***Commonwealth of Massachusetts***

***Executive Office of Health and Human Services***

***Office of Medicaid***

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MassHealth

# Adult Foster Care Bulletin 20

August 2021

**TO**: Adult Foster Care Providers Participating in MassHealth

**FROM**: Amanda Cassel Kraft, Acting Assistant Secretary for MassHealth [signature of Amanda Cassel Kraft]

RE: Rate Increases and Reporting Requirements for Certain Home-and Community-Based Services Related to Section 9817 of the American Rescue Plan Act

## Introduction

The Executive Office of Health and Human Services (EOHHS) has established enhanced rates for certain home and community-based services (HCBS), including MassHealth-covered Adult Foster Care (AFC) services, under 101 CMR 447.00: *Rates for Certain Home-and Community-based Services Related to Section 9817 of the American Rescue Plan Act* for dates of service beginning July 1, 2021, through December 31, 2021.

These enhanced rates have been established to advance the Commonwealth’s initiatives related to Section 9817 of the American Rescue Plan Act. Specifically, these enhanced rates promote workforce development, strengthen the HCBS workforce, and address reduced utilization of day program services during the continued federal public health emergency.

This bulletin sets forth the enhanced rates and billing instructions in effect for MassHealth-covered AFC services for dates of service beginning July 1, 2021, through December 31, 2021, and the required provider attestation and reporting requirements regarding use of the funds associated with the add-on for workforce development established under 101 CMR 447.00.

## Enhanced Adult Foster Care Rates and Billing Instructions for Dates of Service from July 1, 2021, through December 31, 2021

### Enhanced Rates

To promote workforce development and strengthen the HCBS workforce during the continued federal public health emergency, rates for the following services are being established in 101 CMR 447.00 at an amount 10% higher than the existing rates for these services as established in 101 CMR 351.00: *Rates of Payment for Certain Adult Foster Care Services*.

| **Code** | **Unit** | **Rate** | **Add on** | **Total** |
| --- | --- | --- | --- | --- |
| S5140 | *Per Diem* | $48.10 | $4.81 | $52.91 |
| S5140TG | *Per Diem* | $82.67 | $8.27 | $90.94 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Code** | **Unit** | **Rate** | **Add on** | **Total** |
| S5140TF | *Per Diem* | $48.10 | $4.81 | $52.91 |
| S5140U5 | *Per Diem* | $82.67 | $8.27 | $90.94 |
| S5140U6 | *Per Diem* | $48.10 | $4.81 | $52.91 |
| S5140TGU6 | *Per Diem* | $82.67 | $8.27 | $90.94 |
| S5140U7 | *Per Diem* | $48.10 | $4.81 | $52.91 |
| S5140TGU7 | *Per Diem* | $82.67 | $8.27 | $90.94 |
| T1028 | Per Admission | $242.38 | $24.24 | $266.62 |

### Service Provision

All AFC services receiving enhanced funding must be delivered in accordance with all applicable program requirements and regulations as set forth in 101 CMR 351.00: *Rates of Payment for Certain Adult Foster Care Services*.

### Administrative and Billing Requirements

All existing provider billing processes will remain in effect during the period of enhanced funding, beginning July 2021, through December 2021. Providers must submit claims according to policies and procedures set forth in applicable administrative and billing regulations and supporting guidance.

## AFC Rates for Dates of Service on or after January 1, 2022

For dates of service on or after January 1, 2022, MassHealth will pay providers for Adult Foster Care services at the rates established under 101 CMR 351.00.

## Allowable Uses of Enhanced Funding

Providers will be required to use at least 90% of enhanced funds for the specific purposes of recruiting, building, and retaining their direct care and support workforce.

EOHHS guidance about allowable uses of the enhanced funding, including eligible direct care and support staff and categories of compensation, is described in the document about Home and Community-Based Service Enhanced Rate Add-Ons using American Rescue Plan Act (ARPA) Funding, and is available at [www.mass.gov/doc/for-masshealth-providers-home-and-community-based-service-enhanced-rate-add-ons-using-american-rescue-plan-act-arpa-funding/download](http://www.mass.gov/doc/for-masshealth-providers-home-and-community-based-service-enhanced-rate-add-ons-using-american-rescue-plan-act-arpa-funding/download).

## Provider Attestation and Spending Report

As a condition of receipt of these additional funds, eligible provider agencies must complete an attestation assuring EOHHS that they will use at least 90% of the funds for HCBS workforce development and submit a spending report to EOHHS that accounts for how the enhanced funds were used.

EOHHS guidance about the provider attestation and spending report requirements will be provided at a future date at [www.mass.gov/info-details/strengthening-home-and-community-based-services-and-behavioral-health-services-using-american-rescue-plan-arp-funding](http://www.mass.gov/info-details/strengthening-home-and-community-based-services-and-behavioral-health-services-using-american-rescue-plan-arp-funding). Providers are encouraged to check this site regularly for updated information.

## Failure to Submit an Attestation or Spending Report

Providers may be subject to sanction for failure to submit an attestation form and/or spending report in accordance with EOHHS guidance, including the Home and Community-Based Service Enhanced Rate Add-Ons using American Rescue Plan Act (ARPA) Funding guidance noted above, and pursuant to 130 CMR 450.238: *Sanctions: General* and 130 CMR 450.239: *Sanctions: Calculation of Administrative Fine*.

## MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](http://www.mass.gov/masshealth-provider-bulletins) web page.

[Sign up](https://www.mass.gov/forms/email-notifications-for-provider-bulletins-and-transmittal-letters) to receive email alerts when MassHealth issues new bulletins and transmittal letters.

## Questions

Providers may submit questions related to the enhanced funding and other questions related to this bulletin to ARPAMedicaidHCBS@mass.gov.

The MassHealth LTSS Provider Service Center is also open from 8 a.m. to 6 p.m. ET, Monday through Friday, excluding holidays. LTSS Providers should direct their questions about this letter or other MassHealth LTSS Provider questions to the LTSS Third Party Administrator (TPA) as follows:

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| **Phone:**  | Toll free (844) 368-5184 |
| **Email:** | support@masshealthltss.com  |
| **Portal:** | [www.MassHealthLTSS.com](http://www.MassHealthLTSS.com)  |
| **Mail:** | MassHealth LTSSPO Box 159108 Boston, MA 02215 |
| **Fax:** | (888) 832-3006 |