

**Commonwealth of Massachusetts
Executive Office of Health and Human Services**



**Health Related Social Needs (HRSN) Service Manual –
HRSN Supplemental Nutrition Services**

Last revised: January 2026

Change Log

Version	Date	Revision Details
1.0	July 2024	<ul style="list-style-type: none">• First release.
2.0	October 2024	<ul style="list-style-type: none">• Restructured how content is presented• Removed guidance regarding household level Category 1 services• Updated the required risk factor from “Low Food Security” to “Very Low Food Security” for all Nutrition services• Removed the Nutrition Transportation Category 2 Service• Removed the Application Assistance Category 2 Service• Removed the Benefit Maintenance Assistance Category 2 Service
2.1	July 2025	<ul style="list-style-type: none">• Clarified that Z-codes must be the primary diagnosis code on claims for HRSN Supplemental Services.• Updated the description of Medically Tailored and Nutritionally Appropriate Food Boxes to clarify that food examples listed within the description are not an exhaustive list of permissible food.
3.0	January 2026	<ul style="list-style-type: none">• Clarified the allowable activities for both Medically Tailored and Nutritionally Appropriate Food Prescriptions and Vouchers

Section 1. Introduction

All content described here is subject to required approvals of the federal Centers for Medicare and Medicaid Services (CMS) and is subject to change.

Related Documents:

- [MassHealth Accountable Care Partnership Plan Contract](#)
- [MassHealth Primary Care ACO Contract](#)
- [MassHealth Managed Behavioral Health Vendor Contract](#)
- [HRSN Service Manual Definitions](#)
- [HRSN Supplemental Housing Service Manual](#)
- [HRSN Supplemental Services Fee Schedule](#)
- [HRSN Supplemental Services Criteria Guidance](#)

Health Related Social Needs (HRSN) Supplemental Services in this manual include:

- Nutrition Category 1 Services (i.e., services that provide food necessary to improve, stabilize, or prevent the deterioration of functioning of an Enrollee's health)
 - [HRSN Supplemental Nutrition Services – Medically Tailored Home Delivered Meals](#)
 - [HRSN Supplemental Nutrition Services – Nutritionally Appropriate Home Delivered Meals](#)
 - [HRSN Supplemental Nutrition Services – Medically Tailored Food Boxes](#)
 - [HRSN Supplemental Nutrition Services – Nutritionally Appropriate Food Boxes](#)
 - [HRSN Supplemental Nutrition Services – Medically Tailored Food Prescriptions and Vouchers](#)
 - [HRSN Supplemental Nutrition Services – Nutritionally Appropriate Food Prescriptions and Vouchers](#)
- Nutrition Category 2 Services (i.e., services that enhance the effectiveness and impact of Nutrition Category 1 Services by providing nutrition education, goods, and services other than food)
 - [HRSN Supplemental Nutrition Services – Nutrition Education Classes and Skills Development](#)
 - [HRSN Supplemental Nutrition Services – Nutrition Counseling](#)
 - [HRSN Supplemental Nutrition Services – Kitchen Supplies](#)

Section 2. HRSN Supplemental Nutrition Services

Section 2.1 HRSN Supplemental Nutrition Services – Medically Tailored Home Delivered Meals

A. Service Description

Providers of Medically Tailored Home Delivered Meals provide Enrollees with fully prepared meals approved by a registered dietician nutritionist (RDN) or a nutrition and dietetics technician, registered (NDTR) to help an Enrollee experiencing Very Low Food Security (VLFS) receive appropriate nutrition to support their specific medical condition, in accordance with MassHealth Managed Care Entities' Contracts (MCE Contracts). Medically Tailored Home Delivered Meals consist of the following.

