Administrative Bulletin 20-30

101 CMR 304:00: Rates for Community Health Centers

Alternative Payment Methodology Applicable to Community Health Centers Providing Services at Coronavirus Disease 2019 (COVID-19) Isolation and Recovery Sites

Effective April 22, 2020

Purpose, Scope, and Effective Period

The Executive Office of Health and Human Services (“EOHHS”) is issuing this bulletin pursuant to the authority of COVID-19 Order #20: Order Authorizing the Executive Office of Health and Human Services to Adjust Essential Provider Rates During the COVID-19 Public Health Emergency and Executive 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 establishing an alternative payment methodology for community health centers providing services at dedicated COVID-19 isolation and recovery (“I&R”) Sites, notwithstanding 101 CMR 304.00: Rates for Community Health Centers, as further described in this administrative bulletin. If a rate or payment methodology is not being updated pursuant to this administrative bulletin, the rate or payment methodology remains as established.

This administrative bulletin is effective for dates of service beginning April 9 2020 and shall remain effective for the duration 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.

Disclaimer: This administrative bulletin is not authorization for a provider’s use of the updated rate or service. Authorization for the provision of, and billing and payment for, community health center services at a dedicated COVID-19 I&R Site is governed by an executed special conditions amendment to a community health center’s MassHealth Provider Contract.

Background

Community health centers provide essential services to members, including primary and preventive physical and health care services, in community settings. During the public health emergency, certain community health centers will be providing services in designated I&R Sites established by EOHHS around the Commonwealth. These I&R Sites are crucial to containing the spread of COVID-19, but require the use of service modalities not contemplated by current community health center rate methodologies. Accordingly, EOHHS is establishing an alternative payment methodology, as described below, to pay I&R Community Health Centers for services provided at I&R Sites.
Definitions and Payment Methodology for Community Health Center Services Provided at Isolation and Recovery Sites

1. Definitions

For the purposes of this bulletin the following terms have the meanings specified below. All capitalized terms not defined herein shall have the meanings ascribed to those terms by 101 CMR 304: Rates for Community Health Centers, 130 CMR 405.000: Community Health Center Services, or 130 CMR 450.000: Administrative and Billing Regulations.

“Clinical Care Team” is the staff necessary to provide I&R Services to guests at an I&R Center. The Clinical Care Team may include physicians, nurse practitioners, physician assistants, registered nurses, licensed practical nurses, certified nursing assistants, home health aides, masters of social work, licensed independent clinical social workers, and administrative support staff. EOHHS may approve other staff types, including staff with different clinical qualifications than those listed herein, for the Clinical Care Team, as appropriate. The make-up of the Clinical Care Team for each I&R Community Health Center will be established in the special conditions amendment to each I&R Community Health Center’s MassHealth Provider Contract.

“I&R Site” is a location, such as a hotel or motel, that contracts with EOHHS to provide safe, isolated lodging for individuals with a COVID-19 diagnosis.

“I&R Community Health Center” is a community health center that has executed a special conditions amendment to their MassHealth Provider Contract to provide I&R Services at an I&R Center.

“I&R Services” are the services that the Clinical Care Team at an I&R Community Health Center must provide, as provided by the special conditions amendment to the I&R Community Health Center’s MassHealth Provider Contract.

2. Alternative Payment Methodology

Effective for dates of service beginning April 9, 2020, and notwithstanding the rates established under 101 CMR 304: Rates for Community Health Centers, an I&R Community Health Center will be paid for the I&R Services such I&R Community Health Center provides at an I&R Site through a weekly, facility-specific, all-inclusive rate established pursuant to the alternative payment methodology described below. This rate shall be set forth and agreed to by the I&R Community Health Center through the special conditions to its MassHealth Provider Contract. This rate shall be sufficient to cover the following allowable costs associated with the provision of I&R Services, as agreed to by EOHHS for each I&R Community Health Center:

a. The direct labor costs for the Clinical Care Team, staffed appropriately to meet the clinical and administrative needs of the I&R Site.

b. The costs to acquire and maintain sufficient amounts of medical supplies necessary to provide I&R Services at the I&R Site.

c. Appropriate set-up and other one-time costs associated with the provision of I&R Services at the I&R Site, which may include information technology equipment and services and office supplies.

d. To be considered an allowable cost, the costs described in subsections 2(a), 2(b), and 2(c) must, at a minimum, be reasonable, directly related to the provision of I&R Services, and identified in the special conditions amendment to the I&R Community Health Center’s MassHealth Provider Contract.
Nothing in this bulletin shall be construed to prevent a community health center from separately submitting claims for services which are not I&R Services provided in the regular course of their operations as a community health center.

**Public Comment**

EOHHS will accept comments on the rate methodology established via this administrative bulletin through May 6, 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 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 Debby Briggs, Executive Office of Health and Human Services, 100 Hancock Street, Quincy, MA 02171.

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