



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
www.mass.gov/masshealth

MassHealth
Transmittal Letter ALL-232
July 2020

TO: All Providers Participating in MassHealth
FROM: Amanda Cassel Kraft, Acting Medicaid Director
RE: All Provider Manuals (Revised Appendix Y)

This letter transmits revisions to the Eligibility Verification System (EVS) message codes in Appendix Y of all provider manuals. The following changes were made:

- added codes related to the new ACOs. These codes were announced in March 2018 and appeared in All Provider Bulletin 275: MassHealth EVS Codes and Restrictive Messages for 2018 Managed Care Health Plans;
- placed outdated codes at the end of the document in a new section titled “Obsolete Codes”;
- edited some active codes for clarity and updated content for other active codes;
- restructured the document table so that the structure mirrors the order in which the provider accesses the information.

MassHealth Website

This transmittal letter and attached pages are available on the MassHealth website at www.mass.gov/masshealth-transmittal-letters.

To sign up to receive email alerts when MassHealth issues new transmittal letters and provider bulletins, send a blank email to join-masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.

Questions

If you have any questions about this transmittal letter, please contact MassHealth as applicable for your provider type.

Dental Services

Phone: (800) 207-5019; TTY: (800) 466-7566

Long-Term Services and Supports

Phone: (844) 368-5184 (toll free)

Email: support@masshealthtss.com

Portal: MassHealthLTSS.com

Mail: MassHealth LTSS, PO Box 159108, Boston, MA 02215

Fax: (888) 832-3006

All Other Provider Types

Phone: (800) 841-2900; TTY: (800) 497-4648

Email: providersupport@mahealth.net

Fax: (617) 988-8974

NEW MATERIAL

(The pages listed here contain new or revised language.)

All Provider Manuals

Pages Y-1 through Y-18

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

All Provider Manuals

Pages Y-1 through Y-6 — transmitted by Transmittal Letter ALL-206

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EVS Codes and Messages

The Eligibility Verification System (EVS) provides important benefit information about MassHealth members.

This appendix lists the active Eligibility Verification System (EVS) messages displayed when providers access EVS through the Provider Online Service Center (POSC) to verify patient's eligibility and any restriction on their coverage before providing services to MassHealth members.

This appendix is accessible online through the [MassHealth Provider Manual Appendices](#) page.

These messages are subject to change without notice.

