



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

All Provider Bulletin 409

DATE: October 2025

TO: All Providers Participating in MassHealth

FROM: Mike Levine, Undersecretary for MassHealth

RE: **Update to Certain Exceptions to Referral Requirements for Services through the Primary Care Clinician Plan and Primary Care Accountable Care Organizations**

Background

Effective August 1, 2025, MassHealth reinstated referral requirements for services provided through the Primary Care Clinician (PCC) Plan or a Primary Care Accountable Care Organization (primary care ACO). We provided this update in [All Provider Bulletin 403](#). This bulletin announces an update to certain exceptions to services that require referrals in the PCC Plan or Primary Care ACOs.

PCC Plan and Primary Care ACO Referrals

As stated in [All Provider Bulletin 403](#), effective August 1, 2025, MassHealth reinstated referral requirements for services provided to members in the PCC Plan or a primary care ACO, as outlined in [130 CMR 450.118\(J\): Referral for Services](#) and [130 CMR 450.119\(I\): Referral for Services](#).

Additional Exceptions to Services Requiring Referrals

Notwithstanding the requirements of [130 CMR 450.118\(J\): Referral for Services](#) and [130 CMR 450.119\(I\): Referral for Services](#), the following services, in addition to the services listed in those sections and in [All Provider Bulletins 403 and 406](#), also do not require a referral from the member's PCC or participating primary care provider to be payable (these services may be subject to other referral requirements under their respective program regulations).

- adult day health services as described in [130 CMR 404.000](#);
- adult foster care/group adult foster care services as described in [130 CMR 408.000](#);
- day habilitation services as described in [130 CMR 419.000](#);
- doula services as described in [130 CMR 463.000](#);
- early intervention service as described in [130 CMR 440.000](#);
- homeless medical respite services as described in [130 CMR 458.000](#);
- independent nursing services as described in [130 CMR 414.000](#);

- personal care services under [130 CMR 422.000](#): *Personal Care Attendant Services*, which includes functional skills training provided by a MassHealth personal care management agency as described in [130 CMR 422.421\(B\)](#): *Functional Skills Training*, as well as fiscal intermediary functions provided by a fiscal intermediary as described in [130 CMR 422.419\(B\)](#): *The Fiscal Intermediary*;
- rehabilitation center services as described in [130 CMR 430.000](#);
- restorative services, including physical, occupational, and speech/language therapy;
- services provided by continuous skilled nursing agencies as described in [130 CMR 438.000](#);
- services delivered by home health agencies as described in [130 CMR 403.000](#);
- services delivered by an orthotic provider as described in [130 CMR 442.000](#);
- services delivered by a prosthetic provider as described in [130 CMR 428.000](#);
- speech and hearing center services as described in [130 CMR 413.000](#);
- urgent care services as defined in [M.G.L. c. 118E, § 10N](#); and
- vaccine administration and injectable material for such vaccines.

Referring Provider Requirements

As described in [All Provider Bulletin 286](#) (with updated information provided in [All Provider Bulletins 361, 376, 380, 391, and 403](#)), 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, for PCC and Primary Care ACO referrals reinstated August 1, 2025, billing providers must include the NPI of an authorized, enrolled referring provider on claims with services that require a referral in order for the claims to be payable.

MassHealth Website

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Questions?

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