



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
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**MassHealth
Speech and Hearing Center Bulletin 10
February 2004**

TO: Speech and Hearing Centers Participating in MassHealth
FROM: Beth Waldman, Medicaid Director *BW*
RE: **Delay in Implementation of New Prior Authorization Policy for Certain Therapy Services**

Revised Regulations

MassHealth recently sent Transmittal Letter SHC-14, which transmitted revised regulations for the *Speech and Hearing Center Manual*. The revised regulations require the provider to obtain prior authorization from MassHealth before providing more than 15 speech/language therapy visits to a member within a 12-month period. The revised regulations are effective February 1, 2004. (Before these regulations went into effect, speech and hearing centers were required to obtain prior authorization for more than 35 speech/language therapy visits within a 12-month period.)

Delay in Implementation

MassHealth has decided to delay enforcement of its new prior-authorization policy until **April 15, 2004**. This decision was made, in part, because of concerns raised by providers, who felt that more time was needed to adjust to the new thresholds for therapy visits before prior authorization is required.

Upon implementation of this policy, regardless of how many visits the member has had before April 15, 2004, MassHealth will count the first therapy visit occurring on or after April 15, 2004, as the first visit toward the 15 medically necessary visits that are allowed without prior authorization.

Exception: If a member is receiving therapy under a prior authorization issued before April 15, 2004, MassHealth will not count visits authorized by that prior authorization toward the initial 15 visits allowed without prior authorization. Rather, after the number of visits approved before April 15, 2004, are provided or after the prior authorization expires, whichever is sooner, a member may receive 15 therapy visits within a 12-month period before the provider must request another prior authorization.

Example: If a member is receiving speech/language therapy under a prior authorization that was issued before April 15, 2004, and that expires on May 17, 2004, then the 12-month period for speech/language therapy begins on the date of the first visit after the date the prior authorization

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Delay in Implementation
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expires. If this member's next speech/language therapy visit is May 20, 2004, then the 12-month period in this example begins on May 20, 2004. MassHealth will pay for a total of 15 speech/language therapy visits between May 20, 2004, and May 19, 2005, without prior authorization.

Frequently Asked Questions

To provide more guidance about the revised policy for therapy services, MassHealth has also posted frequently asked questions (FAQs) about this policy on its Web site at www.mass.gov/masshealth.

Requesting Prior Authorization

Information about how to request prior authorization can be found in Subchapter 5 of your provider manual. It is important to complete your request for prior authorization properly and attach the necessary documentation, to reduce the possibility of a deferral or denial of your request.

Providers are encouraged to submit their requests for prior authorization using MassHealth's Web-based Automated Prior Authorization System (APAS) at www.masshealth-apas.com. To receive more information about submitting prior authorization using APAS or training for and access to APAS, call 1-866-378-3789.

Upcoming Training

MassHealth will offer training on these new requirements and the prior-authorization process in the coming weeks. Visit www.mahealthweb.com for dates and registration information.

Update Your Manual

Although MassHealth has delayed enforcement of the revised policy for certain therapy services, it is important to note that the regulations transmitted by Transmittal Letter SHC-14 reflect the policy that will be in place for dates of service on or after April 15, 2004. Except for enforcement of the effective date, the information provided on this transmittal letter is correct. If you need a new copy of this transmittal letter for purposes of reviewing the details of this policy and updating your provider manual, you can print one from the MassHealth Web site at www.mass.gov/masshealth or request a paper copy by mailing, faxing, or e-mailing a request to:

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Questions

If you have any questions about the information in this bulletin, please call MassHealth Provider Services at 617-628-4141 or 1-800-325-5231.
