




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

MassHealth
Adult Foster Care Bulletin 18
May 2021

TO: Adult Foster Care and Group Adult Foster Care Providers Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth 

RE: **MassHealth Telehealth Policy for Adult Foster Care and Group Adult Foster Care Services**

Overview

Through All-Provider Bulletins 289, 291, 294, 298, 303, and 314, and in response to the 2019 novel Coronavirus Disease 2019 (COVID-19) outbreak, the Executive Office of Health and Human Services (EOHHS) implemented MassHealth rules governing delivery of clinically appropriate, medically necessary MassHealth-covered services via telehealth (telephone and live video). Pursuant to the terms of All Provider Bulletin 314, the referenced telehealth policy will remain in effect for 90 days beyond the final date of the Governor's Declaration of a State of Emergency to Respond to COVID-19.

This bulletin explains MassHealth's policy for the use of telehealth for certain adult foster care services and certain group adult foster care services. The guidance in this bulletin will remain in effect for 90 days after the final date of the Governor's Declaration of a State of Emergency due to COVID-19. The MassHealth telehealth policy for adult foster care/group adult foster care services will help ensure members retain access to appropriate adult foster care/group adult foster care services, while promoting social distancing and mitigating the spread of COVID-19.

This bulletin applies to members receiving adult foster care/group adult foster care services on a fee-for-service basis, including members enrolled in the Primary Care Clinician (PCC) plan who receive adult foster care/group adult foster care services.

This bulletin supersedes and replaces telehealth flexibilities issued within the [MassHealth LTSS Provider Information: Updates Related to the Coronavirus Disease 2019 \(COVID-19\)](#).

Adult Foster Care and Group Adult Foster Care Telehealth Guidance

MassHealth adult foster care providers and group adult foster care providers may deliver clinically appropriate, medically necessary MassHealth-covered adult foster care/group adult foster care services to eligible MassHealth members via telehealth (including telephone or live video), in accordance with the standards in this bulletin and notwithstanding any regulation to the contrary, including physical presence requirements in regulation at 130 CMR 408.000 and group adult foster care guidelines.

EOHHS is not imposing specific requirements for technologies used to deliver services via telehealth and will allow reimbursement for MassHealth-covered adult foster care/group adult

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foster care services delivered through telehealth, as long as such services are medically necessary and clinically appropriate and delivered in accordance with this bulletin. 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 in-person services. Providers must inform members of any relevant privacy considerations.

EOHHS does not require providers to deliver adult foster care services via telehealth and may continue to provide services in-person as necessary or appropriate.

Adult foster care and group adult foster care providers may use telehealth for

- Initial evaluations, provided such telehealth uses teleconferencing technology. EOHHS strongly encourages providers to conduct initial evaluations in-person with proper personal protective equipment (PPE). There may be certain circumstances in which telehealth use via videoconference is appropriate. In those circumstances, evaluations may be conducted via hybrid model, using a combination of telehealth and in-person methodology as appropriate;
- Reassessments, including reassessments based on significant change, provided such telehealth uses teleconferencing technology. EOHHS strongly encourages providers to conduct reassessments in-person with proper PPE. There may be certain circumstances in which telehealth use via videoconference is appropriate. In those circumstances, reassessments may be conducted via hybrid model, utilizing a combination of the telehealth and in-person methodology as appropriate; and
- Care management and nursing oversight visits or community health worker visits if applicable, provided the prior care management or nursing oversight visit was not provided via telehealth. MassHealth strongly encourages providers to resume conducting care management and nursing oversight visits in-person with proper PPE. There may be circumstances for which telehealth is utilized in lieu of an in-person visit. It is the responsibility of the provider to make the determination if telehealth is appropriate for that particular visit, and the provider must document the reason in the member record. Telehealth cannot be utilized in consecutive months unless it has been approved by EOHHS on a case-by-case basis.

Adult foster care and group adult foster care providers may not use telehealth for

- Caregiver or direct care aide assistance with activities of daily living or instrumental activities of daily living, inclusive of cueing and supervision of such activities;
- Initial evaluations of members for whom providers are unable to conduct an initial evaluation in-person or using teleconferencing technology. Such members should be referred to their primary care physicians.
- Reassessments, including reassessments based on significant change, of members for whom providers are unable to conduct such reassessments in-person or using teleconferencing technology. Such members should be referred to their primary care physicians.
- Consecutive care management visits provided via telehealth; and
- Consecutive nursing oversight visits provided via telehealth.

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Member Consent

Providers must obtain verbal consent from a member, and the member's caregiver/legal guardian if applicable, before the initiation of home health services via telehealth. Providers must also document the consent in the member's record.

In obtaining the member's consent, providers must provide the member with the following information about telehealth.

A statement explaining

- What a telehealth visit entails;
- What is expected from the member, as well as the AFC or GAFC provider; and
- Any relevant privacy considerations, and that the member may revoke their consent for telehealth services at any time.

Documentation Requirements and Billing Instructions

All relevant documentation requirements of 130 CMR 408.000, 130 CMR 450.000, and Group Adult Foster Care Guidelines apply when adult foster care and group adult foster care services are delivered via telehealth. Documentation of telehealth must indicate that the visit was completed via telehealth due to COVID-19, note any limitations of the visit, and include a plan to follow up any medically necessary components deferred due to those limitations.

Providers must bill the same procedure codes for services delivered via telehealth as appropriate for services delivered in-person.

Additional Information

For the latest Massachusetts-specific information, visit www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19.

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

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 questions about the information in this bulletin, please contact the LTSS Provider Service Center.

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