



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
www.mass.gov/masshealth

MassHealth
Nursing Facility Bulletin 147
May 2020

TO: Nursing Facilities Participating in MassHealth
FROM: Amanda Cassel Kraft, Acting Medicaid Director
RE: **Signing Bonuses for Nursing Facility Staff**

Background

In light of the state of emergency declared in the Commonwealth due to the 2019 novel coronavirus (COVID-19) outbreak, MassHealth is implementing measures to address staffing shortages that nursing facilities are experiencing due to COVID-19. Specifically, MassHealth is funding qualifying signing bonuses that eligible nursing facilities pay to incentivize new direct care staff to work in nursing facilities during the public health emergency.

The Commonwealth also established the [COVID-19 Long Term Care Facility Staffing Team Intake](#) portal (“the portal”) on April 8, 2020, to enable long-term-care facilities, including nursing facilities, to request staffing needs and to allow potential staff to apply for jobs. The Commonwealth uses the portal to match labor supply and demand, prioritizing requests in facilities that have the most urgent need for staffing. It will also be used as a tool to facilitate the implementation of this signing bonus policy, as further described herein.

This bulletin applies to MassHealth-participating nursing facilities that meet the criteria described below and that attest to their eligibility through the form provided in Appendix A.

This bulletin will remain effective for the duration of the state of emergency declared via [Executive Order No. 591](#).

Criteria for Qualified Signing Bonus Payments

In order for a nursing facility to be eligible for a supplemental payment by MassHealth, the facility must meet the criteria described herein and the provider must attest to its compliance with those criteria via the form attached as Appendix A of this bulletin. The providers that submit an attestation regarding their compliance with the criteria set forth in this bulletin, and whose attestation is accepted by EOHHS, will be eligible for supplemental payments from MassHealth. The payment methodology for eligible nursing facilities will be described in a forthcoming administrative bulletin issued by EOHHS.

In order for signing bonus payments to qualify, and for the nursing facility provider to become eligible for the associated supplemental payments from MassHealth, the provider must meet the following criteria:

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1. The provider operates a nursing facility licensed by the Department of Public Health and enrolled as a provider with MassHealth. As such, the provider is subject to all state and federal statutory and regulatory requirements, including those established under 130 CMR 456.000: *Long Term Care Services* and 130 CMR 450.000: *Administrative and Billing Regulations*, as such requirements are applicable and in effect during the COVID-19 public health crisis.
2. The provider directly hired each employee or contractor claimed as an eligible hire under this bulletin on or after April 8, 2020, and on or before June 12, 2020. Each employee or contractor claimed as an eligible hire under this bulletin must be listed in in Table A of this bulletin and submitted to EOHHS in the manner described herein in order for their signing bonus to be considered qualifying. An employee or contractor hired via a temporary staffing service or agency will not be considered directly hired by the provider and should not be listed in Table A.
3. The employees or contractors listed in Table A must be one of the following employment types: certified nursing assistant (CNA)/patient care tech, resident care assistant (RCA), registered nurse (RN), licensed practical nurse (LPN), occupational therapist assistant (OTA), physical therapist assistant (PTA), activities assistant/recreational therapist, occupational therapist (OT), physical therapist (PT), or licensed independent social worker (LICSW).
4. The provider hired the employees or contractors listed in Table A through the portal or registered their employment with the facility through the portal by June 19.
5. The employees and contractors listed in Table A worked for at least 128 hours at the facility within 30 days of the employee or contractor's start date, or if they did not reach such 30 day hourly requirement, worked for at least 64 hours at the facility within 15 days of the employee or contractor's start date. The facility must indicate on Table A if the employee or contractor met the 128 hours within 30 days criteria or, if not, the 64 hours within 15 days criteria. An employee or contractor listed in Table A whose employment would otherwise be eligible for a qualifying signing bonus based on the qualifying criteria, but who became COVID-19 positive during the 15-day or 30-day duration and could not complete the requisite number of hours due to such diagnosis, will be deemed to have met the hour eligibility criteria.
6. The provider disbursed to each of the eligible employees and contractors listed in Table A payments of \$500 or greater to those who worked at least 64 hours within 15 days and payments of \$1,000 or greater to those who worked at least 128 hours within 30 days on or before 37 days after the employee or contractor's start date, such that all signing bonuses are disbursed on or before July 19, 2020. The provider must be able to produce documentation upon request demonstrating that the signing bonus was paid on top of the employee or contractor's base wages and benefits.
7. The provider must submit a scanned copy of the executed attestation via email to Amar Parikh at amar.parikh@massmail.state.ma.us and Meera Ramamoorthy at meera.ramamoorthy@massmail.state.ma.us on or before July 24, 2020.

