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| Logo of Dignity Alliance Massachusetts with tag line "respect. self-determination. choices."  Description generated with high confidence | The Tuesday Digest  Issue # 56 September 21, 2021  *The Tuesday Digest* is information complied by Dignity Alliance Massachusetts concerning long-term services, support, living options, and care issued each Tuesday. | | |
|  | \*May require registration before accessing article. | | |
| Quotes of the Week | *“While we are doing our utmost, we are no longer able to provide the standard of care to each and every patient who needs our help. The acuity and number of patients now exceeds our resources and our ability to staff beds with skilled caregivers, like nurses and respiratory therapists. We have been forced within our hospital to implement crisis standards of care. . . What is already a stressful situation could rapidly progress to a catastrophe.”*  Dr. Kristen Solana Walkinshaw, Chief of Staff at Providence Alaska Medical Center in Anchorage, Alaska, *Alaska E.R. patients are waiting hours in vehicles as a major hospital rations care.* **\*New York Times,** September 15, 2021, <https://tinyurl.com/AlaskaHospitalsRationCare>  *“We can be productive working at home. I can attend health care committees or legal committees on Zoom. If I get mail in the office, it can get sent to me or scanned to me.”*  Andy Forman, senior disability advocate at the Boston Center for Independent Living, who is legally blind, *Remote work made life easier for employees with disabilities. Advocates say the option should stay,* **\*Boston Globe,** September 9, 2021, <https://tinyurl.com/WorkersDisabilitiesRemoteWork>  *When I asked a woman my age [80 years old] how she was feeling, she said, “I have issues,” and I said, “We all have issues. The secret to successful aging is to recognize one’s issues and adapt accordingly.” I’m constantly learning what I can and can’t do and asking or paying for help when needed.*  Jane E. Brody, author of the column, *Well, How to Age Gracefully,* **\*New York Times,** September 13, 2021, <https://tinyurl.com/HBrodyHowToAgeGracefully>  *“I don’t think we can fail the American people who are struggling under the crippling weight of astronomical drug prices that rise year after year. I really believe the current system is unsustainable.”*  Rep. Frank Pallone, D-N.J., chairman of the Energy and Commerce Committee,  *Democrats on key panel vote with Republicans to reject adding Medicare drug-price plan to $3.5T budget package,* **USA Today,** September 15, 2021, <https://tinyurl.com/MedicareDrugPricePlan>  *“[I}t is worrisome not to have inspections, especially when visitation has been curtailed. We know that family members help monitor and ensure appropriate care … so inspections and families work in complementary ways.”*  Tamara Konetzka, a public health professor at the University of Chicago,  *Feds: Inspection backlog at nursing facilities continues to,* **The Joplin Globe,** September 11, 2021, <https://tinyurl.com/InpsectionBacklog>  *“It’s always been the case that most older adults are very resilient, and that’s true with this pandemic as well.”*  Peter Lichtenberg, director of the Wayne State University Institute of Gerontology, *for some seniors, pandemic trials have brought renewal,* **Christian Science Monitor,** September 14, 2021, <https://tinyurl.com/TrialsBroughtResilency>  *“I am very troubled that one of the largest nursing home chains in the country is allowed to evade a $256 million court-ordered judgment against it by filing for bankruptcy and selling a handful of its facilities. What happens to accountability for the billions of dollars that nursing homes receive from the federal government for providing care to residents?”*  Toby S. Edelman, senior policy attorney, Center for Medicare Advocacy, *How one of the largest nursing home chains in Florida could avoid nearly all of $256 million fraud judgment,* **\*Washington Post,** September 14, 2021, <https://tinyurl.com/256MillionJudgement>  *“Everyone knew from early in the pandemic that the most vulnerable populations are in nursing homes and veterans’ homes. Going forward, we must give more attention and devote additional resources to these facilities. We must also make sure they are being run by people with proper credentials and work experience. We can’t allow these residents to be forgotten victims of the most tragic public health crisis of our time.”*  New Jersey Sen. Joe Vitale (D-Middlesex), chairman of the Senate Health, Human Services and Senior Citizens Committee, *Veterans at nursing homes will have more rights in future emergencies under new N.J. laws,* **NJ.com,** September 17, 2021, <https://tinyurl.com/VeteransMoreRights>  *“The veterans in our memorial homes may not always be in a position to advocate for themselves and might need someone else to advocate on their behalf. Assigning a resident advocate to each home to serve as a point of contact for our veterans will make it easier for them to share any concerns or grievances they may have.”*  *Veterans at nursing homes will have more rights in future emergencies under new N.J. laws,* **NJ.com,** September 17, 2021, <https://tinyurl.com/VeteransMoreRights>  *Night after night, I see restaurants that are theoretically wheelchair accessible. What I rarely see are wheelchairs. And I’m ashamed to admit I never thought very hard about that until my first meal at a new restaurant in East Harlem called* [*Contento*](https://www.contentonyc.com/)*. Two of its owners use wheelchairs, and they designed Contento so that they and others like them would be as comfortable as possible. . . [S]he pointed out all the things she’d noticed that were out of the ordinary: the smooth concrete path from the sidewalk to the front door; the placement and height of the tables and bar tops; and a dozen other things that allowed her to get through the meal without help. . . Listing all the ways Contento accommodates people with various disabilities, not just wheelchair users, will make the place sound like some kind of accessibility theme park. But it is, above all, a very enjoyable place to have dinner and a few glasses of wine.