EVS-Generated Message #	Unique Message #	Restrictive Message Text
2	111	Resident currently in a nursing facility or a chronic disease and rehab hospital.
3	116	EAEDC (Cat. 04). Services restricted. See 130 CMR 450.106.
5	480	Bill member's private health insurance. See 130 CMR 450.316-317 for information on TPL requests and payment limitations on claim submissions.
6		
7	485	Bill member's private health insurance. MassHealth pays for copays and deductibles for well-child visits.
8		
9	516	Call HRCA at 617-325-8000 for authorization of all services except acute inpatient admissions.
12	31	Member enrolled in PACE. All services must be authorized by PACE, except emergencies. Call Element Care PACE: Lynn 877-845-8442 Merrimack Valley 855-857-7349 Beverly 978-837-9479.
13	36	Member enrolled in PACE. All services must be authorized by PACE, except emergencies. Call CHA PACE/Cambridge Health Alliance at 617-575-5850.
14	41	Member enrolled in PACE. All services must be authorized by PACE, except emergencies. Call Summit PACE at Fallon at 866-275-3247.
15	46	Member enrolled in PACE. All services must be authorized by PACE, except emergencies. Call ESP of Upham's Corner at 617-288-0970.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
16	51	Member enrolled in PACE. All services must be authorized by PACE, except emergencies. Call Harbor Health Elder Services at: Mattapan 617-533-2400 Brockton 774-470-6700
19	171	Member enrolled in PACE. All services must be authorized by PACE, except emergencies. Call East Boston Neighborhood PACE at 617-568-7214
20	201	Member enrolled in Senior Care Options (SCO). Emergency services do not need authorization. For all other services, call Commonwealth Care Alliance (CCA): 1-866-610-2273.
21	231	Member enrolled in Senior Care Options (SCO). Emergency services do not need authorization. For all other services, call Senior Whole Health (SWH): 1-888-794-7268.
28	391	Member enrolled in Senior Care Options (SCO). Emergency services do not need authorization. For all other services, call UnitedHealthcare: 1-888-867-5511
29-32	495	Eligible for Premium Assistance. Bill member's private health insurance.
33	505	MassHealth CommonHealth member.
43	604	For eligibility dates and payment for primary and preventive care services call CMSP at 1-800-841-2900 (regular) 1-800-497-4648 (TTY).
44	606	Payment from the Health Safety Net not allowable for this patient.
45	608	Member eligible for Medicare Part D. For member enrollment status or other information, call 1-800-MEDICARE (1-800-633-4227).
46	611	Member is Qualified Medicare Beneficiary eligible for Senior Buy-In program. See 130 CMR 519.010.
48	612	Member is Specified Low Income Medicare Beneficiary. See 130 CMR 519.011(A).
49		
50	613	Member is Qualified Individual Beneficiary. See 130 CMR 519.011(B).
51		
68	126	Community Case Management (CCM) member: Prior Authorization required for Nursing and PCA services. Contact CCM at 1-800-863-6068.
71	71	Member enrolled in program that limits him/her to one pharmacy. For information, member may call 1-800-841-2900, 8AM-5PM Mon-Fri.
74	74	Client is not eligible for MassHealth.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
76	525	For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership (MBHP) at 1-800-495-0086.
121	121	Direct all inquiries about eligibility to Social Service Worker.
186	186	Exempt from copay on nonpharmacy services under 130 CMR 450.130(D).
246	246	Exempt from copay on pharmacy services under 130 CMR 450.130(D).
271	271	Member has met cap on nonpharmacy services under 130 CMR 450.130(C).
366	366	Member has met cap on pharmacy services under 130 CMR 450.130(C).
461	461	Primary Care Clinician (PCC) Plan member. Call the PCC above for referrals for all services except those listed in 130 CMR 450.118(J). For medical service questions, claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900. For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership (MBHP) at 1-800-495-0086.
530	530	No PCC/MCO authorizations needed. For Behavioral Health service authorization, call the Massachusetts Behavioral Health Partnership (MBHP) at 1-800-495-0086.
614	614	Bill hospice provider if service is related to terminal illness.
633	633	Member is not eligible for MassHealth and has submitted a Medical Benefit Request HSN is for certain acute hospital and CHC services only. Call HSN Eligibility line at 1-877-910-2100.
650	650	Member's MassHealth eligibility is temporary.
685	685	Steward Health Choice member. Steward Health Choice is a Primary Care ACO. Call the PCP above for referrals for all services except those listed in 130 CMR 450.119(I). For medical service questions, call the MassHealth Customer Service Center at 1-800-841-2900. For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership (MBHP) at 1-800-495-0086.
686	686	Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO. Call the PCP above for referrals for all services except those listed in 130 CMR 450.119(I). For medical service questions, call the MassHealth Customer Service Center at 1-800-841-2900. For behavioral health service questions and authorization, call the Massachusetts Behavioral

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
		Health Partnership (MBHP)at 1-800-495-0086.
687	687	Community Care Cooperative (C3) member. Community Care Cooperative (C3) is a Primary Care ACO. Call the PCP above for referrals for all services except those listed in 130 CMR 450.119(I). For medical service questions, call the MassHealth Customer Service Center at 1-800-841-2900. For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership (MBHP)at 1-800-495-0086.
747	021	BMC HealthNet Plan member. BMC HealthNet Plan is an MCO. For medical service questions, call BMC HealthNet Plan at 1-888-566-0010. For behavioral health service questions and authorizations call Beacon Health Options at 1-888-217-3501.
749		
760-761	606	Payment from the Health Safety Net not allowable for this patient.
766	611	Member is Qualified Medicare Beneficiary eligible for Senior Buy-In program. See 130 CMR 519.010.
770	648	HSN pharmacy copays may be applicable. See 101 CMR 613.04(8)(b), 613.03(1)(c).
773	500	Special program. For medical service questions call BMC HealthNet Plan at 1-888-566-0010. For behavioral health service questions and authorizations call Beacon Health Options at 1-888-217-3501.
791-792	637	Member is HSN Secondary for certain acute hospital and CHC Services only. Bill member's private health insurance before seeking payment from HSN. See 101 CMR 613.04 for information on HSN Secondary requirements.
827	386	Medicare-covered services only.
831		
832		
840		
841		
842-848	606	Payment from the Health Safety Net not allowable for this patient.
853-854	636	Member is eligible for HSN Secondary. See 101 CMR 613.04 for information on HSN Secondary requirements.
856		
859		
860		