Submission of Attestation of Compliance

In order for MassHealth to recognize qualifying signing bonus payments, a nursing facility administrator or other appropriate representative must attest to the criteria set forth above using the form included in this bulletin as Appendix A, and must submit the executed form via email to Amar Parikh at amar.parikh@massmail.state.ma.us and Meera Ramamoorthy at meera.ramamoorthy@massmail.state.ma.us. Upon notification from MassHealth that the provider's attestation has been accepted, the provider will be eligible for the supplemental payment to be established in the forthcoming EOHHS administrative bulletin as of the date the facility submitted the attestation to MassHealth.

Verification of Compliance

A nursing facility provider that attests to their compliance with the criteria established by this bulletin will be subject to audits, inspections, or requests for information or documentation by EOHHS and MassHealth regarding its compliance with the criteria established in this bulletin. If a nursing facility is determined to be out of compliance with the criteria established in this bulletin or any other state or federal requirements, as applying and in effect during the COVID-19 public health emergency, EOHHS may take appropriate administrative action under 130 CMR 450.000: *Administrative and Billing Regulations*, and/or may refer the provider to the Medicaid Fraud Division at the Attorney General's Office for further investigation.

Additional Information

For the latest MA-specific information, visit the following link:

<https://www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19>.

The latest CMS guidance is available at the following link: <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>.

MassHealth Website

This bulletin is available on the MassHealth website at www.mass.gov/masshealth-provider-bulletins. To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to join-masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.

Questions

If you have any questions about the information in this bulletin, please email your inquiry to Amar Parikh at amar.parikh@massmail.state.ma.us and Meera Ramamoorthy at meera.ramamoorthy@massmail.state.ma.us.

Appendix A

Nursing Facility Provider Attestation to Qualified Signing Bonus Payments

I, _____, hereby certify under the pains and penalties of perjury that I am the administrator or other duly authorized officer or representative of _____, located at _____, (hereinafter “nursing facility”) and that the nursing facility provider directly hired nursing and other qualifying direct care staff and paid said staff qualifying signing bonus payments.

Specifically, I represent and warrant that:

I have actual knowledge that the following conditions are currently satisfied:

1. The provider operates a nursing facility licensed by the Department of Public Health and enrolled as a provider with MassHealth. As such, the provider is subject to all state and federal statutory and regulatory requirements, including those established under 130 CMR 456.000: *Long Term Care Services* and 130 CMR 450.000: *Administrative and Billing Regulations*, as such requirements are applicable and in effect during the COVID-19 public health crisis.
2. The provider directly hired each employee or contractor listed in the attached Table A on or after April 8, 2020, and on or before June 12, 2020, and that no employee or contractor listed in Table A was hired via a temporary staffing service or agency.
3. The employees or contractors listed in Table A are one of the following employment types: certified nursing assistant (CNA)/patient care tech, resident care assistant (RCA), registered nurse (RN), licensed practical nurse (LPN), occupational therapist assistant (OTA), physical therapist assistant (PTA), activities assistant/recreational therapist, occupational therapist (OT), physical therapist (PT), or licensed independent social worker (LICSW).
4. The provider hired the employees or contractors listed in Table A through the portal or registered their employment with the facility through the portal by June 19, 2020.
5. Each of the employees and contractors listed in Table A worked for at least 128 hours at the facility within 30 days of the employee or contractor’s start date or, if not, at least 64 hours at the facility within 15 days of the employee or contractor’s start date, or was otherwise a qualifying hire but became a COVID-19 positive during the 30-day or 15-day duration and could not complete the requisite number of hours due to such diagnosis.
6. The provider accurately indicated on Table A whether each employee or contractor met the 128 hours within 30 days requirement or met the 64 hours within 15 days requirement, instead.
7. The provider disbursed to each of the eligible employees and contractors listed in Table A payments of \$500 or greater for those who worked at least 64 hours within 15 days and payments of \$1,000 or greater for those who worked at least 128 hours within 30 days on or before 37 days after the employee or contractor’s start date, such that all signing bonuses were disbursed on or before July 19, 2020, and the provider is able to demonstrate that the signing bonus was paid on top of the employee or contractor’s base wages and benefits.

Further, I hereby acknowledge that the nursing facility will cooperate fully with any audits, inspections, or requests for information or documentation related to its compliance with the conditions set forth in *MassHealth Nursing Facility Provider Bulletin 147*.

Under the pains and penalties of perjury, I hereby certify that the above information is true and correct.

Printed Name: _____

Title: _____

Signature: _____

Date: _____

Please submit a scanned copy of the executed attestation via email to Amar Parikh at amar.parikh@massmail.state.ma.us and Meera Ramamoorthy at meera.ramamoorthy@massmail.state.ma.us.

The nursing facility should maintain the original executed copy of the attestation in its files.

