

Introduction

Good morning. My name is Annie Kazarnovsky, Program Manager of Continuous Skilled Nursing (CSN) Services 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 staff testimony on proposed amendments to 101 CMR 361.00: *Rates for Continuous Skilled Nursing Agency and Independent Nursing Services*. The anticipated effective date of the proposed amendments is for dates of service on or after September 15, 2026.

Background

Regulation 101 CMR 361.00 governs the rates paid by MassHealth and other governmental purchasers for services provided in a home setting for CSN services rendered by both agency and independent nurses. CSN services are defined as a visit of more than two continuous hours of nursing services provided by a registered nurse (RN) or a licensed practical nurse (LPN). Effective July 1, 2023, complex care assistant (CCA) services and RN supervision of CCA visits were added to the regulation. As of February 1, 2026, LPNs are also allowed to conduct CCA supervisory visits.

Description of Proposed Amendments

The proposed amendments to 101 CMR 361.00 establish a rate for LPN supervisory in-person visits for CCA services every 60 days. The proposed rate for the LPN supervisory visit (code T1003-U5) is \$16.35 per 15 minutes. This rate is the same as the current rate for the weekday agency LPN services.

The proposed amendments also establish separate fee tables in 101 CMR 361.00 specifying rates for CSN training time. CSN training time was implemented in June 2024 through CSN Agency Provider Bulletin 19 and Independent Nurse Bulletin 19 for when a CSN agency nurse or an independent nurse, respectively, is new to a MassHealth member's care and requires in-home, member specific training to provide appropriate CSN services to the member. These bulletins instructed providers to attach modifier U6 to the corresponding CSN agency and independent nurse service codes to bill at rates currently established in 101 CMR 361.00 for the training time.

EOHHS proposes to maintain all other rates at the current levels. EOHHS invested approximately \$30.5 million, a 25.3% increase relative to FY2023 base spending, for rate increases effective August 1, 2024. This significant rate increase has not been captured in the most recent cost report data, which is FY2023 data, used in this rate review. Based on this information, EOHHS concludes that the current rates, along with the addition of the LPN CCA

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supervisory visit rate, are 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, including M.G.L. Chapter 118E, Section 13C, as well as the quality and safety standards and which are within the financial capacity of the Commonwealth.

The proposed amendments also update outdated citations, update terminology, enhance consistency with other EOHHS regulations, and otherwise increase clarity.

Fiscal Impact

The estimated aggregate annual fiscal impact associated with the proposed amendments is a savings of \$15,000. The projected savings results from some of the current utilization of RN supervisory CCA visits shifting to the LPN CCA supervisory visit services that are proposed at the current rate for weekday agency LPN services, which is a lower rate than the current rate for RN CCA supervisory visits.

This concludes my testimony.

Thank you.