*  Pete Wells, **New York Times** restaurant critic, *Accessibility Is a Right. This Restaurant Treats It That Way.,* **\*New York Times,** August 18, 2021, <https://tinyurl.com/AccessibilityIsAStandard>  *In 2017, a bipartisan congress passed a law that would allow for the sale of over-the-counter hearing aids for those with mild to moderate hearing loss, but the Food and Drug Administration has yet to issue regulations to assure that such devices are both safe and effective. The agency, preoccupied with the pandemic, failed to meet the law’s mandated deadline to publish the required rules by August 2020.*  *Will Hearing Aids Ever Be Hip?* , **\*New York Times,** August 30, 2021, <https://tinyurl.com/WillHearingAidsBeHip>  *Today the [Baychester Houses] campus looks spotless, with refurbished playgrounds, fresh plantings, and a new basketball court. The buildings have been reclad with a waterproof material and faux-wood paneling. The renovation is not Architecture with a capital A. But it is dignified and better than some market rate housing. Glassed-in entrances have replaced the old carceral doorways. There are new lobbies, new light fixtures in the hallways, new recycling rooms and compactors in the basements. Apartments have been outfitted with new bathroom fixtures, windows, and kitchen appliances.*  *A Rebirth in the Bronx: Is This How to Save Public Housing?,* **\*New York Times,** August 19, 2021 (updated), <https://tinyurl.com/RebirthInTheBronx>  *It is imperative that these public funds be used wisely to build a workforce that responds to the urgent and enduring health care needs of society, rather than the interests of health care organizations, health insurers, or professional groups. These societal needs include bolstering access to maternity care while rural hospitals are closing, filling the long-standing shortage of primary care services, increasing the availability of mental health and substance use disorder services for patients and providers as behavioral health needs and “*[*deaths of despair*](https://www.sciencenews.org/article/deaths-of-despair-depression-mental-health-covid-19-pandemic)*” have dramatically increased during the COVID-19 pandemic, mitigating critical shortfalls in long-term care, and effectively addressing social determinants that prompt and exacerbate health inequities.*  *Investing In A 21st Century Health Workforce: A Call for Accountability,* **Health Affairs Blog,** September 15, 2021, <https://tinyurl.com/21stCenturyHealthWorkforce>  *If past performance is any guide, DPH is way too lenient in reviewing mergers and other expansions.*  *DPH needs to stop being a paper tiger,* **CommonWealth,** September 19, 2021,  <https://tinyurl.com/APaperTiger>  *“If you need drugs, open up your grandma’s medicine cabinet.”*  Pamela Teaster, gerontologist at Virginia Tech, *The Pain Wouldn’t Stop — Because Her Medication Had Been Stolen,* **\*New York Times,**  September 17, 2021, <https://tinyurl.com/PainWouldntStop>  *"Our findings are concerning given the broad FDA labeling for aducanumab. The public conversation on aducanumab has focused on limited benefit and high costs. It is equally important to consider that the majority of patients with Alzheimer's disease are likely to face higher risks of adverse events than the patients studied in the trials.”*  Dr. Timothy Anderson, assistant professor of medicine at Beth Israel Lahey Health, Boston, *Most Alzheimer's Patients Wouldn't Have Qualified for Controversial Drug's Trial: Stud,* **Health Day,** September 14, 2021,  <https://tinyurl.com/PatientsWouldntHaveQualified>  *"Medicare really improves financial risk protection for older adults and reducing the age of Medicare eligibility would go a long way in reducing the financial burden of health care spending for those who are not quite 65."*  Dr. John Scott, assistant professor of cardiac surgery, University of Michigan Medical School, Ann Arbor, *Turning 65 Brings Big Health Care Cost Savings, Study Finds,* **Health Day,** September 15, 2021, <https://tinyurl.com/Turning65BringsSavings>  *“It means they’re in the waiting room, some are in the back of ambulances”.*  Jeannie Gaines, spokesperson for the Alabama Hospital Association, describing situation for persons needing hospital admission, *Covid Hospitalizations Hit Crisis Levels in Southern I.C.U.s,* **\*New York Times,** September 14, 2021, <https://tinyurl.com/CovidHospitalizationsHitCrisis>  *Now doctors are being forced to call 30 or more hospitals across multiple states to find a bed for a single patient in hospitals with which they have little to no relationship. Some doctors in Idaho have called as far south as Texas and as far east as Georgia.*  *Idaho declares statewide hospital resource crisis amid Covid surge,* **NBC News,**  September 16, 2021, <https://tinyurl.com/IdahoDeclaresStatewideCrisis>  *“The situation is dire — we don’t have enough resources to adequately treat the patients in our hospitals, whether you are there for Covid-19 or a heart attack or because of a car accident.”*  Dave Jeppesen, director of the Idaho Department of Health and Welfare, *Idaho allows overwhelmed hospitals across the state to ration care if necessary.,* **\*New York Times,** <https://tinyurl.com/IdahoHospitalsOverwhelmed>  *“The [safety] net is gone and people will fall from the high wire.”*  *COVID-19 surge forces health care rationing in parts of West,* **AP News,**  September 16, 2021, <https://tinyurl.com/SurgeForcesRationing>  *“Although [the Veterans Administration] recognizes that the trauma caused by the military’s decades-long policy of discrimination against LGBTQ+ people cannot be undone in a few short months, the Biden administration and Secretary McDonough are taking the steps necessary to begin addressing the pain that such policies have created.”