

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

> MassHealth All Provider Bulletin 367 (Corrected) May 2023

TO: All Providers Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth

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RE: Coverage and Reimbursement Policy Updates for Services Related to COVID-19 after the Expiration of the Federal Public Health Emergency

Background

MassHealth put in place many flexibilities during the federal Public Health Emergency (PHE) relating to COVID-19. The Biden administration recently announced that the federal PHE will end at the end of the day on May 11, 2023. This bulletin provides updated information on certain COVID-19-related services and flexibilities.

This bulletin applies to members enrolled in:

- MassHealth fee-for-service
- Primary Care Clinician (PCC) Plan
- Primary Care Accountable Care Organizations (ACOs)
- Health Safety Net (HSN) plans
- MassHealth Limited
- Children's Medical Security Plan (CMSP)

MassHealth Accountable Care Partnership Plans (ACPPs), Managed Care Organizations (MCOs), Senior Care Organizations (SCOs), One Care plans, and Programs of All-inclusive Care for the Elderly (PACE) must provide plan-covered services to enrollees in an amount, duration, and scope that is no more restrictive than MassHealth fee-for-service coverage for such services, including as set forth in this bulletin.

Note that information on Long-Term Services and Supports (LTSS) and eligibility policies after the expiration of the federal PHE are in separate bulletins.

Coverage for COVID-19 Vaccine Services for MassHealth Members

MassHealth will continue covering COVID-19 vaccine services for MassHealth members, at no cost to the member, after the expiration of the federal PHE. COVID-19 vaccines are currently provided free-of-charge to providers out of the federal government stockpile. If COVID-19 vaccines are no longer provided free-of-charge to providers, MassHealth will price the vaccines and pay providers accordingly. For pharmacy providers, MassHealth anticipates that COVID-19 vaccines will be paid consistent with the methodology in <u>101 CMR 331.04</u>: *Payment for Prescription Drugs*. For other providers, MassHealth expects pricing consistent with the rates set by Medicare.

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MassHealth will continue covering COVID-19 vaccines as described in in <u>All Provider Bulletins 304</u>, <u>307, 312, 313, and 317</u>. This includes vaccines administered by emergency medical technicians (EMTs), pharmacists, pharmacy interns, pharmacy technicians, dentists, public health dental hygienists, dental hygienists, mental health centers, and substance use disorder treatment clinics, so long as they meet the requirements described in the All Provider Bulletins.

Coverage for COVID-19 Testing Services for MassHealth Members

MassHealth will continue covering COVID-19 testing services for MassHealth members, at no cost to the member, after the expiration of the federal PHE. PCR and antigen testing remains available for MassHealth members. In addition, over-the-counter (OTC) COVID-19 tests at MassHealth pharmacies will continue to be covered.

MassHealth currently covers eight OTC COVID-19 tests per member per month without prior authorization. MassHealth expects to cover two OTC COVID-19 tests per member per month without prior authorization, beginning July 2023. The limit without prior authorization will be two test kits per member per month, regardless of how they are packaged (for example, one package with two test kits or two single-test packages will be covered without prior authorization). If additional tests are medically necessary, prior authorization may be required. MassHealth will update the MassHealth Drug list when the number of OTC COVID-19 tests covered without prior authorization changes.

End of Separate Payment for COVID-19 Specimen Collection

Through <u>All Provider Bulletin 319</u> and its predecessor bulletins, MassHealth implemented numerous flexibilities in connection with COVID-19 testing to allow providers to separately bill and receive payment for COVID-19 specimen collection services and other billable services, which were later extended. With the end of the federal PHE, MassHealth is ending these separate payments for COVID-19 specimen collection.

Effective May 12, 2023, MassHealth will no longer allow providers to separately bill and receive payment for COVID-19 specimen collection services. Before this date, providers may bill for COVID-19 specimen collection consistent with the guidance in <u>All Provider Bulletin 319</u> and its predecessor bulletins.