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
863		
864		
866		
869		
870		
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879		
880		
882-895		
899		
900, 902, 903		
915	647	HSN pharmacy copays may be applicable. See 101 CMR 613.04(8)(b), 613.03(1)(c).
991	991	Certain HSN dental services available at community health centers and hospital-based health centers. Call HSN Eligibility line at 877-910-2100 for more information.
1100s		
1119	663	Member enrolled in Massachusetts Behavioral Health Partnership (MBHP) & has TPL or Medicare or in an aid cat excluded from enrollment in MCO or PCC Plan. MassHealth is payer of last resort. For behavioral health authorizations, call 1-800-495-0086.
1120	664	Member enrolled in Massachusetts Behavioral Health Partnership (MBHP) & has TPL or Medicare or in an aid cat excluded from enrollment in MCO or PCC Plan. MassHealth is payer of last resort. For behavioral health authorizations, call 1-800-495-0086.
1145, 1146	056	Tufts Health Together member. Tufts Health Together is a MCO. For medical and behavioral health service questions and authorizations call Tufts Health Together at 1-888-257-1985.
1193, 1194	618	BMC HealthNet Plan member. BMC HealthNet Plan is a MCO. For medical services, call 1-888-566-0010. For behavioral health services, call Beacon Health Options at 1-888-217-3501.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1200s		
1231	665	Member enrolled in Senior Care Options (SCO). Emergency services do not need authorization. For all other services, call Tufts health Plan Senior Care Options – 1-855-670-5934.
1233	667	Member enrolled in One Care. Commonwealth Care Alliance. For medical, behavioral health, and long-term services and supports, call 1-866-610-2273.
1235	669	Member enrolled in One Care Tufts Health Unify. For medical, behavioral health, and long-term services and supports, call 1-888-257-1985.
1236	648	HSN pharmacy copays may be applicable. See 101 CMR 613.04(8)(b), 613.03(1)(c).
1240	522	Eligible for emergency services through MassHealth Limited.
1241		
1243-1249		
1251		
1252		
1254		
1258		
1259		
1300s & 1400s		
1393-1481	606	Payment from the Health Safety Net not allowable for this patient.
1482-1487	670	Health Safety Net is not available. Member must submit Identity Verification for HSN eligibility.
1500s		
1500	672	Member enrolled in Senior Care Options (SCO). Emergency services do not need authorization. For all other services, call Navicare SCO at 866-275-3247.
1501	673	Member eligible for CarePlus but not enrolled in a managed care plan. Fee for Service may be available until health plan enrollment is effective.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1502	674	CarePlus Member with active TPL. Some services may be available Fee-for-Service.
1503	679	Not Eligible for Managed Care Enrollment.
1509	675	Temporary Full HSN medical and dental are available. Member Eligible for ConnectorCare. If member is enrolled, do not bill HSN. If member is unenrolled, visit MAHealthConnector.org for more information.
1527	677	Temporary Partial HSN medical and dental are available. Member Eligible for ConnectorCare. If member is enrolled, do not bill HSN. If member is unenrolled, visit MAHealthConnector.org for more information.
1539-1542	991	Certain HSN dental only services available at community health centers and hospital-based health centers.
1543	636	Member is eligible for HSN Secondary. See 101 CMR 613.04 for information on HSN Secondary requirements.
1558	1558	Only Inpatient stays covered.
1559	525	For behavioral health service authorization, call the Massachusetts Behavioral Health Partnership (MBHP) at 1-800-495-0086.
1562	682	HSN determination is temporary based on a presumptive application. Patient must complete a full application for ongoing HSN qualification.
1563	683	HSN determination is temporary based on a presumptive application. Patient must complete a full application for ongoing HSN qualification.
1565	1565	Full HSN Dental Only Available. Member eligible for ConnectorCare. If member is unenrolled, visit MAHealthConnector.org for more information.
1566	1566	Partial HSN Dental Only Available. Member eligible for ConnectorCare. If member is unenrolled, visit MAHealthConnector.org for more information.
1570	684	Member enrolled in Senior Care Options (SCO). Emergency services do not need authorization. For all other services, call BMC: 1-855-833-8124.
1573	688	Be Healthy Partnership member. Be Healthy Partnership is an Accountable Care Partnership Plan. Be Healthy Partnership is Baystate Health Care Alliance in partnership with Health New England.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1574	689	For medical service questions, call Health New England at 1-800-786-9999.
1575	690	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership (MBHP) at 1-800-495-0086.
1576	691	For claims, policy, or billing questions, call Health New England at 1-800-786-9999.
1577	692	Berkshire Fallon Health Collaborative member. Berkshire Fallon Health Collaborative is an Accountable Care Partnership Plan. Berkshire Fallon Health Collaborative is Health Collaborative of the Berkshires in partnership with Fallon Health.
1578	693	For medical service questions, call Fallon Health at 1-855-203-4660.
1579	694	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7184.
1580	695	For claims, policy, or billing questions, call Fallon Health at 1-855-203-4660.
1581	696	BMC HealthNet Plan Community Alliance member. BMC HealthNet Plan Community Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Community Alliance is Boston Accountable Care Organization in partnership with BMC HealthNet Plan.
1582	697	For medical service questions, call BMC HealthNet Plan at 1-888-566-0010.
1583	698	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-217-3501.
1584	699	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.
1585	700	BMC HealthNet Plan Mercy Alliance member. BMC HealthNet Plan Mercy Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Mercy Alliance is Mercy Medical Center in partnership with BMC HealthNet Plan.
1586	701	For medical service questions, call BMC HealthNet Plan at 1-888-566-0010.
1587	702	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-217-3501.
1588	703	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1589	704	BMC HealthNet Plan Signature Alliance member. BMC HealthNet Plan Signature Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Signature Alliance is Signature Healthcare in partnership with BMC HealthNet Plan.
1590	705	For medical service questions, call BMC HealthNet Plan at 1-888-566-0010.
1591	706	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-217-3501.
1592	707	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.
1593	708	BMC HealthNet Plan Southcoast Alliance member. BMC HealthNet Plan Southcoast Alliance is an Accountable Care Partnership Plan. BMC HealthNet Plan Southcoast Alliance is Southcoast Health in partnership with BMC HealthNet Plan.
1594	709	For medical service questions, call BMC HealthNet Plan at 1-888-566-0010.
1595	710	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-217-3501.
1596	711	For claims, policy, or billing questions, call BMC HealthNet Plan at 1-888-566-0010.
1597	712	Fallon 365 Care member. Fallon 365 Care is an Accountable Care Partnership Plan. Fallon 365 Care is Reliant Medical Group in partnership with Fallon Health.
1598	713	For medical service questions, call Fallon Health at 1-855-508-3390.
1599	714	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7182.
1600s		
1600	715	For claims, policy, or billing questions, call Fallon Health at 1-855-508-3390.
1601	716	My Care Family member. My Care Family is an Accountable Care Partnership Plan. My Care Family is Merrimack Valley Accountable Care Organization in partnership with AllWays Health Partners.
1602	717	For medical service questions, call AllWays Health Partners at 1-800-462-5449.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1603	718	For behavioral health service questions and authorizations, call Optum Behavioral Health Services at 1-844-451-3519
1604	719	For claims, policy, or billing questions, call AllWays Health Partners at 1-800-462-5449.
1605	720	Tufts Health Together with Atrius Health member. Tufts Health Together with Atrius Health is an Accountable Care Partnership Plan. Tufts Health Together with Atrius Health is Atrius Health in partnership with Tufts Health Plan (THP).
1606	721	For medical service questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1607	722	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1608	723	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1609	724	Tufts Health Together with BIDCO member. Tufts Health Together with BIDCO is an Accountable Care Partnership Plan. Tufts Health Together with BIDCO is Beth Israel Deaconess Care Organization (BIDCO) in partnership with Tufts Health Plan (THP).
1610	725	For medical service questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1611	726	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1612	727	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1613	728	Tufts Health Together with Boston Children's ACO member. Tufts Health Together with Boston Children's ACO is an Accountable Care Partnership Plan. Boston Children's ACO in partnership with Tufts Health Plan (THP).
1614	729	For medical service questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1615	730	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1616	731	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1618	732	Tufts Health Together with CHA member. Tufts Health Together with CHA is an Accountable Care Partnership Plan. Tufts Health Together with CHA is Cambridge Health Alliance (CHA) in partnership with Tufts Health Plan (THP).

