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State/Territory Name: Massachusetts

State Plan Amendment (SPA) #: 21-0045

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

March 9, 2023

MaryLou Sudders, Secretary
The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
One Ashburton Place, Room 1109
Boston, MA 02108

Re: Massachusetts State Plan Amendment (SPA) 21-0045

Dear Secretary Sudders:

We reviewed your proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 21-0045. This amendment adds day habilitation, a clubhouse, and two specialized add-on services.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR Part 447. This letter informs you that Massachusetts' Medicaid SPA Transmittal Number 21-0045 was approved on March 9, 2023, with an effective date of October 1, 2021. Enclosed are copies of the approved CMS-179 summary form and the approved SPA pages to be incorporated into the Massachusetts State Plan.

If you have any questions, please contact Marie DiMartino at 617-565-9157 or via email at Marie.DiMartino@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

Enclosures

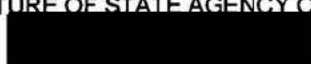
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>2 1 - 0 0 4 5</u>	2. STATE <u>MA</u>
	3. PROGRAM IDENTIFICATION: TITLE <u>XIX</u> OF THE SOCIAL SECURITY ACT	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE 10/01/2021	
5. FEDERAL STATUTE/REGULATION CITATION 42 CFR Part 447	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>22</u> \$ <u>0</u> b. FFY <u>23</u> \$ <u>0</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.39 page 1 Attachement 4.39 page 2	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.39 page 1 New	

9. SUBJECT OF AMENDMENT

An amendment to clarify specialized services under PASRR

10. GOVERNOR'S REVIEW (Check One)


<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	<input checked="" type="checkbox"/> OTHER, AS SPECIFIED: Not required under 42 CFR 430.12(b)(2)(i)
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11. SIGNATURE OF STATE AGENCY OFFICIAL  12. TYPED NAME Marylou Sudders 13. TITLE Secretary 14. DATE SUBMITTED 12/30/2021	15. RETURN TO Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid One Ashburton Place, Room 1109 Boston, MA 02108
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FOR CMS USE ONLY

16. DATE RECEIVED 12/30/21	17. DATE APPROVED 3/9/2023
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL 10/1/2021	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL James G. Scott	21. TITLE OF APPROVING OFFICIAL Director, Division of Program Operations

22. REMARKS

pen and ink change to box 7 and 8 adding Attachment 4.39, page 2 approved by the state on March 9 2023

State Plan under Title XIX of the Social Security Act
State: Massachusetts

Definition of Specialized Services

Specialized services are for individuals diagnosed with serious mental illness, an intellectual disability or related conditions that provide specialized and generic training, treatment, health services and related services directed toward –

- (i) The acquisition of behaviors necessary for the individual to function with as much self-direction and independence as possible; and
- (ii) The prevention or deceleration of regression or loss of current optimal functional status.

For individuals with intellectual disability or related conditions defined in 42 CFR § 483.102(b)(3) for the purposes of the Preadmission Screening and Resident Review process (PASRR), specialized services, as defined in 42 CFR § 483.120(a)(2), means the services specified by the State, which, when combined with services provided by the nursing facility, result in treatment which meets the requirements of 42 CFR § 483.440(a)(1), i.e., a continuous and active treatment program, which includes aggressive, consistent implementation of a program of specialized and generic training, treatment, and health-related services that are:

- (i) Developed by an interdisciplinary team, that would include, at minimum, a physician and an intellectual disability or developmental disability professional;
- (ii) Designed to address needs related to intellectual disability or related conditions;
- (iii) Of greater intensity, frequency or customization than the nursing facility services for intellectual disability or related conditions required in part 483, subpart B;
- (iv) Designed in a person-centered manner that promotes self-determination and independence;
- (v) Designed to prevent or delay loss of, or support increase in, functional abilities; and
- (vi) If the individual is admitted to or remains in an institutional setting, designed to support any goals the individual may have of transition to the most integrated setting appropriate.

For individuals with serious mental illness, defined in 42 CFR § 483.102(b)(1) for the purposes of PASRR, specialized services, as defined in 42 CFR § 483.120(a)(1), means the services specified by the State which, when combined with services provided by the nursing facility, result in the continuous and aggressive implementation of an individualized plan of care that is:

- (i) Developed by an interdisciplinary team, that would include, at minimum, a physician and a mental health professional;
- (ii) Designed to address needs related to mental illness;
- (iii) Of greater intensity, frequency or customization than the nursing facility services for mental illness required in part 483, subpart B;
- (iv) Designed in a person-centered manner that promotes self-determination and independence;
- (v) Designed to prevent or delay loss of, or support increase in, functional abilities; and
- (vi) If the individual is admitted to or remains in an institutional setting, designed to support any goals the individual may have of transition to the most integrated setting appropriate.

For individuals residing in a nursing facility with intellectual disability or related conditions, as defined in 42 CFR § 483.102(b)(3), services which may be required to be included as part of a continuous and active treatment program and which may be designated as specialized services include mobile on-site day habilitation specialized services based on functional assessments to prevent the loss or deceleration of skills for the individuals. The mobile on-site day habilitation services are individually tailored, based on

State Plan under Title XIX of the Social Security Act
State: Massachusetts

functional assessments and goals of each individual with intellectual disability or related condition requiring specialized services, and incorporated into such residents' individualized integrated service plans. These specialized services are focused on skills development in the areas of self-help, sensorimotor skills, independent living, social skills, communication, behavioral and vocational skills, and academic/educational development.

For individuals residing in a nursing facility and diagnosed with serious mental illness as defined in 42 CFR § 483.102(b)(1), services which may be required to be included as part of an individualized person-centered care plan and which may be designated as specialized services include Clubhouse Services provided through the Massachusetts Department of Mental Health, for dates of service beginning January 1, 2023. Clubhouse services provide social, vocational, goal-setting, and self-care skills-building and supports for persons with mental illness and are provided in a community day setting.