*  Kayla Williams, Veterans Administration assistant secretary for public affairs, *Discharged LGBTQ veterans now eligible for benefits under new guidance issued by VA*, **Stars and Stripes,** September 20, 2021, <https://tinyurl.com/LGBTVeteransEligibleBenefits>  *"Our state literally shrunk."*  Dr. Scott Harris, Alabama’s State Health Officer, *There Were More Deaths Than Births in Alabama Last Year, A Grim First for The State,* **NPR,** September 20, 2021, <https://tinyurl.com/NPRAlabamaMoredDeathsBirths>  *“If we use a holistic perspective—one that takes a lifespan  approach—we can increase equity and intergenerational  cohesion. With understanding and commitment, we can get  there, and I hope that will be a positive outcome of this very  difficult time.”*  Fernando Torres-Gil, Professor of Social Welfare and Public Policy and Director,  Center for Policy Research on Aging, University of California Los Angeles, and former Assistant Secretary for Aging, U.S. Administration on Aging, *COVID-19 and the Future of Aging,* **Milken Institute,** June 22, 2021, <https://tinyurl.com/Covid19AndFutureOfAging>  *“The convergence of the viral pandemic with long-standing and systemic structural inequities provided a distinct frame through which to consider efforts to increase social connection, foster improved health, and well-being, and build resilient communities.*  Scott Kaiser, Chief Innovation Officer, Motion Picture, Television Fund, and Nora Super, Senior Director, Milken Institute Center for the Future of Aging, *Together Apart: Findings from the Social Isolation Impact Summit*, **Milken Institute,** October 13, 2020, <https://tinyurl.com/TogetherApartSocialIsolation>  *“I think we have a moral and legal obligation as a country, to open the doors of education to as many people as we conceivably can. I think that times of crisis can sometimes make both people and institutions and nations forget their values. But times of crisis can also remind us of what our values are.”*  Justin Martin, second year graduate student in education at Vanderbilt University who has cerebral palsy, *America Faces a Severe Caregiver Shortage, As This Grad Student Learned Firsthand,* **HuffPost,** September 6, 2021 (updated), <https://tinyurl.com/GradStudentFirsthand> | | |
| Featured | 1. **\*New York Times**   September 13, 2021  *How to Age Gracefully*  Commentary by Jane E. Brody, **New York Times** columnist (*Well*)  Inspired by a new book, “Stupid Things I Won’t Do When I Get Old,” I’m taking stock of my life and deciding what I need to reconsider.  <https://tinyurl.com/HBrodyHowToAgeGracefully> | | |
| Featured recording | 1. **1A NPR**   September 20, 2021  *The Push for Nursing Home Reform in The Middle of a Pandemic*  Long-term care in the United States has been marginalized for decades, leaving aging adults who can no longer care for themselves at home reliant on poorly funded and insufficiently monitored institutions. Although major regulatory policies, including the Federal Nursing Home Reform Act of 1987, have attempted to address deficiencies in the quality of care, Covid-19 has highlighted the fact that better monitoring is not enough. The coronavirus has exposed and amplified a long-standing and larger problem: our failure to value and invest in a safe and effective long-term care system.  Long-term care has been sidelined in our federal social welfare policies since the 1960s, when Medicare and Medicaid created narrow and incomplete social insurance programs for such care. These programs adopted a medicalized model of care, prioritizing the use of licensed providers and institutions. This model made nursing homes the default provider of long-term care and made the care provided by families and others outside these licensed facilities invisible, leaving it unsupported.  <https://tinyurl.com/PushNursingHomeReform> | | |
| Featured Reports | 1. **Milken Institute**   June 22, 2021  *COVID-19 and the Future of Aging*  After the pandemic year of hospitalizations and deaths, failed businesses and lost jobs, social isolation and dreams deferred, these thought leaders were clear-eyed yet optimistic about the future. With progress on vaccine supply and distribution and a “new normal” on the horizon, they focused on the longer-term consequences of our COVID-19 experience, the challenges and risks ahead, and their hopes for how all of us can emerge from this difficult time for the better.  Interviewees discussed a broad range of issues as they considered the effects of the virus. The interviews are organized by seven topics: Societal Response, Health and Wellness, Financial Security and Retirement, Advances in Bioscience, Housing and Communities, Work and Careers, and Philanthropy. While the ideas expressed by interviewees differed, common themes surfaced—suggesting critical areas of opportunity for focus and directed efforts to realize the silver linings of a tragic pandemic.  <https://tinyurl.com/Covid19AndFutureOfAging>   1. **Milken Institute**   October 13, 2020  *Together Apart: Findings from the Social Isolation Impact Summit*  Alongside a pandemic and racial unrest, social isolation is the other crisis. COVID has elevated awareness of this urgent public health issue. More than one in four adults aged 50 to 80 reported that they felt isolated even before the COVID outbreak. The costs of isolation to individuals, families, communities, and the broader society are massive and sadly under-reported. More attention has been needed for years, but the COVID pandemic has dramatically raised the stakes.  But there is hope—and opportunity. Communities and organizations are taking action to implement interventions and promote social connection and support for those in need. The Social Isolation Impact Summit focused on innovative programs in California, but these promising practices can be effective in many places. This report summarizes the themes raised by Summit panelists: promoting social connection across diverse communities, intergenerational cohesion, and the mind-body connection.  <https://tinyurl.com/TogetherApartSocialIsolation> | | |
