



Mass General Brigham Health Plan partners with Prime Therapeutics (Prime) for the Prior Authorization of Medical Specialty Drugs. Spravato, administered by behavioral health providers, requires Prior Authorization from Prime and the drug may be billed to Mass General Brigham Health Plan. This process applies to all Mass General Brigham plans including MassHealth, Commercial, Medicare, and the Dual-eligible Special Needs Plans (D-SNP), One Care and Senior Care Options (SCO).

What actions should providers take?

Providers must contact Prime to receive prior authorizations for members prescribed in scope prescription drugs on or after **January 1, 2026**. The authorization must be obtained prior to performing services for the member.

What information is needed for prior authorization requests?

The following information must be included in prior authorization request submissions:

Provider	Member	Medication	Clinical
Ordering Provider Name Tax ID Practice Address Office Telephone & Fax #	Name DOB ID Number Height & Weight Diagnosis Code	Place of Service Code Requested Drug Name or HCPCS Code Dosage & Frequency Anticipated Start Date	Notes Pathology Reports Relevant Test Results

The full review process is available on [Mass General Brigham Health Plan's Prime website](#).

What drugs are in scope?

The full list of drugs requiring prior authorization is available on [Prime's provider portal Gateway](#). Select "Mass General Brigham Health Plan" from the list of Clinical Guidelines on the left side of the screen.

Please note that coverage for in-scope drugs may vary by plan. The drug list is subject to change and providers can access the list on [Provider Express](#).

Submitting prior authorization requests for Spravato

Optum Behavioral Health enforces a separate [Reimbursement Policy](#) for the professional services associated with the administration of Spravato (Esketamine). Below is a guide to

the Spravato code selection for provider-administered medication claims submitted to Mass General Brigham Health Plan and professional services submitted to Optum Behavioral Health.

Service/Drug	Service Code	LOB	PA Required	Claim Submission
Spravato	J0013 ⁴	Mass Health, Commercial	Yes-Prime Therapeutics	Mass General Brigham Health Plan
Spravato	G2082 ¹ or G2083 ²	Medicare, Senior Care or One Care (DSNP)	Yes-Prime Therapeutics	Mass General Brigham Health Plan
Professional services for evaluation, management, monitoring	99415 ⁷ , 99416 ⁸ in conjunction with the appropriate E&M 99417 ⁹ in conjunction with 99205 ⁵ , 99215 ⁶	Mass Health, Commercial	No	Optum Behavioral Health
Professional services for evaluation, management, monitoring	G2212 ³	Medicare, Senior Care or One Care (DSNP)		Optum Behavioral Health

See attached for reference table for the codes listed in the table above.

Additional Resource

A list of frequently asked questions (FAQs) and training materials are available on [Mass General Brigham Health Plan's Prime page](#).

Code Description Table:

Code	Description
^{1.} G2082	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of up to 56 mg of esketamine nasal self-administration, includes 2 hours post administration observation
^{2.} G2083	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of greater than 56 mg esketamine nasal self-administration, includes 2 hours post administration observation
^{3.} G2212	Prolonged office or other outpatient evaluation and management service(s) beyond the maximum required time of the primary procedure which has been selected using total time on the date of the primary service; each additional 15 minutes by the physician or qualified health care professional, with or without direct patient contact (list separately in addition to CPT codes 99205, 99215, 99483 for office or other outpatient evaluation and management services.) (Do not report G2212 on the same date of service as codes 99358, 99359, 99415, 99416). (Do not report G2212 for any time unit less than 15 minutes)
^{4.} J0013	Esketamine, nasal spray, 1 mg
^{5.} 99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded
^{6.} 99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.
^{7.} 99415	Prolonged clinical staff service (the service beyond the highest time in the range of total time of the service) during an evaluation and management service in the office or outpatient setting, direct patient contact with physician supervision; first hour (List separately in addition to code for outpatient Evaluation and Management service)
^{8.} 99416	Prolonged clinical staff service (the service beyond the highest time in the range of total time of the service) during an evaluation and management service in the office or outpatient setting, direct patient contact with physician supervision; each additional 30 minutes (List separately in addition to code for prolonged service)
^{9.} 99417	Prolonged outpatient evaluation and management service(s) time with or without direct patient contact beyond the required time of the primary service when the primary service level has been selected using total time, each 15 minutes of total time (List separately in addition to the code of the outpatient Evaluation and Management service)