

Introduction

Good morning. My name is Allison Ananis, Senior Manager, Agency Based Fee For Service Community Programs, Adult Foster Care and Group Adult Foster Care at the Office of Long Term Services and Supports (OLTSS) in the Executive Office of Health and Human Services (EOHHS). I am here to present testimony on proposed amendments to 130 CMR 419.00: *Day Habilitation Center Services*. This regulation is proposed to be effective for dates of service on or after July 1, 2024. EOHHS may adopt a revised version of this regulation after taking into account relevant comments and any other practical alternatives that come to its attention.

Background

MassHealth's day habilitation (DH) program services provide individualized, integrated, and goal-oriented services designed to maximize the independence of individuals with intellectual disabilities and developmental disabilities (ID/DD). These services are provided either in the community in structured day program settings or in nursing facilities as Preadmission Screening and Resident Review (PASRR) specialized services. DH members in community programs are leveled into low need, moderate need, or high need in accordance with the DH interdisciplinary team reviews. Effective October 2022, EOHHS replaced the Department of Developmental Services (DDS) as the purchaser of supplemental one-to-one care services, referred to as individualized staffing supports (ISS), provided to individuals requiring additional supports in the DH program. For DH services provided in nursing facilities, rates are based on the staff-to-patient ratio such as one to one, or one to two, or one to three. When one staff member serves four or more members in a nursing facility, the community DH rates are used. Effective July 5, 2023, one-time engagement incentives, admission services and re-engagement services, were added to support DH programs for returning members to services.

In collaboration with the Association of Developmental Disabilities Providers (ADDP), the Massachusetts Day Habilitation Coalition (MDHC), and the Department of Developmental Disabilities (DDS), MassHealth identified a need create a higher level of service to more appropriately align services for the highest acuity members. In addition, changes within the level

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Day Habilitation Program Services
Effective July 1, 2024
February 23, 2024—10:00 a.m.

structure will help to decrease the known administrative burdens associated with the current ISS structure.

Proposed Amendments Effective July 1, 2024

The proposed amendments to 130 CMR 419.000 update, clarify, and reorder DH program regulations to:

- Redefine the levels of service and add an additional level.
- Remove ISS and ensure that providers continue to meet the individual needs of the members served.
- Clarify and update definitions to reflect the above changes.
- Adapt and clarify that members receiving DH services in nursing facilities and members receiving DH with the medical need for continuous one-to-one nursing throughout the day will be prior authorized for Level 4 (highest new payment level).
- Clarify that nursing must be provided and can be through direct hire or contract. State that nursing coverage must be sought in the event of a callout.
- Specifically remind providers that they must have admission policies to prevent discrimination, including discrimination based on member acuity.

These amendments to the program regulations are aligned with amendments to 101 CMR 348.00: *Rates for Day Habilitation Services*.

This concludes my testimony.

Thank you.