



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Office of Medicaid, Health Safety Net  
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**March 2023**

**HSN ALL-BU-5**

### **FY22 Outpatient Hospital Claim Resweep**

HSN identified approximately 535,000 outpatient hospital claims for HSNFY2022 which paid at a lower FY21 rate. HSN is reprocessing these claims in March 2023 they will be included in March 2023 remit files. These remediated claims cumulatively account for approximately \$2.4M in Reimbursable Health Services and will be reflected and adjudicated against the FY22 shortfall calculation.

Provider questions should be directed to the HSN help desk at [hsnhelpdesk@state.ma.us](mailto:hsnhelpdesk@state.ma.us) or 1-800-609-7232.

### **Claim Waiver Requests – MMIS Integration**

Due to the implementation of a new claims database system, any outstanding claims beyond 90 days that your facility has not billed to the HSN must be received by MassHealth no later than **April 30, 2023**. This is to ensure that all claims older than 90 days are adjudicated accordingly prior to the implementation go live date sometime in late 2023. Any claims submitted for processing after the HSN waiver termination will be deny at MMIS for “timely filing”, the same denial facilities currently receive for claims submitted beyond the filing limit.

Please note, once HSN has migrated into MMIS, HSN will follow the same timeline rules as **MassHealth** for billing waivers; HSN will no longer consider any 3-year billing waiver requests.

If you have any questions, please feel free to contact Angela Gizzi, HSN Operations Manager via email at [angela.gizzi@mass.gov](mailto:angela.gizzi@mass.gov).



## **Updated Portal Agreements**

During the Spring/Summer 2023 Health Safety Net (HSN) will be replacing INET. Prior to replacing INET, HSN must set up new users within the replacement OnBase system. Providers who access INET must complete an HSN User Agreement and HSN Business Partner Security Agreement in order to access OnBase. These agreements as well as the OnBase Provider notice can be found at: [HSN-All Provider Billing Update 4](#) .

If you have any questions regarding the updated forms, please email [HSN-OnBase@mass.gov](mailto:HSN-OnBase@mass.gov).

## **Billing and Reimbursement for Services Provided via Telehealth**

Consistent with [MassHealth All Provider Bulletin 355](#), [MassHealth All Provider Bulletin 327](#) and its predecessor bulletins, through September 30, 2023, Health Safety Net (HSN) will reimburse providers delivering any telehealth-eligible covered service via any telehealth modality at parity with its in-person counterpart. Likewise, through September 30, 2023, an eligible distant-site provider delivering covered services via telehealth in accordance with this bulletin may bill HSN a facility fee if such a fee is permitted under the provider's governing regulations. HSN will continue to evaluate these telehealth rate parity and facility fee policies through September 30, 2023, and may change those policies after that date.

Providers must include the place of service (POS) code 02 when submitting a professional claim for telehealth provided in a setting other than in the patient's home, and POS code 10 when submitting a professional claim for telehealth provided in the patient's home. Additionally, for any such professional claim, providers must include:

- modifier 95 to indicate counseling and therapy services rendered via audio-video telecommunications;
- modifier 93 to indicate services rendered via audio-only telehealth;
- modifier FQ to indicate counseling and therapy services provided using audio-only telecommunications;
- modifier FR to indicate a supervising practitioner was present through a real-time twoway, audio and video communication technology; and/or
- modifier GQ to indicate services rendered via asynchronous telehealth.

Additionally, for any institutional claim, providers are allowed to use the following modifiers:

- modifier 95 to indicate counseling and therapy services rendered via audio-video telecommunications;

- modifier 93 to indicate services rendered via audio-only telehealth;
- modifier GT to indicate services rendered via interactive audio and video telecommunications systems;
- modifier FQ to indicate counseling and therapy services provided using audio-only telecommunications;
- modifier FR to indicate that a supervising practitioner was present through a real-time two-way, audio and video communication technology; and/or
- modifier GQ to indicate services rendered via asynchronous telehealth.

Modifier GT is required on the institutional claim, for the distant-site provider, when there is an accompanying professional claim containing POS 02 or 10.

Professional and institutional claims with the aforementioned modifiers must also meet the following requirements:

- modifier 93 is to be allowed only for codes listed in Appendix T of the CPT coding book, attached to this bulletin; and
- modifier 95 is to be allowed only with codes listed in Appendix P of the CPT coding book, attached to this bulletin.

HSN will implement modifiers 95, 93, GQ, GT, FQ, and FR through an informational edit period. Thus, effective for dates of service (DOS) between April 16, 2022, and March 30, 2023, HSN will not deny claims containing POS code 02 or POS code 10 that are missing one of these modifiers. Effective for DOS on or after April 1, 2023, HSN will discontinue this informational edit, and will deny claims containing POS code 02 or POS code 10 that are missing one of these modifiers.

**For any questions about this billing update, please contact the HSN Customer Service line at 800-609-7232 or by email at [HSNHelpdesk@state.ma.us](mailto:HSNHelpdesk@state.ma.us).**