Massachusetts Health Care Training Forum (MTF)
Provider Training Series
Special Session: COVID-19

Executive Office of Health & Human Services

April 2020
Agenda

1. Welcome and Agenda Review

2. COVID-19
   - Bulletin Overview – MassHealth’s COVID-19 Response
   - Hospital-Determined Presumptive Eligibility (HPE)
   - Prior Authorizations (PA)
   - Primary Care Clinician (PCC) Plan and Primary Care ACO Referrals
   - Provider Enrollment: COVID 19 Updates
   - Telehealth Services
   - Laboratory Diagnostic Services
   - Home Visits
   - Quarantine in a Hospital
   - Pharmacy
   - Office of Long Term Services and Supports (OLTSS)
   - Telehealth Network Provider – New Provider Type
   - Provider Resources
   - Questions
In response to COVID-19, MassHealth has taken steps to create flexibilities for providers, expand benefits including coverage of services delivered via telehealth, and expand eligibility for residents of the Commonwealth. This guidance is described in recently issued bulletins below:

- All Provider Bulletin 289
- All Provider Bulletin 290
- All Provider Bulletin 291
- MCE Bulletin 21
- MCE Bulletin 22

As this situation evolves, EOHHS may issue additional guidance for providers. Providers should refer to the dedicated Provider COVID-19 webpage for the latest updates.
The information [All Provider Bulletin 289](#) and [All Provider Bulletin 291](#) applies to members enrolled in:

- MassHealth fee-for-service
- The Primary Care Clinician (PCC) Plan, or a
- Primary Care ACO

Information about members with coverage through MassHealth Managed Care Entities is included in [MCE Bulletin 21](#) & [MCE Bulletin 22](#)
Other Services and Programs

MassHealth has also provided guidance on the forms, services, and programs below in All Provider Bulletin 291:

- Flexibility to Allow Opioid Treatment Programs and Acute Treatment Service Programs to Utilize Pharmacists to Dispense Certain Medication-Assisted Treatment
- Emergency Services Program (ESP) and Mobile Crisis Intervention (MCI) Services
- Admission to Chronic Disease and Rehabilitation Hospitals
- Signatures for Transportation Medical Necessity Forms
- Billing Code for Transportation Providers Obtaining Specimens for COVID-19 Diagnostic Testing Without Member Transportation

Providers should refer to All Provider Bulletin 291 for detailed information.
Hospital-Determined Presumptive Eligibility (HPE)
Hospital-Determined Presumptive Eligibility (HPE)

MassHealth is expanding its Hospital-Determined Presumptive Eligibility (HPE) process to allow qualified MassHealth contracted hospitals through HPE-trained Certified Application Counselors (CACs) to render HPE determinations for individuals previously ineligible for HPE.

Providers should refer to All Provider Bulletin 290 and Eligibility Operations Memo 20-07 for additional details.
Prior Authorizations (PA)
For Non-LTSS providers, there is no change to Prior Authorization (PA) requirements.

- Providers are strongly encouraged to submit prior authorization requests on the Provider Online Service Center (POSC) and include all applicable attachments.

- Do not mail or fax paper request forms.

- Questions regarding prior authorization requirements for members with coverage through MassHealth Managed Care Entities should be directed to the respective Managed Care Entities.

Providers can refer to the POSC job aids page for the Prior Authorizations job aids.

Guidance for Long Term Services and Supports (LTSS) providers can be found in the LTSS section of the presentation.
Primary Care Clinician (PCC) Plan and Primary Care ACO Referrals
Primary Care Clinician (PCC) Plan and Primary Care ACO Referrals

Notwithstanding the requirements of 130 CMR 450.118(J) and 130 CMR 450.119(I), members enrolled in the Primary Care Clinician (PCC) Plan or a Primary Care ACO do not need a referral to receive any MassHealth covered service that would otherwise require a referral. This policy is covered in All Provider Bulletin 289 and All Provider Bulletin 291.

