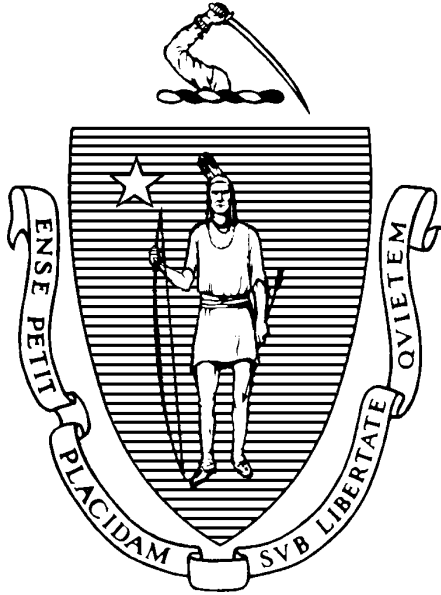




The Massachusetts Register

Published by:
The Secretary of the Commonwealth,
William Francis Galvin, Secretary

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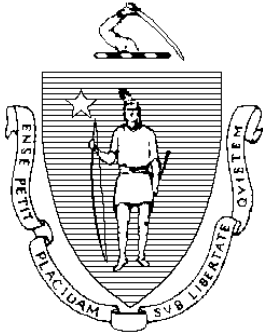
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Date

Steven P. Fleming, Deputy Secretary

9/19/19

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THE COMMONWEALTH OF MASSACHUSETTS
Secretary of the Commonwealth - William Francis Galvin

The Massachusetts Register
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Notice of Expiration of Emergency Regulation

There are no Expiration of Emergency Regulations

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51	S 2218	Establishing a Sick Leave Bank for Ryan Russell, an Employee of the Department of Correction.	8/7/2019
52	S 2240	Authorizing the Appointment of Retired Police Officers as Special Officers in the Town of Milton.	8/7/2019
53	S 2292	Providing for the Assignment of a Perpetual Conservation Restriction in the Town of Middleborough.	8/7/2019
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55	H 3739	Establishing a Sick Leave Bank for Sophia R. Velez, an Employee of the Executive Office of Health and Human Services.	8/7/2019
56	H 3849	Establishing a Sick Leave Bank for Debra Messier, an Employee of the Department of Revenue.	8/7/2019
57	H 3847	Authorizing the Town of Hudson to Grant 5 Additional Licenses for the Sale of All Alcoholic Beverages to Be Drunk on the Premises.	8/9/2019
58	S 2315	Establishing a Sick Leave Bank for Anthony Barton, an Employee of the Department of Mental Health.	8/9/2019
59	H 3742	Authorizing the Town of Plymouth to Continue the Employment of G. Edward Bradley.	8/9/2019
60	S 2301	Establishing a Sick Leave Bank for Marilyn O'Neil, an Employee of the Sex Offender Registry Board.	8/13/2019
61	S 2205	Designating a Certain Park in the City of Lynn as the Frederick Douglas Park.	8/14/2019
62	H 3848	Authorizing the Town of Hudson to Grant an Additional License for the Sale of Wines and Malt Beverages Not to Be Drunk on the Premises.	8/14/2019
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64	H 3815	Exempting the Position of Sealer of Weights and Measures in the Town of Lynnfield from the Civil Service Law.	8/14/2019
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69	H 4022	Authorizing the City of Lowell to Appoint Retired Police Officers as Special Police Officers Within Said City for Paid Detail Assignments.	9/3/2019
70	H 1818	Amending the Charter of the Town of Provincetown.	9/4/2019
71	S 1541	Establishing a Sick Leave Bank for David P. Christian, an Employee of the Department of Correction.	9/12/2019
72	H 3939	Authorizing the Town of Milford to Grant an Additional License for the Sale of Wines and Malt Beverages Not to Be Drunk on the Premises.	9/12/2019
73	H 3854	Relative to Collective Bargaining Dues. <i>This bill was returned by the Governor to the House of Representatives, the branch in which it originated, with his objections thereto, was passed by the House of Representatives on September 18, 2019, and in concurrence by the Senate on September 19, 2019, the objections of the Governor notwithstanding, in the manner prescribed by the Constitution, and therefore has the force of law.</i>	
74	H 3970	Establishing a Sick Leave Bank for Kiera C. McNamara, an Employee of the Trial Court of the Commonwealth.	9/24/2019
75	S 2331	Amending the Home Rule Charter of the City of Easthampton.	9/24/2019



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
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DANIEL TSAI
Assistant Secretary for
MassHealth

www.mass.gov/eohhs

Administrative Bulletin 19-17

101 CMR 318.00: Radiology

Effective November 1, 2019

Radiology Service Codes Updates

In accordance with 101 CMR 318.01(5), the following codes are being added effective November 1, 2019. Codes listed in this administrative bulletin are based on the 2019 CPT (Current Procedural Terminology) and 2019 HCPCS (Healthcare Common Procedure Coding System) Level II codes. Rates for added codes will be set at the current payment rate of analogous codes currently listed in 101 CMR 318.00: *Radiology*. Codes listed in this bulletin that do not have analogous codes currently listed in 101 CMR 318.00: *Radiology* will be reimbursed by individual consideration (IC). Rates listed in this administrative bulletin are applicable until revised rates are issued by the Executive Office of Health and Human Services (EOHHS).

101 CMR 318.00: Radiology – Added Codes

Added Code	Description
0394T	High dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed
0395T	High dose rate electronic brachytherapy, interstitial or intracavitary treatment, per fraction, includes basic dosimetry, when performed
G6016	Compensator-based beam modulation treatment delivery of inverse planned treatment using 3 or more high resolution (milled or cast) compensator, convergent beam modulated fields, per treatment session
G6017	Intra-fraction localization and tracking of target or patient motion during delivery of radiation therapy (e.g., 3D positional tracking, gating, 3D surface tracking), each fraction of treatment



101 CMR 318.00: Radiology Rates

Code	Non-Facility Fee	Facility Fee	Global	Professional Component Fee	Technical Component Fee
0394T	-	-	IC	-	-
0395T	-	-	IC	-	-
G6016	-	-	\$286.66	-	-
G6017	-	-	\$61.36	\$15.60	\$45.76



David E. Pierce, PhD.
Director

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Secretary

Ronald S. Amidon
Commissioner

Mary-Lee King
Deputy Commissioner

DIRECTOR'S DECLARATION:

ADJUSTMENT TO COMMERCIAL SUMMER FLOUNDER LIMITS

Pursuant to the notice and public comment requirements of G.L. c. 30A §3 and under the authority at G.L. c. 130 §§2, 17A and 80 and 322 CMR §§6.41(2)(d) and 7.01(7), the Director of the Division of Marine Fisheries makes the following Declaration to adjust the commercial summer flounder open fishing days:

1. During the period of September 21, 2019 - October 31, 2019, Saturdays have been added as an open commercial summer flounder fishing day. Accordingly, commercial summer flounder fishermen may fish for, retain, possess and land summer flounder Saturdays through Thursdays. The closed commercial fishing days, as described at 322 CMR § 6.22(2)(d)(2)(b), are Fridays.
2. Effective November 1, 2019, commercial fishermen may fish for, retain, possess and land summer flounder seven days per week. Accordingly, the closed commercial summer flounder fishing days, as described at 322 CMR § 6.22(2)(d)(2)(b), shall be rescinded.
3. Effective November 1, 2019, the commercial summer flounder limits set forth at 322 CMR § 6.22(2)(d)(2)(a) shall be adjusted and commercial fishermen using nets or hooks shall be prohibited from retaining, possessing or landing more than 1,000 pounds of summer flounder per trip or per 24-hour day, whichever period of time is longer.
4. The adjustments implemented via this declaration shall expire on December 31, 2019, or when the Director of the Division of Marine Fisheries determines that 100% of the Commonwealth's 2019 commercial summer flounder quota has been taken and the fishery is closed, whichever occurs first.

Dated: September 20, 2019

By: David Pierce



David E. Pierce, PhD.
Director

Commonwealth of Massachusetts

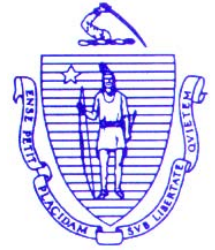
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FISHERY RE-OPENING NOTICE

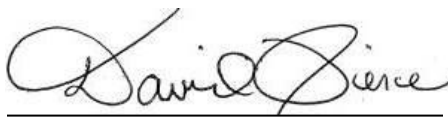
2019 LIMITED ENTRY COMMERCIAL MENHADEN FISHERY TO RE-OPEN AT 25,000 POUND TRIP LIMIT

The Division of Marine Fisheries (DMF) has received a transfer of 2019 commercial menhaden quota. With the receipt of this quota transfer, state landings are now between 85–95% of the adjusted quota. Accordingly, pursuant to the notice and public comment requirements of G.L. c. 30A §3 and under the authority of G.L. c.130 §§17A, 21 and 80, and 322 CMR §§6.43(1) and (4)(a)(2), and 7.01(7), the limited entry commercial menhaden fishery shall reopen on Friday, September 20, 2019 with a 25,000-pound trip limit.

In accordance with 322 CMR §6.43(4)(a), this 25,000-pound trip limit shall remain in effect for the limited entry commercial menhaden fishery until DMF projects 95% of the adjusted 2019 commercial menhaden quota is taken. At that time, the trip limit shall be reduced to 6,000 pounds for all participants. This action does not impact the open access commercial menhaden fishery trip limits, as established at 322 CMR §6.43(4)(b).

These trip limits are enforceable by regulation at 322 CMR §6.43(4) and by permit condition at 322 CMR §7.01(7).

Dated: September 19, 2019

By: 



David E. Pierce, PhD.
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FISHERY CLOSURE NOTICE:

2019 MA/NH ATLANTIC SEA HERRING SPAWNING CLOSURE

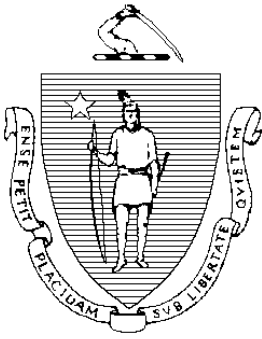
Pursuant to the notice and public comment requirements of G.L. c. 30A § 3 and under the authority of G.L. c. 130 §§ 2, 17A, 80 and 104 and 322 CMR §§ 9.03 and 7.01(7), the Massachusetts/New Hampshire Sea Herring Spawning Area (Area) is closed to the directed sea herring fishery effective 0001 hours on September 23, 2019 through 2359 hours on November 3, 2019. The Area consists of all marine waters north of Cape Cod bounded by 43°30' north latitude to the north and 70°00' west longitude.

In accordance with 322 CMR §9.03(1)(f), vessels are prohibited from taking, possessing or landing more than 2,000 pounds of sea herring from the Area during this closure period. Vessels may transit the Area during the closure in possession of more than 2,000 pounds of sea herring, provided that fish was taken outside of the Area, no fishing activity is occurring and all gear is stowed.

This closure also applies to dealers authorized to purchase sea herring directly from commercial fishermen, in accordance with G.L. c. 130 §80 and 322 CMR §§7.01(3) and 7.07(3). Pursuant to 322 CMR §§7.01(7) and 7.07(5)(b), these dealers are prohibited from purchasing or receiving more than 2,000 pounds of Atlantic sea herring taken from the Area during any calendar day.

Dated: September 20, 2019

By: 



THE COMMONWEALTH OF MASSACHUSETTS
Secretary of the Commonwealth - William Francis Galvin

NOTICES OF PUBLIC REVIEW OF PROSPECTIVE REGULATIONS
PUBLISHED IN COMPLIANCE WITH M.G.L. c. 30A, §§ 2 AND 3

October 4, 2019

Energy Resources, Department of	225 CMR 21.00	10/25/19, 10:00 A.M.- 12:00 P.M. Written comments accepted until 10/25/19 @ 5:00 P.M.
Fisheries & Wildlife, Division of	321 CMR 2.00 & 3.00	10/22/19 @ 7:00 P.M. & 10/29/19 @ 7:00 P.M.
Health Care Finance and Policy, Division of	114.3 CMR 27.00	10/15/19 @ 9:00 A.M. Written testimony accepted until 10/15/19 @ 5:00 P.M.
Health and Human Services, Executive Office of	101 CMR 327.00	10/15/19 @ 9:00A.M. Written testimony accepted until 10/15/19 @ 5:00 P.M.
Medical Assistance, Division of	130 CMR 519.000 & 520.000	Comments accepted until 10/14/19 @ 5:00 P.M.
	130 CMR 522.000	10/18/19 @ 10:00 A.M. Written testimony accepted until 10/18/19 @ 5:00 P.M.
Water Pollution Control, Division of	314 CMR 4.00	10/25/19, 10:00 A.M. - 12:00 P.M.; 10/28/19, 10:00 A.M. - 12:00 P.M. Informational Overview: 9:00 A.M. - 10:00 A.M. Written comments accepted until 11/8/19 @ 5:00 P.M.



COMMONWEALTH OF MASSACHUSETTS
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Commissioner

NOTICE OF PUBLIC COMMENT AND HEARING

Notice is hereby given that the Massachusetts Department of Energy Resources ("DOER"), acting under statutory authority of Section 11F of Chapter 25A of the General Laws, and in conformance with Chapter 30A of the General Laws, is holding a public hearing on proposed 225 CMR 21—Clean Peak Energy Portfolio Standard. The Clean Peak Energy Standard allows for qualified renewable energy generators, energy storage resources, and demand response resources to earn Clean Peak Energy Certificates (CPECs) for every megawatt hour of electricity they produce or reduce coincident with Seasonal Peak Periods as established by the regulation. Seasonal Peak Periods represent the times of day in which the Net Demand for electricity is typically the highest. The CPECs may then be purchased by retail electricity suppliers, who are required to document annually that they have procured a certain quantity of CPECs each year. These resources contribute to the Commonwealth's clean energy goals by increasing renewable energy generation, reducing the need for conventional fossil fuel-based power generation, and assisting the Commonwealth in meeting its obligations under the Global Warming Solutions Act.

A public hearing will be conducted to receive verbal and written comments on the proposed regulations.

Location: Saltonstall Building, 100 Cambridge St, 2nd Floor Conference Room B & C, Boston, MA 02114

Date: October 25, 2019 from 10:00 AM to 12:00 PM

Verbal and written testimony will be accepted at the hearing; however, parties are requested to provide written copies of their testimony. Written comments will be accepted until 5 pm on October 25, 2019. Please submit written comments to Kara Sergeant, via mail to the Department of Energy Resources, 100 Cambridge Street, Suite 1020, Boston, MA 02114, or electronically to DOER.CPS@mass.gov. Copies of the proposed regulations may be obtained from the DOER website www.mass.gov/doer or by contacting DOER at doer.cps@mass.gov.

BY ORDER OF: Judith Judson, Commissioner
Department of Energy Resources.

