




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

MassHealth
Durable Medical Equipment Bulletin 32
April 2023

TO: Durable Medical Equipment Providers Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth 

RE: **COVID-19 Flexibilities 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; and July 19, 2021. 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 Durable Medical Equipment (DME) Bulletins 25 and 26.

Introduction

This bulletin communicates provider requirements that were suspended during the FPHE and that will be enforced after the FPHE ends. This bulletin also communicates changes in requirements implemented during the FPHE that will continue past the end of the FPHE and confirms an update to the types of non-physician practitioners that may prescribe DME.

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

Flexibilities Ending May 11, 2023

Prior Authorization Extensions

Through May 11, 2023, DME providers may request to continue an existing prior authorization (PA). The provider must email the extension request to support@masshealthtss.com before the end date of the existing PA. These extension requests must have the following note in the comments field: "COVID-19." MassHealth will approve an extension for up to 90 days.

Beginning May 12, 2023, there will not be a flexibility for PA Extensions. MassHealth encourages providers to submit PAs up to 21 days before to the expiration of an existing PA to prevent a lapse in the member's services. See 130 CMR 409.405 and 130 CMR 409.418. All documentation, recordkeeping, and other applicable provisions of 130 CMR 450.000 and 130 CMR 409.000 apply.

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Delivery of Up to a 90-day Supply of DME or Medical Supplies

Through May 11, 2023, despite those sections of the online tool that prohibit DME providers from delivering more than a 30-day supply of DME or supplies, providers may deliver up to a 90-day supply upon the member's documented request. Providers must clearly document in the member's chart that the member requested the 60- or 90-day supply and that the delivery was related to COVID-19. Providers must also include the dates of service (DOS) and the period covered by each 60- or 90-day delivery in the member's chart and with the claims.

Beginning May 12, 2023, there will not be a flexibility for delivery of more than a 30-day supply. Monthly supplies can only be delivered and billed every month as instructed in the [MassHealth DME & Oxygen Payment and Coverage Guideline Tool](#).

Continued Delivery of DME and Supplies Not Subject to PA with Expired Prescriptions

Through May 11, 2023, for continuity of care, MassHealth is allowing continued delivery of equipment and supplies that do not require PA but have written prescriptions that expire during the COVID-19 emergency. Specifically, DME providers may continue delivery for 90 days after the prescription expires or until the end of the FPHE, whichever is later. This applies only if a verbal prescription is documented. For items and supplies rented or delivered under expired prescriptions, providers must document oral COVID-19 prescription extensions in the member's record and on claim submissions. Providers must also obtain and document a new oral prescription within each 90-day extension.

Beginning May 12, 2023, there will not be a flexibility for delivery of DME and supplies not subject to PA under an expired prescription.

MassHealth reminds providers that a prescription, Letter of Medical Necessity (LOMN), or a combination of a prescription and LOMN, must be in writing, signed by the ordering practitioner, and dated before the date the claim is submitted to MassHealth. See 130 CMR 409.416, 130 CMR 409.405, 130 CMR 409.419, and DME Provider Bulletin 31. All documentation, recordkeeping, and other applicable provisions of 130 CMR 450.000 and 130 CMR 409.000 apply.

Member or Member's Designee Signature on Delivery Ticket

Through May 11, 2023, and despite the requirements of 130 CMR 409.419(A), DME providers do not have to ask the member or the member's designee to sign a delivery slip when delivering DME and supplies to the member's home. Providers must document the date and include the following on the delivery slip: "Signature not required related to COVID-19."

Beginning May 12, 2023, there will not be a flexibility for delivery ticket signature.

Providers are reminded that, except as provided in 130 CMR 409.419(D), the DME provider must maintain in the member's record a copy of the delivery slip signed by the member or the member's designee accepting the delivery on behalf of the member and dated at the time of delivery. See 130 CMR 409.419. All documentation, recordkeeping, and other applicable provisions of 130 CMR 450.000 and 130 CMR 409.000 apply.

