



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
www.mass.gov/masshealth

MassHealth
Acute Inpatient Hospital Bulletin 197
September 2023

TO: Acute Inpatient Hospitals Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth

A handwritten signature in black ink that reads "Mike Levine".

RE: Coverage of and Reimbursement for Hospital-at-Home Services

Overview

This bulletin updates and restates the information in [Acute Inpatient Hospital Bulletin 180](#) and revises the [billing instructions](#) for inpatient services in a member's home (Hospital-at-Home Services).

Through the Rate Year 2021 Acute Hospital Request for Applications and Contracts (RY21 RFA), MassHealth communicated its intent to reimburse MassHealth-enrolled acute inpatient hospitals (AIHs) rendering Hospital-at-Home Services, contingent upon CMS's approval and MassHealth's publication of subregulatory guidance describing Hospital-at-Home Services and reimbursement. On November 25, 2020, [CMS announced its Acute Hospital Care at Home program](#), providing time-limited authorization for certain hospitals to render acute inpatient hospital services in a patient's home. CMS further announced that State Medicaid agencies may claim federal financial participation on services rendered in accordance with the CMS *Acute Hospital Care at Home* program. In December 2022, the federal [Consolidated Appropriations Act](#) for Fiscal Year 2023 was signed into law, extending authority for CMS' *Acute Hospital Care at Home* program.

As a result, effective for dates of service on or after the date on which CMS has authorized an acute hospital to participate in its *Acute Hospital Care at Home* program, MassHealth will reimburse such appropriately credentialed AIHs for rendering Hospital-at-Home Services to MassHealth members in accordance with this bulletin and the CMS *Acute Hospital Care at Home* program. This bulletin describes MassHealth's coverage of and reimbursement for these Hospital-at-Home Services.

Background

To participate in the *Acute Hospital Care at Home* program, hospitals must apply for and receive a time-limited, hospital-level waiver from CMS of Medicare hospital conditions of participation at 42 CFR 482.23(b) and (b)(1). These waivers and the CMS *Acute Hospital Care at Home* program were originally intended to terminate upon the end of the public health emergency. However, section 4140 of the federal Consolidated Appropriations Act for Fiscal Year 2023 extended the waiver authority until December 31, 2024.

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CMS's guidance¹ requires each hospital seeking to participate in the program to agree, among other things:

- to utilize screening protocols before care at home begins to assess medical and non-medical factors, including working utilities, assessment of physical barriers, and screenings for domestic violence concerns;
- to not admit patients to their home without their prior consent to receive inpatient services at their home;
- to admit patients only from an emergency department or inpatient unit of the credentialed acute hospital following an in-person visit by either a medical doctor (MD) or an advanced practice provider (APP);
- to provide or contract for, at a minimum, the following services:
 - Pharmacy
 - Infusion
 - Respiratory care including oxygen delivery
 - Diagnostics (labs, radiology)
 - Monitoring with at least two sets of patient vitals daily
 - Transportation
 - Food services including meal availability as needed by the patient
 - Durable Medical Equipment
 - Physical, Occupational, and Speech Therapy
 - Social work and care coordination
- to provide certain personnel visits on, at a minimum, a certain cadence, in accordance with all applicable CMS *Acute Hospital Care at Home* program requirements, including, but not limited to, those relating to hospital standards of care and hospital policies;
- to provide immediate, on-demand remote audio connection with Hospital-at-Home staff who can immediately connect either an RN or MD to the patient;
- to ensure appropriate minimum emergency response times;
- to track and, as requested, report unanticipated mortality during the inpatient stay, escalation rate (i.e., transfer back to the acute inpatient hospital from the patient's home during the acute stay), and volume of patients treated at home;
- to establish a local safety committee review (similar to a Mortality and Morbidity team, but dedicated to this program) which will review the metrics listed above prior to weekly submission; and

¹ In the event that CMS updates this guidance, CMS' updated guidance shall control.

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- to use InterQual, Milliman, or another accepted patient leveling process to ensure that only patients requiring an acute level of care are treated by this hospital.

Additional information on the CMS *Acute Hospital Care at Home* program is at <https://www.cms.gov/newsroom/press-releases/cms-announces-comprehensive-strategy-enhance-hospital-capacity-amid-covid-19-surge>. Additional information on CMS' waiver process, including a portal through which interested hospitals can submit a waiver application, is available at <https://qualitynet.cms.gov/acute-hospital-care-at-home>.

MassHealth Coverage of and Reimbursement for Hospital-at-Home Services

Effective for dates of service on or after the date on which CMS has authorized an acute hospital to participate in its *Acute Hospital Care at Home* program, MassHealth will permit AIHs participating in the CMS *Acute Hospital Care at Home* program to provide Hospital-at-Home services in a MassHealth member's home in accordance with this bulletin and the CMS *Acute Hospital Care at Home* program.

AIHs must submit the following to MassHealth, via email to AcuteHospitalRFA@mass.gov, at least 30 days prior to billing MassHealth for Hospital-at-Home services:

1. a copy of CMS's approval of the AIH's *Acute Hospital Care at Home* waiver request; and
2. the date that the hospital anticipates beginning delivery of Hospital-at-Home services to MassHealth members.

AIHs must notify MassHealth, via email to AcuteHospitalRFA@mass.gov, within 30 days of making any significant change to their Hospital-at-Home services that may impact MassHealth members. Examples of significant changes include, but are not limited to: (1) the AIH plans to cease operations of their Hospital-at-Home program; or (2) the AIH plans to significantly expand their inclusion criteria for which individuals may be eligible to receive Hospital-at-Home services.

AIHs rendering Hospital-at-Home Services to MassHealth services must do so:

- in accordance with all of the rules governing the CMS *Acute Hospital Care at Home* program; and
- in accordance with all regulations, contracts, and subregulatory and subcontractual guidance governing the MassHealth Acute Hospital Program, including the MassHealth Utilization Management Program for Acute Inpatient Hospitals.

MassHealth will reimburse AIHs rendering Hospital-at-Home Services in accordance with the Adjudicated Payment Amount per Discharge payment methodology, as described in Section 5.B.1 of the Acute Hospital Request for Applications and Contracts.

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Billing Instructions

MassHealth is updating the billing instructions to better align with [CMS guidelines](#) to identify and track inpatient claims submitted for Hospital-at-Home services. In order to indicate on a claim for acute inpatient hospital services that such services were provided at the patient's home, the hospital must include on the HIPAA-compliant claim transaction the **Occurrence Span Code 82: Hospital at Home Care Dates** and **Revenue Code 0161: Hospital at Home, R&B/Hospital at Home** in the appropriate fields on the facility claim.

MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](#) 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.

Questions

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, TDD/TTY: 711, or email your inquiry to provider@masshealthquestions.com.