Small Business Impact Statement

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

CMR No: 225 CMR 21.00

Estimate of the Number of Small Businesses Impacted by the Regulation: 0

Select Yes or No and Briefly Explain

Yes ☐	No ☒	Will small businesses have to create, file, or issue additional reports? No, participation in the program by small businesses is voluntary.
Yes ☐	No ☒	Will small businesses have to implement additional recordkeeping procedures? No, participation in the program by small businesses is voluntary.
Yes ☐	No ☒	Will small businesses have to provide additional administrative oversight? No, participation in the program by small businesses is voluntary.
Yes ☐	No ☒	Will small businesses have to hire additional employees in order to comply with the proposed regulation? No, participation in the program by small businesses is voluntary.
Yes ☐	No ☒	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)? No, participation in the program by small businesses is voluntary.
Yes ☐	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, participation in the program by small businesses is voluntary.
Yes ☐	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, regulated entities must comply via well established criteria.
Yes ☐	No ☒	Do any other regulations duplicate or conflict with the proposed regulation? No.
Yes ☐	No ☒	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities? No, participation in the program by small businesses is voluntary. A small business would only be impacted to the extent that they participating in the program and triggered a Department audit/inspection.
Yes ☐	No ☒	Does the regulation require small businesses to provide educational services to keep up to date with regulatory requirements? No, participation in the program by small businesses is voluntary.
Yes ☐	No ☒	Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts? No, participation in the program by small businesses is voluntary.
Yes	No	Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts?

☒	☐	The program may encourage new businesses to form as incentives will create a new market, which may include new facilities.
Yes ☐	No ☒	Does the regulation provide for less stringent compliance or reporting requirements for small businesses? No, the regulation does not provide for less stringent compliance or reporting requirements for small businesses.
Yes ☐	No ☒	Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses? No, the regulation makes no changes to deadlines for compliance or reporting requirements.
Yes ☐	No ☒	Did the agency consolidate or simplify compliance or reporting requirements for small businesses? No, the regulation makes no changes to deadlines for compliance or reporting requirements.
Yes ☐	No ☒	Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective? No, participation in the program by small businesses is voluntary.
Yes ☐	No ☒	Are there alternative regulatory methods that would minimize the adverse impact on small businesses? No, participation in the program by small businesses is voluntary.



MASSWILDLIFE

DIVISION OF FISHERIES & WILDLIFE

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MASS.GOV/MASSWILDLIFE

PUBLIC HEARING NOTICE **on Draft Division of Fisheries and Wildlife Regulations at** **321 CMR 2.00 and 3.02**

In accordance with the Massachusetts General Laws, Chapter 131, Sections 1 and 5, and Chapter 30A, Section 2, NOTICE is hereby given of two (2) upcoming public hearings to be conducted by the Division of Fisheries and Wildlife ("MassWildlife") on proposed new regulations, summarized below. The first public hearing will be held on Tuesday, October 22, 2019, at 7:00 p.m., at the Lenox Town Hall, 6 Walker Street, Lenox. The second public hearing will be held on Tuesday, October 29, 2019, at 7:00 p.m., at the Field Headquarters, Richard Cronin Building, 1 Rabbit Hill Road, off North Drive, Westborough.

MassWildlife is proposing a new section at 321 CMR 2.16 that would prohibit contests for the capture, take or waste of certain predator or furbearing animals, and a new section at 2.17 that would prohibit the "waste" of certain game animals and birds. Finally, MassWildlife is proposing an amendment to 321 CMR 3.02 that would change the time for checking harvested fox and coyote from four (4) days from the end of the season to within forty-eight (48) hours of harvest.

The above-described draft MassWildlife regulations, as well a related summary and other explanatory information, are available for review by the public at <https://www.mass.gov/service-details/fisheries-and-wildlife-board-public-hearings>.

Mark S. Tisa, Ph.D., M.B.A.
Director

MASSWILDLIFE

Small Business Impact Statement

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

321 CMR 2 and 3.02

Estimate of the Number of Small Businesses Impacted by the Regulation: 1

Select Yes or No and Briefly Explain

Yes ☐	No ☒	Will small businesses have to create, file, or issue additional reports?
Yes ☐	No ☒	Will small businesses have to implement additional recordkeeping procedures?
Yes ☐	No ☒	Will small businesses have to provide additional administrative oversight?
Yes ☐	No ☒	Will small businesses have to hire additional employees in order to comply with the proposed regulation?
Yes ☐	No ☒	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)?
Yes ☐	No ☒	Does the regulation require small businesses to purchase a product or make any other capital investments in order to comply with the regulation?
Yes ☐	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.)
Yes ☐	No ☒	Do any other regulations duplicate or conflict with the proposed regulation?
Yes ☐	No ☒	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities?
Yes ☐	No ☒	Does the regulation require small businesses to provide educational services to keep up to date with regulatory requirements?
Yes ☐	No ☒	Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts?
Yes ☐	No ☒	Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts?

Yes ☐	No ☒	Does the regulation provide for less stringent compliance or reporting requirements for small businesses?
Yes ☐	No ☒	Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses?
Yes ☐	No ☒	Did the agency consolidate or simplify compliance or reporting requirements for small businesses?
Yes ☐	No ☒	Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective?
Yes ☐	No ☒	Are there alternative regulatory methods that would minimize the adverse impact on small businesses?

DIVISION OF HEALTH CARE FINANCE AND POLICY

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

NOTICE OF PUBLIC HEARING

Pursuant to the provisions 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 public hearing on Tuesday, October 15, 2019, at 9:00 a.m., in the First Floor Conference Room, 100 Hancock Street, Quincy, MA relative to the emergency adoption of:

101 CMR 327.00: Rates of Payment for Ambulance and Wheelchair Van Services

and the repeal of:

114.3 CMR 27.00: Ambulance Services

These actions are being taken pursuant to the requirements of M.G.L. c. 118E, §§ 13C and 13D, and Chapter 224 of the Acts of 2012, which transferred rate-setting authority for these services from the former Division of Health Care Finance and Policy to EOHHS. 101 CMR 327.00 will replace 114.3 CMR 27.00 as the regulation governing the rates of payment used by state governmental units, including MassHealth, for ambulance and wheelchair van services provided by eligible providers.

The amended regulation contains changes and updates from the current rates established for ambulance and wheelchair van services under 114.3 CMR 27.00. Except for mileage and air ambulance rates, the amended rates for ambulance services were established using the Medicare Resource-based Relative Value Scale system and FY2017 provider-specific costs. The amended rate for the ambulance mileage was determined by adding a two-year prospective cost adjustment factor to the current rate. The rates for air ambulance services will remain at the current level. The amended rate for wheelchair van services was established by applying applicable productivity and administrative efficiency standards to a unit cost calculated based on FY2017 provider-specific costs. The remaining wheelchair van rates will remain at the current level. In addition to the rate updates, the amended regulation contains technical changes to remove or update outdated citations, update terminology, incorporate coding updates, enhance consistency with other EOHHS regulations, and otherwise improve clarity.

EOHHS is making these changes, subject to federal approval, to ensure that payments are reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities, and to ensure that payment rates are consistent with efficiency, economy, and quality of care. It is estimated that annual aggregate MassHealth expenditures will increase by \$7.9 million as a result of the amendments. There is no fiscal impact on cities and towns. The amended regulation and rates do not impose new costs on small businesses; the impact on small business providers will vary based on the volume of services provided. The amended regulation went into effect on September 20, 2019.



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/service-details/executive-office-of-health-and-human-services-public-hearings. 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 Tuesday, October 15, 2019. EOHHS specifically invites comments as to how the amendments may affect beneficiary access to care.

All persons desiring to review the current draft of the emergency regulation may go to www.mass.gov/service-details/executive-office-of-health-and-human-services-public-hearings or request a copy in writing or in person from MassHealth Publications, 100 Hancock Street, 6th Floor, Quincy, MA 02171.

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 adopt a revised version of the emergency 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/service-details/executive-office-of-health-and-human-services-public-hearings.

September 24, 2019

Small Business Impact Statement

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

CMR No: 114.3 CMR 27.00: Ambulance Services (rescission)

Estimate of the Number of Small Businesses Impacted by the Regulation: 324 ambulance and chair car providers

Select Yes or No and Briefly Explain

Yes ☐	No ☒	Will small businesses have to create, file, or issue additional reports? No. Small businesses will not have to create, file, or issue additional reports as a result of the proposed amendments to this regulation.
Yes ☐	No ☒	Will small businesses have to implement additional recordkeeping procedures? No. Small businesses will not have additional responsibilities to keep records as a result of the proposed amendments to this regulation.
Yes ☐	No ☒	Will small businesses have to provide additional administrative oversight? No. Small businesses are not required by this regulation to provide additional administrative oversight as a result of the proposed amendments to this regulation.
Yes ☐	No ☒	Will small businesses have to hire additional employees in order to comply with the proposed regulation? No. This regulation does not require small businesses to hire additional employees to remain in compliance.
Yes ☐	No ☒	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)? No. Small businesses are not required by this regulation to hire other professionals.
Yes ☐	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. This regulation does not require small businesses to purchase any particular product or make any capital investments.
Yes ☐	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 MGL Chapter 118E Section 13C, and establishes the rates to be paid by governmental units to providers of non-institutional health care services.
Yes ☐	No ☒	Do any other regulations duplicate or conflict with the proposed regulation? No. No regulations duplicate or conflict with this regulation.
Yes ☒	No ☐	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities? Yes. The regulation requires providers to periodically comply with audits, inspections and other regulatory activities.
Yes	No	Does the regulation require small businesses to provide educational services to keep up to date with

☐	☒	regulatory requirements? No. The regulation does not require small businesses to provide educational services to keep up to date with the regulatory requirements.
Yes ☐	No ☒	Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts? No. The regulation is not likely to deter or encourage the formation of small businesses in Massachusetts as this regulation governs payments for ambulance and chair car services to publicly-aided individuals, and is applied uniformly among providers.
Yes ☐	No ☒	Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts? No. The regulation is not likely to deter or encourage the formation of small businesses in Massachusetts as this regulation governs payments for ambulance and chair car services to publicly-aided individuals, and is applied uniformly among providers.
Yes ☐	No ☒	Does the regulation provide for less stringent compliance or reporting requirements for small businesses? No. The regulation does not distinguish between small and other businesses.
Yes ☐	No ☒	Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses? No. The regulation does not distinguish between small and other businesses.
Yes ☐	No ☒	Did the agency consolidate or simplify compliance or reporting requirements for small businesses? No. The regulation does not distinguish between small and other businesses.
Yes ☐	No ☒	Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective? No. The regulation establishes uniform conditions of payment for the provision of services to publicly-aided individuals. These requirements are applied uniformly to maintain consistency in the care provided to publicly-aided individuals.
Yes ☐	No ☒	Are there alternative regulatory methods that would minimize the adverse impact on small businesses? No. The regulation does not have an adverse impact on small businesses and governs payments for ambulance and chair car services to publicly-aided individuals, and is applied uniformly among providers.

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

NOTICE OF PUBLIC HEARING

Pursuant to the provisions 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 public hearing on Tuesday, October 15, 2019, at 9:00 a.m., in the First Floor Conference Room, 100 Hancock Street, Quincy, MA relative to the emergency adoption of:

101 CMR 327.00: Rates of Payment for Ambulance and Wheelchair Van Services

and the repeal of:

114.3 CMR 27.00: Ambulance Services

These actions are being taken pursuant to the requirements of M.G.L. c. 118E, §§ 13C and 13D, and Chapter 224 of the Acts of 2012, which transferred rate-setting authority for these services from the former Division of Health Care Finance and Policy to EOHHS. 101 CMR 327.00 will replace 114.3 CMR 27.00 as the regulation governing the rates of payment used by state governmental units, including MassHealth, for ambulance and wheelchair van services provided by eligible providers.

The amended regulation contains changes and updates from the current rates established for ambulance and wheelchair van services under 114.3 CMR 27.00. Except for mileage and air ambulance rates, the amended rates for ambulance services were established using the Medicare Resource-based Relative Value Scale system and FY2017 provider-specific costs. The amended rate for the ambulance mileage was determined by adding a two-year prospective cost adjustment factor to the current rate. The rates for air ambulance services will remain at the current level. The amended rate for wheelchair van services was established by applying applicable productivity and administrative efficiency standards to a unit cost calculated based on FY2017 provider-specific costs. The remaining wheelchair van rates will remain at the current level. In addition to the rate updates, the amended regulation contains technical changes to remove or update outdated citations, update terminology, incorporate coding updates, enhance consistency with other EOHHS regulations, and otherwise improve clarity.

EOHHS is making these changes, subject to federal approval, to ensure that payments are reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities, and to ensure that payment rates are consistent with efficiency, economy, and quality of care. It is estimated that annual aggregate MassHealth expenditures will increase by \$7.9 million as a result of the amendments. There is no fiscal impact on cities and towns. The amended regulation and rates do not impose new costs on small businesses; the impact on small business providers will vary based on the volume of services provided. The amended regulation went into effect on September 20, 2019.



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/service-details/executive-office-of-health-and-human-services-public-hearings. 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 Tuesday, October 15, 2019. EOHHS specifically invites comments as to how the amendments may affect beneficiary access to care.

All persons desiring to review the current draft of the emergency regulation may go to www.mass.gov/service-details/executive-office-of-health-and-human-services-public-hearings or request a copy in writing or in person from MassHealth Publications, 100 Hancock Street, 6th Floor, Quincy, MA 02171.

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 adopt a revised version of the emergency 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/service-details/executive-office-of-health-and-human-services-public-hearings.

September 24, 2019

Small Business Impact Statement

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

CMR No: 101 CMR 327.00: Rates of Payment for Ambulance and Chair Car Services (adoption)

Estimate of the Number of Small Businesses Impacted by the Regulation: 324 ambulance and chair car providers

Select Yes or No and Briefly Explain

Yes ☐	No ☒	Will small businesses have to create, file, or issue additional reports? No. Small businesses will not have to create, file, or issue additional reports as a result of the proposed amendments to this regulation.
Yes ☐	No ☒	Will small businesses have to implement additional recordkeeping procedures? No. Small businesses will not have additional responsibilities to keep records as a result of the proposed amendments to this regulation.
Yes ☐	No ☒	Will small businesses have to provide additional administrative oversight? No. Small businesses are not required by this regulation to provide additional administrative oversight as a result of the proposed amendments to this regulation.
Yes ☐	No ☒	Will small businesses have to hire additional employees in order to comply with the proposed regulation? No. This regulation does not require small businesses to hire additional employees to remain in compliance.
Yes ☐	No ☒	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)? No. Small businesses are not required by this regulation to hire other professionals.
Yes ☐	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. This regulation does not require small businesses to purchase any particular product or make any capital investments.
Yes ☐	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 MGL Chapter 118E Section 13C, and establishes the rates to be paid by governmental units to providers of non-institutional health care services.
Yes ☐	No ☒	Do any other regulations duplicate or conflict with the proposed regulation? No. No regulations duplicate or conflict with this regulation.
Yes ☒	No ☐	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities? Yes. The regulation requires providers to periodically comply with audits, inspections and other regulatory activities.
Yes	No	Does the regulation require small businesses to provide educational services to keep up to date with

☐	☒	regulatory requirements? No. The regulation does not require small businesses to provide educational services to keep up to date with the regulatory requirements.
Yes ☐	No ☒	Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts? No. The regulation is not likely to deter or encourage the formation of small businesses in Massachusetts as this regulation governs payments for ambulance and chair car services to publicly-aided individuals, and is applied uniformly among providers.
Yes ☐	No ☒	Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts? No. The regulation is not likely to deter or encourage the formation of small businesses in Massachusetts as this regulation governs payments for ambulance and chair car services to publicly-aided individuals, and is applied uniformly among providers.
Yes ☐	No ☒	Does the regulation provide for less stringent compliance or reporting requirements for small businesses? No. The regulation does not distinguish between small and other businesses.
Yes ☐	No ☒	Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses? No. The regulation does not distinguish between small and other businesses.
Yes ☐	No ☒	Did the agency consolidate or simplify compliance or reporting requirements for small businesses? No. The regulation does not distinguish between small and other businesses.
Yes ☐	No ☒	Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective? No. The regulation establishes uniform conditions of payment for the provision of services to publicly-aided individuals. These requirements are applied uniformly to maintain consistency in the care provided to publicly-aided individuals.
Yes ☐	No ☒	Are there alternative regulatory methods that would minimize the adverse impact on small businesses? No. The regulation does not have an adverse impact on small businesses and governs payments for ambulance and chair car services to publicly-aided individuals, and is applied uniformly among providers.

