

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 350.00: RATES FOR HOME HEALTH SERVICES

Section

- 350.01: General Provisions
- 350.02: General Definitions
- 350.03: General Rate Provisions
- 350.04: Rates of Payment for Home Health Services in the Home
- 350.05: Administrative Adjustment
- 350.06: Filing and Reporting Requirements
- 350.07: Severability

350.01: General Provisions

(1) Scope. 101 CMR 350.00 establishes rates of payment for home health services described in 130 CMR 403.000: *Home Health Agency* that are provided by eligible providers to publicly aided individuals. The rates set forth in 101 CMR 350.00 also apply to individuals covered by M.G.L. c. 152 (the Workers' Compensation Act). For rates applicable to continuous skilled nursing services provided by a home health agency or an independent nurse to publicly aided individuals, *see* 101 CMR 361.00: *Rates for Continuous Skilled Nursing Services*.

(2) Applicable Dates of Service. Rates contained in 101 CMR 350.00 apply for dates of service provided on or after July 1, 2023.

(3) Coverage. The allowable fees established pursuant to 101 CMR 350.00 for services provided to publicly aided individuals apply to all home health services, as defined in 101 CMR 350.02, regardless of the type of program under which MassHealth is purchasing the services. The allowable fees are full compensation for the home health services rendered, including but not limited to administrative or supervisory duties and costs in connection with service provision.

(4) Administrative Bulletins. EOHHS may issue administrative bulletins to clarify its policy on substantive provisions of 101 CMR 350.00 and to specify the information and documentation necessary to implement 101 CMR 350.00.

(5) Disclaimer of Authorization of Services. 101 CMR 350.00 is not authorization for or approval of the substantive services, or lengths of time, for which rates are paid pursuant to 101 CMR 350.00. Governmental units or workers' compensation insurers that purchase services from eligible providers are responsible to define, authorize, and approve the services extended to covered individuals and the length of time for which the approval is applicable.

350.02: General Definitions

As used in 101 CMR 350.00, unless the context requires otherwise, terms have the meanings set forth in 101 CMR 350.02.

Activities of Daily Living (ADL). Activities related to personal care, specifically bathing, grooming, dressing, toileting/continence, transferring/ambulation, and eating.

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 350.00: RATES FOR HOME HEALTH SERVICES

ADL Support Visit. A home visit performed by an eligible provider to a member for assistance with ADLs when the member is not receiving concurrent home health skilled nursing or therapy services.

Eligible Provider. An organization certified as a provider of services under the Medicare Health Insurance Program for the Aged (Title XVIII) and that meets such conditions of participation as have been or may be adopted by a governmental unit purchasing home health services.

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

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

Home Health Agency. An organization that meets the requirements of 130 CMR 403.000: *Home Health Agency* to provide home health services.

Home Health Aide Service. The provision of personal care and other health-related services in the home, as described in 130 CMR 403.416(B) through (D) by a home health aide as defined in 130 CMR 403.402: Home Health Aide.

Home Health Services. Skilled nursing visits, physical therapy, occupational therapy, speech therapy, and home health aide services provided in the individual's home.

Home Visit. A morbidity visit rendered in the home by a qualified employee of a home health agency.

Medication Administration Visit. A skilled nursing visit for the purpose of administration of medications when the member is unable to perform the task due to impaired physical, cognitive, behavioral, and/or emotional issues; no able caregiver is present; or the member has a history of failed medication compliance resulting in a documented exacerbation of the member's condition, and/or the task including the route of administration of medication requires a licensed nurse to provide the service. A medication administration visit may include administration of oral, intramuscular, and/or subcutaneous medication or administration of medications other than oral, intramuscular and/or subcutaneous medication, but does not include intravenous administration.

Nursing Services. Services as defined in 130 CMR 403.402: Nursing Services and described at 130 CMR 403.415: *Nursing Services*.

Occupational Therapy. Services as defined in 130 CMR 403.402: Occupational Therapy provided by an occupational therapist as defined in 130 CMR 403.402: Occupational Therapist and occupational therapy assistant as defined in 130 CMR 403.402: Occupational Therapy Assistant.

Office Visit. A health promotion or therapeutic visit rendered in a home health agency's office.

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 350.00: RATES FOR HOME HEALTH SERVICES

Physical Therapy. Services as defined in 130 CMR 403.402: Physical Therapy provided by a physical therapist or physical therapy assistant as defined in 130 CMR 403.402: *Definitions*.

Publicly Aided Individual. A person who receives health care and services for which a governmental unit is in whole or part liable under a statutory program.

Reasonable Costs. Those reasonable and necessary costs incurred by an eligible provider of home health services, subject to the requirements and limitations of 101 CMR 350.00. In determining the reasonableness of costs, EOHHS may consider the particular services offered, the introduction of efficiency measures, the requirements for staffing, and the costs of providing comparable service.

Security/Escorts. The provision of security services to direct care personnel in the performance of a reimbursable home health visit.

