

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

> MassHealth HCBS Waiver Provider Bulletin 19 March 2022

- **TO**: Acquired Brain Injury (ABI) and Moving Forward Plan (MFP) Waiver Providers Participating in MassHealth
- FROM: Amanda Cassel Kraft, Assistant Secretary for MassHealth Amadu (alter
- RE: Spending and Reporting Requirements for Certain Home-and Community-Based Services Related to Section 9817 of the American Rescue Plan Act

Introduction

The Executive Office of Health and Human Services (EOHHS) established enhanced rates for certain home and community-based services (HCBS), including MassHealth-covered ABI and MFP waiver services, under 101 CMR 447.00: *Rates for Certain Home-and Community-based Services Related to Section 9817 of the American Rescue Plan Act* for dates of service beginning July 1, 2021, through June 30, 2022.

This bulletin provides updated provider attestation and reporting requirements for use of the funds associated with the temporary rate increase established under 101 CMR 447.00. The updated provider attestation and spending report requirements described below supersede and replace the provider attestation and spending report requirements set forth in <u>HCBS Waiver Provider Bulletins 12 and 16</u>.

All rates, billing instructions, and allowable uses set forth in <u>HCBS Waiver Provider Bulletin 12</u> remain in effect for MassHealth-covered ABI and MFP Waiver services for dates of service beginning July 1, 2021, through December 31, 2021, and in <u>HCBS Waiver Provider Bulletin 16</u> for MassHealth-covered ABI and MFP Waiver services for dates and service beginning January 1, 2022, through June 30, 2022.

Provider Attestation and Spending Report

As a condition of receipt of these additional funds, eligible provider agencies must complete an attestation assuring EOHHS that they will use at least 90% of the workforce development rate addon for HCBS workforce development and submit a spending report to EOHHS that accounts for how the enhanced funds were used.

All funds must be expended by September 30, 2022, for services billed during the rate enhancement period. Providers will be required to submit a final spending report no later than December 31, 2022. The final report will account for funds related to the full enhancement period of July 1, 2021, through June 30, 2022. Upon submission of the report, providers will also be required to submit an attestation form, attesting to allowable use of the funds associated with the rate enhancements.

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EOHHS guidance about the provider attestation and spending report requirements is located at <u>www.mass.gov/info-details/strengthening-home-and-community-based-services-and-behavioral-health-services-using-american-rescue-plan-arp-funding</u>. Providers are encouraged to check this site regularly for updated information.

Failure to Submit an Attestation or Spending Report

Providers may be subject to sanction for failure to submit an attestation form and/or spending report in accordance with EOHHS guidance above, and pursuant to 130 CMR 450.238: *Sanctions: General* and 130 CMR 450.239: *Sanctions: Calculation of Administrative Fine.*

MassHealth Website

This bulletin is available on the MassHealth Provider Bulletins web page.

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Questions

Providers may submit questions related to the enhanced funding and other questions about this bulletin to <u>ARPAMedicaidHCBS@mass.gov</u>.

The University of Massachusetts Medical School Disability and Community Services HCBS Provider Network Administration Unit is also open 9 a.m. to 5 p.m. ET, Monday through Friday, excluding holidays. ABI and MFP waiver providers may direct questions about this bulletin or other ABI and MFP waiver provider questions to the Disability and Community Services HCBS Provider Network Administration Unit, as follows:

Phone: Toll free (855) 300-7058

Email: ProviderNetwork@umassmed.edu