

PHARMACY FACTS

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Current Information for pharmacists about the MassHealth Pharmacy Program

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MassHealth Pharmacy Coverage of Pediatric Enteral Special Formula and Thickening Agents

Due to concerns about the supply chain for formula and thickening agents, the following items have been added to the MassHealth Pharmacy Non-Drug Product List.

- Pediatric Enteral Special Formula-PA
- Thickening Agents—PA

This change is effective December 16, 2021, and will remain in effect unless MassHealth provides alternative guidance. Pharmacies may process and dispense pediatric enteral special formula and thickening agents with a valid prescription from the member's prescriber through MassHealth's Pharmacy Online Processing System (POPS). Pharmacies will be paid the lower of the Wholesale Acquisition Cost or the submitted Usual and Customary Charge. MassHealth expects to codify this rate methodology in forthcoming amendments to Executive Office of Health and Human Services rate regulations. This change applies to MassHealth Standard, CommonHealth, CarePlus, Family Assistance, and Children's Medical Security Plan (CMSP) members whose pharmacy claims are paid through POPS. This coverage does not apply to Health Safety Net patients or MassHealth Limited members.

Updated MassHealth Brand Name Preferred Over Generic Drug List

Effective December 20, 2021, the following agents will be removed from the MassHealth Brand Name Preferred Over Generic Drug List.

- Humalog (insulin lispro 75/25)
- Humalog (insulin lispro)

- Novolog (insulin aspart 70/30)
- Novolog (insulin aspart)

Although insulin lispro and insulin aspart are authorized generics, they are currently not interchangeable with the respective brand product. MassHealth will continue to pay for both the branded product and the authorized generic. Beginning February 7, 2021, MassHealth will require prior authorization for brand Humalog and Novolog for new prescriptions. Current refills for Humalog and Novolog will pay at the pharmacy for the life of that prescription. A new prescription will be needed from the prescriber for insulin lispro or insulin aspart once current refills are exhausted.

BIN/PCN/Group Numbers for ACOs, MCOs and PCC Plan

The following tables show the correct combinations, effective for calendar year 2022, for pharmacies for Accountable Care Partnership Plans (ACPPs), Primary Care Affordable Care Organizations (ACOs), Managed Care Organizations (MCO)s, Primary Care Clinician (PCC) Plan, and MassHealth-Only Senior Care Organizations (SCOs).

Accountable Care Partnership Plans	PBM	BIN	PCN	Group	Pharmacy Help Desk
Be Healthy Partnership (HNE)	OptumRx	610593	MHP	HNEMH	(800) 918-7545 (Optum Rx)
Berkshire Fallon Health Collaborative	OptumRx	610011	IRX	FCHPMCD	(844) 368-8734 (Optum Rx)
BMC HealthNet Plan Community Alliance	Express Scripts	003858	MA	MAHLTH	(877) 401-2069 (ESI)
BMC HealthNet Plan Mercy Alliance	Express Scripts	003858	MA	MAHLTH	(877) 401-2069 (ESI)
BMC HealthNet Plan Signature Alliance	Express Scripts	003858	MA	MAHLTH	(877) 401-2069 (ESI)
BMC HealthNet Plan Southcoast Alliance	Express Scripts	003858	MA	MAHLTH	(877) 401-2069 (ESI)
Fallon 365 Care	OptumRx	610011	IRX	FCHPMCD	(844) 368-8734 (Optum Rx)
My Care Family	CVS Caremark	004336	ADV	RX1653	(800) 364-6331 (CVS Caremark)
Tufts Health Together with Atrius Health	CVS Caremark	004336	ADV	RX1143	(877) 683-6174 (CVS Caremark)
Tufts Health Together with BIDCO	CVS Caremark	004336	ADV	RX1143	(877) 683-6174 (CVS Caremark)
Tufts Health Together with Boston Children's ACO	CVS Caremark	004336	ADV	RX1143	(877) 683-6174 (CVS Caremark)
Tufts Health Together with CHA	CVS Caremark	004336	ADV	RX1143	(877) 683-6174 (CVS Caremark)
Wellforce Care Plan (Fallon)	OptumRx	610011	IRX	FCHPMCD	(844) 368-8734 (Optum Rx)

BIN/PCN/Group Numbers for ACOs, MCOs, PCC Plan, and SCO MassHealth-Only

Primary Care ACOs	PBM	BIN	PCN	Group	Pharmacy Help Desk
Community Care Cooperative (C3)	Conduent	009555	MASSPROD	MassHealth	(866) 246-8503 (Conduent/POPS) (800) 745-7318 (DUR)
Mass General Brigham ACO	Conduent	009555	MASSPROD	MassHealth	(866) 246-8503 (Conduent/POPS) (800) 745-7318 (DUR)
Steward Health Choice	Conduent	009555	MASSPROD	MassHealth	(866) 246-8503 (Conduent/POPS) (800) 745 - 7318 (DUR)
MCOs*	PBM	BIN	PCN	Group	Pharmacy Help Desk
BMC HealthNet Plan	Express Scripts	003858	MA	MAHLTH	(877) 401-2069 (ESI)
Tufts Health Together	CVS Caremark	004336	ADV	RX1143	(877) 683-6174 (CVS Caremark)
PCC Plan	PBM	BIN	PCN	Group	Pharmacy Help Desk
Primary Care Clinician (PCC) Plan	Conduent	009555	MASSPROD	MassHealth	(866) 246-8503 (Conduent/POPS) (800) 745-7318 (DUR)
SCO Plan- Medicaid Only	РВМ	BIN	PCN	Group	Pharmacy Help Desk
Commonwealth Care Alliance	Navitus	610602	MCD	МНО	(877) 908-6023
Senior Whole Health	CVS Caremark	004336	ADV	RX 51BB	(866) 693-4620
Tufts Health Plan SCO	CVS Caremark	004336	ADV	RXTHP	(866) 693-4620 (CVS Caremark)
United Health Care SCO	Optum Rx	610494	9999	ACUMA	(877)-889-6510
NaviCare	Optum Rx	610011	IRX	FCHPSCOND	(844) 368-8734 (Optum Rx)
Boston Medical Center SCO	Express Scripts	003858	MA	MAHLTH	(877) 858-5958

*Members of the Lahey Clinical Performance Network ACO should submit claims to the appropriate MCO using the information above.