| Featured Commentary | 1. **The Lancet**   October 1, 2020  *A life-course model for healthier ageing: lessons learned during the COVID-19 pandemic*  The Stanford Center on Longevity launched the New Map of Life (NMOL) initiative in September 2018, and later convened a global conference on the same topic in Bellagio, Italy, in September 2019. Experts identified six principles to guide long-lived societies on a global scale:  (1) new roles and opportunities must be created so that people experience purpose, belonging, and worth  (2) education must be a lifelong pursuit  (3) working longer should occur in multigenerational contexts  (4) money: opportunities to earn and save must be available throughout life to ensure financial security  (5) advances in the science of ageing must be distributed broadly in the population 6) physical health and the prevention of disease is critical to achieving the promise longevity presents[2](https://www.thelancet.com/journals/lanhl/article/PIIS2666-7568(20)30008-8/fulltext#bib2)  The NMOL initiative rests on the presumption that longer lives are not inherently problematic, but rather reflect a mismatch between the cultures guiding us and the length of our lives. Although not guaranteed, added years can enable people to cultivate more meaningful lives. COVID-19 has taught us important lessons relevant to each NMOL principle. We learned how purpose, belonging, and worth are threatened for people older than 65 years, especially when public health recommendations insist on isolation from friends and loved ones (principle 1). We have seen how education is critical so that communities and individuals stay updated about COVID-19 and preventive measures (principle 2). We witnessed just how different workforce experiences are, as non-manual (so-called white collar) workers retreated to working from home, while manual (so-called blue collar) workers remained on the frontline and were particularly vulnerable to job loss (principles 3 and 4). We experienced how disruptions in scientific advances fostering health equity, such as vaccination distributions, can have detrimental impacts worldwide (principle 5). And, finally, the pandemic underscored the importance of physical resilience, and demonstrated how older communities and individuals living with comorbidities are more threatened by COVID-19 health impacts than the younger population (principle 6).  <https://tinyurl.com/LifeCourseModelHealthierAging> | | |
| Public Hearings | 1. **Joint Committee on Ways and Means and the House Committee on Federal Stimulus and Census Oversight**   Tuesday, September 21, 2021, 11:00 a.m.  *Virtual hearing on the American Rescue Plan Act (ARPA) Funding focusing on health care, mental health, substance use disorder, public health, and human services*  Individuals who wish to testify virtually may register to do so by filling out this [form](https://forms.office.com/Pages/ResponsePage.aspx?id=a36UCyb_E0uuHFc8Z1DIiG08Ttab3MtEi_YThcDRVMNUQzZRWVdLMFFVWTg0OUNINkJWRFIySk02RC4u) by **3:00 p.m. on Friday, 9/17**. Once registered, you will receive further instruction on how to participate virtually.    Written testimony submitted to:  Written testimony can be submitted to  [Erin.Walsh@Mahouse.gov](mailto:Erin.Walsh@Mahouse.gov) and [SenateCommittee.Ways&Means@masenate.gov](mailto:SenateCommittee.Ways&Means@masenate.gov)  The schedule and agenda are subject to change at the discretion of the chairs.   This hearing will be available to be viewed live at <https://malegislature.gov/Events/Hearings/Detail/3930>.  <https://malegislature.gov/Events/Hearings/Detail/3930>   1. **Joint Committee on Health Care Finance**   Tuesday, September 28, 2021, 11:00 a.m.  [*S.748*](https://malegislature.gov/Bills/192/S748) *An Act supporting equal access to community care for elders and the disabled*  [*S.749*](https://malegislature.gov/Bills/192/S749) *An Act protecting the homes of seniors and disabled people on MassHealth*  [*S.773*](https://malegislature.gov/Bills/192/S773) *An Act preserving special needs trusts for disabled seniors*  [*S.811*](https://malegislature.gov/Bills/192/S811) *An Act relative to consistent treatment of life estates*  [*H.1242*](https://malegislature.gov/Bills/192/H1242) *An Act relative to transfers of assets by MassHealth members*  [*H.1246*](https://malegislature.gov/Bills/192/H1246) *An Act protecting the homes of seniors and disabled people on MassHealth*  [*H.1274*](https://malegislature.gov/Bills/192/H1274) *An Act to preserve special needs trusts for disabled seniors*  [*H.1301*](https://malegislature.gov/Bills/192/H1301) *An Act relative to consistent treatment of life estates*  *To Stream Live*: [MALegislature.gov/Events/Hearings/Joint](https://malegislature.gov/Events/Hearings/Joint)  PRE-REGISTRATION TO TESTIFY IS REQUIRED: Persons seeking to provide testimony must pre-register via this Google form:  https://forms.gle/WSsGyz4bPpRML2NH7  DEADLINE TO PRE-REGISTER: The deadline to pre-register to testify is 4:00 P.M. Thursday, September 23  deadline to submit a request for ADA accommodations is 4:00 P.M. Thursday, September 23. Requests for services should be made by E-mail to the Committee Director at timothy.oneill@mahouse.gov.  Written testimony may be submitted to the Joint Committee on Health Care Financing via E-mail to the House and Senate Chairs at [John.Lawn@mahouse.gov](mailto:John.Lawn@mahouse.gov) and [Cindy.Friedman@masenate.gov](mailto:Cindy.Freidman@masenate.gov) as well as the Committee Director Committee Director at [timothy.oneill@mahouse.gov](mailto:timothy.oneill@mahouse.gov). | | |