DIVISION OF MEDICAL ASSISTANCE

Commonwealth of Massachusetts
Office of Medicaid

NOTICE OF PROPOSED AMENDMENT OF REGULATIONS

The Division proposes to amend its regulations under the authority of M.G.L. c. 118E, ss. 7 and 12 and pursuant to M.G.L. c. 30A. The Division describes the substance of the proposed actions as amendments to regulations found at 130 CMR 519.000: MassHealth Coverage Types, and 130 CMR 520.000: MassHealth Financial Regulations. The proposed amendments to 130 CMR 519.000 and 130 CMR 520.000 update the regulations to comply with requirements in the 2020 fiscal year state budget. The proposed amendments increase the income and asset limits for the three Medicare Savings Programs. The amendments also modify policies to allow for consistent application and processing procedures for the three programs.

It is anticipated that these amendments will not go into effect before January 1, 2020.

All persons desiring to submit data, views, or arguments concerning these proposed actions may submit them in writing to the Assistant Secretary for MassHealth, EOHHS, One Ashburton Place, Room 1109, Boston, Massachusetts 02108, or email them to masshealthpublicnotice@state.ma.us. Emailed comments should contain the sender's name, mailing address, and organization or affiliation, if any. Comments will be accepted through 5:00 p.m. on October 14, 2019.

All persons desiring to review the current draft of the proposed actions may go to www.mass.gov/service-details/masshealth-public-notices-1 or request a copy in writing or in person from the MassHealth Publications Unit, 100 Hancock Street, 6th Floor, Quincy, Massachusetts 02171.

The Division may adopt a revised version of the proposed actions taking into account relevant comments and any other practical alternatives that come to the Division's attention.

September 23, 2019

SECRETARY OF STATE
REGULATORY DIVISION
2019 SEP 20 PM 3:21

Amended Small Business Impact Statement

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

CMR No: 130 CMR 519.000 and 130 CMR 520.000

Estimate of the Number of Small Businesses Impacted by the Regulation: none

Select Yes or No and Briefly Explain

Yes ☐	No ☒	Will small businesses have to create, file, or issue additional reports?
Yes ☐	No ☒	Will small businesses have to implement additional recordkeeping procedures?
Yes ☐	No ☒	Will small businesses have to provide additional administrative oversight?
Yes ☐	No ☒	Will small businesses have to hire additional employees in order to comply with the proposed regulation?
Yes ☐	No ☒	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)?
Yes ☐	No ☒	Does the regulation require small businesses to purchase a product or make any other capital investments in order to comply with the regulation?
Yes ☐	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.)
Yes ☐	No ☒	Do any other regulations duplicate or conflict with the proposed regulation?
Yes ☐	No ☒	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities?
Yes ☐	No ☒	Does the regulation require small businesses to provide educational services to keep up to date with regulatory requirements?
Yes ☐	No ☒	Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts?
Yes ☐	No ☒	Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts?

Yes ☐	No ☒	Does the regulation provide for less stringent compliance or reporting requirements for small businesses?
Yes ☐	No ☒	Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses?
Yes ☐	No ☒	Did the agency consolidate or simplify compliance or reporting requirements for small businesses?
Yes ☐	No ☒	Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective?
Yes ☐	No ☒	Are there alternative regulatory methods that would minimize the adverse impact on small businesses?

DIVISION OF MEDICAL ASSISTANCE

Commonwealth of Massachusetts
Office of Medicaid

NOTICE OF PUBLIC HEARING

Pursuant to the authority of M.G.L. c. 6A, s. 16 and in accordance with M.G.L. c. 30A, a public hearing will be held on October 18, 2019, at 10:00 a.m. in the First Floor Conference Room, 100 Hancock Street, Quincy, MA relative to the adoption of:

130 CMR 522.000: MassHealth: Other Division Programs

The proposed changes to the regulation would eliminate the state-funded Massachusetts Insurance Commission (MIC) program effective 1/1/20, as there is comparable coverage through the HIV Drug Assistance Program (HDAP) at the Department of Public Health, which pays health insurance premiums for eligible members. HDAP is partially funded by federal funds.

The proposed deletion of 130 CMR 522.001 removes the eligibility rules for MIC from the MassHealth regulations. MIC members will be given timely notice that includes information on how to apply for HDAP, as well as an offer of assistance with the application and enrollment process. HDAP has more generous eligibility requirements and additional benefits and current MIC members are expected to be eligible for HDAP after the elimination of the MIC program.

The proposed regulation is planned to go into effect no sooner than 01/01/2020. There is no fiscal impact on cities and towns.

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/service-details/masshealth-public-hearings-0. Individuals may also submit written testimony by emailing masshealthpublicnotice@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 October 18, 2019.

All persons desiring to review the current draft of the proposed actions may go to www.mass.gov/service-details/masshealth-public-hearings-0 or request a copy in writing or in person from MassHealth Publications, 100 Hancock Street, 6th Floor, Quincy, MA 02171.

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.

MassHealth may adopt a revised version of the proposed actions 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/service-details/masshealth-public-hearings-0.

September 23, 2019

Small Business Impact Statement

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

CMR No: 130 CMR 522.000

Estimate of the Number of Small Businesses Impacted by the Regulation: None

Select Yes or No and Briefly Explain

Yes ☐	No ☒	Will small businesses have to create, file, or issue additional reports? No. The proposed changes to the regulation do not require additional reports.
Yes ☐	No ☒	Will small businesses have to implement additional recordkeeping procedures? No. The proposed changes to regulation do not impose additional recordkeeping requirements.
Yes ☐	No ☒	Will small businesses have to provide additional administrative oversight? No. The proposed changes to regulation do not require additional administrative oversight.
Yes ☐	No ☒	Will small businesses have to hire additional employees in order to comply with the proposed regulation? No additional employees are required to comply with the proposed changes to regulation.
Yes ☐	No ☒	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)? Compliance with the proposed changes to regulation does not require small businesses to hire additional professionals.
Yes ☐	No ☒	Does the regulation require small businesses to purchase a product or make any other capital investments in order to comply with the regulation? None of the proposed changes to regulation require capital investments for compliance.
Yes ☐	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 being rescinded.
Yes ☐	No ☒	Do any other regulations duplicate or conflict with the proposed regulation? No other regulations duplicate or conflict with the proposed regulation.
Yes ☐	No ☒	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities? No. The regulation is being rescinded.

Yes ☐	No ☒	Does the regulation require small businesses to provide educational services to keep up to date with regulatory requirements? No. The regulation is being rescinded.
Yes ☐	No ☒	Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts? No. The regulation is being rescinded.
Yes ☐	No ☒	Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts? No. The regulation is being rescinded.
Yes ☐	No ☒	Does the regulation provide for less stringent compliance or reporting requirements for small businesses? No. The regulation is being rescinded.
Yes ☐	No ☒	Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses? No. The regulation is being rescinded.
Yes ☐	No ☒	Did the agency consolidate or simplify compliance or reporting requirements for small businesses? No. The agency did not consolidate or simplify compliance or reporting requirements for small businesses.
Yes ☐	No ☒	Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective? No. The regulation is being rescinded.
Yes ☐	No ☒	Are there alternative regulatory methods that would minimize the adverse impact on small businesses? No. The regulation is being rescinded.



Commonwealth of Massachusetts
Executive Office of Energy & Environmental Affairs

Department of Environmental Protection

One Winter Street Boston, MA 02108 • 617-292-5500

Charles D. Baker
Governor

Karyn E. Polito
Lieutenant Governor

Kathleen A. Theoharides
Secretary

Martin Suuberg
Commissioner

DIVISION OF WATER POLLUTION CONTROL

NOTICE OF PUBLIC HEARING

Notice is hereby given that the Department of Environmental Protection (MassDEP), under its authority pursuant to M.G.L. Chapter 21, §27, is proposing amendments to 314 CMR 4.00, Massachusetts Surface Water Quality Standards. The proposed amendments update toxic pollutant criteria for the protection of aquatic life and human health in accordance with recommendations published by the U.S. Environmental Protection Agency. The proposed amendments also designate additional cold water streams, update and clarify certain site-specific criteria, and make the basin tables more clear and consistent.

Two public hearings will be held under the provisions of M.G.L. Chapter 30A on the following dates and locations to receive comments on the proposed changes. An informational overview of the proposed amendments will be given during the first hour, followed by two hours for testimony, which may be presented orally or in writing.

Friday, October 25, 2019 – Boston, MA.

Informational Overview: 9:00 a.m. – 10:00 a.m.

Public Hearing: 10:00 a.m. – 12:00 p.m.

MassDEP's Headquarters, One Winter Street, (617) 292-5500

Monday October 28, 2019 – Worcester, MA.

Informational Overview: 9:00 a.m. – 10:00 a.m.

Public Hearing: 10:00 a.m. – 12:00 p.m.

MassDEP's Central Regional Office, 8 New Bond Street, (508) 792-7650

Written comments will be accepted until 5:00 p.m. on Friday, November 8, 2019. Written comments must be submitted by email to richard.carey@mass.gov or by mail to Richard Carey, MassDEP, Watershed Planning Program, 8 New Bond Street, Worcester, MA 01606.

If you have questions or would like to request a copy of the background documents for the proposed regulations, please contact Richard Carey (richard.carey@mass.gov). Copies of the proposed regulations and background documents will also be made available on MassDEP's website at:

<https://www.mass.gov/regulations/314-CMR-4-the-massachusetts-surface-water-quality-standards>

By Order of the Department
Martin Suuberg, Commissioner

This information is available in alternate format. Contact Michelle Waters-Ekanem, Director of Diversity/Civil Rights at 617-292-5751.

TTY# MassRelay Service 1-800-439-2370

The text of the regulations published in the electronic version of the Massachusetts Register is unofficial and for informational purposes only. The official version is the printed copy which is available from the State Bookstore at <http://www.sec.state.ma.us/spr/sprcat/catidx.htm>.

Small Business Impact Statement
(As required by M.G.L. c. 30A §§ 2, 3 & 5)

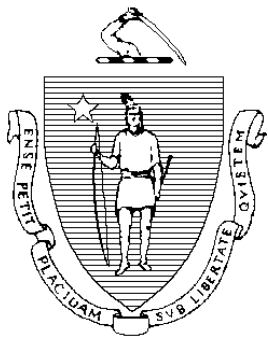
CMR No: 314 CMR 4.00 – Surface Water Quality Standards

Estimate of the Number of Small Businesses Impacted by the Regulation: 0

Select Yes or No and Briefly Explain

Yes ☐	No ☒	Will small businesses have to create, file, or issue additional reports? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA) pursuant to the Federal Clean Water Act, and MassDEP's Surface Water Discharge Permit Program regulations, 314 CMR 3.00 (SWDP).
Yes ☐	No ☒	Will small businesses have to implement additional recordkeeping procedures? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Will small businesses have to provide additional administrative oversight? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Will small businesses have to hire additional employees in order to comply with the proposed regulation? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Does compliance with the regulation require small businesses to hire other professionals (e.g. a lawyer, accountant, engineer, etc.)? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Does the regulation require small businesses to purchase a product or make any other capital investments in order to comply with the regulation? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☒	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.) These regulations are performance standards; they do not dictate how standards are to be met.
Yes ☐	No ☒	Do any other regulations duplicate or conflict with the proposed regulation? No other regulations duplicate or conflict with these regulations.
Yes ☐	No ☒	Does the regulation require small businesses to cooperate with audits, inspections or other regulatory enforcement activities? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.

Yes ☐	No ☒	Does the regulation require small businesses to provide educational services to keep up to date with regulatory requirements? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Is the regulation likely to <i>deter</i> the formation of small businesses in Massachusetts? Since no small businesses are impacted by these regulations, these regulations are not likely to deter the formation of small businesses in Massachusetts.
Yes ☐	No ☒	Is the regulation likely to <i>encourage</i> the formation of small businesses in Massachusetts? Since no small businesses are impacted by these regulations, these regulations are not likely to encourage the formation of small businesses in Massachusetts.
Yes ☐	No ☒	Does the regulation provide for less stringent compliance or reporting requirements for small businesses? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Does the regulation establish less stringent schedules or deadlines for compliance or reporting requirements for small businesses? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Did the agency consolidate or simplify compliance or reporting requirements for small businesses? These regulations only set standards for water quality. The standards are implemented through the federal National Pollutant Discharge Elimination System permit program administered by the U.S. Environmental Protection Agency (EPA), and MassDEP's SWDP program regulations.
Yes ☐	No ☒	Can performance standards for small businesses replace design or operational standards without hindering delivery of the regulatory objective? These regulations are based on performance standards.
Yes ☐	No ☒	Are there alternative regulatory methods that would minimize the adverse impact on small businesses? It is anticipated that no small businesses will be affected by these regulations.



THE COMMONWEALTH OF MASSACHUSETTS

Secretary of the Commonwealth - William Francis Galvin

2019 CUMULATIVE TABLE TO THE MASSACHUSETTS REGISTER

1382 - 1401

The Cumulative Tables lists all regulations and amendments thereto published in the Massachusetts Register during the current year. The Table is published in each Register.

State agencies are listed in the Table as they appear in the Code of Massachusetts Regulations (CMR or Code) in CMR numerical order which is based on the cabinet structure. For example, all Human Service agencies are prefaced by the number "1" and are designated as 101 CMR through 130 CMR.

