**Introduction**

Good morning. My name is Jennifer Reid, and I am the Assistant Project Director for the Money Follows the Person (MFP) Demonstration at the MassHealth Office of Long Term Services and Supports within the Executive Office of Health and Human Services (EOHHS). I am here to present staff testimony on proposed amendments to 101 CMR 356.00: *Rates for Money Follows the Person Demonstration Services*. These proposed amendments were published on August 1, 2025, in the Massachusetts Register and are anticipated to be effective for dates of service on or after December 1, 2025.

**Background**

Regulation 101 CMR 356.00 was last updated, effective March 1, 2023, and establishes rates for services pursuant to a demonstration grant awarded by the Centers for Medicare and Medicaid Services (CMS) to MassHealth. The MFP Demonstration helps transition eligible MassHealth members from nursing facilities; chronic disease and rehabilitation (CDR) hospitals; and long-term stay hospital settings to community-based care. The goal of the MFP Demonstration grant is to increase the use of home- and community-based services for MassHealth members while reducing utilization of facility-based care and transitioning members from these settings. MassHealth currently purchases three services, which include Assistive Technology, Community Engagement Navigation, and Transitional Assistance, under this grant.

**Proposed Amendments**

The proposed amendments to 101 CMR 356.00 include the following changes:

* Adding a citation to 101 CMR 423.00: *Rates for Certain In-Home Basic Living Supports (Levels I and J)* to the rate table in 101 CMR 356.03(4) for the Assistive Technology service to clarify previously established rates that are paid for the evaluation and training service component;
* Updating certain definitions to align with current state and federal MFP Demonstration service descriptions; and
* Updating the effective date of 101 CMR 356.00 to December 1, 2025, with no changes to the current rates.

The proposed rate amendments are in compliance with M.G.L. Chapter 118E, Sections 13C and 13D, which require EOHHS to establish rates by regulation for health care services that 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 and quality and safety standards and which are within the financial capacity of the commonwealth.”

**Fiscal Impact**

There is no fiscal impact associated with the proposed amendments.

This concludes my testimony.

Thank you.