

**Commonwealth of Massachusetts  
Executive Office of Health and Human Services**

**NOTICE OF PUBLIC HEARING**

Under the authority of M.G.L. c. 118E and in accordance with M.G.L. c. 30A, the Executive Office of Health and Human Services (EOHHS) will hold a remote public hearing on Friday, April 3, 2026, at 3 p.m. relative to the adoption of amendments to the following regulation.

**101 CMR 350.00: *Rates for Home Health Services***

The proposed regulation contains rates effective for dates of service on or after August 1, 2026. There is no fiscal impact on cities and towns.

The proposed rates comply with M.G.L. Chapter 118E, §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 financial capacity of the Commonwealth”.

EOHHS proposes to establish two per member per month rates for new optional home health agency value based payment (VBP) services, which align with the Centers for Medicare & Medicaid Services’ (CMS) home health value based purchasing program. The home health agency VBP service rates will only be accessible to home health agencies who opt to participate through an additional contract and meet provider eligibility requirements that will be established in 130 CMR 403.000: *Home Health Agency*. The home health agency VBP Rate 1 is proposed at \$2,957.60 per member per month and VBP Rate 2 is proposed at \$3,286.22 per member per month. Differential VBP rates are paid based on the eligible provider’s performance on certain quality measures. The proposed home health agency VBP rates are developed based on the current rates of relevant component services established in 101 CMR 350.00 and the respective weighted average monthly utilization. Relevant component services include medication administration visits, skilled nursing visits, home health aide visits, and therapy visits. In addition, costs for medical social work visits were added, accounting for two visits per month at the 2025 Medicare rate of \$149.24 per visit.

EOHHS is proposing these amendments, subject to federal approval, to ensure that payment rates are consistent with efficiency, economy, and quality of care, and to satisfy the requirements of M.G.L. 118E, sections 13C and 13D. The estimated aggregate annual fiscal impact of the proposed amendments is \$3.4 million in Rate Year 1 and additional \$3 million in Rate Year 2 for a total additional investment of \$6.4 million for both rate years relative to the base spending for the eligible population. The proposed amendments are not anticipated to impose new costs on small businesses, and any impact on small business providers will vary based on the volume of services provided.

To register to testify at the hearing and to get instructions on how to join the hearing online, go to [www.mass.gov/info-details/executive-office-of-health-and-human-services-public-hearings](http://www.mass.gov/info-details/executive-office-of-health-and-human-services-public-hearings). To join the hearing by phone, call (646) 558-8656 and enter meeting ID 935 397 8200# when prompted.

You may also submit written testimony instead of, or in addition to, live testimony. To submit written testimony, please email your testimony to [ehs-regulations@mass.gov](mailto:ehs-regulations@mass.gov) as an attached Word or PDF document or as text within the body of the email with the name of the regulation in the subject line. All written testimony must include the sender's full name, mailing address, and organization or affiliation, if any. Individuals who are unable to submit testimony by email should mail written testimony to EOHHS, c/o D. Briggs, 100 Hancock Street, 6<sup>th</sup> Floor, Quincy, MA 02171. Written testimony will be accepted through 5 p.m. on April 3, 2026. EOHHS specifically invites comments as to how the amendments may affect beneficiary access to care for MassHealth-covered services.

To review the current draft of the proposed regulation, go to [www.mass.gov/info-details/executive-office-of-health-and-human-services-public-hearings](http://www.mass.gov/info-details/executive-office-of-health-and-human-services-public-hearings) or request a copy in writing from MassHealth Publications, 100 Hancock Street, 6<sup>th</sup> Floor, Quincy, MA 02171.

Special accommodation requests may be directed to the Disability Accommodations Ombudsman by email at [ADAaccommodations@mass.gov](mailto:ADAaccommodations@mass.gov) or by phone at (617) 847-3468 (TTY: (617) 847-3788 for people who are deaf, hard of hearing, or speech disabled). Please allow two weeks to schedule sign language interpreters.