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1619	733	For medical service questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1620	734	For behavioral health service questions and authorizations, call Tufts Health Plan (THP) at 1-888-257-1985.
1621	735	For claims, policy, or billing questions, call Tufts Health Plan (THP) at 1-888-257-1985.
1622	736	Wellforce Care Plan member. Wellforce Care Plan is an Accountable Care Partnership Plan. Wellforce Care Plan is Wellforce in partnership with Fallon Health.
1623	737	For medical service questions, call Fallon Health at 1-855-508-4715.
1624	738	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7183.
1625	739	For claims, policy, or billing questions, call Fallon Health at 1-855-508-4715.
1626	740	Community Care Cooperative (C3) member. Community Care Cooperative is a Primary Care ACO.
1627	741	For medical service questions, call Community Care Cooperative (C3) at 1-866-676-9226.
1628	742	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
1629	743	Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO.
1630	744	For medical service questions call, Partners HealthCare Choice at 1-800-231-2722.
1631	745	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
1632	746	Steward Health Choice member. Steward Health Choice is a Primary Care ACO.
1633	747	For medical service questions call, Steward Health Choice at 1-855-860-4949.
1634	748	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
1636	749	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
1646	1646	Prior Authorization Mandatory for all care except for Emergencies. Call MERCY LIFE at 413-748-7223.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1647	1647	Prior Authorization Mandatory for all care except for Emergencies. Call Serenity Care PACE at 413-241-6321.
1649	1649	Member is enrolled in the BH Community Partners Program
1650	1650	Member is enrolled in the BH Community Partners Program
1651	1651	Member is enrolled in the BH Community Partners Program
1652	1652	Member is enrolled in the BH Community Partners Program
1653	1653	Member is enrolled in the BH Community Partners Program
1654	1654	Member is enrolled in the LTSS Community Partners Program
1655	1655	Member is enrolled in the LTSS Community Partners Program

