



**MassHealth**  
**Rehabilitation Center Bulletin 14**  
**September 2021**

**TO:** Therapy Providers at Rehabilitation Centers Participating in MassHealth

**FROM:** Amanda Cassel Kraft, Acting Assistant Secretary for MassHealth

**RE: Extended COVID-19 Related Administrative Flexibilities for Therapy Services Including Telehealth and New Telehealth Documentation Requirement**

### **Introduction**

On January 31, 2020, the United States Secretary of Health and Human Services (Secretary), pursuant to authority under section 319 of the Public Health Service Act (42 U.S.C. § 247d), issued a determination that a nationwide public health emergency had existed since January 27, 2020 (“the FPHE”). The Secretary has since issued renewals of the FPHE, on April 21, 2020; July 23, 2020; October 2, 2020; January 7, 2021; April 15, 2021; and July 19, 2021. On March 10, 2020, the Governor issued the Declaration of State of Emergency within the Commonwealth due to the 2019 novel Coronavirus (COVID-19) outbreak, which expired June 15, 2021.

In light of the FPHE and the state declaration, 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 Rehabilitation Center Bulletins (RCB) 12 and 13.

Due to the continued FPHE, MassHealth is issuing this bulletin. The purpose of this bulletin, which supersedes RCB 13, is to update MassHealth’s COVID-19 related flexibilities for MassHealth therapist services, including telehealth, to help ensure members retain access to appropriate services, promote social distancing, and mitigate the spread of COVID-19. The guidance in this bulletin replaces all previously issued guidance for MassHealth RCB providers described in RCBs 12 and 13 and in the MassHealth COVID-19 LTSS Flexibilities document.

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

This bulletin:

- a. describes COVID-19 related flexibilities for MassHealth Rehabilitation Center services (physical therapy, occupational therapy, and speech-language therapy) that will remain in effect beyond September 13, 2021, until the end of the FPHE;
- b. clarifies that telehealth visits may be used for follow-up visits that do not require any hands-on care; and

c. describes a new recordkeeping and documentation requirement regarding telehealth services.

### **Prior Authorization Extensions**

Through the end of the FPHE, therapy providers may request a continuation of an existing prior authorization (PA). The provider must email an extension request to [support@masshealthtss.com](mailto:support@masshealthtss.com) prior to the end date of the existing PA. Such extension requests must have “COVID-19” in the comments field and should provide justification for continuing therapy services. Extension requests may be approved for periods up to 30 days and no more than three extension requests will be approved. Additional therapy visits beyond the third extension require a new PA. To increase the frequency of services or number of units, providers must file a new request for PA.

### **Therapy Telehealth Guidance**

MassHealth is extending coverage for telehealth services that shall remain in effect until the end of the FPHE for members receiving therapist services on a fee-for-service basis, including members enrolled in the PCC plan.

### **Prior Authorization and Recordkeeping**

Therapy providers of telehealth services must follow all prior authorization and recordkeeping requirements under 130 CMR 430.601(D) and 130 CMR 450.000, and services must meet all requirements under the MassHealth Guidelines for Medical Necessity Determination for [Speech and Language Therapy](#), [Physical Therapy](#), and [Occupational Therapy](#).

### **Service Delivery Requirements**

MassHealth is not imposing specific requirements for technologies used to deliver services via telehealth and will allow reimbursement for MassHealth therapist services delivered through telehealth, as long as such services

- are medically necessary;
- are clinically appropriate;
- meet requirements within 130 CMR 430.000 and 130 CMR 450.000; and
- all additional requirements of the therapy telehealth guidance contained in this bulletin are met.

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.

***Therapy telehealth visits may be used for therapist services that***

- a) require the member's consent, documented as described below; and
- b) are follow-up visits that do not require any hands-on care.

Follow-up visits do not include evaluations or re-evaluations and may be conducted telephonically if appropriate, but live video is preferred.

Live video telehealth must be used, with the member's consent, to conduct the comprehensive evaluation and/or reevaluation under 130 CMR 430.601(A)(9) for members receiving therapy if they have concerns due to COVID-19. Telephonic only telehealth is not permitted to conduct the comprehensive evaluation and/or reevaluation under 130 CMR 430.601(A)(9) for members receiving therapy if they have concerns due to COVID-19.

**Member Consent**

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

In obtaining the member's consent, MassHealth therapy providers 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 therapy provider;
- c) any relevant privacy considerations; and
- d) that the member may revoke their consent for telehealth services at any time.

Information provided to members should be given in their preferred method of delivery and must be documented within the member's record.

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

Speech and language therapy providers must include modifier "GT" when submitting claims for services delivered via telehealth. Rates of payment for therapist services delivered via telehealth will be the same as rates of payment for therapist services delivered via traditional (e.g., in-person) methods set forth in [101 CMR 339.00: Restorative Services](#).

Failure to include modifier "GT" when submitting claims for SHC services delivered via telehealth may result in the imposition of sanctions pursuant to 130 CMR 450.238-450.240.

**Important note:** Although MassHealth allows reimbursement for the delivery of certain services through telehealth, MassHealth does not require providers to deliver services via telehealth.

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**Documentation of Telehealth Services and Encounter Requirements**

All documentation requirements of 130 CMR 450.000 and 130 CMR 430.000 apply when services are delivered via telehealth and the documentation must also include:

- 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; and
- c) For dates of service on or after September 13, 2021, the following new visit note:

On [DATE], member has requested and verbally consented to their comprehensive evaluation, reevaluation, and/or visit being completed via telehealth due to COVID-19. On [DATE], therapist staff discussed the safety protocols that are used during any in-person visit, including but not limited to PPE use and COVID precautions but member still requested telehealth instead of an in-person visit.

Failure to maintain documentation requirements for services delivered via telehealth, may result in the imposition of sanctions pursuant to 130 CMR 450.238-450.240.

**Additional Information**

For the latest Massachusetts-specific information, visit [www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19](http://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](http://www.cdc.gov/coronavirus/2019-ncov/hcp/index.html).

**MassHealth Website**

This bulletin is available on the [MassHealth Provider Bulletins](#) web page.

[Sign up](#) to receive email alerts when MassHealth issues new bulletins and transmittal letters.

**Questions**

If you have questions about the information in this bulletin, please contact the Long-Term Services and Supports (LTSS) Provider Service Center.

- Phone:** Toll free (844) 368-5184
- Email:** [support@masshealthltss.com](mailto:support@masshealthltss.com)
- Portal:** [www.MassHealthLTSS.com](http://www.MassHealthLTSS.com)
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