

# Administrative Bulletin 20-63

**101 CMR 361.00: Rate for Continuous Skilled Nursing Services**

Effective June 17, 2020

**Rate Add-On Applicable to Certain Continuous Skilled Nursing Services to Address Costs Associated with Coronavirus Disease 2019 (COVID-19)**

## Purpose, Scope, and Effective Period

The Executive Office of Health and Human Services (EOHHS) is issuing this administrative bulletin pursuant to the authority of COVID-19 Order No. 20: *Order Authorizing the Executive Office of Health and Human Services to Adjust Essential Provider Rates During the COVID-19 Public Health Emergency* and *Executive Order 591: Declaration of State of Emergency to Respond to COVID-19*. In light of the state of emergency declared in the Commonwealth due to COVID-19, EOHHS, which administers the Massachusetts Medicaid program known as “MassHealth,” is temporarily implementing an add-on rate for certain MassHealth-covered Continuous Skilled Nursing (CSN) services established in 101 CMR 361.00, and as further described in this bulletin.

This administrative bulletin is effective as of May 1, 2020, and shall remain effective through July 31, 2020.

Disclaimer: This administrative bulletin is not authorization for a provider’s use of the adjusted rate or service. Authorization for the provision of, and billing and payment for, Continuous Skilled Nursing services are pursuant to the MassHealth Home Health Agency regulations at 130 CMR 403.000 and MassHealth Independent Nurse regulations at 130 CMR 414.000.

## Background

The COVID-19 public health emergency has made the delivery of CSN services more difficult and costly. Accordingly, EOHHS is establishing a rate add-on that addresses the increased costs and difficulty in providing CSN services related to COVID-19, to ensure the continued delivery of this critical service.

As provided below, EOHHS is instituting a rate add-on to address increased staffing costs and the acquisition of personal protective equipment (PPE) that are associated with COVID-19. This COVID-19 related rate add-on is effective May 1, 2020, through July 31, 2020. The COVID-19 related rate add-on will automatically be applied to the service codes as described in the following table. See Home Health Agency Bulletin 58 for implementation requirements for the utilization of the rate add-on.

## Rate Add-on for Certain Continuous Skilled Nursing Services to Address Concerns Related to COVID-19

| **Services** | **Patient(s) Per 15 Minutes** | **Shift** | **Procedure Code** | **Current Rate** | | **Rate Add-on** | | **Updated Rate with Rate  Add-on** | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  | Agency | IN | Agency | IN | Agency | IN |
| RN Services | Single Patient: Per 15 minutes | Weekdays | T1002 | $14.63 | $12.02 | $1.46 | $1.20 | $16.09 | $13.23 |
| Nights | T1002, UJ | $15.54 | $12.86 | $1.55 | $1.29 | $17.10 | $14.14 |
| Holidays | T1002 | $20.23 | $17.22 | $2.02 | $1.72 | $22.25 | $18.94 |
| Two Publicly Aided Patients: Per 15 minutes | Weekdays | T1002, TT | $20.58 | $17.37 | $2.06 | $1.74 | $22.64 | $19.11 |
| Nights | T1002, U1 | $21.91 | $18.63 | $2.19 | $1.86 | $24.10 | $20.50 |
| Holidays | T1002, TT | $28.95 | $25.17 | $2.90 | $2.52 | $31.85 | $27.68 |
| Three Publicly Aided Patients: Per 15 minutes | Weekdays | T1002, U2 | $24.59 | $20.15 | $2.46 | $2.02 | $27.04 | $22.17 |
| Nights | T1002, U3 | $26.16 | $21.62 | $2.62 | $2.16 | $28.77 | $23.78 |
| Holidays | T1002, U2 | $34.38 | $29.25 | $3.44 | $2.93 | $37.81 | $32.17 |
| Overtime: Per 15 minutes | Weekdays | T1002, TU | $20.23 | $17.22 | $2.02 | $1.72 | $22.25 | $18.94 |
| Nights | T1002, U4 | $21.58 | $18.48 | $2.16 | $1.85 | $23.74 | $20.33 |
| Holidays | T1002, TU | $28.62 | $25.01 | $2.86 | $2.50 | $31.48 | $27.52 |
| LPN Services | Single Patient: Per 15 minutes | Weekdays | T1003 | $12.07 | $10.01 | $1.21 | $1.00 | $13.27 | $11.01 |
| Nights | T1003, UJ | $12.83 | $10.73 | $1.28 | $1.07 | $14.11 | $11.80 |
| Holidays | T1003 | $16.79 | $14.42 | $1.68 | $1.44 | $18.46 | $15.86 |
| Two Publicly Aided Patients: Per 15 minutes | Weekdays | T1003, TT | $17.06 | $14.53 | $1.71 | $1.45 | $18.77 | $15.98 |
| Nights | T1003, U1 | $18.18 | $15.59 | $1.82 | $1.56 | $20.00 | $17.15 |
| Holidays | T1003, TT | $24.15 | $21.13 | $2.42 | $2.11 | $26.56 | $23.24 |
| Three Publicly Aided Patients: Per 15 minutes | Weekdays | T1003, U2 | $20.70 | $16.85 | $2.07 | $1.69 | $22.77 | $18.54 |
| Nights | T1003, U3 | $22.03 | $18.10 | $2.20 | $1.81 | $24.24 | $19.90 |
| Holidays | T1003, U2 | $28.99 | $24.55 | $2.90 | $2.46 | $31.88 | $27.01 |
| Overtime: Per 15 minutes | Weekdays | T1003, TU | $16.79 | $14.42 | $1.68 | $1.44 | $18.46 | $15.86 |
| Nights | T1003, U4 | $17.93 | $15.48 | $1.79 | $1.55 | $19.72 | $17.02 |
| Holidays | T1003, TU | $23.88 | $21.00 | $2.39 | $2.10 | $26.27 | $23.10 |

## Public Comment

EOHHS will accept comments on the rates established via this administrative bulletin through July 1, 2020. Individuals may submit written comments by emailing [**ehs-regulations@state.ma.us**](mailto:ehs-regulations@state.ma.us). Please submit written comments as an attached Word document or as text within the body of the email with the name of this bulletin in the subject line. All submissions of comments must include the sender’s full name, mailing address, and organization or affiliation, if any. Individuals who are unable to submit comments by email may mail written comment to Executive Office of Health and Human Services, c/o D. Briggs, 100 Hancock Street, Quincy, MA 02171.

EOHHS may adopt a revised version of this bulletin taking into account relevant comments and any other practical alternatives that come to its attention.