

# Administrative Bulletin 20-24

# 101 CMR 350.00: Home Health Services

# Eff. April 16, 2020

# Rate Adjustment Applicable to Certain Home Health Services to Address Costs

# Associated with COVID-19 Public Health Emergency

# Purpose, Scope, and Effective Period

The Executive Office of Health and Human Services (EOHHS) is issuing this administrative bulletin pursuant to the authority of COVID-19 Order No. 20: *Order Authorizing the Executive Office of Health and Human Services to Adjust Essential Provider Rates During the COVID-19 Public Health Emergency* andExecutive Order 591: *Declaration of State of Emergency to Respond to COVID-19*. In light of the state of emergency declared in the Commonwealth due to COVID-19, EOHHS, which administers the Massachusetts Medicaid program known as “MassHealth,” is temporarily adjusting rates for certain MassHealth-covered home health services established in 101 CMR 350.00 and as further described in this administrative bulletin. If a rate is not being adjusted pursuant to this administrative bulletin, the rate remains at the currently established rate.

This administrative bulletin is effective for dates of service from April 1, 2020, through July 31, 2020.

Disclaimer: This administrative bulletin is not authorization for a provider’s use of the adjusted rate or service. Authorization for the provision of, and billing and payment for, home health services are pursuant to the MassHealth Home Health Agency regulations at 130 CMR 403.000 and Home Health Agency Bulletin 56.

# Background

The COVID-19 public health emergency has unexpectedly increased the need for home health services and has also made the delivery of these service more difficult and costly. Existing service rates do not contemplate these increased costs and changes in utilization patterns. Accordingly, EOHHS is establishing adjusted rates as described below that address the increased costs related to COVID-19 and to ensure the continued delivery of these critical services.

# Updated Rates for Certain Home Health Services to Address Concerns Related to COVID-19

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Code** | **Modifier** | **Current Rate** | **Updated Rate** | **Unit** | **Service Description** |
| G0299 |  | $89.21 | $98.13 | Per visit | Services of an RN in home health setting (one through 30 calendar days) |
| G0299 | UD | $70.45 | $77.50 | Per visit | Services of an RN in home health setting (31+ calendar days) |
| G0299 | U3 | $89.21 | $98.13 | Per visit | Nursing care visit for temporary emergency PCA services |
| G0300 |  | $89.21 | $98.13 | Per visit | Services of an LPN in home health setting (one through 30 calendar days) |
| G0300 | UD | $70.45 | $77.50 | Per visit | Services of an LPN in home health setting (31+ calendar days) |
| G0300 | U3 | $89.21 | $98.13 | Per visit | Nursing care visit for temporary emergency PCA services |
| G0493 |  | $89.21 | $98.13 | Per visit | Skilled services of an RN for the observation and assessment of the patient's condition (PA required prior to start of care) |
| T1502 |  | $59.14 | $65.05 | Per visit | Administration of oral, intramuscular, and/or subcutaneous medication by health care agency/professional per visit (RN or LPN) (Use only for Medication Administration visit.) |
| T1503 |  | $59.14 | $65.05 | Per visit | Administration of medication other than oral, intramuscular, and/or subcutaneous medication by health care agency/professional per visit (RN or LPN) (Use only for Medication Administration visit.) |
| G0156 |  | $6.94\* | $7.57\* | Per 15 minutes | Services of Home Health Aide in the home health setting |
| G0156 | UD | $6.94\* | $7.57\* | Per 15 minutes | Services of Home Health Aide in the home health setting (ADL support) (15-minute units) (PA required prior to start of care) |
| G0151 |  | $68.30 | $75.13 | Per visit | Services of Physical Therapist in the home health setting |
| G0152 |  | $71.20 | $78.32 | Per visit | Services of Occupational Therapist in the home health setting |
| G0153 |  | $72.88 | $80.17 |  Per visit | Services of Speech-Language Pathologist in the home health setting |
| 99509 |  | $6.94\* |  $7.57\* | Per 15 minutes | Home Health Aide visit for temporary emergency PCA services |

\*Includes $0.63 annualized add-on that is effective April 1 – June 30, 2020, pursuant to FY19 supplemental budget language.

# Public Comment

EOHHS will accept comments on the rate established via this administrative bulletin through April 30, 2020. Individuals may submit written comments by emailing **ehs-regulations@state.ma.us**. Please submit written comments as an attached Word document or as text within the body of the email with the name of this administrative bulletin in the subject line. All submissions of comments must include the sender’s full name, mailing address, and organization or affiliation, if any. Individuals who are unable to submit comments by email may mail written comments to EOHHS, c/o D. Briggs, 6th floor, 100 Hancock Street, Quincy, MA 02171.

EOHHS may adopt a revised version of this administrative bulletin taking into account relevant comments and any other practical alternatives that come to its attention.