| Biden / federal proposals / policies | 1. **USA Today**   September 15, 2021  *Democrats on key panel vote with Republicans to reject adding Medicare drug-price plan to $3.5T budget package*  Three House Democrats on a key committee joined Republicans in rejecting a section of President Joe Biden's $3.5 trillion budget that proposed having Medicare negotiate drug prices, one of a number of contentious issues in a bill that is at the heart of the president's domestic agenda.  The Energy and Commerce Committee voted 29-29 on whether to add language on Medicare negotiations to the $3.5 trillion legislation, which failed to include it as part of the overall package.  <https://tinyurl.com/MedicareDrugPricePlan>   1. **Becker’s Hospital Review**   September 15, 2021  *15 million people could lose coverage after public health emergency ends, report says*  A new report by the Urban Institute, funded by Robert Wood Johnson Foundation, anticipates that 15 million people could be out of Medicaid coverage when the pandemic public health emergency ends. Medicaid enrollment initially swelled as a result of early pandemic joblessness and continuous coverage requirement of the Families First Coronavirus Response Act, according to the Sept. 15 [report](https://www.rwjf.org/en/library/research/2021/09/what-will-happen-to-unprecedented-high-medicaid-enrollment-after-the-public-health-emergency.html).  <https://tinyurl.com/15MillionLoseCoverage>   1. **JAMA Network**   September 10, 2021  *Changes in Out-of-Pocket Spending and Catastrophic Health Care Expenditures Associated with Medicare Eligibility*  Despite large gains in health insurance coverage after the Patient Protection and Affordable Care Act, adults younger than 65 years remain at substantial financial risk because of high out-of-pocket (OOP) costs for health care.1 However, the gains in financial risk protection associated with Medicare, which covers 60 million elderly and disabled adults, remain incompletely understood. In this study, we assessed the association between gaining Medicare eligibility and OOP health care spending and catastrophic health care expenditure (CHE) risk.  <https://tinyurl.com/OutOfPocketSpending>   1. **\*New York Times**   August 30, 2021  *Will Hearing Aids Ever Be Hip?*  A new generation of more affordable and stylish hearing aids could help preserve mind, life, and limb for millions.  Additional legislation now before Congress would expand Medicare coverage not only for medically prescribed hearing aids, but also for critically important audiology services that could benefit those who purchase over-the-counter hearing devices and need adjustments, as well as those who might benefit from seeing an audiologist, but who don’t necessarily need a hearing aid.  Two-thirds of Americans aged 70 and older “have clinically relevant hearing loss,” according to the Johns Hopkins Cochlear Center for Hearing and Public Health. Unaddressed hearing loss can increase the risk of cognitive decline, dementia, falls, cardiovascular disease, social isolation, depression, and anxiety, but less than 20 percent of the adults who could benefit from a hearing aid currently wear one.  Although the need is generally greatest for those 65 and older, the Medicare legislation of 1965 excluded the coverage for hearing aids (as well as for vision aids and dental care) and never updated it. Medicare does cover the cost of a hearing exam performed by an audiologist, who can diagnose and prescribe treatment for hearing loss. But if the result is a prescription for hearing aids, which can range in cost from about $2,000 to $12,000 a pair, they will not be covered by Medicare and only rarely by private insurance.  <https://tinyurl.com/WillHearingAidsBeHip> | | |
| Webinars / Online sessions | 1. **Disability Advocates Advancing our Healthcare Rights (DAAHR)**   Wednesday, September 22, 2021, 1:00 p.m.  *DAAHR Forum on One Care!*  ***What’s working for you? What can be better?***  For present, past, or future enrollees of: **Tufts Unify, Commonwealth Care Alliance (CCA), and soon United Health Care.**   * Concerns on PCAs, DME, meds, supplies, homemaking services, meals? * Is your care team functioning? Do you have easy access to your medical team and specialists? * What has best supported recovery and independent living for you? * What has changed since you’ve been a part of One Care? * Were there services you used to receive that you don’t get anymore?   After registering, you will receive a confirmation email containing information about joining the meeting.  ASL & CART will be provided.  Contact Jessica Podesva at jpodesva@bostoncil.org regarding accommodation requests or more information.  Please attend - your voice is vital!  Registration: <https://tinyurl.com/DAAHRForumOneCare>   1. **The Longevity Project and Stanford Center on Longevity**   Wednesday, September 22, 2021, 2:00 p.m.  *Social Infrastructure and the New Map of Life*  The doubling of life expectancy in the US counts as one of the great achievements in human history, but it has come with such speed that social institutions, economic policies, and social norms developed for lives that were half as long are no longer up for the task. Over the last several years, researchers at the Stanford Center on Longevity have been thinking through a New Map of Life that supports a longer-lived society that is healthier, more productive, and more equitable. September marks the release of the first report on the New Map of Life.  Participants:   * U. S. Senator Bob Casey (D-PA), Chair of the Senate Aging Committee * Laura Carstensen, founding Director of the Stanford Center on Longevity * Kim McCoy Wade, Director of the California Department of Aging * Hannah Matthews, Deputy Executive Director of Policy at the Center for Law and Social Policy (CLASP   Registration: <https://tinyurl.com/NewMapOfLife>   1. **The Long-Term Care Discussion Group**   Tuesday, September 28, 2021, 1:00 to 2:00 p.m.  *How Wellness Program Can Enhance Care for Long-Term Care (LYC) Insurance Policyholders*  LTC insurance pays benefits when policyholders need help with two or more Activities of Daily Living (ADLs) or have a severe cognitive impairment. But, waiting until the onset of chronic illness or severe cognitive impairment may be too late for some. Wellness benefit programs that utilize technology and evidence-based interventions are being used and studied by LTC insurance companies to potentially delay, prevent, or lower the severity of LTC claims, improve health outcomes, and allow older adults to live with dignity, choice, and independence in the place they call home.  