



# PHARMACY FACTS

*Current information for pharmacists about  
the MassHealth Pharmacy Program*

[www.mass.gov/masshealth-pharmacy-facts](http://www.mass.gov/masshealth-pharmacy-facts)

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## Flu Vaccine Billing Reminder

Pharmacies may bill for the flu vaccine administration using the Pharmacy Online Processing System (POPS). The instructions are as follows.

- Include the NDC of the vaccine serum.
- Enter a zero amount in the dispensing fee field. (MassHealth will pay an administration fee, rather than a dispensing fee, to pharmacies.)
- Enter "MA" in the field named "Professional Service" (440-E5).
- Enter the appropriate administration fee in the field named "Incentive Amount Submitted" (438-E8). The administration fee is \$20.25.
- Include the cost of the vaccine serum, plus the administration fee, as the gross amount due.

## Brand Name Preferred Over Generic Drug List

MassHealth prefers certain brand name drugs over generics. Such brand name drugs are listed on the MassHealth Brand Name Preferred Over Generic Drug List.

When submitting a claim for the generic version of a brand name drug that appears on the MassHealth Brand Name Preferred Over Generic Drug List, a pharmacy may see a claim rejection that reads as follows.

75 - Prior Authorization Required, with text message, "Drug is on MH brand preferred list. DAW 9 for preferred brand submission. Non-preferred brand or generic drugs would require DUR (Drug Utilization Review) certification."

If a pharmacy encounters this rejection, the pharmacy should resubmit the claim for the preferred brand name drug using a DAW 9. Brand name drugs appearing on the MassHealth Brand Name Preferred Over Generic Drug List are not preferred when MassHealth is the secondary insurer and another payer is the primary insurer. If this type of rejection is encountered on a claim where MassHealth is the secondary payer and the primary insurer prefers the generic, please contact the MassHealth DUR unit at (800) 745-7318 for assistance.

## Pregnancy

Members who are pregnant or in the postpartum period (extending through the end of the second calendar month following the final month of their pregnancy), are exempt from MassHealth copayment requirements. In these cases, the pharmacist should enter a 2 in the Pregnancy Indicator Field (NCPDP- 335-2C) of the pharmacy claim.