OBSOLETE MESSAGES		
<p>Important Note: MassHealth is working to deactivate the following messages. However, until the messages are removed from EVS, please note that they are obsolete effective March 01, 2020.</p>		
EVS-Generated Message #	Unique Message #	Restrictive Message Text
1	35	DMH client.
10	6	NHP member. For medical services, call 1-800-462-5449. For behavioral health services, call 1-800-414-2820.
34	520	Eligible for ambulatory prenatal care only.
35	522	Eligible for emergency services through MassHealth Limited
40	601	Eligible for emergency services, including labor and delivery, under Limited without copay under 130 CMR 450.130(D).
41	602	For eligibility dates and payment under Healthy Start for outpatient, non-emergency pregnancy-related services except labor and delivery and global delivery codes, call 1-888-488-9161.
42	603	Eligible for emergency services under Limited without copay under 130 CMR 450.130(D).
53	615	BMC HealthNet member. For medical services, call 1-888-566-0010. For behavioral health services, call 1-888-217-3501.
80	609	Yes. Member has full Medicaid benefits.
81	610	No. Member does not have full Medicaid benefits.

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OBSOLETE MESSAGES

Important Note: MassHealth is working to deactivate the following messages. However, until the messages are removed from EVS, please note that they are obsolete effective March 01, 2020.

EVS-Generated Message #	Unique Message #	Restrictive Message Text
89	646	NHP member. For vision services, call 1-800-462-5449.
96	96	Care Management Pilot Program Member. Please call 413-794-9428 to coordinate all Medical and Behavioral Health Services.
106-120	609	Yes. Member has full Medicaid benefits.
122-185	609	Yes. Member has full Medicaid benefits.
187-201	609	Yes. Member has full Medicaid benefits.
202-245	610	No. Member does not have full Medicaid benefits.
247-270	610	No. Member does not have full Medicaid benefits.
272-298	610	No. Member does not have full Medicaid benefits.
550	550	Retro HSN available.
551	551	Retro Partial HSN available. HSN deductible is \$XX.XX.
596	596	ESSENTIAL UNENROLLED. Member eligible for Essential but not enrolled. Member must call 800-841-2900 and enroll in Managed Care to receive these benefits. HSN is available.
597	597	BASIC UNENROLLED. Member eligible for Basic but not enrolled. Member must call 800-841-2900 and enroll in Managed Care to receive these benefits. HSN is available.
621	N/A	Providers call 1-800-841-2900 for more information.
632	632	Commonwealth Care Plan Type IV. Member must pay a monthly premium and copayments for some services.
635	635	HSN available.
638	638	Partial HSN Available. Member with 200-250 Percent FPL. HSN deductible is \$46.
639	639	Partial HSN Available. Member with 250-300 Percent FPL. HSN deductible is \$2,299.
640	640	HSN not available.
641	641	Partial HSN available.
700-701	609	Yes. Member has full Medicaid benefits.
702	610	No. Member does not have full Medicaid benefits.
740-746	311	Fallon member. For medical services, call 1-866-275-3247. For behavioral health services, call 1-888-421-8861.