MassHealth recognizes that providers may not be able to follow the usual referral process for member services during this time. As a result, all current referral edits will be set to pay for claims with a date of service on or after March 25, 2020. The edits will still appear on your remittance advice as informational only. The affected edits are listed below:

3120--REFERRAL REQUIRED
3121--INVALID REFERRAL NUMBER
3122--NO MORE UNITS AVAILABLE ON REFERRAL
3124--RENDERING PROVIDER DOES NOT MATCH REFERRAL AUTHORIZATION
3125--RECEPIENT IN CLAIM DOES NOT MATCH REFERRAL
3126--SERVICE DATE IS OUTSIDE REFERRAL AUTHORIZATION

Please note that the services receiving the above edits will require a referral once the state of emergency is lifted or until further notice from MassHealth.

Any claims with a date of service prior to March 25, 2020 will continue to require a referral and will deny if they hit the above edits.
Provider Enrollment
COVID-19 Updates
Provider Enrollment and Credentialing Updates

MassHealth has implemented a temporary, expedited enrollment process to allow non-Medicaid enrolled health care professionals rendering services to Medicaid beneficiaries due to the COVID-19 outbreak to quickly enroll as a MassHealth provider. These modifications took effect on March 26, 2020. MassHealth will allow a retroactive effective date for provisional enrollments no earlier than March 01, 2020.

New Provider Enrollment

The following changes to screening and enrollment requirements during this public health emergency are:

- Minimal data collected for enrollment process
- EFTs and W9s can be scanned and submitted as electronic copies to expedite full participation and original signature copies should follow
- Provider Application fees suspended (will be required when emergency ends)
- Provider Fingerprinting Requirement and Criminal background checks suspended (will be required when emergency ends)
- Provider Site Visits suspended (will be required when emergency ends)
- To assure expedited processing, please indicate either on the application or on a cover letter the enrollment is critical to COVID-19 support

Existing Providers

- Provider Revalidation suspended

For COVID-19 related provider revalidation, application fee, site visit and fingerprinting 1135 waived requirements, please visit: https://www.mass.gov/info-details/covid-19-related-provider-application-and-credentialing-waived-requirements
Provider Enrollment and Credentialing Updates

Provider Online Service Center (POSC)
We strongly encourage providers to transmit enrollment information via The Provider Online Service Center (POSC) when possible. Providers can also complete and submit the appropriate application and supporting materials via the POSC

- **Document Management**
Providers may temporarily submit all enrollment applications and supporting documentation via email directly to the Document Management email box at: DocMgmtDCF@maximus.com

- **Electronic Submission**
Effective March 30, 2020 MassHealth will temporarily allow scanned copies of Massachusetts W9 and EFTs with a signature to be sent as part of the enrollment package. Please email copies to the Document Management email box at: DocMgmtDCF@maximus.com

Original signature copies are still required and must be mailed to:
  MassHealth Customer Service Center
  Attn: Provider Enrollment and Credentialing
  PO Box 121205
  Boston, MA 02112-1205

For COVID-19 related provider revalidation, application fee, site visit and fingerprinting 1135 waived requirements, please visit: https://www.mass.gov/info-details/covid-19-related-provider-application-and-credentialing-waived-requirements
Provider Enrollment and Credentialing Updates

- The Board of Registration in Medicine (BORIM) is issuing emergency temporary licenses for physicians that are applying for their full medical license. MassHealth will allow physicians to enroll as fee-for-service providers using the temporary emergency license as long as the physician has an application for a permanent license in process. These licenses will be valid until the state of emergency is terminated.

- The Massachusetts Department of Public Health (DPH) has implemented a deferral of expiration dates on all licenses that are in good standing, and all expiration dates have been removed from the DPH Health Professionals License Verification Site.

