

BY ELECTRONIC MAIL July 28, 2025

c/o William Anderson

Office of the General Counsel, Department of Public Health 250 Washington Street

Boston, MA 02108

Re: 801 CMR 4.00: Rates

The Massachusetts Health & Hospital Association (MHA), on behalf of its member hospitals, health systems, physician organizations, and allied healthcare providers, appreciates the opportunity to submit these comments regarding the proposed amendments to *801 CMR 4.00: Rates*. MHA supports the Department of Public Health’s commitment to improving the quality and oversight of long-term care facilities (LTCFs) and the establishment of small house nursing homes. We also understand the financial costs to the Department that have triggered the proposed increase in architectural plan review fees. Thank you for the opportunity to provide feedback, and while you consider this increase in fees we also hope you consider a few points below.

As the Department is aware, hospitals and health systems are still struggling financially due to low reimbursement rates and capacity constraints, among other issues that will worsen due to recent federal Medicaid and coverage cuts. Although MHA and its members support the commonwealth’s initiatives to improve LTCFs, we believe these efforts should be funded in a way that does not place a disproportionate burden on them.

Many of our members are planning to make capital investments to their facilities to meet the needs of the communities they serve. These proposed plan review fee increases would negatively affect the ability to carry out these projects as scheduled. If the fee increases are non-negotiable, MHA recommends a phased-in approach for the increases starting in FY27 for new projects.

Many hospitals have projects under development that already have been budgeted with assumptions for architectural plan review costs.

Additionally, if the architectural plan review fees are increased, MHA and its members ask for a commitment from the Department to improve its timeliness for completing architectural plan reviews to 30 or 60 days. We understand these reviews may require multiple experts to complete, but believe the facility submitting the plans should receive an answer as quickly as possible.

MHA greatly appreciates that the draft amendment maintains the maximum plan review fee of

$45,000, and exempts plans from needing review if the total construction cost is less than

$50,000.

MHA looks forward to our continued work with the Department on the proposed architectural plan review rates in these financially uncertain times and appreciates the opportunity to provide feedback. Please do not hesitate to contact me at alevie@mhalink.org with any questions or concerns.

Sincerely,



Alex Levie, MPH

Director, Healthcare Policy & Regulatory Affairs Massachusetts Health & Hospital Association

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