The Cumulative Tables published in the last issue of previous years will have a listing of all regulations published for that year. These Registers are:

April 6, 1976 - 1977	Register: # 88	Date: 1998	Register: # 859
1978	138	1999	885
1979	193	2000	911
1980	241	2001	937
1981	292	2002	963
1982	344	2003	989
1983	396	2004	1016
1984	448	2005	1042
1985	500	2006	1068
1986	546	2007	1094
1987	572	2008	1120
1988	598	2009	1146
1989	624	2010	1172
1990	650	2011	1198
1991	676	2012	1124
1992	702	2013	1250
1993	729	2014	1276
1994	755	2015	1302
1995	871	2016	1329
1996	Supp. # 2 807	2017	1355
1997	833	2018	1381

		<u>Issue</u>	<u>Effective Date</u>
101 CMR	Executive Office of Health and Human Services		
20.00	Health Information Exchange	1401	10/4/19
204.00	Rates of Payment to Resident Care Facilities	1383	1/25/19
206.00	Standard Payments to Nursing Facilities	1383	1/25/19
	- <i>Correction</i> (MA Reg. # 1383)	1389	1/25/19
304.00	Rates for Community Health Centers - <i>Correction</i> (MA Reg. # 1381)	1385	12/28/18
306.00	Rates of Payment for Mental Health Services Provided in Community Health Centers and Mental Health Centers	1391	5/17/19
307.00	Rates for Psychiatric Day Treatment Center Services	1383	1/25/19
309.00	Rates for Certain Services for the Personal Care Attendant Program	1396	7/26/19
310.00	Rates for Adult Day Health Services	1391	5/17/19
	- <i>Correction</i> (MA Reg. # 1391)	1394	5/17/19
312.00	Family Planning Services	1383	1/25/19
313.00	Rates for Freestanding Clinics Providing Abortion and Sterilization Services	1385	2/22/19
320.00	Clinical Laboratory Services	1396	7/26/19
327.00	Rates of Payment for Ambulance and Wheelchair Van Services - <i>Emergency</i>	1401	9/20/19
330.00	Rates for Team Evaluation Services	1399	9/6/19
334.00	Prostheses, Prosthetic Devices and Orthotic Devices - <i>Correction</i> (MA Reg. # 1381)	1383	12/28/18
345.00	Rates for Temporary Nursing Services	1389	4/19/19
346.00	Rates for Certain Substance-related and Addictive Disorders Programs	1394	6/28/19
350.00	Home Health Services	1395	7/12/19
351.00	Adult Foster Care	1391	5/17/19
358.00	Rates of Payment for Applied Behavior Analysis	1398	8/23/19
359.00	Rates for Home and Community-based Services Waivers	1384	2/8/19
361.00	Rates for Continuous Skilled Nursing Services	1395	7/12/19
413.00	Payments for Youth Intermediate-term Stabilization Services	1394	6/28/19
414.00	Rates for Family Stabilization Services	1387	3/22/19
415.00	Rates for Community-based Day Support Services	1394	6/28/19
419.00	Rates for Supported Employment Services	1394	6/28/19
421.00	Rates for Adult Housing and Community Support Services	1394	6/28/19
427.00	Rates for Certain Youth and Young Adult Support Services - <i>Correction</i> (MA Reg. # 1379)	1387	11/30/18
428.00	Rates for Certain Independent Living Communities and Services	1394	6/28/19
429.00	Rates for Certain Sexual and Domestic Violence Services	1394	6/28/19
430.00	Rates for Program of Assertive Community Treatment Services	1394	6/28/19
431.00	Rates for Certain Respite Services	1394	6/28/19
432.00	Rates for Certain Lead Agency Services	1394	6/28/19
444.00	Rates for Certain Substance Use Disorder Services	1384	2/8/19
103 CMR	Department of Correction		
179.00	Restrictive Housing Oversight Committee - <i>Emergency</i>	1393	5/29/19
		1398	8/23/19
423.00	Restrictive Housing - <i>Emergency</i>	1382	12/28/18
		1387	3/22/19

		<i>Issue</i>	<i>Effective Date</i>
425.00	Placement Reviews in Secure Treatment Units - <i>Emergency</i>	1382	12/28/18
		1387	3/22/19
430.00	Inmate Discipline - <i>Emergency</i>	1382	12/28/18
		1387	3/22/19
104 CMR	Department of Mental Health		
27.00	Licensing and Operational Standards for Mental Health Facilities . . .	1395	7/12/19
	- <i>Emergency</i>	1397	7/16/19
30.00	Fiscal Administration	1384	2/8/19
105 CMR	Department of Public Health		
700.000	Implementation of M.G.L. c. 94C	1393	6/14/19
106 CMR	Department of Transitional Assistance		
327.000	State Supplement Program to Supplemental Security Income Program: Eligibility Requirements for SSP	1390	5/3/19
701.000	Transitional Cash Assistance Programs: General Policies		
	- <i>Compliance</i> (MA Reg. # 1379)	1384	11/13/18
	- <i>Emergency</i>	1392	5/15/19
	- <i>Compliance</i> (MA Reg. # 1392)	1396	5/15/19
702.000	Transitional Cash Assistance Programs: The Eligibility Process		
	- <i>Compliance</i> (MA Reg. # 1379)	1384	11/13/18
	- <i>Emergency</i>	1392	5/15/19
	- <i>Compliance</i> (MA Reg. # 1392)	1396	5/15/19
	- <i>Emergency</i>	1398	7/1/19
703.000	Transitional Cash Assistance Programs: Nonfinancial Eligibility		
	- <i>Compliance</i> (MA Reg. # 1379)	1384	11/13/18
	- <i>Emergency</i>	1392	5/15/19
	- <i>Compliance</i> (MA Reg. # 1392)	1396	5/15/19
704.000	Transitional Cash Assistance Programs: Financial Eligibility	1384	2/8/19
	- <i>Emergency</i>	1392	5/15/19
	- <i>Compliance</i> (MA Reg. # 1392)	1396	5/15/19
	- <i>Emergency</i>	1398	7/1/19
706.000	Transitional Cash Assistance Programs: Auxillary Activities		
	- <i>Compliance</i> (MA Reg. # 1379)	1384	11/13/18
	- <i>Emergency</i>	1392	5/15/19
	- <i>Compliance</i> (MA Reg. # 1392)	1396	5/15/19
707.000	Transitional Cash Assistance Programs: Employment Services		
	Program - <i>Emergency</i>	1392	5/15/19
	- <i>Compliance</i> (MA Reg. # 1392)	1396	5/15/19
110 CMR	Department of Children and Families		
6.00	Case Reviews	1399	9/6/19
14.00	Volunteers	1390	5/3/19
23.00	Services for Young Adults	1399	9/6/19

		<i>Issue</i>	<i>Effective Date</i>
114 CMR	Division of Health Care Finance and Policy		
114.3			
7.00	Psychiatric Day Treatment Center Services	1383	1/25/19
27.00	Ambulance Services - <i>Emergency</i>	1401	9/20/19
130 CMR	Division of Medical Assistance		
405.000	Community Health Center Services	1387	3/22/19
417.000	Psychiatric Day Treatment Program Manual	1383	1/25/19
418.000	Substance Use Disorder Treatment Services	1384	2/8/19
420.000	Dental Services	1389	4/22/19
441.000	Chiropractor Services	1387	3/22/19
442.000	Orthotics Services	1395	7/12/19
501.000	Health Care Reform: MassHealth: General Policies - <i>Correction</i> (MA Reg. # 1354)	1396	12/18/17
506.000	HealthCare Reform: MassHealth: Financial Requirements - <i>Correction</i> (MA Reg. # 1374)	1386 1396	7/1/18 7/26/19
610.000	MassHealth: Fair Hearing Rules	1397	8/9/19
630.000	Home- and Community-based Services Waivers - <i>Correction</i> (MA Reg. # 1327)	1392	12/2/16
204 CMR	Alcoholic Beverages		
2.00	Regulations of the Alcoholic Beverages Control Commission - <i>Emergency</i>	1401	9/12/19
205 CMR	Massachusetts Gaming Commission		
102.00	Construction and Application	1399	9/6/19
133.00	Voluntary Self-exclusion	1392	5/31/19
138.00	Uniform Standards of Accounting Procedures and Internal Controls - <i>Correction</i> (MA Reg. # 1367)	1384	6/15/18
143.00	Gaming Devices and Electronic Gaming Equipment	1399	9/6/19
146.00	Gaming Equipment - <i>Compliance</i> (MA Reg. # 1381)	1387	12/17/18
152.00	Individuals Excluded from a Gaming Establishment - <i>Emergency</i>	1394	6/7/19
	- <i>Compliance</i> (MA Register # 1394)	1399	6/7/19
211 CMR	Division of Insurance		
71.00	Medicare Supplement Insurance to Facilitate the Implementation of M.G.L. c. 176K and Section 1882 of the Federal Social Security Act	1397	8/9/19
220 CMR	Department of Public Utilities		
99.00	Procedures for the Determination and Enforcement of Violations of Safety Codes Pertaining to Damage Prevention - <i>Emergency</i>	1397	7/18/19
114.00	Uniform Natural Gas Leaks Classification	1387	3/22/19
	- <i>Correction</i> (MA Reg. # 1387)	1389	3/22/19

		<i>Issue</i>	<i>Effective Date</i>
225 CMR	Department of Energy Resources		
16.00	Alternative Energy Portfolio Standard (APS) - <i>Emergency</i>	1389	4/5/19
		1394	6/28/19
232 CMR	Board of Registration of Barbers		
2.00	General Provisions Applicable to Barber Shops and Barber Schools .	1392	5/31/19
238 CMR	Board of Registration of Electrologists		
2.00	Administrative Practices	1392	5/31/19
3.00	Licensure of Electrology Schools	1392	5/31/19
4.00	Continuing Education	1392	5/31/19
240 CMR	Board of Registration of Cosmetology and Barbering		
2.00	Licensure of Cosmetologists, Manicurists, Aestheticians, Demonstrators and Instructors	1392	5/31/19
3.00	Cosmetology Salons	1392	5/31/19
4.00	Operation of Cosmetology Schools and Post-secondary Institutions .	1392	5/31/19
5.00	Operation of Aesthetics Schools and Post-secondary Institutions . .	1392	5/31/19
6.00	Advanced Seminars	1392	5/31/19
7.00	Operation of Manicuring Schools	1392	5/31/19
8.00	Barber Regulations	1392	5/31/19
9.00	Administrative Practices for Electrolysis	1392	5/31/19
10.00	Licensure of Electrolysis Schools	1392	5/31/19
11.00	Continuing Education for Electrolysis	1392	5/31/19
243 CMR	Board of Registration in Medicine		
2.00	Licensing and the Practice of Medicine	1397	8/9/19
302 CMR	Department of Conservation and Recreation		
19.00	Small Wireless Facility and New Small Cell Structure Licensing - <i>Emergency</i>	1390	4/12/19
		1395	7/12/19
310 CMR	Department of Environmental Protection		
4.00	Timely Action Schedule and Fee Provisions	1388	4/5/19
6.00	Ambient Air Quality Standards for the Commonwealth of Massachusetts	1393	6/14/19
	- <i>Correction</i> (MA Reg. # 1393)	1394	6/14/19
7.00	Air Pollution Control - <i>Compliance</i> (MA Reg. # 1381)	1387	12/13/18
		1395	7/12/19
70.00	Environmental Results Program Certification	1388	4/5/19
75.00	Collection, Recycling, Labeling and Sales Ban of Mercury-added Products	1388	4/5/19
77.00	Collection and Recycling of Mercury-added Thermostats	1388	4/5/19

		<i>Issue</i>	<i>Effective Date</i>
321 CMR	Division of Fisheries and Wildlife		
3.00	Hunting	1382	1/11/19
	- <i>Correction</i> (MA Reg. # 1369)	1389	7/13/18
		1390	5/3/19
322 CMR	Division of Marine Fisheries		
4.00	Fishing and Shellfish Equipment	1387	3/22/19
6.00	Regulation of Catches	1387	3/22/19
		1389	4/19/19
	- <i>Emergency</i>	1390	4/16/19
	- <i>Compliance</i> (MA Reg. # 1390)	1396	4/16/19
		1391	5/17/19
	- <i>Emergency</i>	1396	7/10/19
7.00	Permits	1387	3/22/19
		1387	3/22/19
	- <i>Correction</i> (MA Reg. # 1387)	1396	3/22/19
8.00	Coastal Fisheries Conservation and Management	1387	3/22/19
		1387	3/22/19
12.00	Protected Species	1387	3/22/19
16.00	Shellfish Sanitation, Harvest, Handling and Management	1387	3/22/19
330 CMR	Department of Agricultural Resources		
22.00	Agricultural Preservation Restriction Program	1396	7/26/19
360 CMR	Massachusetts Water Resource Authority		
1.00	Adjudicatory Proceedings	1399	9/6/19
2.00	Enforcement and Administrative Penalties	1399	9/6/19
10.000	Sewer Use	1399	9/6/19
	- <i>Correction</i> (MA Reg. # 1399)	1401	9/6/19
430 CMR	Department of Unemployment Assistance		
6.00	Waiver Regulations	1388	4/5/19
9.00	Training Benefits under M.G.L. c. 151A, § 30(c)	1400	9/20/19
454 CMR	Department of Labor Standards		
25.00	Occupational Safety and Health for Public Sector Workers	1389	4/19/19
30.00	Professional Employer Organization Registration Regulations	1389	4/19/19
458 CMR	Department of Family and Medical Leave		
2.00	Family and Medical Leave	1394	6/28/19
501 CMR	Executive Office of Public Safety and Security		
17.00	Medical Parole - <i>Emergency</i>	1391	5/1/19
		1396	7/26/19

		<i>Issue</i>	<i>Effective Date</i>
505 CMR	Office of the Chief Medical Examiner		
4.00	Cremation Fees	1398	9/1/19
560 CMR	State 911 Department		
3.00	Establishing an Equitable and Reasonable Method for the Remittance and Collection of a Surcharge on Prepaid Wireless Telephone Service	1389	4/19/19
603 CMR	Department of Elementary and Secondary Education		
4.00	Vocational Technical Education - <i>Correction</i> (MA Reg. # 1369) . . .	1382	7/13/18
14.00	Education of English Learners - <i>Correction</i> (MA Reg. # 1369)	1390	7/13/18
30.00	Massachusetts Comprehensive Assessment System and Standards for Competency Determination	1389	4/19/19
606 CMR	Department of Early Education and Care		
10.00	Subsidized Child Care	1385	2/22/19
15.00	Early Education and Out of School Time Capital Fund Program	1385	2/22/19
14.00	Criminal Offender and Other Background Record Checks - <i>Emergency</i>	1392	5/16/19
	- <i>Compliance</i> (MA Reg. # 1392)	1398	5/16/19
651 CMR	Executive Office of Elder Affairs		
16.00	Home Care Worker Registry	1394	6/28/19
700 CMR	Massachusetts Department of Transportation		
7.00	Use of the Massachusetts Turnpike and the Metropolitan Highway System	1384	2/8/19
13.00	Approval of Access to Massachusetts Department of Transportation Highways and Other Property - <i>Emergency</i>	1390	4/12/19
760 CMR	Department of Housing and Community Development		
5.00	Eligibility and Selection Criteria - <i>Emergency</i>	1390	4/10/19
		1394	6/28/19
801 CMR	Executive Office for Administration and Finance		
4.00	Rates - <i>Emergency</i>	1390	4/12/19
		1395	7/12/19
830 CMR	Department of Revenue		
64H.00	Tax on Retail Sales of Certain Tangible Personal Property - <i>Emergency</i>	1382	12/20/18
	- <i>Correction</i> (MA Reg. # 1382)	1386	12/20/18
	- <i>Compliance</i> (MA Reg. # 1382)	1386	12/20/18

		<i>Issue</i>	<i>Effective Date</i>
950 CMR	Office of the Secretary of the Commonwealth		
12.200	Registration of Broker-dealer, Agents, Investment Adviser, Investment Adviser Representatives and Notice of Filing Procedures for Federal Covered Advisers	1387	3/22/19
		1393	6/14/19
13.300	Registration of and Notice Filings for Securities	1387	3/22/19
14.400	General Provisions	1387	3/22/19
956 CMR	Commonwealth Health Insurance Connector Authority		
8.00	Student Health Insurance Program - <i>Correction</i> (MA Reg. # 1251) ..	1394	1/3/14
961 CMR	State Lottery Commission		
2.00	Rules and Regulations - <i>Emergency</i>	1391	5/2/19
	- <i>Compliance</i> (MA Reg. # 1391)	1396	5/2/19
	- <i>Emergency</i>	1395	6/28/19
	- <i>Compliance</i> (MA Reg. # 1395)	1400	6/28/19
970 CMR	Office of Campaign and Political Finance		
1.00	Campaign Finance Activity	1392	5/31/19