For COVID-19 related provider revalidation, application fee, site visit and fingerprinting 1135 waived requirements, please visit: https://www.mass.gov/info-details/covid-19-related-provider-application-and-credentialing-waived-requirements
Telehealth
Telehealth

To mitigate the spread of COVID-19, MassHealth is committed to enabling members to remain in their homes to reduce exposure and transmission, to the extent possible, and to preserve health system capacity for the duration of this public health emergency. Refer to All Provider Bulletin 289 and All Provider Bulletin 291

• MassHealth will permit qualified providers to deliver clinically appropriate, medically necessary MassHealth-covered services to MassHealth members via telehealth (including telephone and/or live video) in accordance with the standards set forth in Appendix A of All Provider Bulletin 291

• MassHealth is not imposing specific requirements for technologies used to deliver services via telehealth and will allow reimbursement for MassHealth covered services delivered through telehealth so long as such services are medically necessary and clinically appropriate and comport with the guidelines set forth in All Provider Bulletin 289

• Providers are encouraged to use appropriate technologies to communicate with individuals and should, to the extent feasible, ensure the same rights to confidentiality and security as provided in face-to-face services. Providers must inform members of any relevant privacy considerations

• A provider may prescribe medications via telehealth as otherwise described in All Provider Bulletin 289
Telehealth

• Rates of payment for services delivered via telehealth will be the same as rates of payment for services delivered via traditional (e.g., in-person) methods set forth in the applicable regulations.

• MassHealth will also reimburse physicians (including midlevel practitioners under the direction of a physician in accordance with 130 CMR 433), acute outpatient hospitals (AOHs), community health centers (CHCs), outpatient behavioral health providers, and early intervention providers for clinically appropriate, medically necessary telephone evaluations.

• Notwithstanding the statement to the contrary in Appendix A to All Provider Bulletin 291, an eligible distant site provider rendering covered services via telehealth in accordance with All Provider Bulletin 289 may bill MassHealth a facility fee if such a fee is permitted under such provider’s governing regulations or contracts.

• Existing performance specifications for Children’s Behavioral Health Initiative (CBHI) services allow for the telephonic delivery of services, other than for initial assessments. Notwithstanding any requirements that initial assessments be conducted in person, where appropriate, services for new clients may be initiated via telephonic means. CBHI providers should use the regular CBHI codes when billing for CBHI services delivered telephonically.

• MassHealth will be the payer of last resort.
Telehealth

Does the guidance expanding telehealth apply to all providers?

Yes, ALL MassHealth providers may deliver any MassHealth covered service via telehealth if they determine it is medically necessary and clinically appropriate to deliver this service via telehealth (including live video or telephone). Among other providers, this includes dentistry, nutrition appointments with registered dietitians, physical therapy, specialist appointments, and behavioral health care (including Opioid Treatment Programs). This guidance also applies to LTSS providers that offer in-person and home-based services when appropriate.

- Providers must include Place of Service (POS) Code 02 when submitting a claim for services delivered via telehealth. **Do not add any other insurer’s designated telehealth modifiers**

- **Community Health Center (CHC) provider example:**
  For services rendered remotely by telephone or video that would typically have been conducted in-person and billed as a T1015 code, CHCs may continue to bill the T1015 with Place of Service 02 and **no telehealth modifier**. Payment rate would be the same

Providers are reminded to refer to All Provider Bulletins 289 and 291 including Appendix A: Guidelines for Use of Telehealth to Deliver Covered Services to ensure all guidance is being followed.
## Telehealth - Telephone Evaluation Codes

Physicians (*including mid-level practitioners under the direction of a physician in accordance with 130 CMR 433*) acute outpatient hospitals, community health centers, outpatient behavioral health providers, and early intervention providers for clinically appropriate, medically necessary telephone evaluations for the codes listed in the table below.

<table>
<thead>
<tr>
<th>Eligible Billing Provider Types</th>
<th>Billable Codes</th>
<th>Date of Service/Billing effective date</th>
<th>Place of service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>CPT codes for physicians:</td>
<td>Providers will be able to bill MassHealth for these services delivered via telehealth beginning April 1, 2020, for dates of service beginning March 12, 2020</td>
<td></td>
</tr>
<tr>
<td><em>Physician Assistant</em></td>
<td>99441</td>
<td></td>
<td>Providers must include Place of Service Code 02 when submitting a claim for services delivered via telehealth</td>
</tr>
<tr>
<td><em>Certified Registered Nurse Anesthetist (CRNA)</em></td>
<td>99442</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Psychiatric Clinical Nurse Specialist (PCNS)</em></td>
<td>99443</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Clinical Nurse Specialist (CNS)</em></td>
<td>CPT codes for qualified non-physicians:</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Nurse Practitioner (NP)</em></td>
<td>98966</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Nurse Midwife (NMW)</em></td>
<td>98967</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute Outpatient Hospital</td>
<td>98968</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Health Center</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient Behavioral Health Provider</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Early Intervention Provider</td>
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</tbody>
</table>

MassHealth will issue transmittal letters that formally add these codes to the relevant provider manuals. Payment rates for these codes can be found at 101 CMR 317: Medicine.

