




Commonwealth of Massachusetts
Executive Office of Health and Human Services
Division of Medical Assistance
600 Washington Street
Boston, MA 02111
www.mass.gov/dma

MassHealth
Pharmacy Bulletin 71
November 2002

TO: Pharmacies Participating in MassHealth
FROM: Wendy E. Warring, Commissioner 
RE: Changes to Pharmacy Copayments

Background

The Massachusetts Legislature increased pharmacy copayments for MassHealth members from 50 cents per prescription to \$2 per prescription. The revised regulations for this change will be effective January 1, 2003. You will receive these revised regulations sometime in early January 2003.

The Division will send MassHealth members a notice beginning in November 2002, informing them of this copayment increase. An advance copy of the member notice is attached to this bulletin. We are sending you this bulletin before MassHealth members are notified of the change.

Scope of Copayment

This copayment increase applies to drugs covered by MassHealth (whether legend or nonlegend), including the original prescriptions and all refills, with certain exceptions listed below.

Copayment Exceptions

The following continue to be excluded from the copayment requirement:

- MassHealth members who have not reached their 19th birthday;
 - MassHealth members who are pregnant;
 - MassHealth members who are in the postpartum period that extends through the last day of the second calendar month following the month in which their pregnancy ends;
 - MassHealth Limited (emergency MassHealth) members;
 - MassHealth Senior Buy-In (MassHealth and Medicare) members or MassHealth Standard members for Medicare-covered drugs only, when furnished by a Medicare-certified provider;
 - MassHealth members who are inpatients in hospitals, nursing facilities, chronic-disease or rehabilitation hospitals, or intermediate-care facilities for the mentally retarded;
 - family-planning services and supplies;
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Copayment Exceptions
(cont.)

- emergency services;
 - hospice-care services; and
 - persons getting medical services through the Emergency Aid to the Elderly, Disabled and Children (EAEDC) Program, if they do not receive MassHealth Basic or MassHealth Standard.
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MassHealth MCOs

Members of one of these MassHealth managed-care organizations (MCOs)—Fallon Community Health Plan, Neighborhood Health Plan, Network Health, or Boston Medical Center HealthNet Plan—must follow the MassHealth copayment policy of their MCO.

Restrictions

The pharmacy may not refuse to fill or refill a prescription for a MassHealth member who is financially unable to pay the copayment.

Collection of Copayments

The pharmacy may use any legal means to collect unpaid copayments from the member.

Claims Processing

Pharmacy claims with dates of service on or after January 1, 2003, will reflect the increased copayment amount of \$2.

Questions

If you have any questions about claims processing, contact the
ACS Help Desk
1-866-246-8503
24 hours a day, seven days a week.

If MassHealth members have a question, advise them to call the
MassHealth Customer Service Center
1-800-841-2900 (TTY: 1-800-497-4648 for the deaf and hard of hearing) between 8 A.M. – 5 P.M., Monday through Friday.



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This is an important message about your MassHealth benefits.

What you pay for medicine is changing. Right now, most of you pay 50 cents (the pharmacy copayment) for each MassHealth prescription filled at your pharmacy. As of January 1, 2003, the pharmacy copayment will increase from 50 cents to \$2 for each MassHealth prescription that you get filled or refilled.

This pharmacy copayment increase is because of a law passed by the Massachusetts Legislature. Even with this change, MassHealth still charges its members less for medicine than almost any other health plan.

If you are a member of one of these MassHealth health plans—Fallon Community Health Plan, Neighborhood Health Plan, Network Health, or Boston Medical Center HealthNet Plan—the increased copayment may not apply to you. You must follow the copayment rules of your health plan.

A copayment cannot be charged for some services and some MassHealth members cannot be charged a copayment.

These services and people are “exempt,” and are described later in this notice.

If you are *not* exempt, you will be charged a pharmacy copayment. You must pay the copayment if you can afford it. You decide if you can afford the copayment. You should never go without medicine that you need because you cannot afford the copayment. If you cannot afford to pay the copayment, tell the pharmacy. Under federal law, the pharmacy must still give you the medicine. If you do not pay the copayment because you cannot afford to, you will still owe the money to the pharmacy. (MassHealth will not pay the pharmacy for the \$2 copayment you owe.) The pharmacy may use any legal way to collect the money you owe.

The following persons are exempt from paying a pharmacy copayment.

- MassHealth members under 19 years old
- MassHealth members who are pregnant
- MassHealth members for the 60 days following the month their pregnancy ended
- MassHealth Limited (emergency MassHealth) members
- MassHealth Senior Buy-In (MassHealth and Medicare) members or MassHealth Standard members for Medicare-covered medicines only, when filled at a pharmacy that is a certified Medicare provider
- MassHealth members who are inpatients in hospitals, nursing facilities, chronic-disease or rehabilitation hospitals, or intermediate-care facilities for the mentally retarded
- Persons getting Emergency Aid to the Elderly, Disabled and Children (EAEDC) covered services, if they are not getting MassHealth Basic or MassHealth Standard

The following services are exempt from a pharmacy copayment.

- Family-planning services and supplies
- Emergency services
- Hospice-care services

Because the pharmacy’s computer system may not show the pharmacist that you are exempt from paying a pharmacy copayment, be sure to tell the pharmacist if any of the above-listed exemptions apply to you.

If you have questions about this change, call the MassHealth Customer Service Center at 1-800-841-2900 between 8:00 A.M. - 5:00 P.M. Monday through Friday (TTY: 1-800-497-4648 for the deaf and hard of hearing). Your wait time on the phone may be shorter if you call in the afternoon and call on Tuesday through Friday.

If you are a consumer of the Massachusetts Commission for the Blind, and you have questions about this change, please call 1-800-392-6450 (TTY: 1-800-392-6556 for the deaf and hard of hearing).