1. Medically Tailored Home Delivered Meals, which include
 - a. An RDN or NDTR (overseen by an RDN) assessment of the Enrollee's medical and nutritional needs
 - b. Fully prepared meals approved by an RDN or NDTR (overseen by an RDN) based on the Enrollee's specific condition
 - i. To approve meals, an RDN must develop or review meal composition or an NDTR (overseen by an RDN) may develop or review meal composition
 - c. Delivery to an Enrollee's home
 - d. The appropriate nutritional needs of the Enrollee based on their defined medical diagnosis and standards reflecting evidence-based practice guidelines (for example, guidelines for applicable health condition, Dietary Reference Intakes, Dietary Guidelines for Americans)
 - e. Up to three meals a day, seven days a week for a minimum of 12 weeks based on Enrollee's needs as determined by the assessment conducted by the RDN or NDTR (overseen by the RDN)
2. Navigation, which includes
 - a. Identifying other available resources based on the initial needs assessment (for example, benefits, entitlements, and discretionary services for which the Enrollee is potentially eligible)
 - b. Connecting and referring the Enrollee to appropriate supports (for example, SNAP Outreach Provider or food pantry) for identified needs, in coordination with the Enrollee's Plan.
3. Medically Tailored Home Delivered Meals Information, which includes
 - a. Providing the Enrollee materials related to the food provided (for example, fact sheets on benefits of proteins in the meal, recipes to remake the meals, or the total sodium count for the entire day's meals)

B. Additional Service Detail

Medically Tailored Home Delivered Meals is a **Nutrition Category 1 service**.

C. Criteria for Enrollees to Receive Medically Tailored Home Delivered Meals

To receive Medically Tailored Home Delivered Meals, Enrollees must meet the following criteria.

1. HNBC: have any of the following HNBC conditions that require improvement, stabilization, or prevention of deterioration of functioning
 - a. HIV
 - b. Cardiovascular disease

- c. Diabetes
- d. Renal disease
- e. Lung disease
- f. Liver disease
- g. Cancer
- h. High-risk pregnancy (including up to 12 months postpartum)

2. Risk Factor: experiencing Very Low Food Security; and
3. Other Criteria: be unable to prepare their own meals. Reasons for being unable to prepare meals may include physical or mental conditions or lack of knowledge, capacity, or resources to prepare meals.

D. Provider Qualifications

Providers of Medically Tailored Home Delivered Meals must meet the following criteria.

1. Have at least one year of experience providing medically tailored meals to people experiencing Food Insecurity with applicable health conditions (for example, experience with Flexible Services, current nutrition-focused contracts/grants with local, state, or federal agencies);
2. Have specialized staff with knowledge of medically tailored meals, and Food Insecurity or imbalance;
3. Have specialized staff with education (for example, a bachelor's degree, associate's degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience; and
4. Have an RDN on staff or as a consultant to assess Enrollees and approve meals.

E. Payment and Billing Code Requirements

Plans must require their Providers of Medically Tailored Home Delivered Meals to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.1.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.2 HRSN Supplemental Nutrition Services – Nutritionally Appropriate Home Delivered Meals

A. Service Description

Providers of Nutritionally Appropriate Home Delivered Meals provide Enrollees with fully prepared, nutritionally appropriate, healthy, well-balanced meals approved by an RDN or NDTR to help an Enrollee experiencing Very Low Food Security obtain food that meets appropriate nutritional standards, in accordance with MCE Contracts. Nutritionally Appropriate Home Delivered Meals consist of the following.

1. Nutritionally Appropriate Meals
 - a. Have an RDN or NDTR (overseen by an RDN) assessment of the Enrollee’s medical and nutritional needs.
 - b. Are fully prepared meals approved by an RDN or NDTR (overseen by an RDN). To approve meals, an RDN or NDTR (overseen by an RDN) must ensure adherence to appropriate nutritional standards (for example, Dietary Guidelines for Americans) and
 - i. be engaged in the development of the meal; or
 - ii. review meal composition
 - c. Are delivered to an Enrollee’s home
 - d. Can be provided for up to three meals a day, seven days a week
2. Navigation includes
 - a. Identifying other available resources based on the initial needs assessment (such as benefits, entitlements, and discretionary services for which the Enrollee is potentially eligible)
 - b. For identified needs, in coordination with the Enrollee’s Plan, connecting and referring them to appropriate supports, like SNAP Outreach Provider or a food pantry
3. Nutritionally Appropriate Home Delivered Meals Information
 - a. Providing Enrollee materials related to the food provided (for example, fact sheets on benefits of proteins in the meal, recipes to remake the meals, total sodium count for entire day’s meals)

B. Additional Service Detail

Nutritionally Appropriate Home Delivered Meals is a **Nutrition Category 1 service**.