Early Intervention Providers can refer to [Transmittal Letter EIP-21](#)
COVID-19 Diagnostic Laboratory Services
COVID-19 Diagnostic Laboratory Services

- MassHealth covers medically necessary clinical diagnostic laboratory tests when a qualified clinician orders them. Testing of persons under investigation (PUI) for COVID-19 is available through the MA State Public Health Laboratory (MA SPHL) when a patient meets clinical and epidemiologic criteria.

- MA SPHL does not charge providers for its provision of these laboratory service. Additionally, MassHealth does not pay providers a specimen acquisition fee (including testing supplies) or a specimen transportation fee for lab services to be rendered by MA SPHL.

- MassHealth-enrolled clinical laboratories and health care facilities may bill MassHealth for medically necessary, clinically appropriate COVID-19 lab tests.

- For questions about testing, specimen transport, or control measures, contact the Massachusetts Department of Public Health (DPH) (24/7) at (617) 983-6800. Further information on testing can be found at DPH’s website.
Diagnostic Laboratory Services

MassHealth-enrolled clinical laboratories and health care facilities should bill MassHealth for medically necessary, clinically appropriate COVID-19 lab tests.

<table>
<thead>
<tr>
<th>Eligible Billing Provider Types</th>
<th>Billable Codes</th>
<th>Date of Service/Billing effective date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>• 87635 - infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique</td>
<td>Providers will be able to bill MassHealth for these services delivered via telehealth beginning April 1, 2020, for dates of service beginning March 12, 2020</td>
</tr>
<tr>
<td>Community Health Center</td>
<td>• U0002 - 2019-nCoV Coronavirus, SARA-CoV-2/2019-nCoV (COVID-19) using any technique, multiple types or subtypes</td>
<td></td>
</tr>
<tr>
<td>Certified Independent Laboratories</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute Outpatient Hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital Licensed Health Center</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please see Transmittal Letter LAB-51 where MassHealth formally added these codes to the relevant provider manuals.
Home Visits
Home Visits

• MassHealth currently covers specific home visit codes under the physician, acute outpatient hospital and community health centers regulations

• MassHealth has added additional home visit codes that will be reimbursable when clinically appropriate and medically necessary

• Providers should refer to All Provider Bulletin 289 for details
**Home Visits**

In addition to already established home visit codes, MassHealth will reimburse physicians, acute outpatient hospitals, and Community Health Centers for clinically appropriate, medically necessary home visits using the following codes for the duration of the COVID-19 crisis.

<table>
<thead>
<tr>
<th>Eligible Billing Provider Types</th>
<th>Billable Codes</th>
<th>Date of Service/Billing effective date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>99500, 99501, 99502, 99503, 99504, 99505, 99506, 99507, 99509, 99511, and 99512</td>
<td>Providers will be able to bill MassHealth for these services delivered via telehealth beginning April 1, 2020, for dates of service beginning March 12, 2020</td>
</tr>
<tr>
<td>Acute Outpatient Hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Health Center</td>
<td>99500, 99501, 99502, 99503, 99504, 99505, 99506, 99507, 99509, 99511, 99512, and 99600</td>
<td>Providers will be able to bill MassHealth for these services delivered via telehealth beginning April 1, 2020, for dates of service beginning March 12, 2020</td>
</tr>
</tbody>
</table>

MassHealth will issue transmittal letters that formally add this code to the relevant provider manuals. MassHealth intends to pay a rate equal to the Medicare rate for this code.