THE COMMONWEALTH OF MASSACHUSETTS

William Francis Galvin

Secretary of the Commonwealth

Regulation Filing *To be completed by filing agency*CHAPTER NUMBER: **101 CMR 327.00**CHAPTER TITLE: **Rates of Payment for Ambulance and Wheelchair Van Services**AGENCY: **Executive Office of Health and Human Services**SUMMARY OF REGULATION: *State the general requirements and purposes of this regulation.***101 CMR 327.00: Rates of Payment for Ambulance and Wheelchair Van Services governs the rates of payment used by state governmental units for ambulance and wheelchair van services rendered to publicly aided individuals.****101 CMR 327.00 replaces 114.3 CMR 27.00: Ambulance Services, which is simultaneously being repealed.**REGULATORY AUTHORITY: **M.G.L. c. 118E**AGENCY CONTACT: **Deborah Briggs** PHONE: **6178473302**ADDRESS: **100 Hancock Street, 6th Floor, Quincy, MA 02171****Compliance with M.G.L. c. 30A**EMERGENCY ADOPTION - *if this regulation is adopted as an emergency, state the nature of the emergency.***101 CMR 327.00 is adopted on an emergency basis to ensure continued access to ambulance and wheelchair van services for eligible MassHealth beneficiaries.**PRIOR NOTIFICATION AND/OR APPROVAL - *If prior notification to and/or approval of the Governor, Legislature or others was required, list each notification, and/or approval and date, including notice to the Local Government Advisory Commission.***EO 145 notifications sent: 9/18/19****EO 562 approval: 9/18/19**PUBLIC REVIEW - *M.G.L. c. 30A sections 2 and/or 3 requires notice of the hearing or comment period, including a small business impact statement, be filed with the Secretary of the Commonwealth, published in appropriate newspapers, and sent to persons to whom specific notice must be given at least 21 days prior to such hearing or comment period.*Date of public hearing or comment period: **October 15, 2019**

FISCAL EFFECT - *Estimate the fiscal effect of the public and private sectors.*

For the first and second year: Annual aggregate MassHealth expenditures are estimated to increase by \$7.9 million.

For the first five years: _____

No fiscal effect: _____

SMALL BUSINESS IMPACT - *M.G.L. c. 30A section 5 requires each agency to file an amended small business impact statement with the Secretary of the Commonwealth prior to the adoption of a proposed regulation. If the purpose of this regulation is to set rates for the state, this section does not apply.*

Date amended small business impact statement was filed: N/A

CODE OF MASSACHUSETTS REGULATIONS INDEX - *List key subjects that are relevant to this regulation:*

PROMULGATION - *State the action taken by this regulation and its effect on existing provisions of the Code of Massachusetts Regulations (CMR) or repeal, replace or amend. List by CMR number:*

101 CMR 327.00 has been adopted on an emergency basis.

ATTESTATION - *The regulation described herein and attached hereto is a true copy of the regulation adopted by this agency.* ATTEST:

SIGNATURE: SIGNATURE ON FILE DATE: Sep 20 2019

Publication - *To be completed by the Regulations Division*

MASSACHUSETTS REGISTER NUMBER: 1401 DATE: 10/04/2019

EFFECTIVE DATE: 09/20/2019

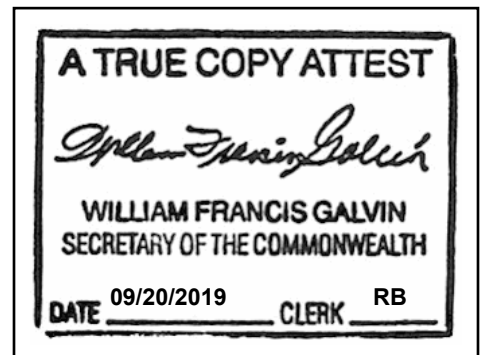
CODE OF MASSACHUSETTS REGULATIONS

Remove these pages:

This is an Emergency Regulation.

Insert these pages:

There are no Replacement Pages.



(101 CMR 324.00 THROUGH 326.00: RESERVED)

(PAGES 761 THROUGH 790 ARE RESERVED FOR FUTURE USE.)

101 CMR 327.00: RATES OF PAYMENT FOR AMBULANCE AND WHEELCHAIR VAN SERVICES

Section

- 327.01: General Provisions
- 327.02: General Definitions
- 327.03: General Rate Provisions and Payment
- 327.04: Special Contracts
- 327.05: Reporting Requirements
- 327.06: Severability

327.01: General Provisions

- (1) Scope and Purpose. 101 CMR 327.00 governs the rates of payment to eligible ambulance and wheelchair van service providers to be used by all governmental units for services provided to publicly aided individuals. The ground transport rates set forth in 101 CMR 327.00 also apply to individuals covered by the Workers' Compensation Act, M.G.L. c. 152.
- (2) Effective Date. Rates contained in 101 CMR 327.00 are effective for dates of service on or after September 20, 2019.
- (3) Disclaimer of Authorization of Services. 101 CMR 327.00 is not authorization for or approval of the services for which rates are determined pursuant to 101 CMR 327.00. Governmental units that purchase services are responsible for the definition, authorization, and approval of care and services provided to publicly aided individuals.
- (4) Coverage. The rates of payment in 101 CMR 327.00 constitute payment in full for all services provided by an eligible provider, including administration and professional supervision services. The payment rates will apply to ambulance and wheelchair van services provided by eligible providers to publicly aided individuals whose medical condition requires the use of such vehicles under the conditions described by the purchasing governmental unit.
- (5) Exclusion. 101 CMR 327.00 and the payment rates in 101 CMR 327.03 shall not, under any conditions, apply when the purchasing governmental unit determines that:
 - (a) no medical necessity exists; or
 - (b) some means of transportation other than an ambulance or wheelchair van may be used without endangering the patient's health; or
 - (c) ambulance or wheelchair van usage is for an unauthorized purpose.
- (6) Coding Updates and Corrections. EOHHS may publish service code updates and corrections in the form of an administrative bulletin. Updates may reference coding systems including, but not limited to, the Healthcare Common Procedure Coding System (HCPCS). The publication of such updates and corrections will list:
 - (a) codes for which the code numbers change, with the corresponding cross references between existing and new codes and the codes being replaced. Rates for such new codes are set at the rate of the code that is being replaced;
 - (b) codes for which the code number remains the same, but the description has changed;
 - (c) deleted codes for which there are no corresponding new codes; and
 - (d) codes for entirely new services that require pricing. EOHHS will list these codes and apply individual consideration (I.C.) payment for these codes until appropriate rates can be developed.
- (7) Administrative Bulletins. EOHHS may issue administrative bulletins to clarify its policy on and understanding of substantive provisions of 101 CMR 327.00, or to issue coding updates and corrections under 101 CMR 327.01(6).

327.02: General Definitions

Meaning of Terms. As used in 101 CMR 327.00, terms have the meanings set forth in 101 CMR 327.02.

327.02: continued

Ambulance. An aircraft, boat, motor vehicle or other means of transportation, however named, whether privately or publicly owned, which is intended to be used for, and is maintained and operated for, the response to and the transportation of sick or injured individuals.

Center. The Center for Health Information and Analysis, established under M.G.L. c. 12C.

Eligible Provider. A person, partnership, corporation, governmental unit or other entity that provides authorized emergency ambulance, nonemergency ambulance, and/or wheelchair van services and that also meets such conditions of participation as have been or may be adopted from time to time by a governmental unit purchasing ambulance services.

EOHHS. The Executive Office of Health and Human Services, established under M.G.L. c. 6A.

Governmental Unit. The Commonwealth of Massachusetts, any of its departments, agencies, boards, or commissions, or political subdivisions.

Individual Consideration (I.C.). Rates of payment to eligible providers for services authorized, but not listed herein, or authorized services performed in exceptional circumstances will be determined on an individual consideration basis by the governmental unit upon receipt of a bill that describes the services rendered. Eligible providers must maintain adequate records to determine the appropriateness of their I.C. claims and must provide these documents to the governmental unit upon request.

Loaded Mileage. The actual distance a person or persons is (are) transported in an ambulance or wheelchair van.

Publicly Aided Individual. A person for whose medical and other services a governmental unit is in whole or in part liable under a statutory program.

Trip. The event of pick-up, transport and delivery of a person or persons to or from a hospital or other health care facility by an ambulance or wheelchair van.

Wheelchair Van. A motor vehicle that is specifically equipped to carry one or more persons who are mobility-handicapped or using a wheelchair.

327.03: General Rate Provisions and Payment

(1) Rate Determination. The rates for authorized ambulance and wheelchair van services under 101 CMR 327.00 are the lowest of:

- (a) the eligible provider's usual fee to patients other than publicly-aided individuals; or
- (b) the eligible provider's actual charge submitted; or
- (c) the schedule of fees set forth in 101 CMR 327.03.

327.03: continued

Code	Allowable Fee	Description of Code
A0425	\$2.99	Ground mileage, per statute mile (loaded mileage)
A0426	\$189.45	Ambulance service, advanced life support, nonemergency transport, level 1 (ALS 1)
A0427	\$299.97	Ambulance service, advanced life support, emergency transport, level 1 (ALS 1 - emergency)
A0428	\$157.88	Ambulance service, basic life support, nonemergency transport (BLS)
A0429	\$252.61	Ambulance service, basic life support, emergency transport (BLS-emergency)
A0430	\$3,775.00	Ambulance service, conventional air services, transport, one way (fixed wing)
A0431	\$3,775.00	Ambulance service, conventional air services, transport, one way (rotary wing)
A0433	\$434.17	Advanced life support, level 2 (ALS 2)
A0434	\$513.11	Specialty care transport (SCT)
A0170	I.C.	Transportation ancillary; parking fees, tolls, other (used only for ferry charges)
A0999	I.C.	Unlisted ambulance service (used for transporting bariatric patients only)

(3) Billing Certification. Each eligible provider who submits an invoice to a governmental unit for authorized ambulance services must certify to the accuracy of the level of services provided, as listed on its invoice.

(4) Allowable Trip Fees for Wheelchair Van Services.

Code	Allowable Fee	Description of Code
A0130	\$40.55	Nonemergency transportation; wheelchair van (each way)
S0215	\$1.46	Nonemergency transportation; mileage, per mile (wheelchair van, loaded mileage)
T2001	\$8.00	Nonemergency transportation; patient attendant/escort (wheelchair van, each way)

327.04: Special Contracts.

Notwithstanding 101 CMR 327.03 and 327.04, a governmental unit may enter into a special contract with an eligible provider under which the governmental unit will pay for services authorized but not listed herein, or authorized services performed in exceptional circumstances.

327.05: Reporting Requirements

- (1) Required Reports. Reporting requirements are governed by 957 CMR 6.00: *Cost Reporting Requirements*.
- (2) Penalty for Noncompliance. The purchasing governmental unit may impose a penalty in the amount of up to 15% of its payments to any provider that fails to submit required information. The purchasing governmental unit will notify the provider in advance of its intention to impose a penalty under 101 CMR 327.05(2).

327.06: Severability

The provisions of 101 CMR 327.00 are severable and if any provisions of 101 CMR 327.00 or the application of such provisions to any person or circumstances is held to be invalid or unconstitutional, such invalidity shall not be construed to affect the validity or constitutionality of any remaining provisions of 101 CMR 327.00 or application of such provisions to eligible providers or circumstances other than those held invalid.

REGULATORY AUTHORITY

101 CMR 327.00: M.G.L. c. 118E.

(101 CMR 328.00 AND 329.00: RESERVED)

(PAGES 797 THROUGH 802 ARE RESERVED FOR FUTURE USE.)



THE COMMONWEALTH OF MASSACHUSETTS

William Francis Galvin
Secretary of the Commonwealth

Regulation Filing *To be completed by filing agency*

CHAPTER NUMBER: 114.3 CMR 27.00

CHAPTER TITLE: Ambulance Services

AGENCY: Division of Health Care Finance and Policy

SUMMARY OF REGULATION: *State the general requirements and purposes of this regulation.*

114.3 CMR 27.00: Ambulance Services governs the rates of payment used by state governmental units for ambulance and chair car services rendered to publicly aided individuals.

REGULATORY AUTHORITY: M.G.L. c. 118G; M.G.L. c. 118E

AGENCY CONTACT: Deborah Briggs PHONE: 617-847-3302

ADDRESS: 100 Hancock Street, 6th Floor, Quincy, MA 02171

Compliance with M.G.L. c. 30A

EMERGENCY ADOPTION - *if this regulation is adopted as an emergency, state the nature of the emergency.*

114.3 CMR 27.00 is being repealed and adopted as 101 CMR 327.00 with updated rates to ensure continued access to ambulance and wheelchair van services for eligible MassHealth beneficiaries.

PRIOR NOTIFICATION AND/OR APPROVAL - *If prior notification to and/or approval of the Governor, Legislature or others was required, list each notification, and/or approval and date, including notice to the Local Government Advisory Commission.*

EO 145 notifications sent: 9/18/19

EO 562 Approval: 9/18/19

PUBLIC REVIEW - *M.G.L. c. 30A sections 2 and/or 3 requires notice of the hearing or comment period, including a small business impact statement, be filed with the Secretary of the Commonwealth, published in appropriate newspapers, and sent to persons to whom specific notice must be given at least 21 days prior to such hearing or comment period.*

Date of public hearing or comment period: October 15, 2019

FISCAL EFFECT - *Estimate the fiscal effect of the public and private sectors.*

For the first and second year: _____

For the first five years: _____

No fiscal effect: No effect

SMALL BUSINESS IMPACT - *M.G.L. c. 30A section 5 requires each agency to file an amended small business impact statement with the Secretary of the Commonwealth prior to the adoption of a proposed regulation. If the purpose of this regulation is to set rates for the state, this section does not apply.*

Date amended small business impact statement was filed: N/A

CODE OF MASSACHUSETTS REGULATIONS INDEX - *List key subjects that are relevant to this regulation:*

PROMULGATION - *State the action taken by this regulation and its effect on existing provisions of the Code of Massachusetts Regulations (CMR) or repeal, replace or amend. List by CMR number:*

114.3 CMR 27.00 has been repealed and adopted as 101 CMR 327.00 on an emergency basis.

ATTESTATION - *The regulation described herein and attached hereto is a true copy of the regulation adopted by this agency.* ATTEST:

SIGNATURE: SIGNATURE ON FILE DATE: Sep 20 2019

Publication - *To be completed by the Regulations Division*

MASSACHUSETTS REGISTER NUMBER: 1401 DATE: 10/04/2019

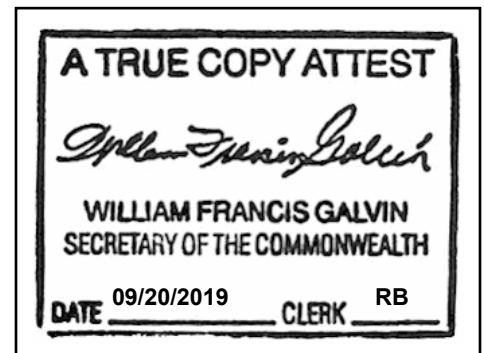
EFFECTIVE DATE: 09/20/2019

CODE OF MASSACHUSETTS REGULATIONS

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There are no Replacement Pages.