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OBSOLETE MESSAGES

Important Note: MassHealth is working to deactivate the following messages. However, until the messages are removed from EVS, please note that they are obsolete effective March 01, 2020.

EVS-Generated Message #	Unique Message #	Restrictive Message Text
748	21	For medical service questions call BMC HealthNet Plan at 1-888-566-0010. For behavioral health service questions and authorizations call Beacon Health Strategies at 1-888-217-3501.
750-752	615	BMC HEALTHNET PLAN Member. For Medical Services call 1-888-566-0008. For Behavioral Health Services call 1-866-444-5155.
771, 772	646	NHP member. For vision services, call 1-800-462-5449.
857	636	Member is also eligible for HSN Secondary. See 101 CMR 613.00 for info on HSN Requirements.
858		
861		
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865		
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881		
896-898		
901		
904-910		
912	636	Member is also eligible for HSN Secondary. See 101 CMR 613.00 for info on HSN Requirements.
913		
916		
917	651	CeltiCare member. For medical services, call 1-866-895-1786. For behavioral health services, call 1-866-896-5053.
918-921	652	CeltiCare member. For dental services, call 1-866-895-1786. For vision

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OBSOLETE MESSAGES

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
		services, call 1-866-895-1786.
936-942	653	CeltiCare member. For vision services, call 1-866-895-1786.
985	656	Member eligible for full MassHealth dental. Bill member's private health insurance first. For information on dental services and claims, call Doral at 1-800-207-5019.
986	658	Effective July 1, 2010, global delivery codes for HSP members must be billed to MassHealth. For more information, call 1-800-841-2900.
987	661	Health New England member. For medical services, call 1-800-786-9999. For behavioral health services, call 1-800-495-0086.
990	662	Health New England member. For dental services, call 1-800-786-9999. For vision services, call 1-800-786-9999
1050-1053	990	Certain HSN dental services available at community health centers and hospital-based health centers. Call 877-910-2100 for more information.
1054-1057	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1058	617	NHP member. For dental services, call 1-800-685-9971. For vision services, call 1-800-638-3120.
1059-1061	618	BMC HealthNet Plan member. For dental services, call 1-800-207-8147. For vision services, call 1-800-877-7195.
1062-1065	618	BMC HealthNet Plan member. BMC HealthNet Plan is an MCO.
1066-1069	619	Fallon Community Health Plan member. For dental services, call 1-866-275-3247. For vision services, call 1-866-275-3247.
1070-1073	622	Network Health Member. For vision services, call 1-888-257-1985.
1074-1077	623	NHP member. For vision services, call 1-800-462-5449.
1078-1081	624	BMC HealthNet Plan member. For vision services, call 1-800-877-7195.
1082	625	Fallon Community Health Plan member. For vision services, call 1-866-275-3247.
1083	628	Commonwealth Care Plan Type I. Member does not have to pay a monthly premium. Member must pay copayments for prescription drugs.
1084	629	Commonwealth Care Plan Type II. Member may have to pay a monthly premium. Member must pay copayments for some services.
1085-1086	630	Commonwealth Care Plan Type II. Member must pay a monthly premium and copayments for some services.

