

Introduction

Good morning. My name is Ann Harvey, and I am a manager of Behavioral Health Policy at the MassHealth Office of Accountable Care and Behavioral Health within the Executive Office of Health and Human Services (EOHHS). I am here to present staff testimony on proposed amendments to 101 CMR 358.00: *Rates for Applied Behavior Analysis*. The proposed amendments have an anticipated effective date of December 1, 2026.

Background

The rates established under 101 CMR 358.00 are for applied behavior analysis (ABA) services for publicly aided children under age 21 who have been diagnosed with autism spectrum disorder (ASD) or Down syndrome. ABA services include an evaluation and treatment plan provided by a licensed ABA professional; parent training, instruction, and supervision; and implementation of the plan by professional and paraprofessional staff. The regulation also covers MassHealth-eligible children who are served in Early Intensive Behavioral Intervention (EIBI) services. The Massachusetts Department of Public Health (DPH) uses the ABA rates for its contracted EIBI providers. Regulation 101 CMR 349.00: *Rates for Early Intervention Program Services* refers to 101 CMR 358.00 for the rates for early intervention specialty services.

Description of Proposed Changes

Effective December 1, 2026, the proposed amendments maintain all rates established in 101 CMR 358.00 at their existing levels. Although currently, there is no fee-for-service (FFS) utilization under 101 CMR 358.00, EOHHS has observed increases in year-over-year utilization and continued participation of high numbers of providers in MassHealth managed care entity (MCE) networks. EOHHS has determined that the current rates are in compliance with the requirement of M.G.L. Chapter 118E, Section 13C, which requires that rates established by EOHHS for health care services be “adequate to meet the costs incurred by efficiently and economically operated facilities providing care and services in conformity with applicable state and federal laws and regulations and quality and safety standards and which are within the

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financial capacity of the Commonwealth.” Additionally, EOHHS proposes to amend 101 CMR 358.00 to reflect updated terminology and current policy.

Fiscal Impact

There is no fiscal impact associated with the proposed amendments.

This concludes my testimony.

Thank you.