidence of a Referral



STRIDESM (HMO)/(HMO-POS) MEDICARE ADVANTAGE

01/01/22 removed Massachusetts and Maine information

¹Harvard Pilgrim requires that all requests for services be submitted with a valid NPI for the requesting and servicing providers.