**Administrative Bulletin 20-39**

**101 CMR 345.00: Rates for Temporary Nursing Services**

Effective May 8, 2020

Additional Rate Provision Applicable to Temporary Nursing Services Purchased by Governmental Units to Compensate for Costs Associated with Coronavirus Disease 2019 (COVID-19)

Purpose and Effective Period

The Executive Office of Health and Human Services (EOHHS) is issuing this administrative bulletin pursuant to the authority of COVID-19 Order No. 20: *Order Authorizing the Executive Office of Health and Human Services to Adjust Essential Provider Rates During the COVID-19 Public Health Emergency* andExecutive Order 591:  *Declaration of State of Emergency to Respond to COVID-19*. In light of the state of emergency declared in the Commonwealth due to COVID-19, EOHHS is establishing additional provisions to supplement 101 CMR 345.00: Rates for Temporary Nursing Services to address the potential for increased costs associated with COVID-19 and the need to provide temporary nursing services in alternate locations, as further described in this administrative bulletin.

This administrative bulletin will remain effective for the duration of COVID-19 Order No. 20: *Order Authorizing the Executive Office of Health and Human Services to Adjust Essential Provider Rates During the COVID-19 Public Health Emergency*.

Background

The COVID-19 public health emergency has unexpectedly made the delivery of critical services by temporary nursing service providers more difficult and costly and existing service rates do not contemplate these increased costs, changes in utilization patterns, or the need for alternative methods of care delivery. As a result, providers of temporary nursing services may be experiencing increased staffing costs and purchasers of these services may need to obtain temporary nursing services in alternate service locations. Accordingly, EOHHS is establishing additional provisions to supplement the rate regulation for temporary nursing services that will permit increased flexibility to address the potential for increased costs related to COVID-19 and the need to provide these critical services in alternate service locations.

## Additional Rate Provisions to Address Costs and Alternate Service Locations Associated with COVID-19

The policy at 101 CMR 345.03(1) is being expanded to add the following provisions, which are intended to address costs incurred and alternate service locations associated with COVID-19 for temporary nursing services purchased by governmental units.

**COVID-19 Emergency Increase to Maximum Rates in Nursing Facilities.** For a period of two months from May 1, 2020, through June 30, 2020, the maximum rates for temporary nursing services provided in nursing facilities are increased by 35% above the maximum rates set forth in 101 CMR 345.03(2). The maximum rates effective May 1, 2020, through June 30, 2020 are as follows:

(a) Registered Nurse (RN) – Nursing Facility.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Position | Shift | HSA 1 | HSA 2 | HSA 3 | HSA 4 | HSA 5 | HSA 6 |
| RN | Weekday, Shift 1 | $79.76 | $77.02 | $77.98 | $80.96 | $79.12 | $78.08 |
| RN | Weekday, Shift 2 | $81.96 | $79.23 | $80.18 | $83.16 | $81.32 | $80.28 |
| RN | Weekday, Shift 3 | $82.69 | $79.96 | $80.91 | $83.90 | $82.05 | $81.01 |
|  |  |  |  |  |  |  |  |
| RN | Weekend, Shift 1 | $81.96 | $79.23 | $80.18 | $83.16 | $81.32 | $80.28 |
| RN | Weekend, Shift 2 | $83.79 | $81.05 | $82.01 | $85.00 | $83.16 | $82.12 |
| RN | Weekend, Shift 3 | $84.16 | $81.43 | $82.38 | $85.37 | $83.52 | $82.49 |

(b) Licensed Practical Nurse (LPN) – Nursing Facility.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Position | Shift | HSA 1 | HSA 2 | HSA 3 | HSA 4 | HSA 5 | HSA 6 |
| LPN | Weekday, Shift 1 | $67.34 | $65.54 | $66.15 | $71.52 | $69.54 | $69.67 |
| LPN | Weekday, Shift 2 | $69.54 | $67.74 | $68.35 | $73.72 | $71.74 | $71.87 |
| LPN | Weekday, Shift 3 | $70.28 | $68.49 | $69.08 | $74.47 | $72.47 | $72.60 |
|  |  |  |  |  |  |  |  |
| LPN | Weekend, Shift 1 | $69.54 | $67.74 | $68.35 | $73.72 | $71.74 | $71.87 |
| LPN | Weekend, Shift 2 | $71.37 | $69.58 | $70.19 | $75.56 | $73.56 | $73.71 |
| LPN | Weekend, Shift 3 | $71.74 | $69.94 | $70.55 | $75.92 | $73.94 | $74.07 |

(c) Certified Nurse Aide (CNA) – Nursing Facility.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Position | Shift | HSA 1 | HSA 2 | HSA 3 | HSA 4 | HSA 5 | HSA 6 |
| CNA | Weekday, Shift 1 | $35.61 | $36.72 | $37.15 | $37.02 | $36.23 | $38.10 |
| CNA | Weekday, Shift 2 | $37.08 | $38.19 | $38.62 | $38.49 | $37.71 | $39.56 |
| CNA | Weekday, Shift 3 | $37.08 | $38.19 | $38.62 | $38.49 | $37.71 | $39.56 |
|  |  |  |  |  |  |  |  |
| CNA | Weekend, Shift 1 | $37.08 | $38.19 | $38.62 | $38.49 | $37.71 | $39.56 |
| CNA | Weekend, Shift 2 | $38.19 | $39.29 | $39.73 | $39.60 | $38.80 | $40.66 |
| CNA | Weekend, Shift 3 | $38.56 | $39.65 | $40.10 | $39.96 | $39.18 | $41.03 |

**COVID-19 Individual Consideration Rate for Governmental Units.** Temporary nursing services related to COVID-19 may be purchased by governmental units at individually considered rates that exceed the maximum rates established in 101 CMR 345.00 and governmental units may enter into contracts for the provision of these services in alternate service locations other than a hospital or nursing facility. A governmental unit, in its sole discretion, may determine whether a rate above the maximum rates established in 101 CMR 345.00 is necessary and appropriate, as well as the appropriate rate for services provided in an alternate service location other than a hospital or nursing facility. Any rate above the maximum rates established in 101 CMR 345.00 will be limited in duration to the effective period of COVID-19 Order No. 20.

**Dedicated COVID-19 Nursing Facilities.** Temporary nursing services provided in dedicated COVID-19 nursing facilities (i.e. facilities eligible for the payments described in both Sections 2 and 3 of Administrative Bulletin 20-19) may be purchased at individually considered rates that exceed the maximum rates established in 101 CMR 345.00. The purchasing entity, in its sole discretion, may determine whether a rate above the maximum rates established in 101 CMR 345.00 is necessary and appropriate for temporary nursing services provided in a dedicated COVID-19 nursing facility. Any rate above the maximum rates established in 101 CMR 345.00 will be limited in duration to the effective period of COVID-19 Order No. 20.

# Public Comment

EOHHS will accept comments on the rate established via this administrative bulletin through May 22, 2020. Individuals may submit written comments by emailing **ehs-regulations@state.ma.us**. Please submit written comments as an attached Word document or as text within the body of the email with the name of this administrative bulletin in the subject line. All submissions of comments must include the sender’s full name, mailing address, and organization or affiliation, if any. Individuals who are unable to submit comments by email may mail written comments to Kara Solimini, Director of Purchase of Services, Executive Office of Health and Human Services, 100 Hancock Street, 6th Floor, Quincy, MA 02171.

EOHHS may adopt a revised version of this administrative bulletin taking into account relevant comments and any other practical alternatives that come to its attention.