# Adult Foster Care Bulletin 34



Commonwealth of Massachusetts

Executive Office of Health and Human Services

Office of Medicaid

[www.mass.gov/masshealth](https://www.mass.gov/orgs/masshealth)

**DATE:** August 2025

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

**FROM:** Mike Levine, Undersecretary for MassHealth [signature of Mike Levine]

**RE:** Updated Guidance Related to Adult Foster Care and Group Adult Foster Care Admission and Monthly Visit Requirements

## Background

This bulletin supersedes [Adult Foster Care Bulletin 29](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-a-c) and provides updated guidance for adult foster care (AFC) and group adult foster care (GAFC) providers related to admission and monthly visit requirements.

The purpose of this bulletin is to provide flexibility for AFC and GAFC providers’ multidisciplinary team as it relates to the cadence of admission and monthly visit requirements. However, this flexibility is subject to the specific needs of the member. AFC/GAFC providers who fail to meet the guidance in this bulletin may be subject to overpayments. Providers may also be subject to sanctions, up to and including termination from participation in the MassHealth AFC or GAFC program.

This bulletin applies to members receiving AFC/GAFC services on a fee-for-service basis.

## Admission Visits

For members receiving both AFC level I and level II services, a registered nurse (RN), licensed practical nurse (LPN), or care manager must make the initial visit. If the RN or LPN do not make the initial visit, then an RN or LPN must do so within the first five working days of admission.

For members receiving GAFC services, an RN, LPN, or care manager must make the initial visit. If the RN or LPN do not make the initial visit, then an RN or LPN must do so within the first five working days of admission.

**Monthly Visits**

For both AFC level I and level II services, the RN or LPN must conduct onsite visits every other month, or more often if necessary. These visits alternate with the required visits by the care manager to ensure that the member receives one visit from either the nurse or the care manager every month, as determined by the multidisciplinary team (MDT). A community support specialist may conduct up to three nonconsecutive onsite visits per 12-month period, per calendar year.

For GAFC services, the RN or LPN must conduct onsite visits every other month, or more often, if necessary. These visits alternate with the required visits by the care manager to ensure that the member receives one visit from either the nurse or the care manager every month, as determined by the MDT.

**Extraordinary Circumstances**

As outlined in Adult Foster Care Provider Bulletin 29, AFC/GAFC providers may use telehealth for extraordinary circumstances. These circumstances would be the result of unusual and unavoidable situations that substantially impede the ability of the provider to conduct a visit or provide other AFC/GAFC required services in person, and which can be directly addressed through telehealth. This may include, but is not necessarily limited to, staffing shortages due to illness and/or medical leave (such as Family Medical Leave Act absences). Such use of telehealth to address extraordinary circumstances cannot be used for caregiver or direct-care aide assistance with activities of daily living or instrumental activities of daily living, including cueing and supervision of such activities.

In these limited, permissible instances, the AFC/GAFC program director must document the approved temporary telehealth use. Further, for each such use, the AFC/GAFC provider must document

* the extraordinary circumstance,
* the timeframe during which the extraordinary circumstances necessitated the telehealth visits,
* which types of visits are permitted to be conducted by telehealth, and
* how the use of telehealth is narrowly tailored to address this extraordinary circumstance.

Such documentation must be made available upon request by EOHHS or other appropriate auditors. The AFC/GAFC provider must also document in the relevant member record each visit that occurred via telehealth. If telehealth use extends beyond three months, the AFC/GAFC provider must contact MassHealth for approval and must provide a deadline by which the use of telehealth for extraordinary circumstances will conclude.

## 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

If you have questions about the information in this bulletin, please contact:

### Long-Term Services and Supports

Phone: (844) 368-5184 (toll free)

Email: [support@masshealthltss.com](mailto:support@masshealthltss.com)

Portal: [MassHealthLTSS.com](https://www.masshealthltss.com/s/?language=en_US)

Mail: MassHealth LTSS

PO Box 159108

Boston, MA 02215

Fax: (888) 832-3006

### All Other Provider Types

Phone: (800) 841-2900, TDD/TTY: 711

Email: [provider@masshealthquestions.com](mailto:provider@masshealthquestions.com)

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