**Number 236, December 16, 2024 (Corrected)**

**Updates About MassHealth Managed Care Entities**

This Pharmacy Facts provides guidance about pharmacy billing and coverage for MassHealth members enrolled with managed care entities (MCEs).

**Changes to MassHealth Accountable Care Organizations, Effective January 1, 2025**

[All Provider Bulletin 396](https://www.mass.gov/lists/all-provider-bulletins) describes the service area, hospital, and primary care provider changes for Accountable Care Organizations (ACOs), effective January 1, 2025.

**Changes to MassHealth Senior Care Options (SCO) and One Care Plans, Effective January 1, 2025**

* Commonwealth Care Alliance will change its pharmacy benefits manager (PBM) from Navitus to CVS Caremark. Please see Appendix A for pharmacy claim processing information.

**Eligibility Verification and Billing Operations**

Members who change plans on January 1, 2025, may experience a change in their PBM. Pharmacies should still identify the member’s plan on the date of service and should bill the appropriate plan or PBM.

After January 1, 2025, pharmacies may continue using members’ plan-specific enrollment cards to verify eligibility. Each plan will issue its own unique card to its members. BIN/PCN/group number combinations are provided on these cards. A list of BIN/PCN/group number combinations for MassHealth managed care organizations (MCOs), ACOs, and the Primary Care Clinician (PCC) Plan is in Appendix A of this document.

If the member does not have the card available when requesting service at a pharmacy (or if the BIN/PCN/group is unavailable for any reason), then there are three ways to confirm MassHealth eligibility and plan enrollment:

1. See the list of BIN/PCN/group number combinations in Appendix A.
2. Consult MassHealth’s Eligibility Verification System at the [MassHealth Provider Online Service Center](https://newmmis-portal.ehs.state.ma.us/EHSProviderPortal/providerLanding/providerLanding.jsf).
3. Submit a claim to MassHealth’s Pharmacy Online Processing System (POPS). If the pharmacy is unsure of a member’s MassHealth plan, it may bill POPS. If the member is enrolled in the PCC Plan or a primary care accountable care organization (PCACO), the claim will be processed as usual. If the member is enrolled in an MCO or accountable care partnership plan (ACPP), POPS will send information back in the denial message to help the pharmacy identify the correct plan to bill. Once a member’s ACPP/MCO plan is identified, the pharmacy can gather additional required information (such as the member’s plan-specific ID number) using contact information in Appendix C of this document.

**Current MassHealth 340B Policy and Plan Payments**

For members enrolled in an MCO or an ACPP:

* Pharmacies are paid by the appropriate MCO or ACPP (or their PBM). Rates are based on contracts between the MCO or ACPP and the pharmacy. As of April 1, 2023, MCO and ACPP pharmacy benefits are unified with the MassHealth Drug List.
* MCOs and ACPPs are not permitted to pay pharmacies that are associated with federally qualified health centers (FQHCs) and rural health centers (RHCs) and are enrolled in the federal 340B Drug Pricing Program, as determined by the Executive Office for Health of Human Services, for drugs purchased through the 340B program. For the purposes of this Pharmacy Facts, pharmacies associated with FQHCs or RHCs include, but are not limited to, pharmacies with a contractual relationship with an FQHC or RHC and pharmacies at the same location as an FQHC or RHC. (See [Pharmacy Facts 217](https://www.mass.gov/lists/masshealth-pharmacy-facts-2016-current?_gl=1*pn1yf4*_ga*MTk4MjkxNjQ5Mi4xNzMxNjkxNTIy*_ga_MCLPEGW7WM*MTczMjg5NTU3OS40MTMuMS4xNzMyODk2MjUzLjAuMC4w#2023-).) Except as described below, MCOs and ACPPs are permitted to pay pharmacies associated with hospitals, hospital-licensed health centers, and other provider types that are not FQHCs or RHCs for drugs purchased through the 340B program.

For members enrolled in the PCC Plan or a PCACO:

* MassHealth pays all 340B-covered entities (including eligible FQHCs) for drugs purchased through the 340B program.
* Covered entities interested in using 340B stock for MassHealth Fee-for-Service, PCC Plan, or PCACO pharmacy claims must fill out the *Application for Participating in 340B Drug-Pricing Program for MassHealth Members* form, found at [Community Health Center Provider Forms](https://www.mass.gov/lists/masshealth-provider-forms-by-provider-type-a-d?_gl=1*18u7srk*_ga*Mjg4MzQ0NDIyLjE3MTM5OTMxNDg.*_ga_MCLPEGW7WM*MTczNDM3MjA4MC4xNDcuMC4xNzM0MzcyMDgwLjAuMC4w#community-health-centers-) and [Outpatient Hospital Provider Forms](https://www.mass.gov/lists/masshealth-provider-forms-by-provider-type-o-t#outpatient-hospitals-). Interested providers must fill out the application and register directly with the MassHealth Pharmacy Program.

