***Commonwealth of Massachusetts***

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

***Office of Medicaid***

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MassHealth

# Home Health Agency Bulletin 71

January 2022

**TO**: Home Health Agencies Participating in MassHealth

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

RE: Extension of Rate Increases 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 Home Health Agency (HHA) services and Continuous Skilled Nursing (CSN) services provided by a home health agency, 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 December 31, 2021.

### EOHHS is extending enhanced rates for HHA services through June 30, 2022. This bulletin sets forth the extension of these enhanced rates and billing instructions in effect for MassHealth-covered HHA services provided by a HHA agency for dates of service beginning January 1, 2022, through June 30, 2022, and provides additional information about the required provider attestation and reporting requirements regarding use of the funds associated with the add-on for workforce development established under 101 CMR 447.00.

## Enhanced HHA Rates and Billing Instructions for Dates of Service from January 1, 2022, through June 30, 2022

### Enhanced Rates

To promote workforce development and strengthen the HCBS workforce during the continued federal public health emergency, rates for the following services were established in 101 CMR 447.00 at an amount 10% higher than the existing rates for these services as established in 101 CMR 350.00: *Rates for Home Health Services* for dates of services beginning July 1, 2021, through December 31, 2021. With this extension, the following rates will remain in effect through June 30, 2022.

*Enhanced rates for Intermittent Home Health Services provided by HHA:*

| **Service Description** | **Code** | **Unit** | **Rate** | **Add-on** | **Total** |
| --- | --- | --- | --- | --- | --- |
| Services of an RN in home health setting (one through 30 calendar days) | G0299 | Per visit | $89.21 | $8.92 | $98.13 |
| Services of an LPN in home health setting (one through 30 calendar days) | G0300 | Per visit | $89.21 | $8.92 | $98.13 |
| Services of an RN in home health setting (31+ calendar days) | G0299 UD | Per visit | $72.30 | $7.23 | $79.53 |
| Services of an LPN in home health setting (31+ calendar days) | G0300 UD | Per visit | $72.30 | $7.23 | $79.53 |
| Administration of oral, intramuscular, and/or subcutaneous medication by health care agency/professional per visit (RN or LPN) (Use only for Medication Administration visit.) | T1502 | Per visit | $59.14 | $5.91 | $65.05 |
| Administration of medication other than oral, intramuscular, and/or subcutaneous medication by health care agency/professional per visit (RN or LPN) (Use only for Medication Administration visit.) | T1503 | Per visit | $59.14 | $5.91 | $65.05 |
| Office services provided on an emergency basis | 99058 | Per visit | $28.99 | $2.90 | $31.89 |
| Services of Physical Therapist in the home health setting | G0151 | Per visit | $71.64 | $7.16 | $78.80 |
| Services of Occupational Therapist in the home health setting | G0152 | Per visit | $74.68 | $7.47 | $82.15 |
| Services of Speech/Language Therapist in the home health setting | G0153 | Per visit | $76.44 | $7.64 | $84.08 |
| Services of Home Health Aide in the home health setting\* | G0156 | Per 15 minutes | $6.73 | $0.67 | $7.40 |
| Services of Home Health Aide in the home health setting for ADL support\* | G0156 UD | Per 15 minutes | $6.73 | $0.67 | $7.40 |
| Services of an RN for the observation and assessment of the patient's condition provided every 60 days to members utilizing home health aide services for ADL support | G0493 | Per visit | $89.21 | $8.92 | $98.13 |
| Nursing care visit for temporary emergency PCA services (RN; per visit) | G0299 U3 | Per visit | $89.21 | $8.92 | $98.13 |
| Nursing care visit for temporary emergency PCA services (LPN; per visit) | G0300 U3 | Per visit | $89.21 | $8.92 | $98.13 |
| PCA services performed by a home health aide\* | 99509 | Per 15 minutes | $6.73 | $0.67 | $7.40 |

\*Please see section *101 CMR 449.00: Rates for Certain Home- and Community-based Services Related to Workforce Development* below for current home health aide rates.

### Service Provision

All HHA services receiving enhanced funding must be delivered in accordance with all applicable program requirements and regulations as set forth in 130 CMR 403.000: *Home Health Agency.*

### Administrative and Billing Requirements

All existing provider billing processes will remain in effect during the period of enhanced funding, beginning July 2021 through December 2021, and through the extension period beginning January 1, 2022, through June 30, 2022. Providers must submit claims according to the policies and procedures set forth in applicable administrative and billing regulations and supporting guidance.

