Health Safety Net

Information and Updates

Winter 2026

Agenda

- Dental Updates
- Health Safety Net Updates
- Fiscal Year 2026 Updates
- HSN Pharmacy Formulary Updates
- General Information
- Questions

New Dental Third-Party Administrator

The Executive Office of Health and Human Services will transition third-party administrators for dental services starting in 2026. DentaQuest will act as the third-party administrator for MassHealth, the Children's Medical Security Plan (CMSP), and the Health Safety Net (HSN) dental services. MassHealth expects the transition to take place in February 2026, with the exact date to be announced.

This will not affect members eligibility, nor the rates set for dental services.

MassHealth Dental Program Updates | Mass.gov

HSN Dental Prior Authorization Waiver

- Please be advised of Administrative Bulletin 25-24 announced the temporary suspension of dental prior authorization requirements for Health Safety Net (HSN).
  - **PA requirements for HSN dental services are temporarily suspended effective for dates of service on or after October 1, 2025 through February 28, 2026**.
  - This temporary suspension of PA requirements **applies to acute care hospitals and community health centers that are HSN dental service providers.**
- Prior authorization will be required again for HSN dental services requiring PA beginning March 1, 2026.

HSN Updates: Resweeps

Resweep of claims with Current Procedural Terminology (CPT) codes in the below table

- Health Safety Net identified claims billed with procedure codes that needed to be reprocessed. Claims with the following codes were reprocessed for CHCs and associated payments should be seen in January HSN payments.

CPT Code	CPT Code	CPT Code
69210	87426	90677
90686	90791	90832
90834	90847	90882
90887	93000	99203
99212	99213	99214
99215	99401	99403
No code	G0470	No code

HSN Updates: CARC Codes

Claim Adjustment Reason Code (CARC) Updates

- Health Safety Net made updates to no longer allow claims with certain Claim Adjustment Reason Codes (CARC) to be reimbursable. CARC codes corresponding to administrative reasons for denial from the primary payer will no longer be reimbursable.
- This update is in accordance with 101 CMR 613.00:
- "the Health Safety Net does not pay for, and Providers may not submit claims for, services for which the primary insurer has denied payment because of a technical billing error, because the Patient obtained out of network services, because the Patient failed to obtain required prior authorization for services, or because of other administrative reasons"
    - The Health Safety Net Office continually monitors these codes to ensure compliance with HSN regulations.

Fiscal Year 2026 Hospital Rates

- Health Safety Net has released the hospital-specific outpatient rates for Fiscal Year 2026 which started October 1, 2025, and continues until September 30, 2026. Please note that hospital outpatient rate calculations *do* still contain the 25% DSH/non-teaching hospital add-on, if applicable.
- Rates have been emailed to lead financial contacts at each hospital facility to be reviewed. If a hospital has any requests or corrections associated with FY26 rates, requests and documentation was to be submitted to HSN.Data@mass.gov with the subject line “FY26 Rates” by January 21st, 2026.

PPS Rates Updates

PPS Rates for CHCs

- Health Safety Net has updated Prospective Payment System (PPS) rates for Community Health Centers (CHCs) for Calendar Year 2026. The rates are effective for dates of service beginning January 1, 2026. Rates are calculated based on the Federally Qualified Health Center base rate and include enhancements based on location of the facility as well as new patient as opposed to established patient rates. The table below reflects the 2026 rates.

Location	Established Patient	New Patient
Metro Boston	$231.61	$310.73
Rest of Massachusetts	$214.78	$288.15

Changes to Health Safety Net (HSN) Pharmacy Reimbursable Services

Health Safety Net (HSN): Pharmacy Changes

Historically: Reimbursable HSN pharmacy services largely matched the MassHealth formulary as listed on the MassHealth Drug List (MHDL). MassHealth covers all drugs that participate in the Medicaid Drug Rebate Program.

Effective January 12, 2026, reimbursable HSN pharmacy services no longer match MassHealth.

- Reimbursable medications are largely generic, allowing the Commonwealth to maintain access to cost-effective care, while ensuring the long-term sustainability of the HSN program.

Rationale: Significant HSN shortfall. Significant uncertainty ahead given anticipated federal changes to health coverage.

- Reducing pharmacy expenditures while maintaining access to cost-effective care is critical to maintaining the sustainability of the HSN program.

Health Safety Net (HSN): Recent Pharmacy Changes

Generally reimbursable <u>without PA</u>:	Generally reimbursable <u>with PA</u>:

• Generic medications (including unbranded biosimilars)
• Select brand name medications including:
  • Most drugs on the MassHealth Brand Preferred Over Generic List (BOGL)*
  • Brand antiretrovirals with no generic equivalent
• Select non-drug products *(i.e., alcohol swabs, lancets, pens needles, syringes, urine glucose test strips, ketone test strips)*
• Preferred diabetes test strips within quantity limits
• Vaccines
**Exceptions apply, subject to change*
	• Preferred non-drug products (e.g., continuous glucose monitors, continuous subcutaneous insulin infusion devices)
	• Brand medications not listed on the MassHealth BOGL
	• Other medications when clinically necessary

Over 80% of historical HSN claims would have been reimbursable and paid without PA under the new formulary.

HSN Pharmacy Coverage: Branded Products

Branded medications not on MassHealth BOGL now require PA:

Branded medications will require PA looking for the following:

1. One of the following:
   a. Manufacturer does not offer a patient assistance program (PAP) or patient is ineligible for PAP *(must document reason for ineligibility)*
   b. Documentation of submission to PAP but decision is pending
   c. Documentation that coverage through PAP has been denied
2. Appropriate diagnosis
3. One of the following:
   a. Trial with **all** clinically appropriate reimbursable alternatives available without PA
   b. Medical necessity for the branded agent instead of reimbursable alternatives

Provisional approval *(while awaiting PAP decision):* one month, up to three times

Initial Approval: 6 months

Recertification: Require trials with all clinically appropriate covered alternatives or medical necessity for continued use of branded agent.

Helpful Resources

New HSN Formulary Page on the MassHealth Drug List

Documents on the MassHealth Drug List **HSN Formulary Changes** page include:

- HSN specific PA form
- One page summary document outlining key changes
- List of medications reimbursable without PA for highly utilized therapeutic classes
- Patient assistance program (PAP) tool

Existing Communications for Reference

- Pharmacy Facts #258
- Pharmacy Facts #265
- Pharmacy Facts #267
- Prescriber e-Letter Volume 15, Issue 15
- Prescriber e-Letter Volume 15, Issue 23

MassHealth Pharmacy Facts
The Prescriber E-Letter

General Information

- Health Safety Net eligible service regulations | Mass.gov
- Health Safety Net eligible payment and funding regulations | Mass.gov
- Health Safety Net Reimbursable Services
- Health Safety Net INET | Mass.gov
- Information about HSN Provider Guides and Billing Updates | Mass.gov

Thank you