The speakers will provide an overview of wellness programs with a potential to benefit LTC insurance claims experience. They will also discuss the market potential and regulatory barriers to the increased adoption of these new approaches and how these barriers may be addressed. Specifically, the activities of the National Association of Insurance Commissioners (NAIC) as they review developments in this area will be covered as well. This session will also highlight an actual LTC insurance wellness program in progress. LTCG and Assured Allies have teamed together to offer program participants case management services, fall prevention support, caregiver training and other support services. The goal of this program is to improve participants’ quality of life in the short term, reduce the risk of rapid decline, and consequently,lower aging-related costs.  Speakers:   * Vince Bodnar, Chief Actuary Bain Capital Insurance * Peter Goldstein, CEO, LTCG, a leading provider of administrative and clinical services within the LTC insurance industry * Afik Gal, Co-Founder and CPO, Assured Allies   Zoom access: <https://tinyurl.com/WellnessProgramsLTCInsurance>  Meeting ID: 850 9893 2283; Passcode: 92821   1. **Administration for Community Living, in partnership with the U.S. Department of Housing and Urban Development, the U.S. Department of Treasury and the Consumer Financial Protection Bureau**   Thursday, September 30, 2021, 11:00 a.m.  *Emergency Rental Assistance Program: Tools to Assist the People You Serve*  The Emergency Rental Assistance Program (ERAP) makes funding available to states, territories, local governments, and tribes to assist households that are unable to pay rent or utilities during the COVID-19 pandemic. However, many people with disabilities and older adults who are eligible have not applied, and we need the aging and disability networks to help to get the word out!   * Learn more about ERAP, * Learn first-hand from community-based organizations about how they are helping people with disabilities, older adults, caregivers, and landlords apply for ERAP, * Connect with local tools, resources, and partners, and * Share how you are promoting ERAP.   Registration: <https://tinyurl.com/WebinarEmergencyRentAssist>   1. **National Center on Advancing Person-Centered Practices and Systems**   Tuesday, October 5, 2021, 3:00 p.m.  *Better Together: Brain Injury Survivors Building Community & Making a Difference*  In this webinar, brain injury survivors, caregivers, and others with the lived experience of disability will learn ways to be successful when participating in team projects. Project leaders will learn what works and doesn’t work when engaging people with the lived experience of brain injury.  The content of this webinar is based on brain injury survivors’ experiences in the National Center on Advancing Person-Centered Practices and Systems (NCAPPS) Brain Injury Learning Collaborative from January 2020 to August 2021. During this time, teams in 15 states worked toward aims to make brain injury services more person-centered.  Each team included members with the lived experience of brain injury. In addition, the Learning Collaborative included three faculty members who were brain injury survivors and experienced advocates.  The three faculty members and lived experience advisors created a vibrant community of advocates within the Learning Collaborative. This community positively impacted not only the individuals involved, but also their teams, the Collaborative, and the larger brain injury community, serving as a model for successful survivor engagement.  Registration: <https://tinyurl.com/BetterTogetherBrainInjury>   1. **National Institute on Disability, Independent Living, and Rehabilitation Research**   Wednesday, October 6, 2021, 12:00 p.m.  *Social Isolation & Loneliness Among Caregivers During the COVID-19 Pandemic*  Since the start of the COVID-19 pandemic, all of us have experienced the changing nature of social connections and many of us have gained personal insight into what it means to be socially isolated, lonely, or both. These are not new concepts that have resulted from the pandemic. However, the pandemic has likely made worse our experience of social isolation and loneliness, and challenged our beliefs about who is socially isolated and lonely.  This is the final webinar in a four-part national webinar series on research related to social isolation and loneliness for people with disabilities hosted by the National Institute on Disability, Independent Living, and Rehabilitation Research. Join NIDILRR grantees for a discussion on social isolation and loneliness among caregivers during the COVID-19 pandemic.  Presenters:  Heidi Donovan, Ph.D., R.N., Professor, Department of Health and Community Systems, University of Pittsburgh  Scott Beach, Ph.D, Director, Survey Research Program, University of Pittsburgh  Space limited. Registration closes October 1  Registration: <https://tinyurl.com/NIDILRRSocialIsolation> | | |
| Previously posted webinars and online sessions | **Previously posted webinars and online sessions can be viewed at:**  [**https://dignityalliancema.org/webinars-and-online-sessions/**](https://dignityalliancema.org/webinars-and-online-sessions/) | | |
