# All Provider Bulletin 403



Commonwealth of Massachusetts

Executive Office of Health and Human Services

Office of Medicaid

[www.mass.gov/masshealth](https://www.mass.gov/orgs/masshealth)

**DATE:** May 2025

**TO:** All Providers Participating in MassHealth

**FROM:** Mike Levine, Assistant Secretary for MassHealth [signature of Mike Levine]

RE: Ending the Suspension of Primary Care Clinician Plan & Primary Care ACO Referrals and Updating Referral Requirements for Urgent Care Services

## Background

MassHealth created many flexibilities during the federal Public Health Emergency (PHE) to address COVID-19. We provided updates on those flexibilities in [All Provider Bulletins 367, 371, and 384](https://www.mass.gov/lists/402-through-300). These flexibilities included the suspension of referral requirements for services provided to members enrolled in the Primary Care Clinician (PCC) Plan or a Primary Care Accountable Care Organization (Primacy Care ACO). This bulletin announces the reinstatement of those requirements.

## Primary Care Clincian Plan & Primary Care ACO Referrals

On August 1, 2025, MassHealth will reinstate referral requirements for services provided to members enrolled in the PCC plan or a Primary Care ACO, as outlined in [130 CMR 450.118(J): *Referral for Services*](https://www.mass.gov/regulations/130-CMR-450000-administrative-and-billing-regulations) and [130 CMR 450.119(I): *Referral for Services*](https://www.mass.gov/regulations/130-CMR-450000-administrative-and-billing-regulations).

## Referrals for Urgent Care Services

Notwithstanding the requirements of [130 CMR 450.118(J): *Referral for Services*](https://www.mass.gov/regulations/130-CMR-450000-administrative-and-billing-regulations) and [130 CMR 450.119(I): *Referral for Services*](https://www.mass.gov/regulations/130-CMR-450000-administrative-and-billing-regulations), urgent care services, as defined in M.G.L. c. 118E, s. 10N, will not require a referral in order to be payable. Urgent care facilities, as defined in M.G.L. c. 118E, s. 10N, that provide urgent care services must bill in a manner that shows that the service was urgent. For professional claims, providers must bill with place of service 20. For institutional claims, providers must bill with admit code 02.

## Referring Provider Requirements

As described in [All Provider Bulletin 286](https://www.mass.gov/lists/299-through-104) (with updated information provided in [All Provider Bulletins 361, 376, 380, and 391](https://www.mass.gov/lists/402-through-300)), claims submitted to MassHealth for services that require a referral must include the national provider identifier (NPI) of an authorized referring provider. The referring provider must also be enrolled with MassHealth for the claim to be payable. Therefore, when the PCC and Primary Care ACO referrals are reinstated on August 1, 2025, billing providers must include the NPI of an authorized, enrolled referring provider on every claim for a service for which a referral is required for the claim to be payable.

## MassHealth Website

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

[Sign up](https://www.mass.gov/forms/email-notifications-for-provider-bulletins-and-transmittal-letters) to receive email alerts when MassHealth issues new bulletins and transmittal letters.

## Questions?

If you have questions about the information in this bulletin, please contact:

### Long-Term Services and Supports

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

Email: [support@masshealthltss.com](mailto:support@masshealthltss.com)

Portal: [MassHealthLTSS.com](https://www.masshealthltss.com/s/?language=en_US)

Mail: MassHealth LTSS

PO Box 159108

Boston, MA 02215

Fax: (888) 832-3006

### All Other Provider Types

Phone: (800) 841-2900, TDD/TTY: 711

Email: [provider@masshealthquestions.com](mailto:provider@masshealthquestions.com)

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