Speech/Language Therapy. Services as defined in 130 CMR 403.402: Speech/Language Therapy provided by a qualified speech/language therapist (speech/language pathologist) as defined in 130 CMR 403.402: Speech/Language Therapist (Speech/Language Pathologist).

Therapeutic or Morbidity Home Visit. A home visit rendered by an eligible provider to an individual and/or family for the purpose of treating one or more diagnosed illnesses or disabilities.

Visit. A visit as defined in 130 CMR 403.402: Visit that is up to eight 15-minute units.

Weekday. The hours from 7:00 A.M. to 3:00 P.M., Monday through Friday.

Weekend and Nights.

- (a) Weekend. The hours from 3:00 P.M., Friday, to 7:00 A.M., Monday.
- (b) Nights. The hours from 3:00 P.M. to 7:00 A.M., Monday through Friday.
- (c) Holidays. All official Commonwealth of Massachusetts holidays. For purposes of 101 CMR 350.00, holidays that occur on a weekend are observed on that day and not the preceding Friday or following Monday.

New Year's Day
Martin Luther King Jr. Day
Presidents' Day
Patriots' Day
Memorial Day
Juneteenth
Independence Day
Labor Day
Indigenous Peoples Day
Veterans Day
Thanksgiving Day
Christmas Day

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 350.00: RATES FOR HOME HEALTH SERVICES

350.03: General Rate Provisions

Rates of payment for authorized home health services to which 101 CMR 350.00 applies will be the lower of

- (a) the eligible provider's usual fee to patients other than publicly aided patients; or
- (b) the schedule of rates set forth in 101 CMR 350.04.

350.04: Rates of Payment for Home Health Services in the Home

For dates of service on or after July 1, 2023, the base rate for home health services is the lower of the established charge or the rate listed in 101 CMR 350.04(1).

| Code | Rate | Unit | Service |
|----------|----------|----------------|--|
| G0299 | \$107.88 | Per Visit | Services of an RN in home health setting (one through 30 calendar days) |
| G0300 | \$107.88 | Per Visit | Services of an LPN in home health setting (one through 30 calendar days) |
| G0299 UD | \$87.43 | Per Visit | Services of an RN in home health setting (31+ calendar days) |
| G0300 UD | \$87.43 | Per Visit | Services of an LPN in home health setting (31+ calendar days) |
| T1502 | \$71.52 | Per Visit | Administration of oral, intramuscular, and/or subcutaneous medication by health care agency/professional per visit (RN or LPN) (Use only for medication administration visit.) |
| T1503 | \$71.52 | Per Visit | Administration of medication other than oral, intramuscular, and/or subcutaneous medication by health care agency/professional per visit (RN or LPN) (Use only for medication administration visit.) |
| 99058 | \$28.99 | Per Visit | Office services provided on an emergency basis |
| G0151 | \$94.05 | Per Visit | Services of physical therapist in the home health setting |
| G0152 | \$97.06 | Per Visit | Services of occupational therapist in the home health setting |
| G0153 | \$99.55 | Per Visit | Services of speech/language therapist in the home health setting |
| G0156 | \$10.18 | Per 15 Minutes | Services of home health aide in the home health setting |
| G0156 UD | \$10.18 | Per 15 Minutes | Services of home health aide in the home health setting for ADL support |
| G0493 | \$107.88 | Per Visit | Services of an RN for the observation and assessment of the patient's condition provided every 60 days to members utilizing home health aide services for ADL support |

350.05: Administrative Adjustment

- (1) A certified home health agency may apply for a change in rate(s) of payment due to costs associated with providing interpreter and security/escort services as defined in 101 CMR 350.02.
- (2) Administrative adjustment may be provided on a prospective basis only.

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 350.00: RATES FOR HOME HEALTH SERVICES

(3) Administrative relief will consist of an adjustment to the rate calculated by dividing the costs from the most recently filed and reviewed cost report by the number of service units reported for that corresponding period. The costs allowed will be limited to reasonable costs as defined in 101 CMR 350.02.

(4) An administrative adjustment that an agency was awarded in a prior period may be updated by EOHHS using data from the most recent Cost Report filed pursuant to 101 CMR 350.06.

350.06: Filing and Reporting Requirements

(1) Required Reports. Reporting requirements are governed by 957 CMR 6.00: *Cost Reporting Requirements*.

(2) Penalty for Noncompliance. The purchasing governmental unit may impose a penalty in the amount of up to 15% of its payments to any provider that fails to submit required information. The purchasing governmental unit will notify the provider in advance of its intention to impose a penalty under 101 CMR 350.06(2).

350.07: Severability

The provisions of 101 CMR 350.00 are severable. If any provision of 101 CMR 350.00 or application of any provision to an applicable individual, entity, or circumstance is held invalid or unconstitutional, that holding will not be construed to affect the validity or constitutionality of any remaining provisions of 101 CMR 350.00 or application of those provisions to applicable individuals, entities, or circumstances.

REGULATORY AUTHORITY

101 CMR 350.00: M.G.L. c. 118E.