



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Division of Medical Assistance**  
600 Washington Street  
Boston, MA 02111

**MassHealth**  
**Pharmacy Bulletin 65**  
**December 2000**

**TO:** Pharmacies Participating in MassHealth  
**FROM:** Wendy E. Warring, Commissioner  
**RE:** **Suspension of Pharmacy Bulletin 62—Certain Brand-Name Multi-Source Drugs**

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***Prior Authorization  
No Longer Required  
for Certain Drugs***

In June 2000, the Division of Medical Assistance suspended MassHealth Pharmacy Bulletin 62 (dated March 2000), which required prior authorization for brand-name multi-source analgesics, benzodiazepines, and muscle relaxants.

MassHealth members who could not get their prescriptions for these products filled as a result of the policy stated in Pharmacy Bulletin 62 can have a new prescription for that drug filled without getting prior authorization. Any such prescription must comply with all applicable laws and regulations, including those governing medical necessity.

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***Reimbursement to  
Members***

If a member paid for a brand-name drug listed above between March 15, 2000, and July 4, 2000, instead of accepting a generic substitute, the member may be able to get reimbursed by the Division.

The Division will notify members who may be eligible for reimbursement, and provide instructions for requesting reimbursement. To receive reimbursement, the member must send to the Division, within 90 days of the date of the notice:

- a copy of the notice; and
- a receipt of payment or a printout from the pharmacy showing payment.

The Division will send a reimbursement check directly to qualifying members.

Please help members who paid for such drugs by providing them with a pharmacy printout, if requested, that they can submit to the Division.

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***Questions***

If you have any questions about the information in this bulletin, please contact the MassHealth Provider Services Department at (617) 628-4141 or 1-800-325-5231.

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