***Commonwealth of Massachusetts***

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

***Office of Medicaid***

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MassHealth

# Managed Care Entity Bulletin 85

March 2022

**TO**: Managed Care Entities Participating in MassHealth

**FROM**: Amanda Cassel Kraft, Assistant Secretary for MassHealth [signature of Amanda Cassel Kraft]

RE: Coverage of Pediatric Enteral Special Formula and Thickening Agents as a Pharmacy Benefit

## Applicable Managed Care Entities and PACE Organizations

[x]  Accountable Care Partnership Plans (ACPPs)
[x]  Managed Care Organizations (MCOs)
[ ]  MassHealth’s behavioral health vendor
[x]  One Care Plans
[x]  Senior Care Organizations (SCOs)
[x]  Program of All-inclusive Care for the Elderly (PACE) Organizations

## Background

As detailed in [Pharmacy Facts 175](https://www.mass.gov/lists/masshealth-pharmacy-facts-2016-current), MassHealth began providing coverage for pediatric enteral special formula and thickening agents through the pharmacy program. Pediatric enteral special formula and thickening agents were added to the MassHealth Pharmacy Non-Drug Product List to help address supply chain concerns. The coverage for these products is available to MassHealth members enrolled in MassHealth fee-for-service, the Primary Care Clinician (PCC) Plan, and the Primary Care Accountable Care Organizations (ACOs). Existing coverage for enteral special formula and thickening agents will stay the same.

With this bulletin, MassHealth directs Accountable Care Partnership Plans (ACPPs), Managed Care Organizations (MCOs), Senior Care Organizations (SCOs), and One Care plans (collectively, “managed care plans”), as well as Program of All-inclusive Care for the Elderly (PACE) organizations to institute certain policies to align with [Pharmacy Facts 175](https://www.mass.gov/lists/masshealth-pharmacy-facts-2016-current).

## Coverage of Pediatric Enteral Special Formula and Thickening Agents

MassHealth directs managed care plans and PACE organizations to cover the following products as a pharmacy benefit using a valid prescription from the MassHealth member’s prescriber:

• Pediatric enteral special formula

• Thickening agents

Managed care plans and PACE organizations must also continue to cover these products as they do currently.

One Care Plans and SCOs should first follow guidance provided by Medicare on these topics for enrollees with Medicare, including billing and coding instructions. SCOs must follow the requirements in this bulletin for Medicaid-only enrollees. PACE organizations should follow all PACE guidance from the Centers for Medicare & Medicaid Services on these topics and must ensure that their coverage policies include those outlined in this bulletin.

## 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-masshealth-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 the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988‑8974.