

## Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid

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MassHealth Hospice Bulletin 15 October 2020

**TO**: Hospice Providers Participating in MassHealth

FROM: Dan Tsai, Assistant Secretary for MassHealth

RE: Hospice Election Requirements for Dual-Eligible Members and MassHealth

**Hospice Election Form Update** 

#### Introduction

This bulletin communicates a reminder to hospice providers who deliver services to dual-eligible MassHealth members to ensure such members elect or revoke the hospice benefit simultaneously through Medicare and MassHealth.

Pursuant to Medicare Benefit Policy Manual Chapter 9, Section 20.3 and State Medicaid Manual Chapter 4, Section 4305.3, dual-eligible members are required to elect or revoke the hospice benefit simultaneously under both Medicare and MassHealth.

# Submission of the MassHealth Hospice Election Form for Dual-Eligible Members

Hospice providers must complete and submit the MassHealth Hospice Election Form for all dualeligible members served by the hospice provider, in accordance with all requirements set forth in 130 CMR 437.412, to ensure that dual-eligible members elect or revoke their MassHealth Hospice benefit at the same time that they elect or revoke their Medicare Hospice benefit.

# **MassHealth Hospice Election Form Update**

MassHealth has updated the MassHealth Hospice Election Form, which replaces all previous versions of the MassHealth Hospice Election Form. Hospice providers will have 30 days following the effective date of this bulletin (October 29, 2020) to implement the updated MassHealth Hospice Election Form.

Any submission using previous versions of the MassHealth Hospice Election Form following the implementation date will not be processed.

The MassHealth Hospice Election Form can be accessed at: <u>MassHealth Provider Forms by</u> Provider Type H-M. Select "Hospice" from the menu.

# Failure to Submit the MassHealth Hospice Election Form

In accordance with 130 CMR 437.412, hospice providers are required to complete and submit the MassHealth Hospice Election Form for all MassHealth members served by the hospice provider. This includes dual-eligible members served by the hospice provider under a member's Medicare benefit. Failure to complete and submit the MassHealth Hospice Election Form for any MassHealth member served by the hospice provider, including a dual-eligible member being served by the

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hospice provider under the member's Medicare benefit, may result in overpayments pursuant to 130 CMR 450.235 and/or the imposition of sanctions pursuant to 130 CMR 450.238 – 450.240.

## **MassHealth Website**

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

To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to <u>join-masshealth-provider-pubs@listserv.state.ma.us</u>. No text in the body or subject line is needed.

### **Questions**

For questions about this Hospice Bulletin, contact the MassHealth Long Term Services and Supports (LTSS) Provider Service Center. The MassHealth LTSS Provider Service Center is open from 8:00 a.m. to 6:00 p.m. ET, Monday through Friday, excluding holidays. LTSS providers should direct their questions about this bulletin or other MassHealth LTSS provider questions to the LTSS Third Party Administrator (TPA) as follows;

Method	Contact Information for MassHealth LTSS Provider Service Center
Phone	Toll-free <b>(844) 368-5184</b>
Email	support@masshealthltss.com
Portal	MassHealth LTSS
Mail	MassHealth LTSS PO Box 159108 Boston, MA 02215
Fax	(888) 832-3006
LTSS Provider Portal	Trainings, general information, and future enhancements will be available at <a href="https://www.MassHealthLTSS.com">www.MassHealthLTSS.com</a> .