| Nursing homes | 1. **\*New York Times**   September 16, 2021  *At U.S. nursing homes, aides were the least likely workers to be vaccinated, a study shows.*  Low vaccination rates among nursing home workers in some areas have fueled concern about fresh [outbreaks](https://www.nytimes.com/2021/08/04/health/nursing-homes-vaccine-delta-covid.html?action=click&module=RelatedLinks&pgtype=Article) among staff and residents in these facilities, even with high numbers of vaccinated residents. Covid deaths among nursing home staff and residents accounted for [nearly one third](https://www.nytimes.com/interactive/2020/us/coronavirus-nursing-homes.html) of the nation’s pandemic fatalities as of June 1, and vaccination rates among staff average around 63 percent, according to the latest [federal data](https://data.cms.gov/covid-19/covid-19-nursing-home-data). But slightly under half of the certified nursing assistants were fully vaccinated, according to the analysis, which looked at federal vaccination data through July 18. That was before [many nursing homes, states and cities began imposing mandates](https://www.nytimes.com/2021/08/04/health/nursing-homes-vaccine-delta-covid.html).  <https://tinyurl.com/LeastLikelyWorkers>   1. **JAMA Network**   September 16, 2021  *Association of Nursing Home Characteristics with Staff and Resident COVID-19 Vaccination Coverage*  Vaccines have been instrumental in reducing COVID-19 cases and related deaths among US nursing home residents.1 However, low vaccination coverage among nursing home staff,2 who may introduce COVID-19 into facilities, could contribute to future outbreaks, especially in the presence of more transmissible variants.3,4 Maximizing vaccination coverage among nursing home staff and residents is critical because of the extreme vulnerability of this population to COVID-19, but little is known about which nursing homes have been successful at achieving high vaccination coverage.  <https://tinyurl.com/NHVaccinationCharacteristics>   1. **\*Washington Post**   September 14, 2021  *How one of the largest nursing home chains in Florida could avoid nearly all of $256 million fraud judgment*  <https://tinyurl.com/256MillionJudgement>   1. **The Joplin Globe**   September 11, 2021  *Feds: Inspection backlog at nursing facilities continues to grow*  The U.S. Department of Health and Human Services Office of Inspector General released a report in late July detailing how states failed to address inspection backlogs — vigorous in-person oversight visits commonly called “surveys” by regulators. The federal overseer found 71% of nursing homes nationwide lingered more than 16 months without an annual survey.  <https://tinyurl.com/InpsectionBacklog>   1. **The National Center on Law & Elder Rights (NCLER)**   Updated August 2021  *Nursing Home Residents, Medicaid, and Stimulus Checks: What You Need to Know*  Under recent COVID-19 legislation, most nursing facility residents have received multiple stimulus payments. This money belongs to residents, not the nursing facility! This is true even if Medicaid pays for the care and services at the facility.  <https://tinyurl.com/NHResidentStimulusChecks>   1. **Massachusetts Executive Office of Health and Human Services**   January 31, 2020  *Nursing Facility Task Force Report*  The Task Force was charged with considering:  – Improvements to the MassHealth reimbursement system for skilled nursing facilities to promote financial stability.  – Industry-wide workforce initiatives including, but not limited to, ways to improve recruitment, training, including transitional training opportunities for employment in rest homes, assisted living and other alternative senior housing options, retention, rates of pay and other methods of ensuring a sustainable workforce.  – The role of external economic factors on the development and retention of the elder care services workforce such as the increases in the minimum wage and competition from other industries.  – The feasibility of establishing a voluntary reconfiguration program for certain areas of elder care services, including the impact of a reduction in the number of currently licensed beds, while ensuring quality and maintaining access.  – Recommended criteria for a voluntary reconfiguration program including, but not limited to, occupancy, co-location of services, care standards and regional geographic need.  – Recommended incentives for elder care service operators to align the need for elder care services with current and future demand and conversion of underutilized beds or other resources to meet current and future demand; and  – Any additional reforms to strengthen the public process for facility closures and sales or other recommendations necessary to address the issues referenced in this section  <https://tinyurl.com/NursingFacilityTaskForceReport> | | |
| Rest Homes | 1. **Massachusetts Association of Residential Care Homes**   January 10, 2020  *Rest Homes: Their Value on the Massachusetts Healthcare Continuum*  35-page report  Residential care homes, licensed as rest homes in Massachusetts, play an important role in the care of over four thousand aged, infirm, and indigent residents of the Commonwealth. There is a general lack of understanding about who they are, the services they provide and the population they care for. Often associated with nursing homes or the rapidly growing assisted living industry, they serve a different population of the elderly and have significant value over other residential options for elderly persons. They fill a distinctive and important role on the Massachusetts healthcare continuum.  <https://tinyurl.com/ValueOfRestHomes>   1. **Massachusetts Association of Residential Care Homes**   January 10, 2020  *Proposed Policy Changes to Rest Home Rates and Reimbursement*  <https://tinyurl.com/ProposedRestHomePolicyChanges>   1. **Massachusetts Executive Office of Health and Human Services**   October 28, 2018  *Summary of Findings from the On-Site Rest Home Visits (July – October 2018)*  <https://tinyurl.com/SummaryRestHomeVisits> | | |
