



# PHARMACY FACTS

## Current information for pharmacists about the MassHealth Pharmacy Program

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### Partial Fill of Schedule II Prescriptions

The Massachusetts Board of Registration in Pharmacy has issued [Circular Letter DCP 18-10-104](#) regarding Patient Requests for Partial Fill of Schedule II Prescriptions.

The letter includes the following points:

- If requested by the patient, a pharmacist may dispense a lesser quantity than indicated on any Schedule II prescription.
- The remaining portion of the partially filled Schedule II prescription may be filled within 30 days of the prescription issue date, in accordance with state and federal law.
- Only the pharmacy dispensing the original quantity may dispense the remaining portion.
- As a reminder, for Schedule II prescriptions issued by prescribers who are licensed in another state and do not hold a Massachusetts Controlled Substance Registration, provided they meet the requirements of M.G.L. c. 94C, § 18(d) or § 18(d½), the initial partial dispensing shall be filled within five days of the prescription issue date, and the remaining portion may be filled within 30 days of the prescription issue date.
- Upon an initial partial dispensing of a prescription, or a subsequent dispensing of a remaining portion, a notation must be made in the patient's record maintained by the pharmacy. This information must be accessible to the prescriber upon request.
- A patient requesting a partial fill for any Schedule II prescription covered under their insurance plan may not be charged an additional payment, including, but not limited

to, copayments, if filling the remaining portion of the prescription.

- Per M.G.L. c. 94C, § 22(c), prescribers must include a partial fill notation on all Schedule II opioid prescriptions. Prescribers may include this notation on Schedule II opioid prescriptions in writing or electronically.
  - DPH considers use of the following abbreviated phrase on all prescriptions for a Schedule II opioid to meet this requirement:

**“Partial fill upon patient request”**

- A pharmacist receiving a prescription for a Schedule II opioid without the required notation must contact the prescriber or prescriber's authorized agent for confirmation and document the notation on the prescription in writing or electronically.

### Copayments for Partial Fill of Schedule II Prescriptions

MassHealth-enrolled pharmacies must use the process described below to ensure compliance with the following provision of [Circular Letter DCP 18-10-104](#):

A patient requesting a partial fill for any Schedule II prescription covered under their insurance plan may not be charged an additional payment, including, but not limited to, co-payments, if filling the remaining portion of the prescription.

To ensure that a MassHealth member is not charged an additional copayment when electing a partial fill, the pharmacy must reverse the claim for the original partial fill and then resubmit a claim for the total quantity

which includes the original partial quantity and the subsequent remaining quantity filled. The pharmacy must enter the original date of service for the first partial fill as the date of service for the final claim for the total quantity.