Providers should refer to [All Provider Bulletin 289](#) for details.
Quarantine in a Hospital

**Acute Inpatient Hospitals (AIHs)** may bill MassHealth for members no longer requiring an inpatient level of care but who must be quarantined in the hospital or otherwise cannot be safely discharged due to COVID-19 by either
- Keeping the member as an inpatient, switching the member to administrative day status, and billing accordingly, or
- Discharging the member from inpatient care, commencing observation services, and billing accordingly.

**Psychiatric Inpatient Hospitals** may bill MassHealth for members no longer requiring an inpatient level of care but who must be quarantined in the hospital or otherwise cannot be safely discharged due to COVID-19 by keeping the member as an inpatient, switching the member to administrative day status, and billing MassHealth accordingly.

**Chronic Disease and Rehabilitation Inpatient Hospitals** may bill MassHealth for members no longer requiring an inpatient level of care but who must be quarantined in the hospital or otherwise cannot be safely discharged due to COVID-19 by keeping the member as an inpatient, switching the member to administrative day status, and billing MassHealth accordingly

Providers should refer to [All Provider Bulletin 289](#) for details.
Pharmacy
90-day Supplies and Early Refills of Prescribed Drugs

MassHealth is allowing additional exceptions to the 30-day supply limitation described at 130 CMR 406.411(D), effective for dates of service beginning March 14, 2020

• Pharmacies may dispense up to a 90-day supply of a prescription drug if requested by a MassHealth member or that member's prescriber as long as sufficient quantity remains on the prescription to support the quantity being filled

• Pharmacies may dispense up to a 90-day supply of behavioral health medications and schedule IV benzodiazepines and hypnotics in quantities up to a 90-day supply, if requested by a MassHealth member or that member’s prescriber

Pharmacies should refer to All Provider Bulletins 289, 291, and Pharmacy Facts 141 through 143 for detailed information
Pharmacy 90-day Supplies and Early Refills of Prescribed Drugs (cont.)

A pharmacy believes that dispensing up to a 90-day supply of any drug not generally subject to this policy would be in the best interest of a MassHealth member, it may call the MassHealth Drug Utilization Review (DUR) program at (800) 745-7318 to request an override.

- For dates of service beginning March 14, 2020 MassHealth will also allow early refills of existing prescriptions for drugs as long as at least one refill remains on the prescription.

- If a pharmacy receives a denial for an early refill, the pharmacy should place a "13" in the Submission Clarification field (NCPDP field 420-DK) to override the denial.

- Pharmacies are reminded that they may not refuse services to any members who are unable to pay the copayment at the time service is provided (130 CMR 450.130(G)(2)).

Pharmacies should refer to All Provider Bulletins 289, 291, and Pharmacy Facts 141 through 143 for detailed information.
Pharmacy- Prior Authorizations

- MassHealth is working to identify and extend prior authorizations (PA) for drugs that are due to expire in the coming weeks. MassHealth anticipates that these existing prior authorizations will be extended for another 60 days from the date of expiration.

- MassHealth is also removing PA requirements for certain drugs, allowing for emergency overrides if a claim is rejected for lack of PA, allowing for clozapine refills if current lab results cannot be obtained, and removing the requirement to use brand name ProAir when dispensing an albuterol inhaler.

Pharmacies should refer to All Provider Bulletins 289, 291, and Pharmacy Facts 141 through 143 for detailed information.
Office of Long Term Services and Supports (OLTSS)
Key Guidance

MassHealth LTSS Provider Information: Updates Related to the Coronavirus Disease 2019 (COVID-19), which outlines flexibilities that MassHealth has implemented for:

- Adult Day Health
- Adult Foster Care
- Chronic Disease and Rehabilitation Hospitals
- Community Case Management
- Day Habilitation
- Durable Medical Equipment
- Group Adult Foster Care
- HCBS Waiver Providers
- Home Health & Continuous Skilled Nursing
- Hospice
- Independent Nurses
- Nursing Facilities
- PCA Program
- Therapy Providers (Physical, Occupational, Speech)

Important Note: This document is updated frequently as various measures are taken to support MassHealth members and guide the providers who serve them.

