

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

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MassHealth Hospice Bulletin 18 March 2021

TO: Hospice Providers Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth

RE: COVID-19 Related Administrative Flexibilities for Hospice Providers -

Extension

Introduction

In light of the March 10, 2020, Declaration of State of Emergency within the Commonwealth due to the 2019 novel Coronavirus (COVID-19) outbreak, MassHealth authorized certain COVID-19 related administrative flexibilities to long-term services and supports (LTSS) providers. These flexibilities were communicated in a guidance document titled MassHealth LTSS Provider Information: Updates Related to the Coronavirus Disease 2019 (COVID-19) (hereinafter referred to as the 'MassHealth COVID-19 LTSS Flexibilities document'). MassHealth subsequently replaced this guidance with Hospice Bulletin 17.

The purpose of this bulletin, which supersedes Hospice Bulletin 17, is to update MassHealth's COVID-19 related flexibilities for providers of MassHealth covered hospice services, and with the goal of helping to ensure members retain access to appropriate hospice services, promote social distancing, and mitigate the spread of COVID-19. The guidance in this bulletin replaces all previously issued guidance for MassHealth hospice providers described in Hospice Bulletin 17 and in the MassHealth COVID-19 LTSS Flexibilities document.

This bulletin applies to members receiving hospice services on a fee-for-service basis, including members enrolled in the Primary Care Clinician (PCC) plan who are receiving MassHealth covered hospice services.

This bulletin describes COVID-19 related flexibilities for MassHealth providers of hospice services that will remain in effect until the end of the federal Public Health Emergency (PHE).

Flexibilities Effective Until the End of the Federal PHE

Timeframe on Initial Certification of Terminal Illness

Through the end of the federally declared PHE, if a member's physician is unable to complete and submit to the hospice agency provider written certification of terminal illness for a member's initial 90-day certification period within two calendar days after the beginning of hospice services, as required by 130 CMR 437.411(A), the hospice provider may acquire an oral certification within two calendar days and the written certification before the hospice provider submits a claim for payment to MassHealth.

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Contracted Staff

Through the end of the federally declared PHE, MassHealth is temporarily waiving certain provisions of 130 CMR 437.421(D) in order to allow hospice providers to arrange for the provision of routine nursing services, medical social services, and counseling services specified in 130 CMR 437.000: *Hospice Services* on a contract basis to supplement hospice employees in order to meet members' needs under extraordinary or other non-routine circumstances, as defined in 42 CFR 418.64. If contracting is used, the hospice must continue to maintain professional, financial, and administrative responsibility for the services in accordance with current regulations and policy.

Hospice Aide Supervision Requirements

Through the end of the federally declared PHE, hospice providers may temporarily perform the hospice aide supervisory visits conducted by a registered nurse pursuant to 130 CMR 437.423(F) via telehealth (including telephone and/or live video) in accordance with the standards in All Provider Bulletin 314. Additionally, MassHealth is expanding the timeframe for hospice aide supervisory visits set out in in 130 CMR 437.423(F) from every two weeks to every 30 days.

Volunteer Services

Through the end of the federally declared PHE, in accordance with the federal waiver of the requirement at 42 CFR § 418.78(e) that hospices are required to use volunteers (including at least 5% of patient care hours), MassHealth is permitting hospice agencies to suspend the use of volunteers required under 130 CMR 437.421(E)(1).

Expanded Timeframe for Updates to the Comprehensive Assessment

Through the end of the federally declared PHE, in accordance with the federal waiver of certain requirements of 42 CFR § 418.54(d), MassHealth is modifying certain requirements related to updates of the comprehensive assessments of members. Hospices must continue to complete the required comprehensive assessments and updates, including corresponding review and revision of the plan of care. However, the timeframes for updating the assessment and completing the plan of care review, as set forth in 130 CMR 437.422(C), may be extended from 15 to 21 days.

Waiver of Certain Non-Core Hospice Service Delivery

Through the end of the federally declared PHE, in accordance with the federal waiver of the requirements at 42 CFR § 418.72 for hospices to provide physical therapy, occupational therapy, and speech-language pathology, MassHealth is temporarily suspending the requirement in 130 CMR 437.423(E) for hospices to provide physical therapy, occupational therapy, and speech-language pathology.

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.

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Questions

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

Contact Information for MassHealth LTSS Provider Service Center

Phone: Toll-free (844) 368-5184

Email: support@masshealthltss.com

Portal: MassHealthLTSS

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 www.MassHealthLTSS.com.