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1087-1091	631	Commonwealth Care Plan Type III. Member must pay a monthly premium and copayments for some services.
1092	634	Member must enroll in COMMCARE to receive these benefits. Member must call 1-877-MA-ENROLL (1-877-623-6765).
1093	642	Partial HSN dental available. Member with 200-250 percent FPL. HSN deductible is \$46.
1094-1095	643	Partial HSN dental available. Member with 250-300 percent FPL. HSN deductible is \$2,299.
1103-1109	644	HSN dental available.
1110-1113	56	Network Health member. For medical services, call 1-888-257-1985. For behavioral health services, call 1-888-257-1985.
1114-1117	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1130	622	Network Health Member. For vision services, call 1-888-257-1985.
1131	56	Network Health member. For medical services, call 1-888-257-1985. For behavioral health services, call 1-888-257-1985.
1132-1135	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1136-1138	622	Network Health Member. For vision services, call 1-888-257-1985.
1139	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1140-1144, 1147	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1144	056	Network Health member. For medical services, call 1-888-257-1985. For behavioral health services, call 1-888-257-1985.
1148	056	For medical and behavioral health service questions and authorizations call Tufts Health Together at 1-888-257-1985.
1151	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1153-1158	634	Member must enroll in COMMCARE to receive these benefits. Member must call 1-877-MA-ENROLL (1-877-623-6765).
1161	634	Member must enroll in COMMCARE to receive these benefits. Member must call 1-877-MA-ENROLL (1-877-623-6765).

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OBSOLETE MESSAGES

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EVS-Generated Message #	Unique Message #	Restrictive Message Text
1162	631	Commonwealth Care Plan Type III. Member must pay a monthly premium and copayments for some services.
1163-1164	630	Commonwealth Care Plan Type II. Member must pay a monthly premium and copayments for some services.
1165-1166	629	Commonwealth Care Plan Type II. Member may have to pay a monthly premium. Member must pay copayments for some services.
1167-1172	628	Commonwealth Care Plan Type I. Member does not have to pay a monthly premium. Member must pay copayments for prescription drugs.
1173-1177	624	BMC HealthNet Plan member. For vision services, call 1-800-877-7195.
1178-1182	625	Fallon Community Health Plan member. For vision services, call 1-866-275-3247.
1183	623	NHP member. For vision services, call 1-800-638-3120.
1186-1190	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1191-1192	616	Network Health member. For dental services, call 1-888-257-1985. For vision services, call 1-888-257-1985.
1195-1196	617	NHP member. For dental services, call 1-800-685-9971. For vision services, call 1-800-638-3120.
1197-1198	619	Fallon Community Health Plan member. For dental services, call 1-866-275-3247. For vision services, call 1-866-275-3247.
1200-1212 1213	622	Network Health Member. For vision services, call 1-888-257-1985.
1214	642	Partial HSN dental available. Member with 200-250 percent FPL. HSN deductible is \$46.
1215-1217	643	Partial HSN dental available. Member with 250-300 percent FPL. HSN deductible is \$2,299.
1218-1229	644	HSN dental available.
1234	633	HSN is for certain hospital and CHC services only. Member is not eligible for MassHealth. Call 1-877-910-2100.
1242	668	One Care. Fallon Total Care member. For medical, behavioral health, and long-term services and support services, call 1-855-508-4715.
1250	522	Eligible for emergency services through Masshealth Limited.

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1253		
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1263-1392		
1488-1494	606	Reimbursement from the Health Safety Net is not allowable for this patient.
1499	670	Health Safety Net is not available. Member must submit Identity Verification for HSN eligibility.
1505-1508	671	CarePlus Celticare member. For medical services, call 1-855-678-6975. For Behavioral Health Services, call 1-855-678-6975.
1510-1519	675	Member eligible for ConnectorCare. HSN may be available. If enrolled, HSN dental is available.
1520 - 1523	675	Member eligible for ConnectorCare. HSN may be available. If enrolled, HSN dental is available.
1525-1526	676	Member eligible for coverage through the Health Connector. HSN available. If enrolled, member is HSN Secondary. Primary insurance must be billed first.
1528 -1534	677	Member eligible for ConnectorCare. HSN Partial may be available. If enrolled, Partial HSN dental is available.
1535-1536		
1546-1557	678	Member eligible for coverage through the Health Connector. Partial HSN available. If enrolled, member is HSN Secondary. Primary insurance must be billed first.
1560	681	This member's Commonwealth Care coverage is ending soon! They need to submit a new application on or after November 15, 2014 at MAhealthconnector.org.
1560	1560	Temporary HSN Available. Member eligible for ConnectorCare. If member is unenrolled, visit mahealthconnector.org for more information.
1561	1561	HSN Dental Available. Member eligible for ConnectorCare. If member is unenrolled, visit mahealthconnector.org for more information.