Key Guidance (continued)

MassHealth LTSS Provider Information Guidance

• For in-home caregivers
  
o Guidance for **agency based in-home** caregivers & workers (e.g. Home Health Agencies, Personal Care Management Agencies, Home Care Agencies, Adult Foster Care, etc.): [Agency In-Home Care COVID-19 Guidance](#)
  
o Guidance for **non-agency based in-home** caregivers (e.g. PCAs, Independent Nurses, etc.): [Non Agency In Home Care COVID-19 Guidance](#)

• For community day programs
  
o Guidance for community day program settings (e.g. Adult Day Health, Day Habilitation, Clubhouses, Councils on Aging, etc.): [Community Day Program COVID-19 Guidance](#)
Key Guidance (continued)

Managed Care Entities & Integrated Care Plans

• Managed Care Entity Bulletin 21: Coverage and Reimbursement for Services Related to Coronavirus Disease 2019 (COVID-19)

• Managed Care Entity Bulletin 22: Updated Coverage and Payment Policies

• 2019 Novel Coronavirus (COVID-19) Guidance for Integrated Care Programs: One Care, Program of All-inclusive Care for the Elderly (PACE), and Senior Care Options (SCO)
Key Guidance for Consumers receiving Personal Care Attendant Services

As of Wednesday, March 25, MassHealth implemented measures to support PCA Consumers who may experience service disruption and have unfilled hours during the COVID-19 outbreak

- As described further in Home Health Agency Bulletin 56, for the duration of the state of emergency declared via Executive Order No. 591, MassHealth will permit:

  o **Expansion of Home Health Aide Services to PCA Consumers**: Home Health Agency Providers to provide home health aide services to MassHealth members with an existing prior authorization for PCA services when a member is experiencing a disruption in receipt of PCA services due to COVID-19.

  o **Flexibility around Home Health Aide Training Requirements**: An individual providing personal care attendant-only home health aide services on behalf of a home health agency does not need to meet the home health aide training and certification requirements required under 42 CFR 484.80. The individual only needs to meet the training requirements established by the state for personal care services and demonstrate competency in the personal care services the individual is required to furnish. *(Note: The MassHealth PCA Program requires a 3-hour training be completed within the first 9 months of hire.)*

- **Expanded MassOptions** operations to support calls from MassHealth PCA Consumers who have unfilled PCA hours and are looking to be connected to a Home Health Agency that call fill those hours by calling MassOptions central phone line: 1-844-422-6277
Key Guidance for Consumers receiving Personal Care Attendant Services (continued)

• For MassHealth PCA consumers who need additional hours because they are now home when they typically attend school or a day program, MassHealth has implemented the following:

  o **School hours:** For PCA consumers who attend school, MassHealth is adjusting all prior authorizations to ensure they’re receiving the appropriate number of PCA hours as they spend more time at home. This will be done by extending the number of weeks that are authorized for PCA hours that are received when PCA Consumers are on vacation from school. The adjustment time will be effective from March 16, 2020 for 90 days. **Consumers can begin utilizing their vacation hours now** and can schedule PCAs accordingly. Once the adjustments are completed, notification letters will be sent to Consumers, but Consumers do not need to wait until they receive those letters to start utilizing their vacation hours.

  o **Day programs:** Additional hours for the days that PCA Consumers would have been at an Adult Day Health center or Day Habilitation program will be added to their authorized hours. The adjustment time will be effective from March 16, 2020 for 90 days. Once the adjustments are completed, notification letters will be sent to Consumers, but Consumers do not need to wait until they receive those letters to start scheduling PCA hours for necessarily services.

• **Temporarily suspended the PCA overtime cap of 50 hours**, allowing members to schedule individual PCAs freely without prior authorization but keeping in mind both their own wellbeing and that of their PCAs

• **Letters sent to all PCAs confirming that they are essential workers** during this national emergency
Key Guidance for COVID-19 Positive Members Receiving Certain In-Home Services in Need of PPE


What is the program?

The program will get a supply of personal protective equipment (PPE) to the home of MassHealth members receiving certain MassHealth covered in-home services and supports and who have a documented case of COVID-19 so that they can continue to receive services at home by their personal care attendant (PCA), independent nurse, or direct care worker.

Who can qualify?

