



Long-Acting Injectable Antipsychotic Medications Administered in Inpatient Psychiatry Units

Effective May 15, 2024, the Long-Acting Injectable Antipsychotic Medication Administered in Inpatient Psychiatry Units section of the MassHealth Drug List (MHDL) applies to participating in-state MassHealth acute hospital (acute) and freestanding inpatient psychiatric hospital (psychiatric) providers of inpatient psychiatric services. This list identifies the current list of long-acting injectable antipsychotic medications that, when administered in an inpatient psychiatry unit, are reimbursable outside of the applicable per diem rates for acute and psychiatric hospitals. Drug specific prior authorization criteria, if applicable, must be met as listed on the MHDL. Other requirements, such as preferred drug designation or quantity limits, may apply. This list, prior authorization status, and other requirements may be updated from time to time.

The [Antipsychotic Prior Authorization Form](#) includes a section to denote that the request is for a member currently admitted to an inpatient psychiatry unit.

[Hospitals should also review any special billing instructions for Long-Acting Injectable Antipsychotic Medications Administered in Inpatient Psychiatry Units posted on the “Billing Tips” section of the MassHealth website.](#)

The Long-Acting Injectable Antipsychotics are listed sequentially by J-Code as follows:

- J0401 – Aripiprazole (Abilify Maintena), extended release 1 mg
- J0402 – Aripiprazole (Abilify Asimtufii), 1 mg
- J1631 – Haloperidol decanoate, per 50 mg
- J1943 – Aripiprazole lauroxil (Aristada Initio), 1 mg
- J1944 – Aripiprazole lauroxil (Aristada), 1 mg
- J2358 – Olanzapine (Zyprexa Relprevv), long acting, 1 mg
- J2426 – Paliperidone palmitate extended release (Invega Sustenna), 1 mg
- J2427 – Paliperidone palmitate extended release (Invega Hafyera, or Invega Trinza), 1 mg
- J2680 – Fluphenazine decanoate, up to 25 mg
- J2794 – Risperidone (Risperdal Consta), 0.5 mg
- J2798 – Risperidone (Perseris), 0.5 mg
- J2799 – Risperidone (Uzedy), 1 mg
- J3490 – Risperidone (Rykindo)*

*When using unspecified J-Code (J3490), must include drug-specific NDC.

Long-Acting Injectable Antipsychotics covered outside the per diem for Acute and Psychiatric Hospitals shall be billed using the appropriate J-Code (according to the Physician Subchapter 6). Definitions, payment rules, and rates for these Long-Acting Injectable Antipsychotics are contained in 101 CMR 317.00: *Rates for medicine services*.