

Temporary Rate Increases Due to COVID-19 National Emergency: Common Questions and Answers for Managed Care Entities

1. **Question:** Do the hospital DRG weight 20% increase and 7.5% base rate increase apply to out of state hospitals?
 - a. **Answer:** The required rate increases for hospital services apply to plan-contracted out-of-state hospitals. Masshealth may not direct plans to pay OON providers the increased rates.
2. **Question:** Will MassHealth update the weights for the DRGs receiving a 20% increase to the DRG weight?
 - a. **Answer:** Yes.
3. **Question:** Does the rate increase for home health services under Senior Care Organization contracts only apply to those services covered by Medicaid and not to services covered by Medicare?
 - a. **Answer:** Yes.
4. **Question:** Can MassHealth confirm the MCEs are not responsible for the provider rate increases in EOHHS Administrative Bulletins 20-19, 20-20, 20-25 and 20-26?
 - a. **Answer:** At this time, the MCEs are only responsible for the specific provider rate increases set forth in MCE Bulletins 23 and 24. MassHealth will provide further guidance on additional required payments to providers by MCEs in the coming weeks.
5. **Question:** What is the rate to which a rate increase for payments for ambulance services under code A0998 is applied?
 - a. **Answer:** All required rate increases for services set forth in MCE Bulletins 23 and 24 must be applied to a plan's currently contracted rate with providers for that service.
6. **Question:** Does MCE Bulletin 24 include all of the codes for physician services subject to the required rate increase?
 - a. **Answer:** MCE Bulletin 24 does not include the full set of physician service codes for which MCOs and ACPPs will be directed to pay a temporary increase. Please refer to the EOHHS Administrative Bulletin 20-27 for the full list of physician codes for which the MCEs are required to pay an increased rate. MassHealth will include the same list of codes as those included in Administrative Bulletin 20-27 in a future MCE bulletin.
7. **Question:** MCE Bulletin 24 directs a 7.5% increase for inpatient and outpatient hospital services base payments. Do "base payments" include per diems or case rates paid outside of DRG?
 - a. **Answer:** The 7.5% rate increase does not include per diems, drug carve-outs, or outpatient labs.
8. **Question:** Are plans required to increase rates to FQHCs for physician services?

- a. **Answer:** All eligible providers under the 101 CMR 317.00: Medicine Regulation will receive the increased rates, as applicable, including FQHCs.
9. **Question:** Can the MCEs apply the percentage increase to rates even though such increases may conflict with the rates listed in the EOHHS Administrative Bulletins authorizing increased rates for services delivered to FFS members?
- a. **Answer:** All required rate increases for services set forth in MCE Bulletins 23 and 24 must be applied to a plan's currently contracted rate with providers for that service.
10. **Question:** What will be the due date of the first monthly certification of compliance with the rate increase requirements?
- a. **Answer:** Answer: May 8th. Templates will be sent out shortly.
11. **Question:** What does the rate increase apply to for the Personal Care Attendant (PCA) program?
- a. **Answer:** The rate increase applies to: 1) state-plan directed PCA, for all the codes specified in MassHealth's Administrative Bulletin 20-25, as well as 2) any other personal care or personal assistance services the plan pays at the collectively bargained PCA rate.
12. **Question:** Do directed payment increases apply to services delivered by out-of-network (OON) providers?
- a. **Answer:** Under CMS regulations, Masshealth may not direct plans to pay OON providers the increased rates.
13. **Question:** What does the April 30th implementation timeline refer to?
- a. **Answer:** All plans need to **start** disbursing increased rates by April 30, 2020.