



PHARMACY FACTS

Current information for pharmacists about
the MassHealth Pharmacy Program

www.mass.gov/masshealth-pharmacy-facts

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Background

Federal regulations require that, for certain DME and oxygen and respiratory equipment, physicians, or certain authorized non-physician practitioners (NPP) (collectively, “authorized practitioners”), document the occurrence of a face-to-face encounter with the Medicaid-eligible beneficiary. See 42 CFR 440.70.

General Guidelines

A face-to-face encounter is required for all initial orders for certain DME and oxygen and respiratory items as designated and updated by CMS. The CMS list of items subject to the face-to-face requirements may be found at the following and any successor links:

https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/Medical-Review/Downloads/DME_List_of_Specified_Covered_Items_updated_March_26_2015.pdf.

DME and oxygen and respiratory equipment providers should verify that a face-to-face encounter with the MassHealth member was performed and documented before dispensing equipment, and maintain this information as part of their records to support payment.

42 CFR 440.70 requires the following for payments for the CMS-specified items.

1. There must be an in-person, face-to-face encounter with the authorized practitioner.
2. The authorized practitioner may be:
 - a. a medical doctor (MD) or doctor of osteopathic medicine (DO); or
 - b. a non-physician practitioner (NPP): physician assistant (PA), nurse practitioner (NP), or clinical nurse specialist (CNS). Documentation must identify communication of an NPP’s clinical findings to the ordering physician.
3. Documentation of the ordering practitioner or NPP must indicate that the individual was evaluated and/or treated for a condition that is the primary reason that the individual needs the item(s) of DME/oxygen respiratory equipment. Documentation must include the name of the practitioner and date of the face-to-face encounter.
4. Occurrence of the face-to-face examination during the six months before the date of the order for the item.

Guidelines for Dual-Eligible Member

A new face-to-face encounter is not required if the payment source for a service transitions from Medicare to Medicaid coverage through MassHealth. Medicare face-to-face encounter documentation will meet the Medicaid requirement. See 81 Fed. Register at 5546 (February 2, 2016).

Recordkeeping Requirements

All applicable 42 CFR 440.70 recordkeeping requirements apply, as do the requirements of 130 CMR 450.000, 130 CMR 409.000, 130 CMR 427.000, and 130 CMR 406.000.

Repairs

Face-to-face encounters are not required for repairs.

MassHealth Website

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Questions

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