



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

Nursing Facility Bulletin 191

DATE: January 2025

TO: Nursing Facilities Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth

RE: **Additional member specific criterion required to bill for the Substance Use Disorder (SUD) Add-on**

Background

This bulletin is being issued under 101 CMR 206.10(14): *Substance Use Disorder (SUD) Add-on and SUD Induction Period Add-on*. It applies to nursing facilities participating in the MassHealth program that have previously met the requirements to qualify to bill for the SUD add-on, per the bulletins below.

- [Nursing Facility Bulletin 185](#): Substance Use Disorder (SUD) Add-on and SUD Induction Period Add-on (February 2024)
- [Nursing Facility Bulletin 188](#): Updates to Substance Use Disorder (SUD) Add-on and SUD Induction Period Add-on (August 2024)
- [Nursing Facility Bulletin 189](#): Requirement for Appropriate Agreements between High-SUD Nursing Facility and Opioid Treatment Programs (August 2024)

This bulletin provides further guidance regarding an additional criterion that must be satisfied for such nursing facilities to bill for member-specific SUD add-on payments under 101 CMR 206.10(14)(a)(1), namely the member services under 101 CMR 206.10(14)(c): *SUD Services or Treatment* for dates of service beginning October 1, 2024.

Eligibility Criteria for SUD Add-on

For dates of service beginning October 1, 2024, a nursing facility that meets the criteria in 101 CMR 206.10(14)(a)(3) or (4), as applicable, and has satisfied the requirements in Nursing Facility Bulletins 185, 188, and 189, as applicable, will be eligible for a member-specific SUD add-on. The SUD add-on, for a member for whom MassHealth is the primary payer, is \$50 per member per day for each member residing in the facility who has a documented SUD diagnosis listed in 101 CMR 206.10(14)(b) and who receives at least one SUD service or treatment listed in 101 CMR 206.10(14)(c).

To bill for the SUD add-on, a nursing facility must ensure that the member receives at least one of the following services during the same billing month as the dates of service billed for the SUD add-on:

- Opioid use disorder counseling, in individual or group format;
- Medication management for medications for opioid use disorder treatment;
- Other SUD-related counseling, in individual or group format; or
- Medication management for medications for other SUD treatment.

If none of the above-listed services is received by the member during the same billing month as the dates of services billed for the SUD add-on, the facility will be considered out of compliance with the requirements of this bulletin and 101 CMR 206.10(14). In addition, if the medication management service does not align with the Department of Public Health (DPH)'s [Memorandum for Admission of Residents on Medication for Opioid Use Disorder to Long-Term Care Facilities](#), dated September 12, 2022, the facility will be considered out of compliance with the requirements of this bulletin and 101 CMR 206.10(14).

To be clear, these requirements only apply to the SUD add-on under 101 CMR 206.10(14)(a)(1). They do not apply to the SUD Induction Period add-on under 101 CMR 206.10(14)(a)(2).

Enforcement for Non-Compliance

Any nursing facility that receives an SUD add-on is subject to audits, inspections, or requests for information or documentation by MassHealth regarding its compliance with the criteria established in this bulletin and in 101 CMR 206.10(14).

If a nursing facility is found to be out of compliance with the criteria in this bulletin or 101 CMR 206.10(14), MassHealth may recoup the paid SUD add-on as an overpayment, under 130 CMR 450.237: *Overpayments: Determination*.

Additionally, if MassHealth confirms that a nursing facility provider has made false or misleading representations through the submissions required by this bulletin, MassHealth may pursue sanctions against that provider under 130 CMR 450.238: *Sanctions: General*. MassHealth will also refer such providers to the Medicaid Fraud Division in the Attorney General's Office, as appropriate.

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