C. Criteria for Enrollees to Receive Nutritionally Appropriate Home Delivered Meals

To receive Nutritionally Appropriate Home Delivered Meals, Enrollees must meet the following criteria.

1. HNBC: have an HNBC that does not require a Medically Tailored Home Delivered Meal. Specifically having a condition other than
 - a. HIV
 - b. Cardiovascular disease
 - c. Diabetes
 - d. Renal disease
 - e. Lung disease
 - f. Liver disease
 - g. Cancer
 - h. High-risk pregnancy (including up to 12 months postpartum);
2. Risk Factor: be experiencing Very Low Food Security; and

3. Other Criteria: be unable to prepare own meals. Reasons for being unable to prepare meals may include physical or mental conditions or lack of knowledge, capacity, or resources to prepare meals.

D. Provider Qualifications

Providers of Nutritionally Appropriate Home Delivered Meals must meet the following criteria.

1. Have at least one year of experience providing medically tailored or nutritionally appropriate home delivered meals to people experiencing Food Insecurity (for example, experience with Flexible Services, current nutrition-focused contracts/grants with local, state, or federal agencies);
2. Have specialized staff with knowledge of nutritionally appropriate home delivered meals, Food Insecurity or imbalance;
3. Have specialized staff with education (for example, a bachelor's degree, associate's degree, or certificate) in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience; or training in nutrition or anti-hunger services; and
4. Have an RDN on staff or as a consultant to assess Enrollees and be engaged in the development of the meals to ensure adherence to appropriate nutritional standards.

E. Payment and Billing Code Requirements

Plans must require their Providers of Nutritionally Appropriate Home Delivered Meals to submit to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations.

MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.2.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.3 HRSN Supplemental Nutrition Services – Medically Tailored Food Boxes

A. Service Description

Providers of Medically Tailored Food Boxes provide Enrollees with minimally prepared grocery items approved by an RDN or NDTR to help an Enrollee experiencing Very Low Food Security receive appropriate nutrition to support their specific medical condition, in accordance with MCE Contracts. Medically Tailored Foods Food Boxes consist of the following.

1. Medically Tailored Food Boxes
 - a. Have an RDN or NDTR (overseen by an RDN) assessment of the Enrollee’s medical and nutritional needs
 - b. Contain minimally prepared grocery items (such as fresh vegetables and fruits, cooked chicken breast, and cooked grains) for the Enrollee’s specific condition approved by an RDN or NDTR (overseen by an RDN)
 - i. To approve Medically Tailored Food Boxes, an RDN or NDTR (overseen by an RDN) must develop or review box composition
 - c. Must be provided for a minimum of 12 weeks
2. Navigation includes
 - a. Identifying other available resources based on the initial needs assessment (for example, benefits, entitlements, and discretionary services for which the Enrollee is potentially eligible)
 - b. For identified needs, in coordination with the Enrollee’s Plan, connecting and referring them to appropriate supports, like SNAP Outreach Provider or a food pantry
3. Medically Tailored Food Boxes Information
 - a. Providing Enrollee materials related to the food provided (for example, fact sheets on benefits of grocery items, recipes to make meals from items, total sodium count in items)

B. Additional Service Detail

Medically Tailored Food Boxes is a **Nutrition Category 1 service**.

C. Criteria for Enrollees to Receive Medically Tailored Food Boxes

To receive Medically Tailored Food Boxes, Enrollees must meet the following criteria.

