

101 CMR 415.00: RATES FOR COMMUNITY-BASED DAY SUPPORT SERVICES

Section

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415.01: General Provisions

- (1) Scope. 101 CMR 415.00 governs the payment rates effective January 1, 2016 for community-based day support services that assist individuals to participate in community activities by improving communication, self-care, and relationship-building skills.
- (2) Disclaimer of Authorization of Services. 101 CMR 415.00 is neither authorization for nor approval of the services for which the regulation establishes payment rates. Purchasing agencies are responsible for the definition, authorization, and approval of services as specified in a contract between the provider and the purchasing agency.
- (3) Administrative Bulletins. EOHHS may issue administrative bulletins to clarify its policy on substantive provisions of 101 CMR 415.00.

415.02: Definitions

Meaning of Terms. As used in 101 CMR 415.00, unless the context requires otherwise, terms shall have the meanings ascribed in 101 CMR 415.00.

Active Treatment. Care and services to improve and/or maintain the client's quality of life in a nursing facility by promoting the optimal level of functioning that allows as much self-determination as possible and strives to prevent a regression of current optimal status.

Client. An individual who receives services under a contract between a provider and a purchasing agency.

Community-based Day Support Services (Services). Community-based day support services assist clients to build and maintain their ability to participate in community activities by focusing on skill areas that include communication, self-care, relationship-building and community involvement.

EOHHS. The Executive Office of Health and Human Services established under M.G.L. c. 6A.

Fiscal Year (FY). The period from July 1st through June 30th.

Governmental Unit. The commonwealth, any board, commission, department, division, or agency of the commonwealth and any political subdivision of the commonwealth.

Nursing Facility. An inpatient healthcare facility with the staff and equipment to provide skilled care, rehabilitation and other related health services to patients who need nursing care, but do not require hospitalization.

Program. An integrated and coordinated delivery of services provided at a specific site pursuant to a contract between a provider and the purchasing agency.

Provider. Any individual, group, partnership, trust, corporation or other legal entity that contracts with a purchasing agency to provide community-based day support services.

Purchasing Agency. A governmental unit that purchases community-based day support services.

415.03: Rate Provisions

- (1) Services included in the Rate. The payment rates in 101 CMR 415.00 are payment for all services provided to a client by a provider, subject to the terms of the contract between the provider and the purchasing agency.
- (2) Reimbursement as Full Payment. Each provider shall, as a condition of acceptance of payment by a purchasing agency for services provided to a client, accept the payment rates established by 101 CMR 415.00 as full payment and discharge of all obligations for the services provided. The provider may not seek additional or supplemental payment from clients or other third parties for services for which rates are established by 101 CMR 415.00. If a provider receives any client funds or third party payments for services provided to a client, the purchasing agency's obligation for services to the client shall be offset by the amount received.
- (3) Payment Limitations. Except as provided in 101 CMR 415.04(2), each purchasing agency shall pay for services at the rates established in 101 CMR 415.03(4).
- (4) Approved Rates. The payment rate for services is based on the intensity level assigned to each client by the purchasing agency.

<u>Level</u>	<u>Unit</u>	<u>Rate</u>
A	15 Minutes	\$10.43
B	15 Minutes	\$5.85
C	15 Minutes	\$4.18
D	15 Minutes	\$3.46
E	15 Minutes	\$3.06
F	15 Minutes	\$2.49
G	15 Minutes	\$1.98

Rates for Nursing Facility -Active Treatment

<u>Level</u>	<u>Unit</u>	<u>Rate</u>
Level I - Nursing Facility Active Treatment	15 Minutes	\$10.09
Level II - Pediatric Nursing Facility Active Treatment - Facility Based Model	15 Minutes	\$11.73
Level III - Pediatric Nursing Facility Active Treatment - Community Integration Model	15 Minutes	\$12.17

415.04: Filing and Reporting Requirements

- (1) Required Reports. Each provider must file:
 - (a) an annual Uniform Financial Statement and Independent Auditor's report completed in accordance with the filing requirements of the Division of Purchased Services regulation at 808 CMR 1.00: *Compliance, Reporting and Auditing for Human and Social Services*;
 - (b) any cost report supplemental schedule as issued by EOHHS; and
 - (c) any additional information requested by EOHHS within 21 days of a written request.
- (2) All reports, schedules, additional information, books, and records that are filed or made available to EOHHS shall be certified under pains and penalties of perjury as true, correct and accurate by the executive director or chief financial officer of the provider.
- (3) Each provider shall make available to EOHHS or purchasing agency upon request all records relating to its reported costs, including costs of any entity related by common ownership or control.

415.04: continued

(4) Penalties. The purchasing governmental unit may reduce the payment rates by 15% for any provider that fails to submit required information to EOHHS. The purchasing governmental unit will notify the provider in advance of its intention to impose a rate reduction.

415.05: Severability

The provisions of 101 CMR 415.00 are severable. If any provision of 101 CMR 415.00 or the application of any provision of 101 CMR 415.00 is held invalid or unconstitutional, such provision will not be construed to affect the validity or constitutionality of any other provision of 101 CMR 415.00 or the application of any other provision.

REGULATORY AUTHORITY

101 CMR 415.00: M.G.L. c. 118E.