



MassHealth
Managed Care Entity Bulletin 78
December 2021

TO: Managed Care Entities Participating in MassHealth

FROM: Amanda Cassel Kraft, Assistant Secretary for MassHealth

RE: Temporary Extension of Flexibilities to Permit Separate Payment for Specimen Collection

Applicable Managed Care Entities and PACE Organizations

- Accountable Care Partnership Plans (ACPPs)
- Managed Care Organizations (MCOs)
- MassHealth's behavioral health vendor
- One Care Plans
- Senior Care Organizations (SCOs)
- Program of All-inclusive Care for the Elderly (PACE) Organizations

Background

Through [All Provider Bulletin 325](#) and its predecessor bulletins and [Managed Care Entity Bulletin 70](#) and its predecessor bulletins, MassHealth implemented numerous flexibilities to allow providers to separately bill and receive payment for COVID-19 specimen collection services and other billable services. By the terms of All Provider Bulletin 325 and Managed Care Entity Bulletin 70, these flexibilities were scheduled to expire on December 31, 2021. Through this bulletin, MassHealth is extending the COVID-19 specimen collection-related flexibilities described in All Provider Bulletin 325 and Managed Care Entity Bulletin 70 through March 31, 2022. Except as provided herein, or in other guidance published by MassHealth, the remainder of All Provider Bulletin 325 and Managed Care Entity Bulletin 70 remain unchanged.

In concert with [All Provider Bulletin 334](#) and through this bulletin, MassHealth is directing managed care entities to institute certain policies related to COVID-19. The entities include Accountable Care Partnership Plans (ACPPs), Managed Care Organizations (MCOs), Senior Care Organizations (SCOs), and One Care plans to the extent described in the following paragraph, including for enrollees who are not dually eligible for MassHealth and Medicare (referred to collectively here as "managed care plans"). Program of All-inclusive Care for the Elderly (PACE) organizations should also follow the guidance in this bulletin as described in the following paragraph.

One Care plans and SCOs should first follow guidance provided by Medicare on these topics for enrollees with Medicare, including billing and coding instructions. SCOs must follow the requirements in this bulletin for Medicaid-only enrollees. PACE organizations should follow all PACE guidance from the Centers for Medicare and Medicaid Services on these topics, and must ensure that their coverage policies include those outlined below.

Temporary Extension of Flexibilities to Permit Separate Payment for Specimen Collection

As described in [Managed Care Entity Bulletins 29, 40, 66, and 70](#), MassHealth implemented numerous flexibilities to allow providers to separately bill and receive payment for COVID-19 specimen collection services, in addition to the other billable services. These requirements are largely restated in [All Provider Bulletin 325](#). MassHealth also extended flexibilities related to specimen collection services in [All Provider Bulletin 334](#), through and including March 31, 2022. PACE organizations must continue to cover COVID-19 specimen collection services and any related services as described in All Provider Bulletin 334 for all PACE participants, through and including March 31, 2022.

Out of Network Access to COVID-19 Testing, Evaluation, and Treatment

As described in [Managed Care Entity Bulletin 29](#), in order to further promote access to COVID-19 related testing, evaluation, and treatment, the Executive Office of Health and Human Services (EOHHS) is requiring managed care plans and PACE organizations to cover outpatient COVID-19 testing, evaluation, and treatment services provided by out-of-network providers for the duration of the COVID-19 emergency. Managed care plans and PACE organizations must also cover follow-up care provided by out-of-network providers when such follow-up care is not available in the managed care plan's or PACE organization's network. When such follow-up care is available in-network, managed care plans and PACE organizations may choose whether to cover such follow-up care provided by out-of-network providers or require out-of-network providers who provide these services to enrollees to subsequently refer the enrollee back to their assigned managed care plans and PACE organizations for follow-up care within the managed care plan's or PACE organization's provider network. In satisfying the above requirements, ACPPs and MCOs must refer to Section 2.20.A.7 of their contracts.

Additional Information

For the latest Massachusetts-specific information, visit www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19.

The latest Centers for Disease Control and Prevention (CDC) guidance for healthcare professionals is available at www.cdc.gov/coronavirus/2019-ncov/hcp/index.html.

MassHealth Website

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Questions

If you have questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988-8974.