Streamlined PA Requirements for DME and Supplies

Through May 11, 2023, MassHealth lifted the requirement in 130 CMR 409.418 that providers had to obtain PA before delivering DME and supplies. While PA is not required before delivery during the COVID-19 emergency, providers must continue to submit the required documentation for PA requests and obtain PA for all services that require PA. See MassHealth provider regulations at 130 CMR 409.000 and 130 CMR 450.000, and as specified in the online tool at www.mass.gov/info-details/masshealth-payment-and-coverage-guideline-tools. MassHealth will streamline the review of documentation needed for processing PAs (for example, manufacturer invoices) and issue PA approval notices based on provided documentation.

Instructions for billing

Providers must submit for and obtain PA for all items subject to PA before submitting a claim for payment; otherwise, the claim will be denied. The requested start date on the PA should be on or before the date of delivery. This change was effective for dates of delivery on or after March 31, 2020.

Streamlined PA requirements DO NOT apply to the following:

- Mobility devices (including but not limited to, manual wheelchairs, power wheelchairs, and accessories)
- Chest wall oscillation/vest
- Alternative augmentative communication devices

Beginning May 12, 2023, the flexibility for streamlined PA ends. MassHealth will require providers to submit for PA before the delivery of DME and supplies when PA is required for all services identified as subject to PA in the [MassHealth DME & Oxygen Payment and Coverage Guideline Tool](#). See 130 CMR 409.418. All documentation, recordkeeping, and other applicable provisions of 130 CMR 450.000 and 130 CMR 409.000 apply.

Federal Policy Change that will Remain in Effect after May 11, 2023

Providers Qualified to Order Services

According to a change in federal law implemented via the Coronavirus Aid, Relief, and Economic Security (CARES) Act, and codified at 42 CFR 440.70, MassHealth now allows other medical practitioners to prescribe DME services and write letters of medical necessity. According to the CARES Act and, consistent with 42 CFR 440.70 and 130 CMR 409.402, in addition to physicians, nurse practitioners, and physician assistants, clinical nurse specialists may also prescribe DME services and write letters of medical necessity.

MassHealth's current regulations align with the CARES Act. See 130 CMR 409.402: *Definitions* and 130 CMR 409.416: *Requirements for Prescriptions or Letters of Medical Necessity Completed by the Ordering Practitioner*.

Flexibilities Continuing on May 12, 2023

Telehealth for DME Face-to-face Requirement

Federal regulations require that, for certain DME services, physicians or certain authorized nonphysician practitioners must document a face-to-face meeting with the Medicaid-eligible beneficiary. See 42 CFR 440.70. Through the end of the FPHE, and as described in 42 CFR 440.70

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(f) (6), any required face-to-face meeting may be delivered via telehealth (including telephone and live video) according to the standards in All Provider Bulletin 314.

This is consistent with Centers for Medicare & Medicaid Services (CMS) Interim Final Rules with Comment Period (CMS-1744-IFC (April 6, 2020) and CMS-5531-IFC (May 8, 2020) which provide that the face-to-face meeting requirement does not apply for DME for the duration of the COVID-19 emergency, except for power mobility devices (PMDs) with a statutory requirement for a face-to-face meeting. For those PMDs, a telehealth face-to-face meeting may satisfy the requirement. See CMS COVID-19 [Frequently Asked Questions on Medicare Fee-for-Service Billing Question AA](#).

On May 12, 2023, consistent with 42 CFR 440.70, providers may use telehealth for face-to-face meetings. Providers must follow the federal DME Face-to-Face Requirements identified in 42 CFR 440.70 and maintain the required documentation in the member's record. See 130 CMR 409.430(C) and DME Bulletin 26. All documentation, recordkeeping, and other applicable provisions of 130 CMR 450.000 and 130 CMR 409.000 apply.

DME Provider Bulletins 28 through 31 Remain in Effect

After the FPHE, DME Bulletins 28 through 31 will remain in effect. In particular, the absorbent product PA extension described in DME Bulletin 28 is NOT replaced by this bulletin.

MassHealth Website

This bulletin is on the [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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