



# PROVIDER QUICK TIPS

## Important Changes are Coming for the Physical Health HealthChoices Program

Beginning on **September 1, 2022** some of the Medical Assistance (MA) Physical Health HealthChoices Managed Care Organizations (PH-MCOs) within the five regional zones of Pennsylvania are changing.

### Important Facts

- These changes will impact approximately 500,000 MA consumers who will need to select a new PH-MCO. Some MA consumers will not need to select a new PH-MCO, but there may be new choices available for them to consider.
- MA consumers will receive information from PA Enrollment Services that tells them what they need to do and whether they **must** choose a new plan. These mailings will go out from June 22<sup>nd</sup> to July 7<sup>th</sup>.
- If a consumer who needs to choose a new PH-MCO does not do so by **August 16<sup>th</sup>**, DHS will auto-assign them to a PH-MCO.
- Coverage under the new PH-MCOs will start on September 1<sup>st</sup>.
- These changes will not impact members in the Children Health Insurance Program (CHIP) or who have Dual Eligible Special Needs Plan (DSNP) coverage.

### Continuity of Care

All providers and PH-MCOs enrolled in the MA program are reminded they must ensure continuity of care as described in [MA Bulletin \(MAB\) 99-03-13](#) (for adults over age 21) and [MAB 99-96-01](#) (for children under age 21). These MABs describe the procedures to ensure the safe transition and continuity of care for MA recipients who are under a clinically appropriate course of treatment for medical and/or behavioral health conditions and continuity for prior authorized services. Specifically, [Attachment C](#) to the MAB describes providers' continuity of care requirements when consumers change from one PH-MCO to another PH-MCO, and [Attachment D](#) describes the continuity of care requirements for services not requiring prior authorization.

There is potential for some of your patients to be assigned to PH-MCOs with whom you do not contract. It is vitally important for MA consumers in a course of treatment to be able to continue with that treatment for up to a 60 day period when they change from one PH-MCO to another PH-MCO. **If you do not participate with the PH-MCO your patient chooses, you are strongly encouraged to contact the new PH-MCO to enter into a single case agreement or other financial arrangement.** This will allow the consumer's care to be transitioned to another provider or allow the consumer to select a different PH-MCO with whom you have a contract. Please remember that MA regulations prohibit providers from charging MA beneficiaries cash, other than copays, for covered services, regardless of whether the provider holds a contract with the beneficiary's PH-MCO.

### New MCO Coverage Areas

PH-MCO	Zones of Operation
AmeriHealth Caritas	Southwest, Northwest, Lehigh/Capital, Northeast
Geisinger	All zones – statewide
Health Partners	All zones - statewide
Highmark Wholecare (formerly Gateway)	Southwest, Lehigh/Capital
Keystone First	Southeast
UnitedHealthcare	Southeast
UPMC	All zones - statewide