



PHARMACY FACTS

Current information for pharmacists about the MassHealth Pharmacy Program

www.mass.gov/masshealth-pharmacy-facts

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Cash Payments

Pharmacies are reminded that under MassHealth regulations, pharmacies may not solicit, charge, receive, or accept any money, gift, or other consideration (including cash payments) from a MassHealth member (or from any other person) for any drug for which payment is available from MassHealth, except required co-pays. Payment is available from MassHealth even if the drug is subject to a quantity limit, dose limit, or prior authorization requirement, unless the prescriber has made diligent efforts to obtain prior authorization and MassHealth has denied prior authorization for the drug as not medically necessary. An expired prior authorization, a prior authorization with no remaining refills, or a prior authorization denied by MassHealth for an administrative reason (e.g., missing or incomplete documentation) does not satisfy this requirement. Pharmacies are responsible for verifying that the prescriber undertook diligent efforts to obtain prior authorization, and should notify both the member and the prescriber if a prior authorization is expired or has no remaining refills.

Pharmacies are also responsible for verifying a member's eligibility and plan enrollment information. However, in the event a pharmacy accepts payment from a MassHealth member for any drug for which payment is available from MassHealth without knowing that the member was a MassHealth member at the time the drug was dispensed, the pharmacy must, upon learning that the individual was a MassHealth member, immediately return the payment to the member.

Note also that pharmacies may not refuse to dispense a covered drug to a MassHealth member on the basis of the payment amount available from MassHealth.

Failure to comply with any of these requirements is a violation of MassHealth regulations and may result in sanctions against and/or prosecution of the pharmacy.

Help Desk Contact Information for Member Eligibility for all Plans

Plan Name	Contact Information
Be Healthy Partnership (HNE)	1-800-310-2835 (HNE Member Services)
Berkshire Fallon Health Collaborative	1-866-275-3247 (Eligibility Verification)
Fallon 365 Care	
Wellforce Care Plan (Fallon)	
My Care Family (NHP)	1-800-421-2342 (CVS Caremark) If you don't have member's address, contact 1-800-462-5449 (ACO's Customer Service Desk).
BMC HealthNet Plan	1-888-566-0010 (Choose the pharmacy option in the call menu to reach Envision, BMC's PBM)
BMC HealthNet Plan Community Alliance	
BMC HealthNet Plan Mercy Alliance	
BMC HealthNet Plan Signature Alliance	
BMC HealthNet Plan Southcoast Alliance	

**Help Desk Contact Information for
Member Eligibility for all Plans
(cont.)**

Plan Name	Contact Information
Tufts Health Together	1-877-683-6174 (CVS Caremark) If you don't have member's address, contact 1-888-257-1985 (MCO and ACO customer service desk).
Tufts Health Together with Atrius Health	
Tufts Health Together with BIDCO	
Tufts Health Together with Boston Children's ACO	
Tufts Health Together with CHA	
Primary Care Clinician (PCC) Plan	Submit claims to POPS.
Community Care Cooperative (C3)	
Partners HealthCare Choice	
Steward Health Choice	