



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

Managed Care Entity Bulletin 133

DATE: September 2025

TO: All Managed Care Entities Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth 

RE: **Additional Details About the MassHealth Standardized Encounter Data Program (SENDPro) Project**

Applicable Managed Care Entities and Pace Organizations

- ☒ Accountable Care Partnership Plans (ACPPs)
- ☒ Primary Care Accountable Care Organizations (Primary Care ACOs)
- ☒ Managed Care Organizations (MCOs)
- ☒ MassHealth's behavioral health vendor
- ☒ One Care Plans
- ☒ Senior Care Options (SCO) Plans
- ☐ Program of All-inclusive Care for the Elderly (PACE) Organizations

Overview

MassHealth requires managed care entities (MCEs) to submit post-adjudicated claims, also known as encounter data, to MassHealth, through the flat-file submission protocol. As detailed in [Managed Care Entity Bulletin 129](#), MCEs will be required to submit encounter data through the Standardized Encounter Data Program (SENDPro) application beginning in 2026. Submissions to the SENDPro application must use the industry-standard Electronic Data Interchange (EDI) X12 837 Post Adjudicated Claims Data Reporting (PACDR) format for medical encounters, and the National Council for Prescription Drug Programs (NCPDP) Post Adjudication V51 Standard format for pharmacy encounters. In addition, MCEs will be required to support federal and state encounter data quality mandates via claims-processing validations, as well as more stringent enforcement of existing data quality standards, to report accurate and consistent encounter data to MassHealth. MCEs will have to update their systems to support this transition.

As MCEs update their systems and their processes, they must ensure that all in-network and out-of-network providers, including providers associated with MCE vendors, are fully informed of these requirements in a timely manner, and that provider networks are prepared to update their claims-submissions processes to comply with SENDPro requirements. MCEs must communicate expected changes to providers and allow providers sufficient time to implement

these changes, so that MCEs may then enforce these requirements through their claims-adjudication processes, up to and including denying incomplete claim submissions from providers. This bulletin outlines expectations for MCEs collaborations with their provider networks to support the changes necessary for successful claims processing and encounter submissions after SENDPro go-live.

MCE Communications to Providers

MCEs must communicate key timelines and expectations to providers, and offer technical assistance to support their understanding of the new data-submission requirements. MCEs should emphasize that validation processes will be more rigorous than current standards, and may include the rejection of encounter records until all errors are resolved. Please note that inaccurate or incomplete population of required fields in encounter data submissions may lead to rejection, exclusion from settlement, and exclusion from rate setting.

To support providers, MCEs should develop user guides, training materials, and other guidance documents to assist with claims submissions. Close coordination between MCEs and providers is critical to avoid negative consequences and ensure readiness for the SENDPro go-live.

To understand how each MCE plans to support its providers in preparing for the transition to SENDPro, MassHealth will be requesting MCEs to develop and submit a provider engagement and communication plan at a later date.

Please note that many of these requirements (provider NPI, provider taxonomy, valid code sets) are not new, but will be enforced to better comply with EDI standards and federal requirements for encounter data reporting.

Key Updates Impacting Claim and Encounter Submissions

MassHealth has identified a set of upcoming changes that will substantially impact encounter data validations. Although not comprehensive, this list highlights priority areas that will create challenges if not implemented correctly. As MassHealth continues testing, additional impacts may be identified. **It is the responsibility of the MCEs to communicate impacts to their providers.**

Completeness of Provider Taxonomies

MCEs must include provider taxonomies in the appropriate data element(s) for all medical encounter submissions. Therefore, providers must include provider taxonomies in the appropriate data element(s) on all claim types except pharmacy, per the 837 companion guides for 837 I, 837 P, and 837 D. For a list of valid taxonomies, please refer to the National Uniform Claim Committee's Health Care Provider Taxonomy Code Set, Version 25.1 - July 2025, at taxonomy.nucc.org.

Completeness of Provider NPIs (National Provider Identifiers)

MCEs must include the provider's NPI in the appropriate data element(s) for all encounter submissions. Therefore, all provider claims must include valid NPI in the appropriate data

element(s) for all provider types (e.g. billing, attending, referring, rendering, operating), with the exception of atypical providers.

Validation of Attending-Provider ID

MCEs must include NPI values for attending in the appropriate data element in all 837 I encounter submissions. Therefore, providers must include a valid NPI for the attending provider in the appropriate data element for all inpatient provider claims.

Submission of Hospital Admission Date and Time

MCEs must include a valid admission hour in all encounters submitted via 837 I. Therefore, providers must include a valid admission hour and date on all inpatient provider claims, with exceptions for certain bill types. For full details and list of exceptions, please refer to the 837 I companion guide.

Submission of Hospital Discharge Hour

MCEs must include a valid discharge hour in all encounters submitted via 837 I. Therefore, providers must include a valid discharge hour and date for all inpatient provider claims, with exceptions for certain bill types. For details, please refer to the 837 I companion guide.

Completeness of PID/SL (Provider Identification/Service Location)

MCEs must include PID/SL identifiers in provider-related data fields for all encounters.

- MCEs must ensure that all network providers have a valid PID/SL and require providers without a PID/SL to obtain one.
- MCEs must accurately report all PID/SLs to MassHealth on the enhanced provider file.
- PID/SLs are not required on provider-submitted claims, but providers must include the following data elements for MCEs to accurately map the PID/SL for each provider: provider name, provider address, taxonomy, NPI.

Procedure Codes and Modifiers, Diagnosis Codes, and Any Standardized Codes

MCEs must use standardized code sets, as per EDI implementation guide specifications and requirements. Typos and invalid codes will be rejected.

It is critical that MCEs and providers comply with all requirements for claims and encounter submissions. Failure to populate required fields may result in rejection, exclusion from settlement, and exclusion from rate setting.

Additional Information

For additional information about the technical specifications used in the SENDPro application, please refer to the implementation guides (IG) published by X12 and NCPDP, respectively. Additionally, MassHealth companion guides are a supplement to the mandated X12 Implementation Guide/Technical Report (IG/TR3) and NCPDP Post Adjudication Standard

Implementation Guide. The companion guides provide additional MassHealth business needs and cannot replace or include X12 requirements, due to licensing copyright laws. A link to the latest draft companion guides can be found at mass.gov/lists/masshealth-managed-care-encounter-data-companion-guides.

MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](#) web page.

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Questions?

If you have any questions about this bulletin, please email the SENDPro Communications team at masshealth_sendpro_inquiries@mass.gov.

Resources

Links to acquire the standards

- X12 Licensing Program: x12.org/products/licensing-program
- NCPDP: ncdp.org

Link to latest draft of the MassHealth Managed Care Encounter Data companion guides

- mass.gov/lists/masshealth-managed-care-encounter-data-companion-guides