Rates for relevant codes and modifiers (codes G2023 and G2024, as well as modifiers "CG" to these codes) for services provided on or before May 11, 2023, are set in <u>101 CMR 320.00</u>: *Rates for Clinical Laboratory Services*.

In addition, effective May 12, 2023, MassHealth will no longer cover ambulance providers for visits to patients to obtain and transport specimens for COVID-19 diagnostic testing using code A0998 (Ambulance response and treatment; no transport).

Coverage for COVID-19 Treatment Services for MassHealth Members

MassHealth will continue covering COVID-19 treatment for MassHealth members after the expiration of the federal PHE. There will be no copays for such treatment services through at least September 30, 2024.

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Paxlovid and molnupiravir are currently provided free-of-charge to providers out of the federal stockpile, as are certain monoclonal antibodies. If COVID-19 antivirals and monoclonal antibodies are no longer provided free-of-charge to providers, MassHealth will price them and pay providers accordingly. For prescription drugs dispensed through pharmacies, payment will be consistent with 101 CMR 331.04. For treatment provided through hospitals, payment will be in accordance with the acute hospital rate year request for applications (RFA) in effect for the applicable date of service, and subject to the applicable regulations. For treatment provided in other outpatient settings, MassHealth expects pricing consistent with prices set by Medicare.

Delivery of Prescription Medications to MassHealth Members

As described in <u>Pharmacy Facts 167</u> and in <u>101 CMR 446.03(5)</u>: <u>Prescribed Drugs</u>, eligible pharmacy providers receive a payment adjustment to the professional dispensing fee when medications are delivered to a personal residence (including homeless shelters). The payment adjustment is the lower of the provider's usual charge for prescription delivery or \$8.00 and will be made only when the MassHealth agency is the primary payer. This payment adjustment will continue after the end of the federal PHE.

MassHealth will pay the delivery fee to a provider only once per member per day regardless of the number of prescriptions being delivered. The fee is payable only for deliveries to members living in personal residences and is not payable for claims for members living in any type of institution or residential facility, except for homeless shelters.

Billing for COVID-19 Vaccines, Treatment, and Testing Services for MassHealth Limited and HSN

During the federal PHE and continued through at least September 30, 2024, COVID-19 vaccine services are a covered service under MassHealth Limited.

During the federal PHE and afterward, treatments for COVID-19, including prescription drugs such as paxlovid and molnupiravir, are considered emergency services as defined in <u>130 CMR</u> <u>450.105(F): *MassHealth Limited*</u> for purposes of MassHealth Limited, and are payable by MassHealth to any participating provider qualified to provide such services.

During the federal PHE, COVID-19 vaccines, treatment, and testing are considered emergency services as defined in 130 CMR 450.105(F) for purposes of MassHealth Limited, and is payable by MassHealth to any participating provider qualified to provide such services. Effective starting May 12, 2023, COVID-19 testing will be covered for MassHealth Limited members to the extent performed in an emergency department. No other testing for COVID-19 may be billed for MassHealth Limited members after the end of the federal PHE.

HSN providers rendering COVID-19 vaccines, treatment, and testing services to HSN patients (including for COVID-19 testing for MassHealth Limited members after the expiration of the federal PHE performed outside of an emergency department) should submit claims for such services to the HSN. This includes two over-the-counter tests for COVID-19 per patient per month. Standard HSN rules and regulations apply.

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Transportation to COVID-19 Vaccine Appointments for Members in Family Assistance, CMSP, and MassHealth Limited, and for HSN patients

As described in <u>All Provider Bulletin 310</u>, MassHealth provided transportation for members enrolled in Family Assistance, CMSP, MassHealth Limited, and HSN, for transportation through its Human Services Transportation (HST)'s regional transportation brokers to COVID-19 vaccination sites. Effective May 12, 2023, new requests for transportation for such individuals will no longer be approved.