1. HNBC: have any of the following HNBC conditions that require improvement, stabilization, or prevention of deterioration of functioning.
 - a. HIV
 - b. Cardiovascular disease
 - c. Diabetes
 - d. Renal disease
 - e. Lung disease
 - f. Liver disease
 - g. Cancer
 - h. High-risk pregnancy (including up to 12 months postpartum)
2. Risk Factor: be experiencing Very Low Food Security; and
3. Other Criteria: Enrollees or their authorized representatives or guardians (such as parents, caretakers) must be able to prepare meals.

D. Provider Qualifications

Providers of Medically Tailored Food Boxes must meet the following criteria.

1. Have at least one year of experience providing medically tailored meals, medically tailored food boxes, or nutritionally appropriate food boxes to people experiencing Food Insecurity with applicable health conditions (for example, experience with Flexible Services, current nutrition-focused contracts/grants with local, state, or federal agencies);
2. Have specialized staff with knowledge of medically tailored meals or food boxes, Food Insecurity or imbalance;
3. Have specialized staff with education (for example, a bachelor's degree, associate's degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience; and
4. Have an RDN on staff or as a consultant to assess Enrollees and approve food boxes.

E. Payment and Billing Code Requirements

Plans must require their Providers of Medically Tailored Food Boxes to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates include activities outlined in Section 2.3.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.4 HRSN Supplemental Nutrition Services – Nutritionally Appropriate Food Boxes

A. Service Description

Providers of Nutritionally Appropriate Food Boxes provide Enrollees with minimally prepared grocery items curated by an RDN or NDTR to help an Enrollee experiencing Very Low Food Security obtain food that meets appropriate nutritional standards, in accordance with MCE Contracts. Nutritionally Appropriate Food Boxes consist of the following.

1. Nutritionally Appropriate Food Boxes
 - a. Contain minimally prepared grocery items including, but not limited to, fresh foods (such as fresh vegetables and fruits) and other nutritionally appropriate food items (such as proteins, dried goods, seasonings, spices)
 - i. This may take the form of a Community Supported Agricultural (CSA) share
 - b. Are based on the Provider's assessment of Enrollee's medical and nutritional needs
 - c. Have an RDN or NDTR (overseen by an RDN) engaged in the curating of foods other than fresh foods to ensure adherence to appropriate nutritional standards (for example, Dietary Guidelines for Americans)
2. Navigation includes
 - a. Identifying other available resources based on the initial needs assessment (such as benefits, entitlements, and discretionary services for which the Enrollee is potentially eligible)
 - b. For identified needs, in coordination with the Enrollee's Plan, connecting and referring them to appropriate supports like SNAP Outreach Provider or a food pantry
3. Nutritionally Appropriate Food Box Information
 - a. Providing Enrollee materials related to the food provided (for example, fact sheets on benefits of grocery items, recipes to make meals from items, total sodium count in items)

B. Additional Service Detail

Nutritionally Appropriate Food Boxes is a **Nutrition Category 1 service**.

C. Criteria for Enrollees to Receive Nutritionally Appropriate Food Boxes

To receive Nutritionally Appropriate Food Boxes, Enrollees must meet the following criteria.

1. HNBC: Have an HNBC that does not require a Medically Tailored Food Box. Specifically having a condition other than the following.
 - a. HIV
 - b. Cardiovascular disease
 - c. Diabetes
 - d. Renal disease
 - e. Lung disease
 - f. Liver disease
 - g. Cancer
 - h. High-risk pregnancy (including up to 12 months postpartum);
2. Risk Factor: be experiencing Very Low Food Security; and
3. Other Criteria: Enrollees or their authorized representatives or guardians (like parents, caretakers) must be able to prepare meals.

