

**MassHealth**  
**Chronic Disease and Rehabilitation**  
**Inpatient Hospital Bulletin 97**  
**January 2021**

**TO:** Chronic Disease and Rehabilitation Inpatient Hospitals Participating in MassHealth

**FROM:** Amanda Cassel Kraft, Assistant Secretary for MassHealth



**RE: Family Assistance Coverage Expansion for  
MassHealth Chronic Disease and Rehabilitation Hospitals - Updated**

### **Background**

The Executive Office of Health and Human Services (EOHHS) is expanding MassHealth Family Assistance coverage for chronic disease and rehabilitation hospital (CDRH) services and establishing a path to long-term care coverage under MassHealth Standard. This bulletin simplifies and further expands Family Assistance coverage for CDRH services, which had previously been expanded under MassHealth [Chronic Disease and Rehabilitation Inpatient Hospital Bulletin 90](#)

Effective for dates of service beginning November 1, 2021, this bulletin supersedes MassHealth Chronic Disease and Rehabilitation Inpatient Hospital Bulletin 90 and applies to all MassHealth CDRH providers.

### **Changes to MassHealth Coverage for those Eligible for Family Assistance**

For dates of service beginning November 1, 2021, and notwithstanding 130 CMR 435.418: *Service Limitations*, members covered by Family Assistance who require a CDRH stay will now have a pathway to become eligible for a short-term stay of up to six months, or for long-term care (LTC) coverage.

### **Approvals for Short-Term Stays**

Through this bulletin, members eligible for MassHealth Family Assistance coverage who meet clinical eligibility criteria are now eligible for up to six months of coverage for short-term stays at a CDRH. This is an expansion of the previous family assistance coverage of up to 100 days per admission to a CDRH under MassHealth Chronic Disease and Rehabilitation Inpatient Hospital Bulletin 90.

If a member eligible for Family Assistance is admitted to a CDRH, the CDRH or the member's health plan, as appropriate, will need to submit an SC-1 form indicating that the member requires a short-term stay of up to six months. Upon review and approval of the clinical assessment and SC-1 form, the member is covered for the short-term stay under MassHealth Family Assistance, for up to a six-month stay.

## **Approvals for Long-Term Care**

Through this bulletin, members eligible for MassHealth Family Assistance coverage have a path to obtaining LTC coverage under MassHealth Standard. To begin the LTC eligibility application process, a CDRH must submit an SC-1 form indicating that the length of stay will be more than six months. This form should be submitted when the six-month stay has been exhausted or when it is determined that the member is expected to be in the CDRH for more than six months, whichever occurs first.

Upon receipt of the SC-1, MassHealth will determine both financial and clinical eligibility for LTC for the member based on the current conversion guidelines under MassHealth Standard. This includes the asset test and lookback guidelines for all LTC applicants. To be determined eligible, members younger than 65 will also need to be determined disabled. If financially and clinically eligible as determined by MassHealth, the member will become covered for LTC under MassHealth Standard.

## **Compliance with Existing CDRH Requirements**

MassHealth members with Family Assistance coverage must receive the necessary level of care and pre-admission screenings applicable to all CDRH admissions, including but not limited to, 130 CMR 435.408: *Screening Program for Chronic Disease and Rehabilitation Hospitals*, 130 CMR 435.409: *Level-of-Care for Members in Chronic Disease and Massachusetts Department of Public Health Hospitals*, and 130 CMR 435.410: *Level-of-Care for Rehabilitation Hospitals*.

CDRHs must meet all other federal and state statutory and regulatory requirements, including but not limited to requirements for admission, provision of services, residents' rights, and discharge notice and planning requirements, with respect to members admitted with MassHealth Family Assistance coverage.

## **MassHealth Website**

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## **Questions**

If you have questions about the information in this bulletin please contact MassHealth as applicable for your provider type.

## **Long-Term Services and Supports**

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

Email: [support@masshealthtss.com](mailto: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; TTY: (800) 497-4648

Email: [providersupport@mahealth.net](mailto:providersupport@mahealth.net)

Fax: (617) 988-8974