EOHHS may adopt a revised version of the proposed regulation taking into account relevant comments and any other practical alternatives that come to its attention.

In case of inclement weather or other emergency, hearing cancellation announcements will be posted on the MassHealth website at [www.mass.gov/info-details/executive-office-of-health-and-human-services-public-hearings](http://www.mass.gov/info-details/executive-office-of-health-and-human-services-public-hearings).

March 13, 2026

**Small Business Impact Statement**

*(As required by M.G.L. c. 30A §§ 2, 3 & 5)*

**CMR No and Title: 101 CMR 350.00: Rates for Home Health Services**

**Estimate of the Number of Small Businesses Impacted by the Regulation: 67**  
home health agency providers

Write Yes or No	Explain Briefly
No	Will small businesses have to create, file, or issue additional reports? No. The proposed amendments will not require small businesses to create, file, or issue additional reports.
No	Will small businesses have to implement additional recordkeeping procedures? No. The proposed amendments will not require small businesses to implement additional recordkeeping procedures.
No	Will small businesses have to provide additional administrative oversight? No. The proposed amendments will not require small businesses to provide additional administrative oversight.
No	Will small businesses have to hire additional employees in order to comply with the proposed regulation? No. The proposed amendments will not require small businesses to hire additional employees.
No	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)? No. The proposed amendments will not require small businesses to hire other professionals.
No	Does the regulation require small businesses to purchase a product or make any other capital investments in order to comply with the regulation? No. The proposed amendments will not require small businesses to purchase a product or make any other capital investments.
No	Are performance standards more appropriate than design/operational standards to accomplish the regulatory objective? (Performance standards express requirements in terms of outcomes, giving the regulated party flexibility to achieve regulatory objectives and design/operational standards specify exactly what actions regulated parties must take.) No. The regulation is required by statute under M.G.L. Chapter 118E, §§ 13C and 13D, and establishes the rates to be paid by governmental units to providers of non-institutional health care services, including home health services.
No	Do any other regulations duplicate or conflict with the proposed regulation? No. No other regulations duplicate or conflict with this regulation.
Yes	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities? Yes. The regulation continues to require providers to periodically comply with audits, inspections, and other regulatory activities.

Write Yes or No	Explain Briefly
No	<p>Does the regulation require small businesses to provide educational services to keep up to date with regulatory requirements?</p> <p>No. The proposed amendments do not require small businesses to provide educational services to keep up with regulatory requirements.</p>
No	<p>Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts?</p> <p>No. The proposed amendments are unlikely to deter or encourage the formation of small businesses in Massachusetts.</p>
No	<p>Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts?</p> <p>No. The proposed amendments are unlikely to deter or encourage the formation of small businesses in Massachusetts.</p>
No	<p>Does the regulation provide for less stringent compliance or reporting requirements for small businesses?</p> <p>No. The regulation does not distinguish between small businesses and other businesses.</p>
No	<p>Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses?</p> <p>No. The regulation contains requirements to report cost data to EOHHS upon request to enable EOHHS to develop rates for home health services and is applied uniformly regardless of whether the provider is a small business.</p>
No	<p>Did the agency consolidate or simplify compliance or reporting requirements for small businesses?</p> <p>No. The proposed amendments do not distinguish between small businesses and other businesses. This regulation requires providers to submit documentation requested by the Commonwealth for the purposes of utilization and provider review to ensure compliance with requirements, including the timelines for reporting, and the regulation is applied uniformly among all providers.</p>
No	<p>Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective?</p> <p>No. This regulation and its proposed amendments establish uniform conditions of payment for the provision of home health services to publicly aided individuals. These requirements are applied uniformly, regardless of the size of the provider's business, to maintain consistency in the care provided to publicly aided individuals.</p>
No	<p>Are there alternative regulatory methods that would minimize the adverse impact on small businesses?</p> <p>No. This regulation does not have an adverse impact on small businesses and governs payments for home health services provided to publicly aided individuals. It is applied uniformly regardless of whether the provider is a small business.</p>