TO: All Providers Participating in MassHealth

FROM: Douglas S. Brown, Acting Commissioner

RE: Important Information about the MassHealth Pharmacy Program

Introduction

This bulletin provides important information about several issues related to the MassHealth Pharmacy Program.

MassHealth Drug List

More Frequent Updates

Beginning April 1, 2003, the Division may sometimes update the MassHealth Drug List ("the List") twice a month. Updates to the List may occur on the first business day of the month or 14 calendar days later, or both. The Web site will indicate the effective dates of the updates, some of which may be effective immediately upon publication.

This bulletin supersedes the information about the frequency of updates to the List that was issued in All Provider Bulletin 115, dated July 2002. Pharmacies and prescribers should check the List on the Division’s Web site for changes according to this new schedule.

Summary Page and E-mail Alerts

Although the Division does not send a bulletin to providers each time there are changes to the List, the Division does provide a summary page on the Web site when the List is updated, and sends e-mail alerts to those who sign up for them. The e-mail alert notifies all subscribers that the Division has posted a revised List to its Web site. Signing up for e-mail alerts is easy and free, and will ensure that you receive prompt notification when the List has been updated.

Web Site

To view, print, or download the most up-to-date version of the List, go to www.mass.gov/dma Click on “Providers,” then “Pharmacy Information.” The List also contains instructions for subscribing to e-mail alerts.

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Paper Copies
Providers who do not have access to the Internet may obtain a paper copy of the latest update of the List by sending a written request to:

MassHealth Publications
P.O. Box 9101
Somerville, MA 02145
Fax: 617-576-4487

Include your MassHealth provider number, address, and a contact name with your request. MassHealth Publications will send you the latest version of the List. You will need to submit another written request each time you want a paper copy.

Review of Psychiatric Drugs for the List

The Division will accelerate the implementation of its pharmacy policy decisions based on its review of drugs by therapeutic class. The Division plans to complete its initial review of several therapeutic classes of psychiatric drugs, as well as other therapeutic classes, by April 1, 2003. The Division will update the List to reflect new prior-authorization requirements and other requirements accordingly.

As the Division formulates its policies about psychiatric drugs, careful consideration is given to the fact that psychiatric disorders are complex. The clinical response to psychotropic drugs varies among patients; and stabilizing certain patients with complex psychiatric disorders is difficult.

The Division’s goal in this difficult financial environment is to work collaboratively with providers to maintain clinically appropriate care for MassHealth members in a financially responsible manner.

Antidepressants
On April 1, 2003, the Division plans to post updates to the List on the Division’s Web site based on its review of antidepressants and other therapeutic classes. Any new requirements for antidepressants will be effective for prescriptions written on or after May 1, 2003.

Antipsychotic and anticonvulsant drugs
On May 1, 2003, the Division will post updates to the List on the Division’s Web site based on its review of antipsychotic and anticonvulsant drugs. Any new requirements for these drugs will be effective for prescriptions written on or after June 2, 2003.

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Pharmacy Assessment

The Massachusetts legislature created a pharmacy assessment in the FY 2003 State Budget (Section 101 of Chapter 184 of the Acts of 2002). Pharmacies are required to pay an assessment on all non-Medicaid, non-Medicare prescriptions. Please be advised that, in accordance with 130 CMR 450.203, MassHealth members cannot be charged the assessment, even if MassHealth is not the primary payer of the prescription.

Requirement to Provide Services When Members Cannot Pay the Copayment

In accordance with 130 CMR 450.130(E), providers may not refuse services to any member who states that he or she is not financially able to pay the copayment at the time the service is provided. In addition, 130 CMR 406.411(D)(1) specifies that providers may not split prescriptions by filling them for a period or quantity less than that specified by the prescriber. Therefore, unless the pharmacy has insufficient stock, failure to fill the prescription for the duration the prescriber has specified, due to the member’s inability to pay the copayment, constitutes an improper refusal of service.

Questions

If you have any questions about the information in this bulletin, please call the Drug Utilization Review Program at 1-800-745-7318.