



The Commonwealth of Massachusetts
 Executive Office of Health and Human Services
 Office of Medicaid, Health Safety Net
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www.mass.gov/eohhs

June 2021 Billing Updates

Health Safety Net (HSN) Temporary

HSN Temporary is provided for certain recipients that are eligible for a Connector Care plan, but also meet the eligibility criteria for HSN. This benefit is intended to provide temporary HSN medical coverage as recipients have up to 90 days to select a Connector Care plan. HSN temporary recipients are provided up to 90 days medical coverage and after 90 days provided dental service coverage only through the HSN.

Due to the state's public health emergency, the Commonwealth continued to provide medical coverage for HSN Temporary recipients through the duration of the COVID epidemic. Beginning in June 2021, the Commonwealth will begin removing HSN medical coverage for these recipients who were provided extended medical coverage due to the state's public health emergency. Over the next two months, recipients who received extended medical coverage through HSN Temporary will see their benefits reduced to dental services only. HSN Temporary recipients will have the following restrictive messages appear in EVS.

EVS Generated Message #	Restrictive Message Text
1509	Temporary Full HSN medical and dental are available. Member Eligible for ConnectorCare
1527	Temporary Partial HSN medical and dental are available. Member Eligible for ConnectorCare.

Providers are strongly encouraged to always verify member's coverage prior to the delivery of services.



HSN 837 Partial Claims – Reporting Patient Deductible

Due to the conclusion of state's public health emergency, effective for dates of service beginning June 15, 2021, HSN is reinstating the HSN Partial requirement at 101 CMR 613.08(3)(C). Providers are responsible for collecting and reporting deductibles for HSN Partial patients. Providers should resume reporting partial deductibles effective for dates of service beginning June 15, 2021, as follows.

- 837I Partial Deductible Institutional claims:
 - providers should resume reporting the HSN Partial Deductible amount(s) by using Value Code D3.
- 837P Partial Deductible Professional claims:
 - the remaining HSN Partial Deductible Amount must be coded with a prefix of "MAHSN" and must be followed by a terms discount value of "20" or "100."
 - 20 = Partial deductible amount still due.
 - 100 = Partial deductible amount has been met.

Patient Paid Amounts should be reported using the Amount segment with Qualifier F5.

COVID-19 Administrative Bulletin

Providers are urged to review Administrative Bulletin-21 for information describing HSN Service and Reimbursement Policy Flexibilities Related to the 2019 Novel Coronavirus Disease (COVID-19). <https://www.mass.gov/doc/administrative-bulletin-21-15-101-cmr-61300-health-safety-net-eligible-services101-cmr-61400-health-safety-net-payments-and-funding-health-safety-net-service-and-reimbursement-policy-flexibilities-related-to-covid-19-effective-june-15-2021-0/download>

Questions

If you receive an eligibility related question from an impacted HSN Temporary patient, please refer to the Customer Service line at 800 841-2900 (TTY 800 497-4648).

If an HSN provider has any questions about this billing update, please contact the HSN customer service line at 800-609-7232 or HSNHelpdesk@state.ma.us.