



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

All Provider Bulletin 389

DATE: April 2024

TO: Acute Hospitals and Community Health Centers Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth 

RE: **Changes to Billing for Services Delivered by School-Based Health Centers Operated through Community Health Centers**

Overview

This bulletin updates and supersedes certain policies set forth in MassHealth [All Provider Bulletin 277](#), issued in August 2018, related to billing instructions for services rendered by school-based health centers (SBHCs) operating as a satellite location as part of a community health center (CHC). This bulletin also provides an update related to referral requirements for members enrolled in Primary Care Accountable Care Organizations (ACOs) and the Primary Care Clinician (PCC) Plan who are receiving services at CHCs.

Community Health Center Billing for Services Provided at School-Based Health Centers

Effective immediately, CHCs must submit claims for all services delivered at SBHCs to members enrolled in an Accountable Care Partnership Plan (ACPP) or managed care organization (MCO) (together, “managed care plans”) to the plan. For behavioral health services delivered at SBHCs to members enrolled in the state’s managed behavioral health vendor, including members enrolled in Primary Care ACOs or the PCC Plan, CHCs must submit claims to the managed behavioral health vendor. All such claims submitted by CHCs for services delivered at SBHCs to MassHealth members enrolled in Standard, CommonHealth, Family Assistance, or CarePlus must be submitted in accordance with the plan’s billing procedures.

PCC/PCP Referral Requirements

Primary Care Provider (PCP) and PCC referral requirements for services provided by SBHCs have been paused since September 1, 2018, for members enrolled in a Primary Care ACO or the PCC Plan, pursuant to All Provider Bulletin 277. MassHealth will continue the suspension of the referral requirements for all services provided to members enrolled in a Primary Care ACO or the PCC Plan, including services provided by SBHCs, pursuant to [All Provider Bulletin 384](#). MassHealth will provide additional guidance before ending this flexibility.

However, SBHCs are required to identify the member's managed care plan and PCP of record through the eligibility verification system and are expected to coordinate with the member's managed care plan and PCP to ensure that services are provided in a comprehensive manner that fully supports the health needs of the member.

Other Billing Types

Please note: CHC billing procedures for members in MassHealth Limited, Children's Medical Security Plan (CMSP), and the Health Safety Net have not changed. Further, no changes are being made at this time for any other provider type that may operate a school-based health center, such as a hospital.

MassHealth Website

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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@masshealthtss.com

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