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Administrative Bulletin 24-14

114.3 CMR 40.00: *Rates for Services Under M.G.L. c. 152, Worker's Compensation Act*

Effective June 7, 2024




Clarification around out-of-state providers of prescription drugs subject to 114.3 CMR 40.00

Consistent with 114.3 CMR 40.00, the Executive Office of Health and Human Services (EOHHS) is issuing this administrative bulletin to clarify which out-of-state providers are subject to the rate requirements outlined in 114.3 CMR 40.00 for prescription drugs and prescription drug pricing standards referenced therein.

114.3 CMR 40.02 defines those eligible providers subject to worker's compensation pricing requirements for all healthcare services, including prescription drugs: "[a] provider as defined in 114.3 CMR 40.05, that also meets such conditions of participation as have been or may be adopted by a Governmental Unit or purchaser under M.G.L. c. 152. Out-of-state providers must meet the comparable conditions of licensure and participation required by the state in which they practice." Such providers are subject to the rates for prescription drugs set forth in 101 CMR 331.00: *Prescribed Drugs*, successor of 114.3 CMR 31.00. See 114.3 CMR 40.03(2).

Out-of-state providers of prescription drugs are eligible providers for the purposes of 114.3 CMR 40.00 if they meet the comparable conditions of licensure and participation required by the state in which they practice, notwithstanding that they are not separately defined as providers in 114.3 CMR 40.05. The definition of provider and references to out-of-state providers in 101 CMR 331.02 do not exempt any eligible providers as defined in 114.3 CMR 40.02 from prescription drug pricing requirements.

Accordingly, out-of-state pharmacies that meet the comparable conditions of licensure and participation required for workers' compensation by the state in which they practice qualify as "eligible providers" under 114.3 CMR 40.02 and are subject to the rates outlined in 101 CMR 331.00 for worker's compensation claims for prescription drugs. This is consistent with existing regulations and is not a policy change.

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