## 101 CMR 449.00: Rates for Certain Home- and Community-based Services Related to Workforce

EOHHS promulgated emergency regulation 101 CMR 449.00: *Rates for Certain Home-and-Community-based Services Related to Workforce* to effectuate the FY2022 state budget language at Section 2, line item 9110-1635 that requires EOHHS to provide a rate add-on of $2.68 per hour (or $0.67 per 15 minute unit) for home health aide services. [See Home Health Bulletin 70: *FY22 General Appropriations Act Home Health Aide Rate Increases and Reporting Requirements*](https://www.mass.gov/lists/masshealth-provider-bulletins-by-provider-type-d-h#home-health-agency-), which sets forth the reporting requirements for this additional add-on amount.

The home health aide rates effective for dates of service January 1, 2022, through June 30, 2022, inclusive of both the 10% rate increase provided pursuant to Section 9817 of the American Rescue Plan Act and the additional add-on amount provided under the FY2022 state budget may be found in 101 CMR 449.00 and below.

| **Code** | **Unit** | **Rate** | **Per Unit Rate Add-On** | **Total Rate** |
| --- | --- | --- | --- | --- |
| G0156 | Per 15 minutes | $7.40 | $0.89 | $8.29 |
| G0156 UD | Per 15 minutes | $7.40 | $0.89 | $8.29 |
| 99509 | Per 15 minutes | $7.40 | $0.89 | $8.29 |

## HHA and CSN Agency Rates for Dates of Service on or after July 1, 2022

For dates of service on or after July 1, 2022, MassHealth will pay providers for HHA agency services at the rates established under 101 CMR 350.00.

## Allowable Uses of Enhanced Funding

Providers are required to use at least 90% of enhanced funds for the specific purposes of recruiting, building, and retaining their direct care and support workforce.

EOHHS guidance about allowable uses of the enhanced funding, including eligible direct care and support staff and categories of compensation, is available at [www.mass.gov/doc/for-masshealth-providers-home-and-community-based-service-enhanced-rate-add-ons-using-american-rescue-plan-act-arpa-funding/download.](http://www.mass.gov/doc/for-masshealth-providers-home-and-community-based-service-enhanced-rate-add-ons-using-american-rescue-plan-act-arpa-funding/download)

## 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 funds for HCBS workforce development and submit a spending report to EOHHS that accounts for how the enhanced funds were used.

Providers will first be required to submit an interim spending report no later than July 31, 2022, to report on funds spent in the first enhancement period (July 1, 2021, - December 31, 2021). A final spending report will be due September 30, 2022, and must account for funds spent in the extension period (January 1, 2022, - June 30, 2022).

EOHHS guidance about the provider attestation and spending report requirements will be provided in January 2022 at [www.mass.gov/info-details/strengthening-home-and-community-based-services-and-behavioral-health-services-using-american-rescue-plan-arp-funding](https://www.mass.gov/info-details/strengthening-home-and-community-based-services-and-behavioral-health-services-using-american-rescue-plan-arp-funding). 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 the 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](http://www.mass.gov/masshealth-provider-bulletins) web page.

[Sign up](https://www.mass.gov/forms/email-notifications-for-masshealth-provider-bulletins-and-transmittal-letters) to receive email alerts when MassHealth issues new bulletins and transmittal letters.

## Questions

Providers may submit questions related to the enhanced funding and other questions related to this bulletin to [ARPAMedicaidHCBS@mass.gov](mailto:ARPAMedicaidHCBS@mass.gov).

The MassHealth LTSS Provider Service Center is also open from 8 a.m. to 6 p.m. ET, Monday through Friday, excluding holidays. LTSS Providers should direct their questions about this letter or other MassHealth LTSS Provider questions to the LTSS Third Party Administrator (TPA) as follows:

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| --- | --- |
| **Phone:** | Toll free (844) 368-5184 |
| **Email:** | [support@masshealthltss.com](mailto:support@masshealthltss.com) |
| **Portal:** | [www.MassHealthLTSS.com](http://www.MassHealthLTSS.com) |
| **Mail:** | MassHealth LTSS  PO Box 159108  Boston, MA 02215 |
| **Fax:** | (888) 832-3006 |