



The Commonwealth of Massachusetts
 Executive Office of Health and Human Services
 One Ashburton Place, Room 1109
 Boston, Massachusetts 02108

CHARLES D. BAKER
 Governor

KARYN E. POLITO
 Lieutenant Governor

MARYLOU SUDDERS
 Secretary

Tel: (617) 573-1600
 Fax: (617) 573-1891
www.mass.gov/eohhs

NOTICE OF PUBLIC HEARING

The Executive Office of Health and Human Services (EOHHS) will hold a public hearing at 12 p.m. on Friday, **February 16, 2018**, in the First Floor Conference Room, 100 Hancock Street, Quincy, MA 02171 **relative to the proposed adoption by Administrative Bulletin (AB) of rates for certain durable medical equipment (DME)** otherwise established by the version of **101 CMR 322.00: Durable Medical Equipment, Oxygen, and Respiratory Therapy Equipment**, which is anticipated to be effective for dates of service beginning March 1, 2018.

Specifically, under 101 CMR 322.01(6)(b) (promulgated pursuant to M.G.L. c. 118E), EOHHS will have the authority to establish differential rates via AB to incorporate preferred supplier pricing for DME available to eligible MassHealth-enrolled DME providers. Effective January 1, 2017, EOHHS entered into a preferred supplier agreement with Geriatric Medical Supply, Inc., for certain incontinence products supplied to MassHealth providers, which are described in Table 1. **EOHHS therefore proposes the rates set forth in Table 1 for the covered products when provided to MassHealth members on dates of service beginning March 1, 2018.** These rates are calculated based on the preferred supplier prices that will be available for the covered products to MassHealth-enrolled DME providers from the preferred supplier, plus a uniform percentage markup. Once adopted by AB, **the rates set forth in Table 1 will supersede the rates set forth in 101 CMR 322.00 for the covered products** (when the products are provided to MassHealth members), until such time as the AB is rescinded, modified, or superseded. In the event the AB is rescinded without replacement, the rates set forth for the covered products in the version of 101 CMR 322.00 then in effect will apply.

Table 1: Proposed Preferred Supplier Covered Products and Rates

HCPCS Code	Description	Proposed Rate
T4521	Adult sized disposable incontinence product, brief/diaper, small each	\$0.48
T4522	Adult sized disposable incontinence product, brief/diaper, medium, each	\$0.41
T4523	Adult sized disposable incontinence product, brief/diaper, large each	\$0.55
T4524	Adult sized disposable incontinence product, brief/diaper, extra- large, each	\$0.66

HCPCS Code	Description	Proposed Rate
T4525	Adult sized disposable incontinence product, protective underwear/pull-on, small size, each	\$0.70
T4526	Adult sized disposable incontinence product, protective underwear/pull-on, medium size, each	\$0.51
T4527	Adult sized disposable incontinence product, protective underwear/pull-on, large size, each	\$0.57
T4528	Adult sized disposable incontinence product, protective underwear/pull-on, extra- large size, each	\$0.73
T4529	Pediatric sized disposable incontinence product, brief/diaper, small/medium, each	\$0.31
T4530	Pediatric sized disposable incontinence product, brief/diaper, large size, each	\$0.49
T4531	Pediatric sized disposable incontinence product, protective underwear/pull-on, small/medium size each	\$0.50
T4532	Pediatric sized disposable incontinence product, protective underwear/pull-on, large size each	\$0.69
T4533	Youth sized disposable incontinence product, brief/diaper, each	\$0.53
T4534	Youth sized disposable incontinence product, protective underwear/pull-on, each	\$0.70
T4535	Disposable liner/shield/guard/ pad/undergarment, for incontinence, each	\$0.29
T4536	Incontinence product, protective underwear/pull-on, reusable, bed size, each	\$3.42
T4537	Incontinence product, protective under pad, reusable, bed size, each	\$7.42
T4539	Incontinence product, diaper/brief, reusable, any size, each	\$31.73
T4540	Incontinence product, protective underpad, reusable, chair size, each	\$6.82
T4541	Incontinence product, disposable underpad, large, each	\$0.22
T4542	Incontinence product, disposable underpad, small size, each	\$0.15
T4543	Disposable incontinence product, brief/diaper, bariatric, each	\$1.16
T4544	Adult sized disposable incontinence product, protective underwear/pull-on, above extra large, each	\$1.23

EOHHS is proposing this action to ensure that payments are consistent with efficiency, economy, and quality of care. EOHHS anticipates that annual aggregate MassHealth expenditures will decrease by approximately \$3.7 million as result of this action. There is no anticipated fiscal impact on cities and towns. This action is not anticipated to impose significant new costs on small businesses, and any impact on small business providers will vary based on the volume of services provided.

Individuals who notify EOHHS of their intent to testify at the hearing will be afforded an earlier opportunity to speak. Speakers may notify EOHHS of their intention to testify at the hearing by registering online at www.mass.gov/forms/registration-to-testify-at-an-eohhs-public-hearing. Individuals may also submit written testimony by emailing ehs-regulations@state.ma.us.

Please submit electronic testimony as an attached Word document or as text within the body of the email with the name of the regulation in the subject line. All submissions 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, 6th Floor, Quincy, MA 02171. Written testimony must be submitted by 5:00 p.m. on Friday, **February 16, 2018**. EOHHS specifically invites comments as to how the proposed action may impact beneficiary access to care.

Special accommodation requests may be directed to the Disability Accommodations Ombudsman by email at ADAaccommodations@state.ma.us 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 revise the proposed action based on 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 <https://www.mass.gov/service-details/eohhs-public-hearings-and-public-notices>.

January 26, 2018