



Frequently Asked Questions: COVID-19 and Behavioral Health Providers

March 27, 2020

Q: Can Behavioral Health providers deliver MassHealth-covered services, such as psychotherapy, via telephone?

A: Yes. See MassHealth All Provider Bulletin 289 for details regarding coverage of services delivered via telehealth (including telephonically).

Q: Under MassHealth All Provider Bulletin 289, MassHealth states they will cover “medically necessary telehealth (including telephone and live video) services” for members. Does this mean only for services that include live video or does it mean telephone only or telephone combined with live video?

A: MassHealth is encouraging broad utilization of telehealth technologies to ensure that members are able to continue to receive MassHealth covered services. All providers, including physical health and behavioral health providers, will be able to bill for covered services that are provided either telephonically or through a live video platform (both are not required).

Q: Can Behavioral Health providers deliver and bill for group therapy via Telehealth, including in Partial Hospitalization, Intensive Outpatient, Structured Outpatient Addiction, and Day Treatment Programs?

A: Yes, group therapy may be conducted via telehealth modalities. See MassHealth All Provider Bulletin 289 for details regarding coverage of services delivered via telehealth.

Q: Are Opioid Treatment Programs (OTPs) included in the telehealth guidance issued by MassHealth under All Provider Bulletin 289, considering OTPs use different codes from standard outpatient?

A: Yes, OTP is included and should continue to use their existing codes with Place of Service (POS) 02 for services delivered via telehealth.

Q: Will MassHealth pay for take-home visits for methadone treatment during this time?

A: MassHealth and the Managed Care Entities will pay for all medically necessary covered opioid treatment services, including methadone, buprenorphine, and naltrexone that is provided via take-homes in accordance with guidance issued by the Bureau of Substance Addiction Services.

Q: Does direct service still require that a licensed supervisor be on site when an unlicensed behavioral health clinician is providing face-to-face, telephonic or telehealth services to patients?

A: Telehealth technology can be used to provide clinical supervision.

Q: Can Recovery Coaches and Recovery Support Navigators provide services via telehealth? Is this inclusive of existing members as well as new referrals?

A: Yes, Recovery Coach and Recovery Support Navigator services can be provided via telehealth. This includes both existing members and new referrals.

Q: Can MassHealth clarify whether MassHealth Covered services delivered only through managed care may be delivered via telehealth, as mentioned in MassHealth All Provider Bulletin 289?

A: All medically necessary MassHealth Covered Services, whether delivered through fee-for-service or managed care, may be delivered via telehealth when clinically appropriate.

Q: Do behavioral health providers need to bill for assessments under the new codes outlined in All Provider Bulletin 289 when utilizing telehealth, or can they continue to bill under the traditional codes?

A: Providers should continue to use existing codes to bill for covered services delivered via telehealth. Providers may, but are not required to, use the new codes if those codes are available and more appropriate for the service rendered.

Q: Should behavioral health providers hold claims for telehealth until 4/1?

A: To prevent any delays in payment, behavioral health providers should continue billing existing codes with Place of Service (POS) 02 and submit claims as services are rendered.

Q: Under MassHealth All Provider Bulletin 289, MassHealth will permit qualified providers to deliver clinically appropriate, medically necessary MassHealth-covered services to MassHealth members via telehealth. Does “qualified providers” include interns?

A: Provider qualifications are set forth in applicable program regulations and are not changed by the telehealth policies in All Provider Bulletin 289.