Pharmacies are reminded about the following bulletins relating to payment of 340B pharmacy claims:

* [Managed Care Organization Bulletin 6](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-i-n#managed-care-organization-): MCOs are directed not to pay for Hepatitis C Virus drugs if the provider uses 340B stock.
* [Managed Care Entity Bulletin 112](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-i-n#managed-care-entity-): Managed care entities are directed not to pay for select GLP-1 medications if the provider uses 340B stock.
* [All Provider Bulletin 390](https://www.mass.gov/lists/all-provider-bulletins) and [Managed Care Entity Bulletin 114](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-i-n#managed-care-entity-): Eleven drugs are excluded from being purchased through the 340B Program for applicable MassHealth members.

**340B Pharmacy Claim Processing Information**

Pharmacies must use submission clarification code 20 to identify drugs purchased through the 340B program and dispensed to MCO, ACPP, SCO, and One Care members.

Billing requirements for pharmacies dispensing drugs purchased through the 340B program and dispensed to members enrolled in MassHealth Fee-for-Service, PCC Plan, or PCACO are described in the [POPS Billing Guide](https://www.mass.gov/lists/masshealth-pharmacy-publications-and-notices-for-pharmacy-providers) and are provided to pharmacies upon registration.

**Appendix A**

**ACPPs, PCACOs, MCOs, PCC Plan, PACE, SCO MassHealth-Only and Dual-Eligible, and One Care Dual-Eligible Members**

The following table outlines the most recent billing and contact information for ACPPs, PCACOs, MCOs, the PCC Plan, SCO MassHealth-only and dual-eligible, and One Care dual-eligible members. MassHealth may include updated versions of this list in a future edition of Pharmacy Facts.

**Effective Jan. 1, 2025**

| **Accountable Care Partnership Plans** | **PBM** | **BIN** | **PCN** | **Group** | **Pharmacy Help Desk** |
| --- | --- | --- | --- | --- | --- |
| Fallon Health–Atrius Health Care Collaborative | OptumRx | 610011 | IRX | FCHPMCD | (844) 368-8734 |
| Berkshire Fallon Health Collaborative | OptumRx | 610011 | IRX | FCHPMCD | (844) 368-8734 |
| Fallon 365 Care | OptumRx | 610011 | IRX | FCHPMCD | (844) 368-8734 |
| Be Healthy Partnership Plan (HNE) | OptumRx | 610593 | MHP | HNEMH | (800) 918-7545 |
| Mass General Brigham Health Plan with Mass General Brigham ACO | OptumRx | 610011 | ORX | RX1653 | (844) 368-8732 |
| Tufts Health Together with Cambridge Health Alliance (CHA) | OptumRx | 610011 | IRX | RXMCDMA | (866) 828-6668 |
| Tufts Health Together with UMass Memorial Health | OptumRx | 610011 | IRX | RXMCDMA | (866) 828-6668 |
| East Boston Neighborhood Health WellSense Alliance | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 |
| WellSense Beth Israel Lahey Health (BILH) Performance Network ACO | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 |
| WellSense Boston Children’s ACO | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 |
| WellSense Care Alliance | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 |
| WellSense Community Alliance | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 |
| WellSense Mercy Alliance | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 (ESI) |
| WellSense Signature Alliance | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 (ESI) |
| WellSense Southcoast Alliance | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069 (ESI) |

| **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) |
| Revere Health Choice | Conduent | 009555 | MASSPROD | MassHealth | (866) 246-8503 (Conduent/POPS) (800) 745**-**7318 (DUR) |

| **MCOs** | **PBM** | **BIN** | **PCN** | **Group** | **Pharmacy Help Desk** |
| --- | --- | --- | --- | --- | --- |
| WellSense Essential MCO | Express Scripts | 003858 | MA | MAHLTH | (877) 401-2069(ESI) |
| Tufts Health Together | OptumRx | 610011 | IRX | RXMCDMA | (866) 828-6668(Optum Rx) |

| **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—MassHealth Only** | **PBM** | **BIN** | **PCN** | **Group** | **Pharmacy Help Desk** |
| --- | --- | --- | --- | --- | --- |
| Commonwealth Care Alliance | CVS | 004336 | MCAIDADV | RX24BB | (866) 693-4620 |
| Senior Whole Health | CVS Caremark | 004336 | MCAIDADV | RX51BB | CVS: (800) 364-6331Molina SWH: (800) 665-3086 |
| Tufts Health Plan | Optum | 610011 | CTRXMEDD | RXMEDI | (844) 368-8734 |
| UnitedHealthcare | Optum Rx | 610494 | 9999 | ACUMA | (877) 889-6510 |
| Fallon Navicare | Optum Rx | 610011 | IRX | FCHPSCOND | (844) 368-8734 |
| WellSense Health Plan | ESI | 003858 | MA | MCDSCO2 | (877) 858-5958 |