Transportation services to COVID-19 vaccine administration appointments and other covered medical services will continue to be available for MassHealth members in MassHealth Standard, CommonHealth, and CarePlus.

Coverage of Remote Patient Monitoring

As described in <u>All Provider Bulletin 294</u>, MassHealth added to the MassHealth Physician, Community Health Center, and Acute Outpatient Hospital program manuals coverage of a code for COVID-19 remote patient monitoring (COVID-19 RPM) bundled services to facilitate home- or residence-based monitoring of members with confirmed or suspected COVID-19 who do not require emergency department or hospital level of care but require continued close monitoring. This code was added to divert unnecessary emergency and hospital use during the COVID-19 emergency.

Coverage of COVID-19 RPM will continue after the expiration of the federal PHE.

Primary Care Clinician Plan & Primary Care ACO Referrals

MassHealth will continue the suspension of the referral requirements for services provided to members enrolled in the Primary Care Clinician (PCC) Plan or a Primary Care ACO. Notwithstanding the requirements of <u>130 CMR 450.118(J)</u>: *Referral for Services* and <u>130 CMR 450.119(I)</u>: *Referral for Services*, members enrolled in the PCC plan or a Primary Care ACO do not need a referral to receive any MassHealth-covered service that would otherwise require a referral. This is an extension of the policy announced in <u>All Provider Bulletin 291</u> and extended in <u>All Provider Bulletin 319</u>. This policy will remain in place through at least June 30, 2023. MassHealth will provide additional guidance prior to ending this flexibility.

Deadline for conducting annual monitoring and follow-up activities for targeted case management

MassHealth received Section 1135 waiver authority to modify the deadline for conducting annual monitoring and follow-up activities for targeted case management to allow up to 18 months for such monitoring activities to be completed. Effective May 12, 2023, the deadline reverts to 12 months.

Pharmacy Copay Suspension

Effective May 1, 2023, MassHealth is suspending all pharmacy copays for eligibility groups consistent with 42 CFR 435 Subparts B, C, and D. This policy will remain in effect through March 31, 2024, and also applies to HSN patients. Children's Medical Security Program (CMSP) members must still pay required copays.

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Community Health Center Telephonic Services

The flexibilities provided to community health centers under <u>Community Health Center Bulletin</u> <u>102</u> are no longer in effect upon the expiration of the federal PHE. Specifically, as of May 12, 2023, the term "qualified non-physician health care professionals" shall not be construed to include licensed practical nurses, community health workers, or medical assistants for the purposes of billing CPT codes 98966, 98967, or 98968.

Community Health Center Laboratory Partnerships

To the extent that any community health centers are conducting COVID-19 testing laboratory services in partnership with a non-MassHealth laboratory after MassHealth approval of those partnerships, in accordance with <u>Community Health Center Bulletin 104</u>, such laboratory services are no longer payable by MassHealth upon the expiration of the federal PHE.

Signatures for Transportation Medical Necessity Forms

Transportation providers will not be required to obtain "wet" signatures from authorized providers or managed-care representatives on Medical Necessity Forms. Appropriate electronic signatures will continue to satisfy signature requirements in <u>130 CMR 407.421(D)(2)</u> after the end of the federal PHE.

Additional Information

For the latest MA-specific COVID-19 information, visit the following link: <u>www.mass.gov/coronavirus-disease-2019-covid-19</u>.

For information on Federal Authorities Related to COVID-19, including additional details on authorities after the end of the federal PHE, visit the following link: <u>https://www.mass.gov/info-details/federal-authorities-related-to-covid-19</u>.

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

MassHealth Website

This bulletin is available on the MassHealth Provider Bulletins web page.

Sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters.

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Questions

Dental Services

Phone: (800) 207-5019; TDD/TTY: (800) 466-7566

Long-Term Services and Supports

Phone: (844) 368-5184 (toll free) Email: <u>support@masshealthltss.com</u> Portal: MassHealthLTSS.com 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