




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

MassHealth
Day Habilitation Program Bulletin 26
April 2023

TO: Day Habilitation Providers Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth 

RE: **COVID-19 Flexibilities Expiring after the End of the Federal Public Health Emergency**

Background

On January 31, 2020, the United States Secretary of Health and Human Services determined that a nationwide public health emergency had existed since January 27, 2020. The Secretary renewed the Federal Public Health Emergency (FPHE) on April 21, 2020, July 23, 2020, October 2, 2020, January 7, 2021, April 15, 2021, July 19, 2021, and October 13, 2022. On January 30, 2023, the Secretary announced that the FPHE will end on May 11, 2023.

Due to the decision by the Secretary to end the FPHE, MassHealth is issuing this bulletin, effective May 12, 2023. It will replace all prior FPHE-related bulletins, specifically Day Habilitation (DH) Program Bulletins 21 and 22.

Introduction

This bulletin communicates DH provider requirements that were suspended during the FPHE and that will be enforced after the FPHE ends. It applies to members receiving DH services on a fee-for-service basis, including members enrolled in the Primary Care Clinician (PCC) Plan who are receiving MassHealth-covered DH services.

Flexibilities Ending May 11, 2023

Service Provision Outside the DH Provider's Site

Effective May 12, 2023, DH providers must return to traditional center-based DH services as outlined in 130 CMR 419.000. Services may not be provided remotely, neither outside nor inside the member's home.

DH providers must return to service delivery at the approved physical DH site location as described in 130 CMR 419.432.

Amended Day Habilitation Service Plans (DHSPs) for remote DH services must be adjusted to goals or objectives that focus on in-person programming and skill development.

Members not returning to the congregate setting on or after May 12, 2023, must be surveyed to determine if discharge planning is indicated. If so, the provider must proceed with discharge planning, ensuring that necessary services are aligned to meet the member's needs. If the member indicates the desire to return to DH, the provider must continue to maintain the member on the daily attendance roster and continue to complete all necessary documentation as required, noting that the member remains on a leave of absence, whether personal or medical, in accordance with 130 CMR 419.416(B).

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Staffing Requirements

DH providers must adhere to the staffing requirement in the MassHealth DH provider regulations at 130 CMR 419.416(C).

Admissions, Discharges, and Transfers

All admissions evaluations that the provider intends to bill MassHealth for must occur at the physical DH site.

For all admissions to the program, the DH must acquire a report of the member's most recent annual physical examination or wellness visit in accordance with 419.416(B)(1)(a)6.

DH providers readmitting a member who was discharged during the FPHE must treat the member as a new admission and ensure that all documentation requirements in 130 CMR 419.416(B) and 130 CMR 419.419 are adhered to.

DH providers transferring a member to another site must treat the member as a new admission and ensure that all documentation requirements in 130 CMR 419.416(B) and 130 CMR 419.419 are adhered to.

Documentation

Effective May 12, 2023, semi-annual reviews must return to including the interdisciplinary team (IDT) as noted in 130 CMR 419.419(C)(3).

All Service Needs Assessments (SNAs) and DH Leveling Tools must include the IDT in accordance with 130 CMR 419.407.

COVID-19 MassHealth Reporting

Effective May 12, 2023, DH providers are no longer required to report positive COVID-19 cases at their sites via the online reporting tool, to call the Epidemiology line, or to inform their local board of health. Bi-Weekly Utilization Reporting was phased out in October 2022.

MassHealth Website

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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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