



Massachusetts Provider Attestation Form for Compliance with MassHealth Standards for Certain Behavioral Health Telemedicine Services

Note: This form applies only to Tufts Health Plan Senior Care Options (SCO), Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans (ACPPs), and Tufts Health Unify.

Provider, _____, (the “Provider”) certifies that they are in compliance with the criteria surrounding provision of certain behavioral health services (i.e., Standard Outpatient Services, Emergency Services Program Services) performed via telemedicine, as outlined in the [MassHealth Managed Care Entity Bulletin 10](#), effective for plan years beginning on or after January 1, 2019 (the “Bulletin”). The Provider attests their compliance with criteria identified by the state as identified below and as addressed in the Bulletin. Provider agrees that this criteria is to be considered in addition to any existing Tufts Health Plan and regulatory credentialing and contracting requirements with which Provider must also comply:

The Provider must adhere to and document the following best practices when delivering services via telemedicine:

- The Provider must properly identify the patient using, at a minimum, the patient’s name, date of birth and MassHealth ID.
- The Provider must disclose and validate their identity and credentials, including, but not limited to, Provider’s license, title, and, if applicable, specialty and board certifications.
- For an initial appointment with a new patient, the Provider must review the patient’s relevant medical history and any available medical records with the patient before initiating the delivery of the service.
- For existing provider-patient relationships, the Provider must review the patient’s medical history and any available medical records with the patient during the service.
- Prior to each patient appointment, the Provider must ensure that they are able to deliver the service to the same standard of care and in compliance with licensure regulations and requirements, programmatic regulations, and performance specifications related to the service (e.g., accessibility and communication access) using telemedicine as is applicable to the delivery of the services in person. If the Provider cannot meet this standard of care or other requirements, the Provider must direct the patient to seek in-person care. The Provider must make this determination prior to the delivery of each service.
- The Provider must ensure the same rights to confidentiality and security as provided in face- to-face services.
- The Provider must follow consent and patient information protocol consistent with those followed during in-person visits.
- The Provider must inform the patient of how they can see a clinician in-person in the event of an emergency or as otherwise needed.
- Inform patients of the location of the Provider rendering services via telemedicine (i.e., distant site) and obtain the location of the patient (i.e., originating site).
 - Distant site: The site where the clinician providing the service is located at the time the service is provided via a telemedicine system. While all applicable licensure and programmatic requirements apply to the delivery of the service, there are no

additional geographic or facility restrictions on distant sites for services delivered via telemedicine.

- o Originating site: The location of the member at the time the service is being provided. There are no geographic or facility restrictions on originating sites.

TECHNOLOGY REQUIREMENTS

- All telemedicine transmissions must be conducted using a HIPAA-compliant telemedicine technology. The technology utilized to provide a service via telemedicine must conform to industry-wide compressed audio-video communication standards for real-time, two-way, interactive audio-video transmission.
- All telemedicine sites must have a written procedure detailing the contingency plan in the event of a transmission failure or other technical difficulty that renders the transmission undeliverable.

Note: Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission.

TRAINING REQUIREMENTS

Behavioral health providers and their office staff must be trained in the provision of services via telemedicine, including training in the use of the telemedicine equipment (as applicable). All trainings must include:

- Familiarity with telemedicine equipment, its operation, and limitations;
- Familiarity with procedures to follow for equipment problems and/or failures;
- Safeguarding the confidentiality and security of telemedicine records and compliance with all applicable state and federal laws, including, but not limited to, HIPAA regulations, at both the originating and distant sites; and
- Best practices for clinical work using telemedicine technologies, including protocols for clinical risk management.

In following the applicable state criteria, the Provider or their authorized signatory certifies that they are compliant with these requirements and the requirements as they may be amended in the future. In the event of a change of status to any of the above identified items required to perform telemedicine services, the Provider will notify the Plan to whom it submitted this attestation form to collect information and address any applicable changes to their ability to render services with the Plan via telemedicine. The undersigned individual hereby attests that he or she is authorized to legally bind the Provider to the terms of this attestation and agrees to all the terms specified herein.

NPI: _____

Tax ID Number: _____

Authorized Signatory Signature: _____

Name: _____

Title: _____

Date: _____

Please submit this signed attestation via email to AHCBehavioralHealth@tufts-health.com or fax to 617.673.0909, attention: AHC Behavioral Health.