

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid

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MassHealth All Provider Bulletin 369 (corrected) July 2023

TO: All Providers Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth

RE: Electronic Submission of Prior Authorization Requests

Electronic Prior Authorization Submission Requirement

Effective **June 30**, **2023**, all prior authorization (PA) requests must be submitted electronically, unless the provider has a currently approved <u>electronic claims waiver</u> or the PA request is for 1) prescription drugs, regardless of where they are dispensed or how they are billed; or 2) non-drug products dispensed at a pharmacy and billed through either the Pharmacy Online Processing System (POPS) or the Medicaid Management Information System (MMIS). Electronic claims waiver requests must be submitted via a <u>waiver request form</u> provided by MassHealth. If the waiver request is incomplete, MassHealth may request additional information from the provider. If the provider does not submit the requested information to MassHealth within 30 days of the request date, the waiver will be denied. See <u>130 CMR 450.302(A)</u> for electronic claims submission waiver criteria. If a provider who does not have a currently approved electronic claims waiver submits a PA request via any other method (e.g., via paper, email, or fax), the PA request will not be processed except at the sole discretion of EOHHS.

This bulletin has been corrected to note that the electronic submission requirement does not apply to PA requests for 1) prescription drugs, regardless of where they are dispensed or how they are billed; or 2) non-drug products dispensed through pharmacies and billed through POPS or MMIS. For more information around submitting PA requests for these items, please visit the MassHealth pharmacy services website.

MassHealth Website

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Questions

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All Other Provider Types

Phone: (800) 841-2900; TDD/TTY: 711 Email: <u>provider@masshealthquestions.com</u>