D. Provider Qualifications

Providers of Nutritionally Appropriate Food Boxes must meet the following criteria:

1. Have at least one year of history providing medically tailored or nutritionally appropriate meals or food boxes to people experiencing Food Insecurity (such as experience with Flexible Services, current nutrition-focused contracts/grants with local, state, or federal agencies);
2. Have specialized staff with knowledge of meals or food boxes, Food Insecurity or imbalance;
3. Have specialized staff with education (for example, a bachelor's degree, associate's degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience; and
4. If curating foods other than fresh foods, have an RDN on staff or as a consultant to engage in curating such foods.

E. Payment and Billing Code Requirements

Plans must require their Providers of Nutritionally Appropriate Food Boxes to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates include activities outlined in Section 2.4.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.5 HRSN Supplemental Nutrition Services – Medically Tailored Food Prescriptions and Vouchers

A. Service Description

Providers of Medically Tailored Food Prescriptions and Vouchers provide Enrollees with food vouchers and grocery store gift cards to purchase minimally prepared grocery items from an allowable list, curated by an RDN or NDTR, that is tailored to Enrollee’s specific condition, herein as an approved purchase list (APL)), to help an Enrollee experiencing Very Low Food Security receive appropriate nutrition to support their specific medical condition, in accordance with MCE Contracts. Medically Tailored Food Prescriptions and Vouchers consist of the following.

1. Medically Tailored Food Voucher or Gift Card
 - a. Has an RDN or NDTR (overseen by an RDN) assessment of the Enrollee’s medical and nutritional needs
 - b. Must implement an APL to assist with accessing an appropriate diet based on the Enrollee’s specific condition
 - c. Has an RDN or NDTR (overseen by an RDN) engaged in curating the APL in adherence to appropriate nutritional standards (such as Dietary Guidelines for Americans) and supporting the Enrollee in identifying appropriate foods to purchase from the APL to address their individual needs
 - d. Is provided, activated, and maintained by the Provider (such as sending or delivering voucher or card; activating and maintaining voucher or card to ensure availability; and associated outreach to member related to the voucher or card) to purchase appropriate foods from the APL
 - e. Must be offered for a minimum of 12 weeks
2. Navigation includes
 - a. Identifying other available resources based on the initial needs assessment (such as, benefits, entitlements, and discretionary services for which the Enrollee is potentially eligible)
 - b. For identified needs, in coordination with the Enrollee’s Plan, connecting and referring them to appropriate supports like SNAP Outreach Provider or a food pantry
3. Medically Tailored Food Prescriptions and Voucher Information
 - a. Provide Enrollee materials related to the APL (for example, fact sheets on benefits of proteins in meals, recipes to make meals, total sodium count for entire day’s meals)

B. Additional Service Detail

Medically Tailored Food Prescriptions and Vouchers is a **Nutrition Category 1 service**.

C. Criteria for Enrollees to Receive Medically Tailored Food Prescriptions and Vouchers

To receive Medically Tailored Food Prescriptions and Vouchers, Enrollees must meet the following criteria.

1. HNBC: Have any of the following HNBC conditions that require improvement, stabilization, or prevention of deterioration of functioning.
 - a. HIV
 - b. Cardiovascular disease
 - c. Diabetes
 - d. Renal disease
 - e. Lung disease

- f. Liver disease
 - g. Cancer
 - h. High-risk pregnancy (including up to 12 months postpartum).
2. Risk Factor: be experiencing Very Low Food Security; and
 3. Other Criteria: Enrollees or their authorized representatives or guardians (for example, parents, caretakers) must be able to prepare meals.

D. Provider Qualifications

Providers of Medically Tailored Food Prescriptions and Vouchers must meet the following criteria.

1. Have at least one year of experience providing food vouchers to people experiencing Food Insecurity with applicable health conditions (for example, experience with Flexible Services, current nutrition-focused contracts/grants with local, state, or federal agencies);
2. Have specialized staff with knowledge of food vouchers, Food Insecurity or imbalance;
3. Have specialized staff with education (for example, a bachelor's degree, associate's degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience; and
4. Have an RDN on staff or as a consultant to assess Enrollees and engage in curating the APL.

