***Commonwealth of Massachusetts***

***Executive Office of Health and Human Services***

***Office of Medicaid***

*www.mass.gov/masshealth*

**MassHealth**

**All-Provider Bulletin 297**

**May 2020**

**TO:** All ProvidersParticipating in MassHealth

**FROM:** Amanda Cassel Kraft, Acting Medicaid Director [Signature of Amanda Cassel Kraft]

# RE: Change in Cost Sharing Policies

## Background

MassHealth is revising its cost sharing policies. These changes will be implemented in two phases: the first phase becomes effective on July 1, 2020, and the second phase becomes effective on January 1, 2021. **Existing copay exclusions will still apply.** For a more complete list of copay exclusions, please refer to 130 CMR 450.130(D) and (E).

Effective July 1, 2020, the following services are newly excluded from copays. Please note that copays for acute inpatient hospital stays were eliminated on March 18th, 2020, and no copays apply to COVID-19 testing and treatment services for the duration of the national emergency.

* FDA-approved medications for detoxification and maintenance treatment of substance use disorders (SUD);
* [preventive services rated Grade A and B by the US Preventive Services Task Force (USPSTF)](https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations/)[[1]](#footnote-2) or broader exclusions specified by MassHealth (e.g., low-dose aspirin; colonoscopy preparation); and
* [vaccines and their administration recommended by the Advisory Committee on Immunization Practices (ACIP)[[2]](#footnote-3).](https://www.cdc.gov/vaccines/hcp/acip-recs/index.html)

Effective July 1, 2020, the following populations are newly excluded from copays:

* members with incomes at or under 50% federal poverty level (FPL); and
* members categorically eligible for MassHealth because they are receiving other public assistance (“referred eligibles”) such as Supplemental Security Income (SSI), Transitional Aid to Families with Dependent Children (TAFDC), or services through the Emergency Aid to the Elderly, Disabled and Children (EAEDC) Program.

Pharmacy providers will be able to see the new service and population exclusions as part of the claim response in the Pharmacy Online Processing System (POPS). The Eligibility Verification System (EVS) will not be updated to display any new or additional copay information until the second phase of cost sharing changes.

Details on the second phase of cost sharing changes will be communicated to providers closer to implementation.

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## Notifications of These Changes

Beginning in May 2020, MassHealth is sending a notice explaining these changes to members with incomes at or under 50% FPL and “referred eligibles." A copy of the member notice is attached to this bulletin.

Pharmacies will also receive this information in a Pharmacy Facts closer to the July 1, 2020, implementation date.

## MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins web page](https://www.mass.gov/masshealth-provider-bulletins).

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

## Questions

**Pharmacy Providers**

Pharmacy providers who have any questions regarding Pharmacy Billing and Claims should contact the MassHealth Pharmacy Technical Help Desk at (866) 246-8503. Pharmacy providers who have any other questions about the information in this bulletin, or member eligibility, should contact MassHealth Customer Service at (800) 841-2900 or the Automated Voice Response (AVR): (800) 554-0042.

**LTSS Providers**

If you have any questions about the information in this bulletin, please contact MassHealth Long Term Services and Supports (LTSS) Provider Service Center at (844) 368-5184, or email your inquiry to [support@masshealthltss.com](mailto:support@masshealthltss.comt).

**All Other Providers**

If you have any questions about the information in this bulletin, please contact MassHealth Customer Service at (800) 841-2900, or email your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net).



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[www.mass.gov/masshealth](http://www.mass.gov/masshealth)

«FIRSTNAME» «LASTNAME» «DATE»

«STREET1» «STREET2»

«CITY», MA «ZIP»

**Important Information about MassHealth Copays**

# THIS IS NOT A BILL. YOUR MASSHEALTH BENEFITS DO NOT CHANGE.

Dear «FIRSTNAME» «LASTNAME»:

MassHealth ID: «MASSHEALTHIDNUMBER»

Starting **July 1, 2020**, two types of MassHealth members will no longer have to pay copays for drugs covered by MassHealth:

* Those with income at or below 50% of the federal poverty level, and
* Members who are on MassHealth because they get certain other types of public assistance.

Also, some substance use disorder (SUD) treatments, some preventive services, and acute inpatient hospital stays will not have copays. A copay is the dollar amount charged by a provider to a member for the use of a covered service or item.

Based on our records, you may not need to pay copays starting July 1, 2020.

## You do not have to pay any copays if:

* Your income is at or below 50% of the federal poverty level (NEW STARTING JULY 1, 2020)
* You are eligible for MassHealth because you are getting certain public assistance benefits such as Supplemental Security Income (SSI), Transitional Aid to Families with Dependent Children (TAFDC), or services through the Emergency Aid to the Elderly, Disabled and Children (EAEDC) Program. See 130 CMR 506.015 and 130 CMR 520.037 (NEW STARTING JULY 1, 2020)
* You are under 21 years old
* You are pregnant or your pregnancy has recently ended
* You are getting benefits under MassHealth Limited (emergency MassHealth)
* You are a member with MassHealth Senior Buy-In or MassHealth Standard, and you are getting a drug that is covered under Medicare Parts A and B only, when provided by a Medicare-certified provider
* You are in a long-term care facility
* You are getting hospice services
* You were a foster care child and you are eligible for MassHealth Standard, until age 21 or 26 as specified by 130 CMR 505.002(H)
* You are American Indian or an Alaska Native, or
* You are in another exempt category (see 130 CMR 506.015 or 130 CMR 520.037).

## In addition, there is no copay for the following services:

* SUD treatment, such as Medication-Assisted Therapy (MAT) (for example, Suboxone or Vivitrol) (NEW STARTING JULY 1, 2020)
* Certain preventive services such as low-dose aspirin for heart conditions, drugs used for HIV prevention, and drugs used to prepare for a colonoscopy (NEW STARTING JULY 1, 2020)
* Certain vaccines and their administration (NEW STARTING JULY 1, 2020)
* Acute inpatient hospital stays (EFFECTIVE AS OF MARCH 18, 2020)
* Family planning services and supplies
* Products and drugs to help you stop smoking
* Emergency services
* Provider preventable services, or
* Other services described in MassHealth regulations (see 130 CMR 506.015 and 130 CMR 520.037).

# Important to Know

**If you have a change in your financial situation or other circumstances, you may need to pay copays on drugs.** You must report any changes to MassHealth within 10 days of a change or as soon as possible. To report changes, please call us at (800) 841-2900, Monday

through Friday, between 8:00 a.m. and 5:00 p.m. For TTY, call (800) 497-4648 for people who are deaf, hard of hearing, or speech disabled, during the same hours.

# For More Information

If you have questions or need more information, go to [www.mass.gov/copayment-](http://www.mass.gov/copayment-) information-for-members or call us at (800) 841-2900, Monday through Friday between 8:00 a.m. and 5:00 p.m. For TTY, call (800) 497-4648 during the same hours.

This letter is not a guarantee that you will never have to pay copays after July 1, 2020.

Sincerely, MassHealth

1. As these ratings may be updated by the USPSTF. [↑](#footnote-ref-2)
2. As these recommendations may be updated by the ACIP. [↑](#footnote-ref-3)