

Commonwealth of Massachusetts Executive Office of Health and Human Services Division of Medical Assistance



600 Washington Street Boston, MA 02111 www.mass.gov/dma

> MASSHEALTH TRANSMITTAL LETTER CHC-70 January 2004

TO: Community Health Centers Participating in MassHealth

FROM: Beth Waldman, Acting Commissioner Beth Waldman

RE: Community Health Center Manual (Speech and Hearing Services)

This letter transmits a revision to the community health center regulations. The revised language clarifies that community health centers that want to provide speech and hearing services as an optional service must follow the MassHealth speech and hearing center regulations at 130 CMR 413.000.

These regulations are effective February 1, 2004.

NEW MATERIAL

(The pages listed here contain new or revised language.)

Community Health Center Manual

Pages 4-25 and 4-26

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Community Health Center Manual

Pages 4-25 and 4-26 — transmitted by Transmittal Letter CHC-57

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series

COMMUNITY HEALTH CENTER MANUAL

SUBCHAPTER NUMBER AND TITLE 4 PROGRAM REGULATIONS

PROGRAM REGULATION (130 CMR 405.000)

PAGE

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405.471: Optional Reimbursable Services

A CHC may elect to provide the following services on site or by referral, but it is not required to do so under 130 CMR 405.000. The CHC must notify MassHealth in writing of each service listed below that the CHC will provide on site. All services provided on site must be provided and payment claimed in compliance with the applicable MassHealth regulations for each service, including applicable fee schedules. Services the CHC may elect to provide include:

- (A) adult day health services;
- (B) adult foster care;
- (C) day habilitation;
- (D) family planning;
- (E) psychiatric day treatment; and
- (F) speech and hearing services as described in 130 CMR 413.000.

(130 CMR 405.472 through 405.495 Reserved)

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405.496: Utilization Management Program

MassHealth pays for procedures and hospital stays that are subject to the Utilization Management Program only if the applicable requirements of the program as described in 130 CMR 450.207 through 450.211 are satisfied. Appendix E of the *Community Health Center Manual* contains the name, address, and telephone number of the contact organization for the screening program and describes the information that must be provided as part of the review process.

REGULATORY AUTHORITY

130 CMR 405.000: M.G.L. c. 118E, §§ 7 and 12.