| **S SCO Plan—Dual-Eligible** | **PBM** | **BIN** | **PCN** | **Group** | **Pharmacy Help Desk** |
| --- | --- | --- | --- | --- | --- |
| Commonwealth Care Alliance | CVS | 004336 | MEDDADV | RX24BE | (866) 693-4620 |
| Senior Whole Health | CVS Caremark | 004336 | MEDDADV | RX5038 | CVS: (800) 364-6331Molina SWH: (800) 665-3086 |
| Tufts Health Plan | Optum | 610011 | CTRXMEDD | RXMEDD | (844) 368-8734 |
| UnitedHealthcare | Optum Rx | 610097 | 9999 | MPDMACSP | (877) 889-6510 |
| Fallon Navicare | Optum Rx | 610011 | CTRXMEDD | FCHPSCODL | (844) 368-8734 |
| WellSense Health Plan | ESI | 610014 | MEDDPRIME | SCOPT001 | (877) 858-5958 |

| **One Care Plan** | **PBM** | **BIN** | **PCN** | **Group** | **Pharmacy Help Desk** |
| --- | --- | --- | --- | --- | --- |
| Commonwealth Care Alliance | CVS | 004336 | MEDDADV | RX24BC | (866) 693-4620 |
| UnitedHealthcare | Optum Rx | 610097 | 9999 | MPDMA2CSP | (877) 889-6510 |
| Tufts Health Plan | Optum | 610011 | CTRXMEDD | RXMEDD | (844) 368-8734 |

**Appendix B**

**Emergency Override Codes for Plans**

To ensure that MassHealth members do not experience gaps in care, pharmacists may initiate an emergency override if they encounter a rejected claim for a medication requiring prior authorization. Prescribers may contact the pharmacy and request an override. MassHealth will pay the pharmacy for at least a 72-hour, nonrefillable supply of the drug. The following table lists emergency override codes.

| **Accountable Care Partnership Plans** | **Emergency Override Code** |
| --- | --- |
| Fallon Health–Atrius Health Care Collaborative | 11112222333 |
| Berkshire Fallon Health Collaborative | 11112222333 |
| Fallon 365 Care | 11112222333 |
| Be Healthy Partnership Plan (HNE) | 11112222333 |
| Mass General Brigham Health Plan with Mass General Brigham ACO | 11112222333 |
| Tufts Health Together with Cambridge Health Alliance (CHA) | 11112222333 |
| Tufts Health Together with UMass Memorial Health | 11112222333 |
| East Boston Neighborhood Health WellSense Alliance | PA Type 1, Code 1111 |
| WellSense Beth Israel Lahey Health (BILH) Performance Network ACO | PA Type 1, Code 1111 |
| WellSense Boston Children’s ACO | PA Type 1, Code 1111 |
| WellSense Care Alliance | PA Type 1, Code 1111 |
| WellSense Community Alliance | PA Type 1, Code 1111 |
| WellSense Mercy Alliance | PA Type 1, Code 1111 |
| WellSense Signature Alliance | PA Type 1, Code 1111 |
| WellSense Southcoast Alliance | PA Type 1, Code 1111 |

| **PCACOs and PCC Plan** | **Emergency Override Code** |
| --- | --- |
| Community Care Cooperative (C3) | Value of “03” in field 418 (claims processed through POPS) |
| Revere Health Choice | Value of “03” in field 418 (claims processed through POPS) |
| Primary Care Clinician (PCC) Plan | Value of “03” in field 418 (claims processed through POPS) |

| **MCOs** | **Emergency Override Code** |
| --- | --- |
| WellSense Essential MCO | PA Type 1, Code 1111 |
| Tufts Health Together | 11112222333 |

**Appendix C**

**ACO Customer Service Numbers**

| **Accountable Care Partnership Plans** | **ACO Customer Service** |
| --- | --- |
| Fallon Health–Atrius Health Care Collaborative | (866) 473-0471(866) 275-3247 (for eligibility verification) |
| Berkshire Fallon Health Collaborative | (855) 203-4660(866) 275-3247 (for eligibility verification) |
| Fallon 365 Care | (855) 508-3390(866) 275-3247 (for eligibility verification) |
| Be Healthy Partnership Plan (HNE) | (800) 786-9999 |
| Mass General Brigham Health Plan with Mass General Brigham ACO | (800) 462-5449 |
| Tufts Health Together with Cambridge Health Alliance (CHA) | (888) 257-1985 |
| Tufts Health Together with UMass Memorial Health | (888) 257-1985 |
| East Boston Neighborhood Health WellSense Alliance | (888) 566-0010 |
| WellSense Beth Israel Lahey Health (BILH) Performance Network ACO | (888) 566-0010 |
| WellSense Boston Children’s ACO | (888) 566-0010 |
| WellSense Care Alliance | (888) 566-0010 |
| WellSense Community Alliance | (888) 566-0010 |
| WellSense Mercy Alliance | (888) 566-0010 |
| WellSense Signature Alliance | (888) 566-0010 |
| WellSense Southcoast Alliance | (888) 566-0010 |

| **PCACOs and PCC Plan** | **ACO Customer Service** |
| --- | --- |
| Community Care Cooperative (C3) | (866) 676-9226 |
| Revere Health Choice | (855) 860-4949 |
| Primary Care Clinician (PCC) Plan | (800) 841-2900 |

| **MCOs** | **ACO Customer Service** |
| --- | --- |
| WellSense Essential MCO | (888) 566-0010 |
| Tufts Health Together | (888) 257-1985 |