A MassHealth member receiving one of the below:
- Self-directed personal care services, specifically PCA services through MassHealth FFS (includes ACO/MCO members) or integrated care programs (SCO or One Care),
- Continuous skilled nursing through the MassHealth Community Care Management (CCM) program, or
- Services from a Direct Care Worker through the Moving Forward Plan (MFP) Community Living Waiver.
- Have a documented case of COVID-19 with documentation showing:
  - A positive test result, or
  - A presumptive diagnosis by a physician or nurse practitioner
Key Guidance for COVID-19 Positive Members Receiving Certain In-Home Services in Need of PPE (continued)

How to request the PPE?

• The member/consumer or their representative should contact the MassHealth LTSS Provider Service Line toll-free at 1-844-368-5184, press 1 for members, and then press 1 to get to the PPE program representative.

• TTY users can initiate the call using MassRelay at https://www.mass.gov/how-to/relay-using-tty

• Members can call during these days and times:
  o Monday through Friday, 8am – 6pm
  o Saturday and Sunday, 9am – 1pm

• To be ready for the call, callers should have:
  o Documentation of their positive test result/presumptive diagnosis from a provider or know how to obtain that documentation from a provider. Callers will receive instructions from the Service Center representative on how to submit the documentation.
  o Address information about where the PPE package should be sent.

How long will it take to get the PPE to the member?

• Once the qualification process has been completed and the MassHealth LTSS Provider Service Center receives the member’s COVID documentation, the PPE will be packaged and shipped to the member’s home within 1 - 2 days.
TeleHealth Network Provider- New Provider Type
Telehealth Network Provider- New Provider Type

MassHealth is establishing a temporary new provider type called Telehealth Network Providers (TNPs). The primary purpose of establishing this provider type is to support member triage related to COVID-19. MassHealth is encouraging members to continue to seek both COVID-19 related care and routine care through their primary care provider, who is authorized under All Provider Bulletins 289 and 291 and Managed Care Entity Bulletin 21 to provide both COVID-19 related care and routine care via telehealth.

TNPs enrolled with MassHealth will be required to meet the participation requirements and are eligible to provide and bill for certain covered encounters described in Telehealth Network Provider Bulletin 1 which details:

- Provider Participation Requirements
- Provider Enrollment
- Covered Encounters
- TNP Encounter Codes
- Billing Rules
- Service Limitations
- Verifying Member Eligibility
- Recordkeeping Requirements (Medical Records)

Providers who have wish to participate as a MassHealth TNP must contact Amy Bianco, at (218)235-3980 or amy.bianco@massmail.state.ma.us.
Resources
Dedicated COVID-19 Provider Page

Providers should visit the dedicated COVID-19 provider page for the latest COVID-19 related information.

The webpage includes links to:
• Guidance for All Providers
• Guidance for specific provider types and
• Frequently Asked Questions

The link for “Guidance for All Providers” contains released publications such as Provider Bulletins and the approved Massachusetts’ 1135 waiver.
Resources – Message Text

Providers are reminded that Message Text is another important way that MassHealth communicates with providers. The messages can be found on the first page of the MassHealth remittance advice (RA) and are also available on the MassHealth Provider Remittance Advice Message Text webpage on Mass.gov.

Below is a list of COVID-19 related messages that were recently issued to providers:

• MassHealth is temporarily pausing enforcement of ordering, referring, prescribing (ORP) provider requirements

• Referral edits on claims for dates of service on or after March 25, 2020

• MassHealth claims payments

• Important message for providers who have claims suspended for individual consideration*

* This message went directly to the affected providers types and is not listed on Mass.gov
Resources

• For the latest MA-specific information, visit the following link: https://www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid19

• The latest Centers for Disease Control and Prevention (CDC) guidance for healthcare professionals is available at the following link: https://www.cdc.gov/coronavirus/2019-ncov/hcp/index.html

• All Provider Bulletins 289, 290, 291, are available on the dedicated Provider COVID-19 webpage

• Frequently Asked Questions (FAQ) available on the COVID-19 for Providers web page

• To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to join-masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.

• If you have any questions about the MassHealth provider COVID-19 information, please email your inquiry directly to providersupport@mahealth.net
Questions?