TO: Home Health Agencies Participating in MassHealth
FROM: Wendy E. Warring, Commissioner
RE: Submitting Claims to MassHealth Based on Physicians’ Verbal Orders

New Policy

Effective for dates of service on or after July 1, 2001, home health providers will be allowed to submit claims to MassHealth before obtaining a physician’s signature in the plan of care as long as the provider has obtained a physician’s verbal order, and as long as all of the following requirements are met.

- The member’s clinical record must contain documentation of the verbal order for the care before services are furnished. The home health agency must write this documentation into the plan of care, indicating the date on which the verbal order was given, and identifying the person documenting the order. The home health agency must document every verbal order for home health agency services received from the physician.

- The physician must sign all plans of care. The physician signature must be on each 60-day plan of care either before the claim is submitted or within 45 days after submitting a claim for that period.

- If the member has other health insurance (whether commercial insurance or Medicare), the provider must comply with the other insurer’s billing and authorization requirements, including the insurer’s regulations for physician signature, before billing MassHealth in accordance with 130 CMR 450.316.

- Home health agencies must continue to comply with all other applicable MassHealth referral, authorization, and billing requirements.

The Division will revise its home health agency regulations in the near future.

Questions

If you have any questions about this bulletin, please contact MassHealth Provider Services at (617) 628-4141 or 1-800-325-5231.