114.3 CMR: DIVISION OF HEALTH CARE FINANCE AND POLICY
AMBULATORY CARE

(114.3 CMR 9.00 THROUGH 28.00: RESERVED)

114.3 CMR: DIVISION OF HEALTH CARE FINANCE AND POLICY
AMBULATORY CARE

(PAGES 629 THROUGH 998 ARE RESERVED FOR FUTURE USE.)



THE COMMONWEALTH OF MASSACHUSETTS

William Francis Galvin

Secretary of the Commonwealth

Regulation Filing *To be completed by filing agency*CHAPTER NUMBER: **204 CMR 2.00**CHAPTER TITLE: **Regulations of the Alcoholic Beverages Control Commission**AGENCY: **Alcoholic Beverages Control Commission**SUMMARY OF REGULATION: *State the general requirements and purposes of this regulation.*

This amendment to 204 CMR 2.08 will prohibit the receipt of inducements by any licensee licensed under M.G.L. c. 138.

REGULATORY AUTHORITY: **M.G.L. c. 138, s. 24**AGENCY CONTACT: **Kris Foster, General Counsel** PHONE: **617-727-3040**ADDRESS: **95 Fourth Street, Suite 3, Chelsea MA 02150****Compliance with M.G.L. c. 30A**EMERGENCY ADOPTION - *if this regulation is adopted as an emergency, state the nature of the emergency.*

Licensees can receive inducements, which encourages commercial bribery, concentrates power in a controlled substance industry, and poses an immediate threat to promoting temperance, stabilizing the alcohol trade, and avoiding unfair competition and monopolies. To prevent harm to public health/safety, it is in the public interest to prohibit receipt of inducements as soon as practicable.

PRIOR NOTIFICATION AND/OR APPROVAL - *If prior notification to and/or approval of the Governor, Legislature or others was required, list each notification, and/or approval and date, including notice to the Local Government Advisory Commission.*

Not applicable

PUBLIC REVIEW - *M.G.L. c. 30A sections 2 and/or 3 requires notice of the hearing or comment period, including a small business impact statement, be filed with the Secretary of the Commonwealth, published in appropriate newspapers, and sent to persons to whom specific notice must be given at least 21 days prior to such hearing or comment period.*

Date of public hearing or comment period: **Not applicable**

FISCAL EFFECT - *Estimate the fiscal effect of the public and private sectors.*

For the first and second year: _____

For the first five years: _____

No fiscal effect: There will be no fiscal effect.

SMALL BUSINESS IMPACT - *M.G.L. c. 30A section 5 requires each agency to file an amended small business impact statement with the Secretary of the Commonwealth prior to the adoption of a proposed regulation. If the purpose of this regulation is to set rates for the state, this section does not apply.*

Date amended small business impact statement was filed: Not applicable

CODE OF MASSACHUSETTS REGULATIONS INDEX - *List key subjects that are relevant to this regulation:*
Inducements

PROMULGATION - *State the action taken by this regulation and its effect on existing provisions of the Code of Massachusetts Regulations (CMR) or repeal, replace or amend. List by CMR number:*

Amends 204 CMR 2.08

ATTESTATION - *The regulation described herein and attached hereto is a true copy of the regulation adopted by this agency.* ATTEST:

SIGNATURE: SIGNATURE ON FILE DATE: Sep 12 2019

Publication - *To be completed by the Regulations Division*

MASSACHUSETTS REGISTER NUMBER: 1401 DATE: 10/04/2019

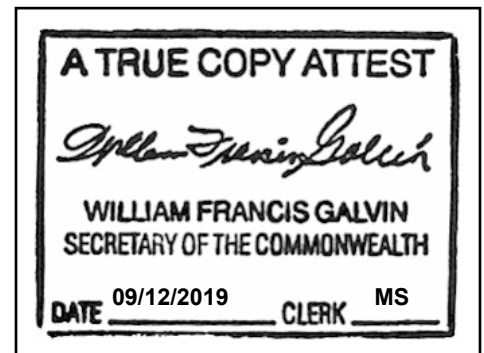
EFFECTIVE DATE: 09/12/2019

CODE OF MASSACHUSETTS REGULATIONS

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Regulation.**

**There are no Replacement
Pages.**



2.06: continued

(10) No licensee shall imitate or forge the brand, label, copyright or trade mark of any other licensee of this Commonwealth or any other state or country.

(11) Wholesalers and Importers shall use only such barrels, kegs, cases or other containers as are furnished by the Manufacturers, except where other containers are permitted to be used bearing such seals or other evidence of the identity and origin of the contents as are approved by the Commission.

(12) No licensee shall deface, mar, obliterate, remove or cover any brand or label on any keg, cask, barrel, bottle or other container, except as may be required by Federal Regulation. No licensee shall buy, sell, exchange or traffic in any such containers without consent of the owner thereof.

(13) No licensee shall refuse to redeem any barrel, keg, bottle, case or other container upon which a deposit has been made, provided it is returned in good order and condition, reasonable wear and tear only excepted. 204 CMR 7.00 shall apply only to the original parties to the contract.

(14) No licensee shall use or keep in his possession, without the consent of the owner, any barrel, keg, bottle, case or other container bearing the mark or brand of such owner.

2.07: Substitution of Beverages

The substitution of any alcoholic beverages of a kind or brand different from that ordered by a purchaser is prohibited unless it is done with the consent of the person or licensee making the purchase.

2.08: Inducements

(1) No licensee shall directly or indirectly give or permit to be given money or any other thing of substantial value in any effort to induce any person to persuade or influence any other person to purchase, or contract for the purchase of any particular brand or kind of alcoholic beverages, or to persuade or influence any person to refrain from purchasing, or contracting for the purchase of any particular brand or kind of alcoholic beverages.

(2) No licensee shall directly or indirectly receive or otherwise accept an inducement prohibited under 204 CMR 2.08(1).

2.09: Monthly Reports

All holders of Storage Permits issued under the provisions of M.G.L. c. 138, § 20 shall file monthly reports with the Commissioner of Revenue within ten days after the first day of each calendar month. These reports shall show the kinds and quantities of alcoholic beverages shipped from the premises included within the Storage Permit during the previous month. The reports shall be made on forms furnished by the Commissioner.

2.10: Liquor Purchase Identification Cards

(204 CMR 2.10, governing liquor purchase identification cards in accordance with the provisions of M.G.L. c. 138, § 34B.)

(1) Face Side of Card. On the face side of the card there shall appear an imprint of the State Seal and the language, "Commonwealth of Massachusetts" on the top line, and immediately underneath, in a bold type, the words, "Liquor Purchase Identification Card." There shall also appear in the respective spaces provided,

- (a) the full and proper name of the holder,
- (b) the residence,

2.10: continued

(c) the card shall also bear an attestation by a person duly authorized by the issuing licensing authority stating that the holder "has furnished satisfactory evidence to the undersigned of having attained the age of 21"prior to the issuance of the card. The applicant shall submit with his application either a Certificate of Birth, a Certificate of Naturalization, or a Certificate of Voter Registration (or a certified copy thereof), together with a personal photograph of 1½" x 1½" dimension,

(d) a statement of the holder's date of birth, age, and place of birth.

It is also encumbered upon the duly authorized person issuing a Liquor Purchase Identification Card to determine that the birth certificate, voting certificate or other evidence submitted as a proof of age, be carefully scrutinized and determine it to be in proper order.

The municipality wherein a card is issued shall also be indicated, as well as the date of issuance, and the holder's signature.

A photograph of the holder shall be securely attached in the area designated on the face side of the card; the size of said photograph should be approximately 1½" x 1½". (Directly under the photograph the words, "See reverse side" shall appear).

The following layout is an example of the procedure desired in the above paragraphs for the face side of the card.

(2) Example

COMMONWEALTH OF MASSACHUSETTS
LIQUOR PURCHASE IDENTIFICATION CARD

STATE SEAL

This is to certify that _____
who resides at _____
has furnished satisfactory evidence to the under- signed of having attained
the age of twenty-one.

	Date of Birth	Age	Place of Birth
Holder's Photograph 1½" x 1½"	_____		
	Licensing Authority		
	City _____		
	Town _____		
	Attest _____ (Duly Authorized Signature)		
	_____ (Date of issuance)		
SEE REVERSE SIDE	_____ (Holder's signature)		

(3) Reverse Side of Card. On the reverse side of the card the following language shall be printed thereon:
(a) "It may be legally used only by its valid holder,"
(b) "This card expires five years from the date of issuance,"

**THE COMMONWEALTH OF MASSACHUSETTS****William Francis Galvin**

Secretary of the Commonwealth

Regulation Filing *To be completed by filing agency*CHAPTER NUMBER: **101 CMR 20.00**CHAPTER TITLE: **Health Information Exchange**AGENCY: **Executive Office of Health and Human Services**

SUMMARY OF REGULATION: *State the general requirements and purposes of this regulation.*
Governs the exchange of health information in the Commonwealth.

REGULATORY AUTHORITY: **M.G.L. c. 118I**AGENCY CONTACT: **Deborah Briggs** PHONE: **6178473302**ADDRESS: **100 Hancock Street, Quincy, MA 02170****Compliance with M.G.L. c. 30A**EMERGENCY ADOPTION - *if this regulation is adopted as an emergency, state the nature of the emergency.*

PRIOR NOTIFICATION AND/OR APPROVAL - *If prior notification to and/or approval of the Governor, Legislature or others was required, list each notification, and/or approval and date, including notice to the Local Government Advisory Commission.*

EO 145 notification: 6/14/19**EO 562 approval: 9/10/19**

PUBLIC REVIEW - *M.G.L. c. 30A sections 2 and/or 3 requires notice of the hearing or comment period, including a small business impact statement, be filed with the Secretary of the Commonwealth, published in appropriate newspapers, and sent to persons to whom specific notice must be given at least 21 days prior to such hearing or comment period.*

Date of public hearing or comment period: **7/19/19**

FISCAL EFFECT - *Estimate the fiscal effect of the public and private sectors.*

For the first and second year: _____

For the first five years: _____

No fiscal effect: No effect

SMALL BUSINESS IMPACT - *M.G.L. c. 30A section 5 requires each agency to file an amended small business impact statement with the Secretary of the Commonwealth prior to the adoption of a proposed regulation. If the purpose of this regulation is to set rates for the state, this section does not apply.*

Date amended small business impact statement was filed: 9/16/19

CODE OF MASSACHUSETTS REGULATIONS INDEX - *List key subjects that are relevant to this regulation:*

PROMULGATION - *State the action taken by this regulation and its effect on existing provisions of the Code of Massachusetts Regulations (CMR) or repeal, replace or amend. List by CMR number:*

101 CMR 20.00 has been amended.

ATTESTATION - *The regulation described herein and attached hereto is a true copy of the regulation adopted by this agency.* ATTEST:

SIGNATURE: SIGNATURE ON FILE DATE: Sep 19 2019

Publication - *To be completed by the Regulations Division*

MASSACHUSETTS REGISTER NUMBER: 1401 DATE: 10/04/2019

EFFECTIVE DATE: 10/04/2019

CODE OF MASSACHUSETTS REGULATIONS

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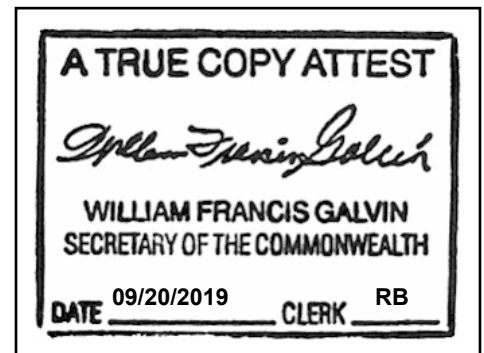


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101 CMR 20.00: HEALTH INFORMATION EXCHANGE

Section

- 20.01: Purpose
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- 20.05: Mass HIway Users and Mass HIway Access
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- 20.14: Penalties
- 20.15: Penalty Schedules
- 20.16: Waivers
- 20.17: Reconsideration and Appeals Process
- 20.18: Severability

20.01: Purpose

101 CMR 20.00 contains the Executive Office of Health and Human Services' regulations specific to health information technology and the state-sponsored, statewide health information exchange (HIE), which is known as the Mass HIway. The Secretariat also publishes other documents affecting health information technology and the Mass HIway including, but not limited to, statements of policy and procedure, conditions of participation, guidelines, and bulletins.

20.02: Citation

101 CMR 20.00 shall be known, and may be cited, as the “Mass HIway Regulations”.

20.03: General Provisions

- (1) Scope. 101 CMR 20.00 governs participation in the Mass HIway and related health information technology.
- (2) Administrative Bulletins. EOHHS may issue administrative bulletins to clarify its policy on substantive provisions of 101 CMR 20.00.
- (3) Mass HIway Policies and Procedures. The Mass HIway Policies and Procedures, as updated from time to time, are applicable to all Mass HIway users. They include detailed policies and procedures, conditions for participation, and fees associated with the Mass HIway.

20.04: Definitions

As used in 101 CMR 20.00, unless the context requires otherwise, terms have the following meanings.

Admission Discharge and Transfer Messages (ADTs). Types of messages that can track a patient's transitions in or out of a site of care such as admissions, discharges, or transfers. The focus of ADT messages is to convey data related to patient demographics and/or to health care encounters.

Business Associate. Has the meaning assigned to it in 45 CFR 160.103 (Health Insurance Portability and Accountability Act (HIPAA) regulations).

20.04: continued

Certified Event Notification Service Vendor or Certified ENS Vendor. An ENS vendor that is certified by EOHHS.

Direct or the Direct Standard. Refers to the specifications developed by the direct project, a nationally recognized organization that develops specifications for a secure, scalable, standards-based way to establish universal health addressing and transport for participants (including providers, laboratories, hospitals, pharmacies, and patients) to send encrypted health information directly to cryptographically validated recipients over the Internet. For purposes of 101 CMR 20.00, references to direct, the direct standard, or the direct project will include any other national, open, industry standard supported by the Mass HIway.

Electronic Health Record (EHR). A digital version of a patient's paper chart. EHRs are real-time, patient-centered records that make information available instantly and securely to authorized users, often including a patient's medical history, diagnoses, medications, treatment plans, immunization dates, allergies, radiology images, and/or laboratory and test results. EHR systems are able to share patient information with other authorized health care providers and organizations.

ENS Recipient. A provider that has a contractual relationship including, but not limited to, a business associate agreement, with a certified ENS vendor(s) for treatment or care coordination in accordance with 101 CMR 20.11.

EOHHS. The Executive Office of Health and Human Services, established under M.G.L. c. 6A.

Event Notification Service (ENS). A service that provides real-time alerts about certain patient medical service encounters, for example, at the time of hospitalization, to a permitted recipient with an existing treatment relationship to the patient, such as a primary care provider.

Health Information Exchange (HIE). The transmission of health care-related data among providers and payers of personal health records according to national standards; the reliable and secure transfer of data among diverse systems and access to and retrieval of data. HIE incorporates many forms of communication methods including, but not limited to:

- (a) directed exchanges;
- (b) queried exchanges; and
- (c) consumer exchanges.

