***Commonwealth of Massachusetts***

***Executive Office of Health and Human Services***

***Office of Medicaid***

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MassHealth

# Continuous Skilled Nursing Agency Bulletin 4

March 2022

**TO**: Continuous Skilled Nursing Agencies Participating in MassHealth

**FROM**: Amanda Cassel Kraft, Assistant Secretary for MassHealth [signature of Amanda Cassel Kraft]

RE: Revised MassHealth Telehealth Policy for Continuous Skilled Nursing (CSN) Services and Telehealth Documentation Requirement

## Introduction

On January 31, 2020, the United States Secretary of Health and Human Services (Secretary), pursuant to authority under section 319 of the Public Health Service Act (42 U.S.C. § 247d), issued a determination that a nationwide public health emergency had existed since January 27, 2020 (“the FPHE”). The Secretary has since issued renewals of the FPHE, on April 21, 2020; July 23, 2020; October 2, 2020; January 7, 2021; April 15, 2021; and July 19, 2021. On March 10, 2020, the Governor issued the Declaration of State of Emergency within the Commonwealth due to the 2019 novel Coronavirus (COVID-19) outbreak, which expired June 15, 2021.

In light of the FPHE and the state declaration, MassHealth introduced a telehealth policy that, among other things, allowed qualified providers to deliver clinically appropriate, medically necessary MassHealth-covered services to MassHealth members via telehealth (telephone and live video).

Due to the continued effects of the COVID-19 pandemic on the delivery of continuous skilled nursing (CSN) services, MassHealth is issuing this revised COVID-19 bulletin which supersedes Home Health Agency bulletins 60, 63, and 68.

This bulletin applies to members receiving CSN services on a fee-for-service basis, including members enrolled in the Primary Care Clinician (PCC) plan who receive CSN services.

This bulletin:

* describes a COVID-19-related telehealth flexibility for MassHealth CSN services that will remain in effect until the end of the FPHE; and
* describes a recordkeeping and documentation requirement regarding telehealth services.

## Provision of Continuous Skilled Nursing (CSN) Services via Telehealth

A MassHealth CSN agency may provide CSN services via telehealth (including telephone and/or live video) as determined necessary by the CSN agency provider. The provision of CSN services via

telehealth is limited to consultative services that the member has provided consent for and for services that do not require hands-on care. Telehealth visits should be billed using the same procedure codes for services delivered face-to-face. The number of units billed per CSN consultative visit or recertification visit should correspond to the length of time the home health agency provided services via telehealth (e.g., a 30-minute consultative or recertification visit would equate to two units of CSN services.

**Member Consent**

Providers must obtain verbal consent from a member, and the member’s caregiver/legal guardian if applicable, before the initiation of home health services via telehealth. Providers must also document the consent in the member’s record.

In obtaining the member’s consent, MassHealth CSN agencies must provide the member with a statement explaining

1. What a telehealth visit involves;
2. What is expected from the member, as well as the CSN agency provider;
3. Any relevant privacy considerations; and
4. The fact that the member may revoke, at any time, their consent for the rendering of services via telehealth.

### Billing Instructions and Payment Rates for CSN Services Delivered via Telehealth

Rates of payment for CSN services delivered via telehealth will be the same as rates of payment for CSN services delivered via traditional (e.g., in-person) methods set forth in [101 CMR 361.00: *Rates for Continuous Skilled Nursing Services*](https://www.mass.gov/regulations/101-CMR-36100-rates-for-continuous-skilled-nursing-services).

CSN agencies must include modifier “GT” when submitting claims for services delivered via telehealth. When providing CSN services, CSN agencies should not use the GT modifier.

Failure to include modifier “GT” when submitting claims for services delivered via telehealth, except when providing CSN services, may result in the imposition of sanctions pursuant to 130 CMR 450.238-450.240.

**Important note:** Although MassHealth allows reimbursement for the delivery of certain CSN services via telehealth as described in this bulletin, MassHealth does not require providers to deliver services via telehealth.

### Documentation of CSN Services Delivered via Telehealth Services and Encounter Requirements

All documentation requirements of 130 CMR 403.000 apply when home health services or CSN services are delivered via telehealth and the documentation must also include:

* Indication in the visit note that the service was provided via telehealth;
* Description in the visit note of the rationale for service via telehealth; and
* For dates of service on or after September 13, 2021, the following new visit note:

On [DATE], member has requested and verbally consented to consultative CSN services and/or visit being completed via telehealth due to COVID-19. On [DATE], CSN agency staff discussed the safety protocols that are used during any in-person visit, including but not limited to PPE use and COVID precautions, but member still requested telehealth instead of an in-person visit.

Failure to maintain documentation requirements for services delivered via telehealth, may result in the imposition of sanctions pursuant to 130 CMR 450.238-450.240.

## MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](http://www.mass.gov/masshealth-provider-bulletins) web page.

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## Questions

If you have questions about the information in this bulletin, please contact the Long Term Services and Supports (LTSS) Provider Service Center.

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