



MASSACHUSETTS

Blue Cross Blue Shield of Massachusetts is an Independent  
Licensee of the Blue Cross and Blue Shield Association

Pharmacy Medical Policy

## Massachusetts Standard Form for Medication Prior Authorization Requests (eForm)

### Browser information:

- Use **Internet Explorer 7, 8, 9, or Firefox**. You may not be able to see or submit the eForm if you use another browser.
- If you use **Internet Explorer 8.0**, select “No” when you see a pop-up box that says, “Stop running this script” so you can continue with your submission.

**If NOT logged into Provider Central use this link:**

[Massachusetts Standard Form for Medication Prior Authorization Requests eForm](#)

(Can also be found on Provider Central at **Forms > Authorization – Pharmacy**)

**If logged into Provider Central use this link:**

[Provider Central Link to Pharmacy Forms](#)

(Also found on Provider Central by clicking **Forms** on the top of the page, then choose **Authorization – Pharmacy**)

### Tips for using this eForm:

- Fill out completely and submit it. You won't be able to start the form and save it for later.
- You can attach documents to support your request. Please have them ready.
- You'll be able to print a copy for your patient's medical record at the end.