

Joint Committee on Health Care Financing 2025-2026 (194th) Bill Summary

<u>Bill Number:</u>	House, No. 1388
<u>Title:</u>	AN ACT EXTEND NURSING HOME RESIDENT OVERNIGHTS WITH THEIR FAMILY FROM 10 TO 14
<u>Sponsor:</u>	Representative John J. Marsi (Dudley)
<u>Hearing Date:</u>	July 1, 2025
<u>Reporting Deadline:</u>	August 30, 2025
<u>Prior History:</u>	New File
<u>Similar Matters:</u>	N/A

Current Law:

M.G.L. Ch. 118E § 1 designates the Executive Office of Health and Human Services [EOHHS] as the single state agency responsible for the administration of any programs of medical assistance and medical benefits established pursuant to Chapter 118E. The Secretary of EOHHS is authorized to take actions, through the division of medical assistance [DMA] and the secretary of aging and independence, as appropriate, in this capacity, in accordance with section 2 of Chapter 118E.

M.G.L. Ch. 118E § 9 establishes the Massachusetts Medicaid program and outlines its basic eligibility criteria.

M.G.L. Ch. 118E § 9A authorizes DMA to implement a combined Medicaid program and Children's Health Insurance Program (CHIP), known as MassHealth, in accordance with the terms and conditions of a demonstration project approved by the Secretary pursuant to section 1115(a) of the Social Security Act, 42 U.S.C. Section 1315(a) or any other federal waiver or demonstration authority and lists beneficiary categories for whom MassHealth may provide medical benefits.

- On September 28, 2022, CMS approved the Commonwealth's request to extend the MassHealth demonstration (Project Number 11-W-00030/1 and 21-W00071/1), in accordance with section 1115(a) of the Social Security Act (the Act), effective October 1, 2022, through December 31, 2027.

M.G.L. Ch. 118E § 12 authorizes the DMA to establish methods, policies, procedures, standards and criteria, except medical standards and criteria, as may be necessary for the proper and efficient operation of MassHealth programs. DMA is further authorized to enter into contracts and negotiate reimbursement rates with providers of care and manufacturers of medical services, equipment and supplies, subject to review by the executive office for administration and finance.

M.G.L. Ch. 118E § 14A requires nursing facilities to preserve the bed of a resident MassHealth enrollee aged 22 years or under or a period of up to 10 calendar days per year for a non-medical leave of absence, and directs DMA to make payments to nursing facilities during such non-medical leave of absence.

130 CMR 456.000 establishes the requirements for nursing-facility services under MassHealth. All nursing facilities participating in MassHealth must comply with the regulations of the DMA governing MassHealth

- **130 CMR 456.430 through 456.433, inclusive**, regulates nursing facility obligations and MassHealth payments for resident non-medical leave of absence days for MassHealth members in nursing facilities. Pursuant said regulations, MassHealth pays nursing facilities to reserve the bed of residents for temporary absences for nonmedical leave for up to a total of ten days per 12-month period.
 - A "day" is defined as a continuous 24-hour period.
 - Absences from the nursing facility of less than 24 hours do not constitute a "day."
 - Non-medical leave extending beyond the allowable 10 days is deemed an unauthorized absence, and for the purpose of payment, MassHealth will consider the resident to be voluntarily discharged.
 - Nursing facilities are prohibited from billing MassHealth for any days of unauthorized absence.

Summary: The proposed legislation requires MassHealth to amend its regulations, in 130 CMR 456.431, to increase the maximum number of covered nursing facility resident non-medical leave of absence days from 10 days per 12-month period to 14 days per 12-month period.