E. Payment and Billing Code Requirements

Plans must require their Providers of Medically Tailored Food Prescriptions and Vouchers to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.5.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.6 HRSN Supplemental Nutrition Services – Nutritionally Appropriate Food Prescriptions and Vouchers

A. Service Description

Providers of Nutritionally Appropriate Food Prescriptions and Vouchers provide Enrollees experiencing Very Low Food Security with food vouchers and grocery store gift cards to purchase food that meets appropriate nutritional standards, in accordance with MCE Contracts. Nutritionally Appropriate Food Prescriptions and Vouchers consist of the following.

1. Nutritionally Appropriate Food Voucher or Gift Card
 - a. Provided, activated, and maintained by the Provider (for example, sending or delivering voucher or card; activating and maintaining voucher or card to ensure availability; and associated outreach to member related to the voucher or card) to purchase nutritionally appropriate foods
 - b. Based on the Provider's assessment of Enrollee's medical and nutritional needs
2. Navigation includes
 - a. Identifying other available resources based on the initial needs assessment (for example, benefits, entitlements, and discretionary services for which the Enrollee is potentially eligible)
 - b. For identified needs, in coordination with the Enrollee's Plan, connecting and referring them to appropriate supports like SNAP Outreach Provider or a food pantry

B. Additional Service Detail

Nutritionally Appropriate Food Prescriptions and Vouchers is a **Nutrition Category 1 service**.

C. Criteria for Enrollees to Receive Nutritionally Appropriate Food Prescriptions and Vouchers

To receive Nutritionally Appropriate Food Prescriptions and Vouchers, Enrollees must meet the following criteria:

1. HNBC: have an HNBC that does not require a Medically Tailored Food Prescription or Voucher. Specifically having a condition other than the following.
 - a. HIV
 - b. Cardiovascular disease
 - c. Diabetes
 - d. Renal disease
 - e. Lung disease
 - f. Liver disease
 - g. Cancer
 - h. High-risk pregnancy (including up to 12 months postpartum);
2. Risk Factor: be experiencing Very Low Food Security; and
3. Other Criteria: Enrollees or their authorized representatives or guardians (for example, parents, caretakers) must be able to prepare meals

D. Provider Qualifications

Providers of Nutritionally Appropriate Food Prescriptions and Vouchers must meet the following criteria.

1. Have at least one year of experience providing food vouchers to people experiencing Food Insecurity (for example, experience with Flexible Services, current nutrition-focused contracts/grants with local, state, or federal agencies);

2. Have specialized staff with knowledge of food vouchers, Food Insecurity or imbalance; and
3. Have specialized staff with education (for example, a bachelor's degree, associate's degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience.

E. Payment and Billing Code Requirements

Plans must require their Providers of Nutritionally Appropriate Food Prescriptions and Vouchers to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates include activities outlined in Section 2.6.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.7 HRSN Supplemental Nutrition Services – Nutrition Education Classes and Skills Development

A. Service Description

Providers of Nutrition Education Classes and Skills Development provide Enrollees experiencing Very Low Food Security with nutrition education and skills in the form of group classes or 1-on-1 sessions, to help an Enrollee meet their nutritional and dietary needs, in accordance with MCE Contracts.

B. Additional Service Detail

Nutrition Education Classes and Skills Development is a **Nutrition Category 2 service** and must be provided with a Nutrition Category 1 service.

C. Criteria for Enrollees to Receive Nutrition Education Classes and Skills Development

To receive Nutrition Education Classes and Skills Development, Enrollees must meet the following criteria.

1. Other Criteria:

- a. Be receiving a Nutrition Category 1 service; and
- b. Is assessed or otherwise determined by the Plan or designee to need Nutrition Education and Skills Development to be able to utilize the Category 1 Service they are receiving to meet their nutritional or dietary needs.

D. Provider Qualifications

Providers of Nutrition Education Classes and Skills Development must meet the following criteria.

