



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)

## **Nursing Facility Bulletin 198**

**DATE:** January 2026

**TO:** Nursing Facilities Participating in MassHealth

**FROM:** Mike Levine, Assistant Secretary for MassHealth

**RE:** **Audits of Antipsychotic Medication Use in Nursing Facilities**

### **Background**

This bulletin is being issued under [130 CMR 450.204: Medical Necessity](#) and 130 CMR 450.205: *Recordkeeping and Disclosure*. It announces that MassHealth will begin to conduct audits of nursing facilities' use of antipsychotic medications in calendar year 2026 and describes the process for these audits.

Per 130 CMR 250.204, MassHealth "may impose sanctions on a provider for providing or prescribing a service...where such service...is not medically necessary." Under 130 CMR 450.204(B), "Medically necessary services must be of a quality that meets professionally recognized standards of health care, and must be substantiated by records including evidence of such medical necessity and quality. A provider must make those records, including medical records, available to the MassHealth agency upon request."

During the audits, MassHealth will conduct clinical reviews of the nursing facilities' medical records for a subset of the facility's MassHealth members who have been prescribed antipsychotic medications. The goal of the audits is to ensure that nursing facilities' use of antipsychotic medications is of a quality that meets professionally recognized standards of health care.

### **General Instructions**

All facilities will be audited twice a year at the same time as the Minimum Data Set (MDS) audit under [Nursing Facility Bulletin 197](#). The audit will focus on the medical records of MassHealth members who were prescribed antipsychotic medications within the six months prior to the date of the audit. MassHealth will require nursing facilities to provide the full medical record of either five such members or 5% of all such members, whichever is greater. EOHHS will select the members whose records will be audited and will notify the facility in the audit notice.

The audit will include a detailed clinical documentation review within the medical records of the identified members. This review will focus on the following areas.

- Psychiatric and neurodegenerative diagnoses

- Evidence of neuropsychiatric symptoms and behaviors
- Psychiatric consultation notes
- Record of an informed consent form signed by the member (if the member is competent to make their own decisions), guardian (if a Rogers order is received from the Probate Court), or health care proxy (if a health care proxy is activated and the health care proxy document does not specifically limit this authority)
- Gradual dose reduction (GDR) attempts or contraindications
- Monthly pharmacy reviews and recommendations
- Individualized care plans addressing each resident's behavioral health needs

If EOHHS determines during the audit that a facility is out of compliance with professionally recognized standards regarding the use of antipsychotic medications, EOHHS will issue a notice of required corrective action plan (hereinafter "notice"). Such instances of noncompliance may include, but are not limited to, the following.

- Inadequate GDR documentation
- Unsupported diagnoses
- Improper or missing consents
- Missing care plans
- Improper coding of GDR on the MDS assessment
- Missing or unavailable documentation, including but not limited to, psychiatric consultation notes and pharmacy medication reviews

Facilities that receive such a notice will be required to submit a written corrective action plan detailing corrective measures.

## **Corrective Action Plans and Sanctions**

If a nursing facility receives a notice after the audit, the facility will have 30 days to submit to EOHHS the required corrective action plan detailing the corrective measures they have taken to address the instances of noncompliance. MassHealth may impose sanctions under 130 CMR 450.238 for any nursing facility that fails to timely submit a corrective action plan outlining how the facility has taken corrective measures for each instance of noncompliance that was listed in the notice.

Additionally, MassHealth may impose sanctions on a nursing facility if the same instances of noncompliance that were listed in a previous notice are identified again in a subsequent audit of the same facility.

MassHealth may, for any reason and at its discretion, request documentation or other information to confirm statements made during the audit and in a nursing facility's corrective action plan.

If MassHealth determines that a nursing facility provider has made false or misleading representations through the submissions required by this bulletin, MassHealth may pursue sanctions against such provider under 130 CMR 450.238: *Sanctions: General*. If appropriate,

MassHealth will also refer such providers to the Medicaid Fraud Division in the Attorney General's Office.

## **MassHealth Website**

This bulletin is available on the [MassHealth Provider Bulletins](#) web page.

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## **Questions?**

If you have questions about the information in this bulletin, please contact:

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### **All Other Provider Types**

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