The Mass HIway operates a statewide health information exchange in accordance with M.G.L. c. 118I, and 101 CMR 20.00. More detailed information regarding the functions and services provided by the Mass HIway can be found in the *Mass HIway Policies and Procedures*.

Health Information Service Provider (HISP).

- (a) HISP. An entity that, as part of or all of its business, performs the following:

- 1. verifies participant identities;
- 2. issues and manages security keys;
- 3. issues direct addresses; and
- 4. processes messages to and from those addresses using the direct standard.

- (b) HIway Trusted HISP. A HISP with which the Mass HIway has a direct contractual arrangement, or a HISP that belongs to a third-party organization that acts as a trust framework aggregator with which the Mass HIway has a direct contractual arrangement, to securely exchange Direct Messages, through a means typically referred to as a HISP-to-HISP connection.

- (c) HISP-to-HISP Connection. A technical connection between two or more HISP systems for the purpose of delivering Direct Messages to and from authorized participants of the HISPs that contains clinical or administrative health information about a specific patient. Contractual agreements establish the HISP-to-HISP terms and may be between two HISPs or may be between a HISP and a third-party organization that acts as a trust framework aggregator.

20.04: continued

HIway Direct Messaging. A secure method for Mass HIway users, including provider organizations, to transmit a message with information about a patient to other users, where the Mass HIway does not analyze, use, or share the contents of the message except as required to deliver it and to make it available for use by the intended recipient. HIway Direct Messaging follows the direct standard for encryption technology, or its successor standard, and provides a more secure method of transmitting information than other modes of transmission such as sending a fax, or sending information by postal mail.

HIway-facilitated Service. A service whereby the Mass HIway creates a framework for protected health information exchange through governance, promotion, certification, and/or contracts with a vendor or vendors to support treatment or care coordination.

HIway-sponsored Services. A service for HIway participants whereby the Mass HIway operates and manages a technology platform that allows the HIway to may use, analyze, and/or share protected health information and/or personally identifiable information on behalf of participants.

Mass HIway Integrator. An organization that connects HIway participants to the Mass HIway. Mass HIway integrators are business associates of participants and may include electronic health record (EHR) vendors, technical integrators, and regional health information organizations (RHIOs). Mass HIway integrators use Mass HIway for HISP services.

Mass HIway User. A user includes:

- (a) HIway Participant. A provider organization, a health plan, or a business associate of either a provider organization or health plan or other entity approved by EOHHS. HIway participants must execute a Participation Agreement.
- (b) Non-participant User. An organization that is granted access to the Mass HIway through a HIway trusted HISP.

Patient Matching Process. A certified ENS vendor's proprietary algorithmic process(es) used to match ADTs with patients.

Reflection or Reflect. The process certified ENS vendors use to disclose ADTs with all other certified ENS vendors for treatment or care coordination.

Statewide Event Notification Service (ENS) Framework. An event notification service framework created as a HIway-facilitated service by the EOHHS under 101 CMR 20.11.

Trust Framework Aggregator. A trust framework aggregator manages a bundle of security certificates, or "Trust Anchors", to facilitate interoperable direct exchange between HISPs in a uniform and scalable manner that is consistent with industry best practices for security and trust, thereby avoiding the need for further one-off negotiations between relying parties who are participants in the bundle.

Use Case. A narrative that describes how to accomplish a business goal and sets forth the functional requirements including scope of the activity, people and organizations involved, expected inputs and data, processing steps, and anticipated results. The use case informs the technical and process planning for development of a solution, and can be implemented between two provider organizations or multiple provider organizations based on the business need, clinical workflows, and technical and operational readiness. Categories of use cases will be detailed in the Mass HIway Policies and Procedures as updated from time to time, and may include, but not be limited to, the following categories:

- (a) Provider-to-provider Communications;
- (b) Payer Case Management;
- (c) Quality Reporting; and
- (d) Public Health Reporting.

20.05: Mass HIway Users and Mass HIway Access(1) Users.

20.05: continued

(a) HIway Participants.

1. All HIway participants must sign a Participation Agreement and agree to the terms of the Mass HIway Policies and Procedures.
2. A HIway participant may connect to the Mass HIway with the help of a Mass HIway integrator.
3. A HIway participant is issued a domain and direct addresses by Mass HIway or by a HIway trusted HISP.
4. A HIway participant and its authorized personnel may be listed in the Mass HIway statewide provider directory.
5. A Mass HIway user must become a HIway participant to be able to connect directly to the Mass HIway and use the Mass HIway as its HISP.
6. HIway-sponsored services are restricted to HIway participants, regardless of whether the HIway participant connects directly to the Mass HIway or via a HIway trusted HISP.

(b) Nonparticipant Users.

1. A nonparticipant user must sign a Business Associate Agreement and/or other agreement with a HIway trusted HISP, as required by the HISP to fulfill its obligations under its contractual agreement with the Mass HIway.
2. A nonparticipant user is issued a domain and direct addresses by the HIway trusted HISP.
3. A nonparticipant user is able to send messages to and receive messages from HIway participants *via* the HIway trusted HISP and the Mass HIway.
4. The Mass HIway does not perform message transformation on messages received from nonparticipant users.
5. Nonparticipant users do not have access to HIway-sponsored services.
6. Nonparticipant users are subject to the Mass HIway Policies and Procedures.

(2) HIway Trusted HISPs.

(a) To become a HIway trusted HISP, a HISP must execute a HISP-to-HISP agreement with the Mass HIway or must execute a direct contract with a third-party organization that acts as a trust framework aggregator with which the Mass HIway also has a direct contractual arrangement.

(b) A HIway trusted HISP must process HIway Direct Messages between its nonparticipant users and HIway participants in accordance with its contractual agreements.

(3) Access.

(a) Provider organizations are required to meet the requirement to connect to the Mass HIway that is described in 101 CMR 20.08.

(b) Other categories of eligible Mass HIway users may connect to the Mass HIway.

(c) Use of the Mass HIway is limited to exchanges of health information that are allowed or required by law. Unauthorized access to or disclosure of individually identifiable patient health information by or through the Mass HIway is prohibited, and violators may be subject to any penalties established under applicable state or federal law regarding the protection and privacy of personal information. The obligations of HIway users in the case of a security breach involving the Mass HIway are further described in the Mass HIway Policies and Procedures.

20.06: Provider Organizations

The requirement that all providers must connect to the Mass HIway applies to provider organizations. Provider organizations include, but are not limited to, acute care hospitals, community health centers, and medical ambulatory practices, which are defined as:

- (1) Acute Care Hospital. A hospital licensed under M.G.L. c. 111, § 51, and the teaching hospital of the University of Massachusetts Medical School, which contains a majority of medical-surgical, pediatric, obstetric, and maternity beds, as defined by the department. Hospitals that meet this definition of acute care hospital can be found in the Massachusetts Licensed or Certified Health Care Facility/Agency Listing, which is maintained by the Department of Public Health and is publicly available on the Department of Public Health's website.

20.06: continued

(2) Community Health Center.

(a) An organization that is either:

1. A "Federally Qualified Health Center" or a "Federally Qualified Health Center look-alike" as defined by the federal Department of Health and Human Services Health Resources and Services Administration (HRSA) and operating in conformance with Section 330 of United States Public Law 95-626; or
2. An organization that files cost reports as a community health center, as requested by the Health Policy Commission within the Executive Office for Administration and Finance.

(b) For the purposes of 101 CMR 20.00, the following definitions of large and small community health centers apply:

1. Large Community Health Center. A community health center where ten or more licensed providers participate in providing health care for patients.
2. Small Community Health Center. A community health center where fewer than ten licensed providers participate in providing health care for patients.

(c) In Community Health Center, licensed providers are limited to include medical doctors, doctors of osteopathy, nurse practitioners, or physician assistants.(3) Medical Ambulatory Practice.(a) An organization in Massachusetts that includes licensed providers who provide primary or specialty outpatient health care services to patients. In a medical ambulatory practice, licensed providers are limited to include medical doctors, doctors of osteopathy, nurse practitioners, or physician assistants. Medical Ambulatory Practice does not include Community Health Center, as defined in 101 CMR 20.06(2), and does not include ambulatory practices whose primary purpose is to provide behavioral health services. In a medical ambulatory practice, "outpatient health care services" are defined as health care services that do not require an overnight stay.

(b) For the purposes of 101 CMR 20.00, the following definitions of large and medium medical ambulatory practices apply:

1. Large Medical Ambulatory Practice. A medical ambulatory practice where more than 50 licensed providers participate in providing health care for patients.
2. Medium Medical Ambulatory Practice. A medical ambulatory practice where ten to 50 licensed providers participate in providing health care for patients.
3. Small Medical Ambulatory Practice. A medical ambulatory practice where fewer than ten licensed providers participate in providing health care for patients. Small medical ambulatory practices includes medical ambulatory practices where only one licensed provider participates in providing health care for patients.

(4) For the purposes of 101 CMR 20.00, the applicability of the provider organization definitions shall be determined by calculating the number of licensed providers that provide health care services to patients on behalf of the provider organization in the month of June prior to that organization's initial required connection date to the Mass HIway, regardless of employment status.

(5) EOHHS may issue administrative bulletins or other issuances to define and describe additional types of provider organizations.

20.07: Opt-in Opt-out Mechanism(1) HIway Direct Messaging. Mass HIway users may transmit information *via* HIway Direct Messaging provided that all such transmissions shall be in compliance with applicable federal and state privacy laws and implementing regulations. Mass HIway users may implement local opt-in and/or opt-out process that applies to the use of HIway Direct Messaging by their organization, but are not required to do so.(2) HIway-facilitated Services. HIway-facilitated services must be used in compliance with applicable federal and state privacy laws and implementing regulations. Provider organizations may implement local opt-in and/or opt-out processes that apply to the use of HIway-facilitated services by their organization, but are not required to do so.

20.07: continued

(3) HIway-sponsored Services.

(a) Opt-in. HIway participants must provide each patient and/or their legal representatives with written notice of how the organization uses HIway-sponsored services.

1. Written notice shall be provided by at least one of the following methods:

a. inclusion in the HIway participant's privacy notice;

b. patient handout; or

c. letter, email, or other personal electronic communication to patients.

2. Written notice must be available in languages as established by EOHHS and described in the Mass HIway Policies and Procedures.

3. The written notice must describe the manner and means that the patient can opt-out of HIway-sponsored services.

(b) Opt-out. The Mass HIway or its designee administers a centralized opt out system. Patients and/or their authorized designees may notify the Mass HIway or its designee directly if they choose to opt-out. A HIway participant that has an established relationship with a patient must notify the Mass HIway that the patient has decided to opt-out and/or provide written instructions to its patients on how a patient or their authorized designees can notify the Mass HIway or its designee of the patient's choice to opt-out. Such notifications shall be made in the form and format determined by the Mass HIway and detailed in the *Mass HIway Policies and Procedures*.

(c) Local Opt-in Opt-out. In addition to the opt-in opt-out provisions described in 101 CMR 20.07(2)(a) and (b), HIway participants may choose to implement their own local opt-in and/or opt-out process that applies to the use of HIway-sponsored services by their organization, but are not required to do so. If a HIway participant does implement a local process that applies to HIway-sponsored services, it must supplement the opt-in opt-out provisions described in 101 CMR 20.07(2)(a) and (b), and shall not replace 101 CMR 20.07(2).

20.08: Connecting to the Mass HIway(1) Provider Organizations.

(a) The requirement that all providers shall connect to the Mass HIway applies to the following provider organizations.

1. Acute care hospitals;

2. Community health centers (large and small); and

3. Medical ambulatory practices (large and medium).

(b) EOHHS may issue administrative bulletins or other issuances establishing Mass HIway connection dates for additional provider organizations. Such guidance will provide at least one year for affected provider organizations to connect to the Mass HIway.

(2) Health Care Systems with Multiple Provider Organizations. For health care systems that comprise multiple provider organizations, the requirements in 101 CMR 20.00 apply to provider organizations as they are defined in 101 CMR 20.04. For example, if a health care system is comprised of multiple acute care hospitals and multiple medical ambulatory practices, then each acute care hospital within that health care system is required to meet the Mass HIway connection requirements for acute care hospitals described in 101 CMR 20.08(3) and (4), and each medical ambulatory practice within that health care system is required to meet the Mass HIway connection requirement for medical ambulatory practices described in 101 CMR 20.08(3).

(3) Connection Requirement for All Provider Organizations.

(a) All provider organizations that have required Mass HIway connection dates specified in 101 CMR 20.09 or in a subsequent administrative bulletin or other issuance, shall meet the M.G.L. c. 118I, § 7 requirement to connect to the Mass HIway by sending and receiving HIway Direct Messages.

(b) The requirement to connect to the Mass HIway by sending and receiving HIway Direct Messages shall be under the following phased-in timeline.

1. Year 1. The provider organization shall send or receive HIway Direct Messages for at least one use case. The use case may be within any category of use cases.

20.08: continued

2. Year 2. The provider organization shall send or receive HIway Direct Messages for at least one use case that is within the provider-to-provider communications category of use cases.

3. Year 3. The provider organization shall send HIway Direct Messages for at least one use case that is within the provider-to-provider communications category of use cases. The provider organization shall also receive HIway Direct Messages for at least one use case that is within the provider-to-provider communications category of use cases. One of these two use cases may be the use case that was used to meet the Year 2 requirement.

4. Year 4. The provider organization may be subject to penalties, as described in 101 CMR 20.13, if that organization has not met the requirements established in 101 CMR 20.08(3).
- (c) Sending or receiving HIway Direct Messages for any category of use case in Years 1, 2 and 3 is fulfilled by a provider organization consistently using HIway Direct Messaging for that use case when it is appropriate to do so.

(d) Provider organizations must submit to EOHHS a use case narrative outlining how the Year 1, Year 2, and Year 3 requirements have been fulfilled in accordance with 101 CMR 20.08(3)(b) through (c). Use case examples and submission requirements are established in the Mass HIway Policies and Procedures.

(e) 101 CMR 20.09 provides the dates for Year 1, Year 2, Year 3, and Year 4 for different provider organizations.
- (4) Connection Requirement for Acute Care Hospitals.

(a) In addition to the requirement to connect to the Mass HIway by sending and receiving HIway Direct Messaging, as described in 101 CMR 20.08(3), acute care hospitals must disclose all, consistent with their obligations under 101 CMR 20.07, and federal and state privacy laws including, but not limited to, HIPAA, 42 CFR Part 2, Human Immunodeficiency Virus, and genetic testing, ADTs or equivalent messages regarding emergency department visits and hospital admissions, discharges and transfers to at least one certified ENS vendor within the statewide event notification service framework; the recipient certified ENS vendor(s) must then reflect ADTs to all certified ENS vendors for purposes of treatment or care coordination by ENS recipients.

(b) Acute care hospitals must meet the requirement in 101 CMR 20.08(4)(a) by January 1, 2020.

(c) If an acute care hospital implements a local opt-in or local opt-out process that limits ADTs that are sent to the statewide event notification service, that provider organization must actively educate staff and inform patients about the purpose of utilizing an event notification service, and report metrics in form and format required in the *Mass HIway Policies and Procedures*.

(d) Penalties for not complying with 101 CMR 20.08(4)(a) through (c) take effect on July 1, 2020.

