




**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)

**MassHealth**  
**Independent Nurses Bulletin 2**  
**March 2021**

**TO:** Independent Nurse Providers Participating in MassHealth

**FROM:** Daniel Tsai, Assistant Secretary for MassHealth 

**RE: COVID-19 Related Administrative Flexibilities for Independent Nurses including Telehealth - 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 Independent Nurses (IN) Bulletin 1.

The purpose of this bulletin, which supersedes IN Bulletin 1, is to update MassHealth's COVID-19 related flexibilities for MassHealth independent nurses providing continuous skilled nursing (CSN) services, including telehealth, and with the goal of helping to ensure members retain access to appropriate CSN services, promote social distancing, and mitigate the spread of COVID-19. The guidance in this bulletin replaces all previously issued guidance for MassHealth IN providers in IN Bulletin 1 and in the MassHealth COVID-19 LTSS Flexibilities document.

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

This bulletin describes COVID-19 related flexibilities for MassHealth independent nurses for the following effective periods.

- a. Flexibilities effective until the end of the federal Public Health Emergency (PHE); and
- b. Flexibilities effective for 90 days beyond the final date of the Governor's Declaration of a State of Emergency due to COVID-19.

### **Flexibilities Effective Until the End of the Federal PHE**

#### **Temporary Change to Overtime Requirements**

Through the end of the federally declared PHE, notwithstanding the requirement at 130 CMR 414.416(A)(3), INs do not need to contact a minimum of two other CSN providers in attempts to find other nurses to fill CSN hours that exceed 40 hours for a complex care member. If an IN

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provides services that are otherwise in accordance with 130 CMR 414.416, MassHealth will provide an authorization for the overtime rate for up to 90 consecutive days, notwithstanding any durational limitations in the regulation, following review and approval by MassHealth.

**Timeframe to Acquire Signatures on Plans of Care**

Through the end of the federally declared PHE, IN providers have additional time to obtain a member's signed plan of care. The IN may obtain the signed plan of care either before the first claims submission or within 60 days from the first claims submission, as long as the requirements outlined in 130 CMR 414.420 are met. This effectively extends the physician signature or allowable non-physician signature timeframe from 30 days to 60 days, as temporarily allowed by MassHealth.

**Temporary Change to Limit of Hours**

Through the end of the federally declared PHE, MassHealth is temporarily expanding the maximum limit of hours described in 130 CMR 414.409(C) from 60 hours provided in a consecutive seven-day period to 80 hours in a consecutive seven-day period; and from 12 hours in a consecutive 24-hour period to 16 hours in a consecutive 24-hour period. All requests to temporarily increase the frequency of continuous skilled nursing service delivery must be authorized by MassHealth or its designee.

**Availability of Caregivers**

Through the end of the federally declared PHE, if, as determined by the IN, a member's family member or primary caregiver who is providing care to the member pursuant to 130 CMR 403.414(I), is unable to continue to provide care due to COVID-19, the independent nurse may request from MassHealth additional CSN services, as applicable, to ensure the member's medical needs continue to be met. These additional CSN services may be authorized for periods of up to 90 days.

**Providers Qualified to Order Services and Establish a Plan of Care**

Through the end of the federally declared public health emergency for COVID-19, CSN services provided by an IN may be directed by a nurse practitioner, clinical nurse specialist, and/or physician assistant. Pursuant to this change in addition to physicians, a nurse practitioner, clinical nurse specialist, or a physician assistant may: (1) order CSN services; (2) establish and periodically review a member's plan of care for CSN services (e.g., sign the plan of care), and (3) certify and re-certify the members plan of care.

**Flexibilities Effective for 90 Days Beyond the Final Date of the Governor's Declaration of a State of Emergency due to COVID-19**

**IN Telehealth Guidance**

MassHealth independent nurses may deliver consultative CSN services that are clinically appropriate, medically necessary MassHealth-covered CSN services to MassHealth members via telehealth (including telephone and live video), in accordance with the standards in this bulletin and notwithstanding any regulation to the contrary, including physical presence requirements in 130 CMR 414.000: *Independent Nurse* and must meet all requirements under the MassHealth Medical Necessity Guidelines.

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MassHealth is not imposing specific requirements for technologies used to deliver services via telehealth and will allow reimbursement for consultative MassHealth CSN services delivered through telehealth, as long as such services are medically necessary and clinically appropriate and comply with the guidelines in this bulletin. Providers are encouraged to use appropriate technologies to communicate with individuals and should, to the extent feasible, ensure the same rights to confidentiality and security as provided in face-to-face services. Providers must inform members of any relevant privacy considerations.

CSN telehealth visits may be used for CSN services that

- a. are consultative services;
- b. are not hands on care; and,
- c. the member has provided consent for.

CSN telehealth visits may not be used for

- a. any non-consultative CSN service;
- b. any hands-on care; and,
- c. services the member has not provided consent for.

**Member Consent**

Providers must obtain verbal consent from a member, and the member's caregiver/legal guardian if applicable, prior to the initiation of consultative CSN services via telehealth. Providers must also document the consent in the member's record.

In obtaining the member's consent, MassHealth home health agencies must provide the member with the following information about telehealth:

A statement explaining

- a. what a telehealth visit entails;
- b. what is expected from the member as well as the IN; and
- c. any relevant privacy considerations; and that the member may revoke their consent for telehealth services at any time.

**Billing Instructions and Payment Rates for CSN Services Delivered via Telehealth**

Rates of payment for continuous CSN delivered via telehealth will be the same as rates of payment for CSN services delivered via traditional (e.g., in-person) methods set forth in [101 CMR 361.00: Rates for Continuous Skilled Nursing Services](#).

INs should not include the modifier GT when submitting claims for CSN services delivered through telehealth.

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**Documentation of CSN Services Delivered via Telehealth Services and Encounter Requirements**

All documentation requirements of [130 CMR 414.000: \*Independent Nurse\*](#) apply when services are delivered via telehealth and the documentation must also include the following:

- a. Indication in the visit note that the service was provided via telehealth;
- b. Description in the visit note of the rationale for service via telehealth.

**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 [join-masshealth-provider-pubs@listserv.state.ma.us](mailto:join-masshealth-provider-pubs@listserv.state.ma.us). No text in the body or subject line is needed.

**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@masshealthtss.com](mailto:support@masshealthtss.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](http://www.MassHealthLTSS.com).