1. Have an RDN or NDTR (overseen by an RDN) on staff or as a consultant to be either engaged with the curriculum development and implementation plan, or to directly oversee the class, session, or education material development; and
2. Have specialized staff who are not RDNs or NDTRs with education (for example, a bachelor's degree, associate's degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience.

E. Payment and Billing Code Requirements

Plans must require their Providers of Nutrition Education Classes and Skills Development to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.7.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.8 HRSN Supplemental Nutrition Services – Nutrition Counseling

A. Service Description

Providers of Nutrition Counseling provide Enrollees experiencing Very Low Food Security with nutrition counseling in either a one-on-one session or group setting with an RDN or NDTR (overseen by an RDN), in accordance with MCE Contracts.

B. Additional Service Detail

Nutrition Counseling is a **Nutrition Category 2 service** and must be provided with a Nutrition Category 1 service.

C. Criteria for Enrollees to Receive Nutrition Counseling

To receive Nutrition Counseling, Enrollees must meet the following criteria.

1. Other Criteria:
 - a. Be receiving a Nutrition Category 1 service; and
 - b. Is assessed or otherwise determined by the Plan or designee to need Nutrition Counseling to utilize the Category 1 Service they are receiving to meet their nutritional or dietary needs.

D. Provider Qualifications

Providers of Nutrition Counseling must meet the following criteria.

1. Have an RDN or NDTR (overseen by an RDN) on staff or as a consultant to either provide or oversee the nutrition counseling; and
2. Have specialized staff who are not RDNs or NDTRs with education (for example, a bachelor's degree, associate's degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience.

E. Payment and Billing Code Requirements

Plans must require their Providers of Nutrition Counseling to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates include activities outlined in Section 2.8.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 2.9 HRSN Supplemental Nutrition Services – Kitchen Supplies

A. Service Description

Providers of Kitchen Supplies pay for and assist Enrollees with obtaining cooking supplies (such as, pots and pans, utensils, refrigerator) needed to meet the member’s nutritional and dietary needs, in accordance with MCE Contracts.

B. Additional Service Detail

Kitchen Supplies is a **Nutrition Category 2 service** and must be provided with a Nutrition Category 1 service.

If an Enrollee meets the criteria for both Kitchen Supplies and Transitional Goods (an [HRSN Supplemental Housing Service](#)), Plans must ensure non-duplication of goods provided to the Enrollee.

C. Criteria for Enrollees to Receive Kitchen Supplies

To receive Kitchen Supplies, Enrollees must meet the following criteria.

1. Other Criteria:

- a. Be receiving a Nutrition Category 1 service; and
- b. Is assessed or otherwise determined by the Plan or designee to need Kitchen Supplies to utilize the Category 1 Service they are receiving to meet their nutritional or dietary needs.

D. Provider Qualifications

Providers of Kitchen Supplies must meet the following criteria

1. Have specialized staff with education (for example, a bachelor’s degree, associate’s degree, or certificate) or training in nutrition or anti-hunger services, or at least one year of relevant professional experience or lived experience.

E. Payment and Billing Code Requirements

Plans must require their Providers of Kitchen Supplies to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](#) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](#).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.9.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Nutrition Services. MassHealth has included a list of recommended Place of Service codes in [Attachment A](#) at the end of this document.

Section 3. ATTACHMENTS

ATTACHMENT A: Recommended Place of Service Codes

POS 10: Telehealth Provided in Patient's Home

- Nutrition Education Classes and Skills Development
- Nutritional Counseling

POS 11: Office

- Nutrition Education Classes and Skills Development
- Nutrition Counseling

POS 12: Home

- Medically Tailored Home Delivered Meals
- Nutritionally Appropriate Home Delivered Meals
- Medically Tailored Food Boxes
- Nutritionally Appropriate Food Boxes
- Medically Tailored Food Prescriptions and Vouchers
- Nutritionally Appropriate Food Prescriptions and Vouchers
- Kitchen Supplies

POS 99: Other Place of Service

- Services provided at a Nutrition Hub (for example, a grocery store, food mart, farmers market)