20.09: Timetable for Connecting to the Mass HIway

Schedule A: Timetable for Connecting to the Mass HIway by sending and receiving HIway Direct Messages				
Provider Organization	Year 1	Year 2	Year 3	Year 4
Acute Care Hospitals	February 10, 2017	January 1, 2018	January 1, 2019	January 1, 2020
Large and Medium Medical Ambulatory Practices	January 1, 2018	January 1, 2019	January 1, 2020	January 1, 2021
Large Community Health Centers	January 1, 2018	January 1, 2019	January 1, 2020	January 1, 2021
Small Community Health Centers	January 1, 2019	January 1, 2020	January 1, 2021	January 1, 2022

- (1) The definition of acute care hospitals is provided in 101 CMR 20.06(1).

20.09: continued

- (2) The definition of large, medium, and small medical ambulatory practices is provided in 101 CMR 20.06(3).
- (3) The definition of large and small community health centers is provided in 101 CMR 20.06(2).
- (4) As described in 101 CMR 20.08(4)(b), acute care hospitals must meet the requirement of 101 CMR 20.08(4)(a) by January 1, 2020.

20.10: Interoperable Electronic Health Record Systems

- (1) Achieving Interoperability via Implementing HIway Direct Messaging. As of February 10, 2017, provider organizations that have dates for connecting to the Mass HIway must establish interoperability by implementing HIway Direct Messaging. The methods by which provider organizations may implement HIway Direct Messaging are specified in the Mass HIway Policies and Procedures.
- (2) Reporting Implementation of an EHR.
 - (a) As of February 10, 2017, provider organizations that have dates for connecting to the Mass HIway must submit information regarding:
 - 1. whether or not they have an EHR; and
 - 2. how their EHR, if any, connects to the Mass HIway.
 - (b) The submission must be in the form and format required, and in accordance with the schedule established in the Mass HIway Policies and Procedures.

20.11: Statewide Event Notification Service Framework.

- (1) General. The statewide event notification service framework is a HIway-facilitated service composed of EOHHS-certified ENS vendors. Certified ENS vendors must:
 - (a) collect ADT feeds from required submitters;
 - (b) reflect ADT feeds to all other certified ENS vendors;
 - (c) conduct a patient matching process with the ADT feeds; and
 - (d) produce notifications to their respective ENS subscribers in a secure method that protects patient privacy in accordance with applicable state and federal law.
- (2) ENS Certification Process. EOHHS sets reasonable objective criteria, including applicable privacy and security standards for certified ENS vendors. The certification will be for a term as specified in the certification process but in no event for more than three years, at which time the term may be renewed upon successful recertification.
- (3) Reflect ADTs. A certified ENS vendor must reflect ADTs to all other certified ENS vendors for the purposes of treatment or care coordination by ENS recipients.
 - (a) Certified ENS vendors must match all inbound reflected ADTs using their patient matching process to determine positive or negative matches.
 - (b) All inbound reflected ADTs that achieve a positive result in the patient matching process must be routed to the appropriate ENS recipients in accordance with the contract between the ENS vendor and ENS recipient.
 - (c) All inbound reflected ADTs that achieve a negative result in the patient matching process must be destroyed in accordance with the requirements of the certification process; however, a record of the transaction must be kept, as required, to meet minimal audit standards and retention periods for audit purposes consistent with 45 CFR § 164.312(b). Certified ENS vendors must keep a log of inbound reflected ADTs in auditable information.
- (4) Data Security. Data shall be transmitted and held in accordance with industry-accepted practices, which at a minimum shall include the Health Insurance Portability and Accountability Act (HIPAA) Rules, and any other requirements EOHHS may deem necessary for certification.

20.11: continued

(5) Audit Rights. EOHHS retains the right to conduct data integrity, privacy, and security audits of certified ENS vendors to comply with the framework of 101 CMR 20.12. EOHHS, upon finding unauthorized access or disclosure of data, may suspend the certification until corrective action is taken, and/or rescind the certification.

20.12: Right to Audit

- (1) EOHHS may audit provider organizations on a periodic basis in order to confirm compliance with the requirements set forth in 101 CMR 20.00.
- (2) Audits will be limited only to such records, personnel, and other resources as EOHHS determines are necessary to assure compliance with the requirements set forth in 101 CMR 20.00.
- (3) Audits will take place during normal business hours and at mutually agreeable times.

20.13: Fees

- (1) Fees for using the Mass HIway apply to HIway participants and are defined in the "Participation Fees" section of the Mass HIway Policies and Procedures, as updated from time to time.
- (2) Participant fees are established at different tiers for different categories of HIway participants.
- (3) The Mass HIway does not charge any fees to HISP's for providing HISP-to-HISP connections, and does not pay any fees to HISP's for providing HISP-to-HISP connections.
- (4) The Mass HIway does not charge any fees to nonparticipant users for their use of HIway Direct Messaging.

20.14: Penalties

As required by M.G.L. c. 118I, § 8, penalties for noncompliance with the requirement to connect to the Mass HIway may be assessed by EOHHS. If a provider organization does not connect to the Mass HIway by the dates stated in 101 CMR 20.09, then the provider organization may be subject to penalty. The penalty schedules are found in 101 CMR 20.15.

20.15: Penalty Schedules

Schedule B: Penalties for not connecting to the Mass HIway via exchanging HIway Direct Messaging	
Provider Organization*	Penalty
Acute Care Hospital	● At the Year 1 required connection date: \$0 ● At the Year 2 and Year 3 dates: \$0 ● At the Year 4 date (<i>i.e.</i>, January 2020): \$30,000 per year
Large Medical Ambulatory Practice	● At the Year 1 required connection date (<i>i.e.</i>, January 2018): \$0 ● At the Year 2 and Year 3 dates: \$0 ● At the Year 4 date (<i>i.e.</i>, January 2021): \$20,000 per year
Medium Medical Ambulatory Practice	● At the Year 1 required connection date (<i>i.e.</i>, January 2018): \$0 ● At the Year 2 and Year 3 dates: \$0 ● At the Year 4 date (<i>i.e.</i>, January 2021): \$5,000 per year

20.15: continued

Schedule B: Penalties for not connecting to the Mass HIway via exchanging HIway Direct Messaging	
Provider Organization*	Penalty
Large Community Health Center	● At the Year 1 required connection date (<i>i.e.</i>, January 2018): \$0 ● At the Year 2 and Year 3 dates: \$0 ● At the Year 4 date (<i>i.e.</i>, January 2021): \$5,000 per year
Small Community Health Center	● At the Year 1 required connection date (<i>i.e.</i>, January 2019): \$0 ● At the Year 2 and Year 3 dates: \$0 ● At the Year 4 date (<i>i.e.</i>, January 2022): \$1,000 per year
* Definitions of provider organizations are provided in 101 CMR 20.06.	

Schedule C: Penalties for Acute Care Hospitals that do not meet the ADT submission requirement	
Provider Organization	Penalty
Acute Care Hospital	● July 1, 2020: \$30,000 per year

20.16: Waivers

- (1) Waiver Criteria. EOHHS may grant a waiver of the requirement to connect to the Mass HIway for the following situations.
- (a) The provider organization does not have internet access or a computer.
 - (b) The provider organization does not have broadband internet access.
 - (c) The provider organization is unable to meet the requirement to connect to the Mass HIway due to a catastrophic event (such as a natural disaster that damages the organization's health information technology infrastructure), or due to an extenuating circumstance.
 - (d) The provider organization is unable to meet the requirement to fully implement a use case of sending and receiving HIway Direct Messages within the use case category of provider-to-provider communications, but the provider organization does meet the following criteria.
 - 1. The provider organization must be able to demonstrate the technical capability to send and receive HIway Direct Messages with a HIway participant in order to demonstrate achieving a basic level of interoperability with provider organizations that use the Mass HIway as their HISP;
 - 2. The provider organization successfully implements provider-to-provider Direct Messaging outside of the Mass HIway (*e.g.*, using a non-Mass HIway HISP); and
 - 3. The provider organization does not have any trading partners on the Mass HIway to implement a use case within the use case category of provider-to-provider communications.
 - (e) The provider organization does not have the capability to send ADT feeds.
 - (f) The provider organization has presented a compelling rationale for a waiver that EOHHS, in its discretion, may consider.
- (2) Waiver Duration. An approved waiver is valid for 24 months from the date of issue. Provider organizations that continue to experience circumstances that require a waiver must apply for another waiver at least 30 days before the expiration of their current waiver in order to avoid a penalty.

20.16: continued

(3) Waiver Request Review Process. After review of a provider organization's request for a waiver, the Mass HIway will notify the provider organization in writing of its decision. If the waiver request is incomplete, the Mass HIway will ask the provider organization for more information. If the provider organization does not submit the requested information to the Mass HIway within 60 days of the request, then the Mass HIway will deny the waiver request. Denial of a waiver request is not subject to appeal, but a provider organization may reapply for a waiver with new or additional information.

20.17: Reconsideration and Appeals Process

(1) Applicability. The provisions set forth in 101 CMR 20.17 establish EOHHS's review process for provider organization disputes concerning penalties associated with the requirement to connect to the Mass HIway as established by M.G.L c. 118I, and 101 CMR 20.08.

(2) Notice of Penalties. EOHHS will notify the provider organization in writing of EOHHS's determination of the provider organization's failure to comply with the requirements to connect to the Mass HIway as established by 101 CMR 20.08. The notice will identify the penalty a provider organization must pay and identify the provider organization's right to review. EOHHS will notify the provider organization by letter, report, computer printout, electronic transmission, or other format. This notification is the Mass HIway Notice of Penalties.

(3) Requesting EOHHS Review of Penalties for Failure to Connect to the Mass HIway.

(a) To preserve its right to an adjudicatory hearing and judicial review, a provider organization must request EOHHS's review of the determination of a penalty as specified in the notice. A provider organization's request for review may be based on an alleged error in EOHHS's determination of the provider organization's ability to connect to the Mass HIway as required under 101 CMR 20.08. The provider organization's request for review must be made in writing and be received by EOHHS within 30 calendar days of the date appearing on the Mass HIway Notice of Penalties.

(b) A provider organization's request for review may request reconsideration of the provider organization's compliance with its selected use case(s) and penalty amounts.

(c) Any request for agency review submitted pursuant to 101 CMR 20.17 must

1. identify with specificity all determinations with which the provider organization disagrees;
2. specify in sufficient detail the basis for the provider organization's disagreement with those determinations;
3. identify and address all issues in the Mass HIway Notice of Penalties with which the provider organization disagrees; and
4. include any documentary evidence and information that the provider organization wants EOHHS to consider.

(4) EOHHS's Final Determination.

(a) EOHHS will review a provider organization's request for agency review only if it is submitted in compliance with the requirements of 101 CMR 20.17. EOHHS is not obligated to consider any information or documents that the provider organization failed to timely submit in writing with the request for agency review and received by EOHHS within 30 calendar days of the date appearing on the Mass HIway Notice of Penalties. EOHHS will issue a final written determination of contested penalty assessments based on its review, which will state the reasons for the determination, and inform the provider organization of the provider organization's right to file a claim for an adjudicatory hearing with the Board of Hearings established under M.G.L. 118E, § 48.

(b) Any findings specified in the Mass HIway Notice of Penalties that are not specifically identified as in dispute in a provider organization's request for agency review will, without further notice, constitute EOHHS's final determination. The provider organization has no right to an adjudicatory hearing or judicial review of such findings because of the failure to exhaust its administrative remedies.

20.17: continued

(c) If the provider organization does not submit a request for agency review, the Mass HIway Notice of Penalties constitutes EOHHS's final determination. If a provider organization requests agency review, but fails to timely comply with the requirements of 101 CMR 20.17, the request for agency review may be denied. In either case, the Mass HIway Notice of Penalties constitutes EOHHS's final determination, and the provider organization has no right to an adjudicatory hearing pursuant or judicial review because of the failure to exhaust its administrative remedies.

(5) Appeal of EOHHS's final agency action pursuant to 101 CMR 20.17(4)(a) will be permitted by filing a claim for an adjudicatory hearing with the Board of Hearings and EOHHS within 30 calendar days of the date on the final determination. A claim is considered to be filed on the date that it is actually received by both the Board of Hearings and EOHHS. Failure to file a timely claim will result in implementation of the action identified in the final determination.

20.18: Severability

The provisions of 101 CMR 20.00 are severable. If any provision of 101 CMR 20.00 is held invalid or unconstitutional, such determination will not affect the validity or constitutionality of any remaining provisions of 101 CMR 20.00.

REGULATORY AUTHORITY

101 CMR 20.00: M.G.L. c. 118I.



THE COMMONWEALTH OF MASSACHUSETTS

William Francis Galvin
Secretary of the Commonwealth

Notice of Correction

Regulation Filing *To be completed by filing agency*CHAPTER NUMBER: 360 CMR 10.000CHAPTER TITLE: Sewer UseAGENCY: Massachusetts Water Resource AuthorityORIGINAL PUBLICATION REFERENCE: 1399 Date: 09/06/2019

SUMMARY OF CORRECTION:

Please remove "10.105: Severability" from the regulation index (page 360 CMR- 52). This section was moved back to 10.003.

AGENCY CONTACT: Rebecca Weidman PHONE: 617-305-5633ADDRESS: 2 Griffin WayChelsea, MA 02150ATTESTATION - *The regulation described herein and attached hereto is a true copy of the regulation adopted by this agency.* ATTEST:SIGNATURE: _____ SIGNATURE ON FILE _____ DATE: Sep 12 2019Publication *To be completed by the Regulations Division*MASSACHUSETTS REGISTER NUMBER: 1401 DATE: 10/04/2019EFFECTIVE DATE: 09/06/2019

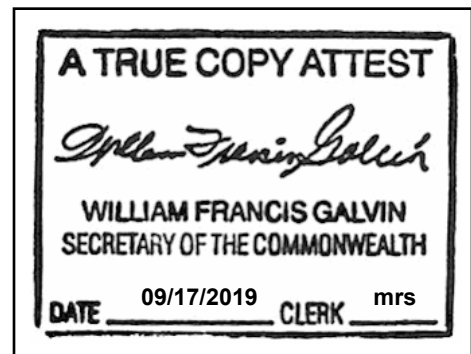
CODE OF MASSACHUSETTS REGULATIONS

Remove these pages:

51 & 52

Insert these pages:

51 & 52



360 CMR 10.000: SEWER USE

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- 10.033: Permit Modifications
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10.000: continued

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GENERAL PROVISIONS

10.001: Authority

360 CMR 10.000 are the rules and regulations of the Massachusetts Water Resources Authority, promulgated under the authority of St. 1984, c. 372, St. 1987, c. 307, and St. 1991, c. 41, governing the discharge of sewage, drainage, substances, and wastes into any sewer under the control of the Authority, or into any sewer tributary thereto. 360 CMR 10.000 is established in compliance with all applicable requirements of federal and state law including, without limitation, the requirements of the Federal Water Pollution Control Act, P.L. 92 500, 33 U.S.C. § 1251 *et seq.*, and the regulations thereunder, 40 CFR Part 403; the National Pollutant Discharge Elimination System program permits issued to the Authority by the United States Environmental Protection Agency and the Massachusetts Department of Environmental Protection; and the Massachusetts Clean Waters Act, M.G.L. c. 21, § 26 *et seq.*, and 314 CMR 2.00: *Permit Procedures*, 314 CMR 7.00: *Sewer System Extension and Connection Permit Program*, and 314 CMR 12.00: *Operation and Maintenance and Pretreatment Standards for Wastewater Treatment Works and Indirect Dischargers*.