| Home and Community | 1. **\*New York Times**   September 17, 2021  *The Pain Wouldn’t Stop — Because Her Medication Had Been Stolen*  Too often, seniors who use opioids become targets for exploitation and abuse.  How often do older Americans fall victim to drug diversion, in which someone steals or tampers with prescription medications, particularly opioids, for personal use or for sale? Researchers and advocates trying to protect seniors from abuse and exploitation wish they knew. The data are sparse and scattered but hint at a significant problem.  <https://tinyurl.com/PainWouldntStop>   1. **Health Day**   September 15, 2021  *Turning 65 Brings Big Health Care Cost Savings, Study Finds*  When Americans are eligible for Medicare at age 65, they see a significant drop in their out-of-pocket medical costs. Lowering the eligibility age would save even more, especially for people with the highest out-of-pocket costs, according to a [new study](https://jamanetwork.com/journals/jama-health-forum/fullarticle/2784105).  <https://tinyurl.com/Turning65BringsSavings>   1. **Health Day**   September 15, 2021  *After an ICU Stay, Social Support Crucial for Seniors' Survival*  Older adults who are socially isolated are more likely to experience serious disability or die after a stay in the intensive care unit (ICU), new research reveals.  <https://tinyurl.com/SocialSupportCrucial>   1. **JAMA Network**   September 7, 2021  *Association of Social Isolation with Disability Burden and 1-Year Mortality Among Older Adults with Critical Illness*  Disability and mortality are common among older adults with critical illness. Older adults who are socially isolated may be more vulnerable to adverse outcomes for various reasons, including fewer supports to access services needed for optimal recovery; however, whether social isolation is associated with post–intensive care unit (ICU) disability and mortality is not known.  <https://tinyurl.com/SocialIsolationDisability>   1. **National Council on Aging**   August 31, 2021  *The Health Benefits of Tai Chi and How to Get Started*  Tai chi is an art and exercise from ancient China, nowadays being used by most as an enjoyable exercise for health. It appears slow and effortless, like tranquil water in a river. Underneath the gentle flow, there is a powerful energy for healing and wellness. It is created based on the laws of nature and Chinese traditional medicine. There are many styles and forms of tai chi that can appear quite different from each other, but almost all traditional tai chi sets are complex.  Tai chi is often modernized for health improvement by using modern medical knowledge. All tai chi forms follow a set of essential principles that are key for its many health benefits. As long as these principles are incorporated in any form of tai chi, the health benefits will come. Modernized tai chi applies these essential principles in shorter and easier forms of tai chi, then uses medical studies to prove their efficacy.  <https://tinyurl.com/HealthBenefitsTaiChi>   1. **The National Center on Law & Elder Rights (NCLER)**   Updated August 2021  *Medicaid Home and Community-Based Services (HCBS) and Stimulus Checks: What You Need to Know*  Medicaid home and community-based services (HCBS) assist a person in living at home or in a residence like an assisted living facility. Under recent COVID-19 legislation, most people receiving Medicaid HCBS have received multiple stimulus payments. This money belongs to the recipient and will NOT affect Medicaid eligibility.  <https://tinyurl.com/MedicaidHCBSStimulusChecks> | | |
| Housing | 1. **Administration for Community Living, in partnership with the U.S. Department of Housing and Urban Development, the U.S. Department of Treasury and the Consumer Financial Protection Bureau**   Thursday, September 30, 2021, 11:00 a.m.  *Emergency Rental Assistance Program: Tools to Assist the People You Serve*  The Emergency Rental Assistance Program (ERAP) makes funding available to states, territories, local governments, and tribes to assist households that are unable to pay rent or utilities during the COVID-19 pandemic. However, many people with disabilities and older adults who are eligible have not applied, and we need the aging and disability networks to help to get the word out!   * Learn more about ERAP, * Learn first-hand from community-based organizations about how they are helping people with disabilities, older adults, caregivers, and landlords apply for ERAP, * Connect with local tools, resources, and partners, and * Share how you are promoting ERAP.   Registration: <https://tinyurl.com/WebinarEmergencyRentAssist>   1. **\*New York Times**   August 19, 2021 (updated)  *A Rebirth in the Bronx: Is This How to Save Public Housing?*  The Baychester Houses have been brightly refurbished using a federal program that could help fix America’s ailing subsidized housing situation.  With parks, prisons, subsidized housing, and much else, America during the last half century has undergone a quiet revolution, privatizing, through tax incentives, qualitative easing, deregulation and other means, many aspects of what had once been regarded as responsibilities of the public sector. Resulting gains in efficiency and cost-savings have gone hand-in-hand with escalating inequities, the unaffordability of homes in many areas of the country and, according to a recent study, record housing shortages.  <https://tinyurl.com/RebirthInTheBronx>   1. **New York Housing Authority**   Undated  *Creating a Permanent Affordability Commitment Together (PACT)*  What are the goals of PACT?  • Raise money through new financing options for critically needed repairs  • Maintain long-term affordability for residents  • Protect resident rights  • Create public-private partnerships that retain the housing authority’s oversight role  <https://tinyurl.com/PACTFactSheet>   1. **U. S. Department of Housing and Development**   Website  *Rental Assistance Demonstration (RAD)*  RAD was created in order to give public housing authorities (PHAs) a powerful tool to preserve and improve public housing properties and address the $26 billion-dollar nationwide backlog of deferred maintenance. RAD also gives owners of three HUD "legacy" program (Rent Supplement, Rental Assistance Payment, and Section 8 Moderate Rehabilitation) the opportunity to enter into long-term contracts that facilitate the financing of improvements.  Five Things About Public Housing Conversions   1. RAD allows public housing agencies to **leverage public and private debt and equity** **in order to reinvest in the public housing stock**. This is critical given the backlog of public housing capital needs - estimated at over $35 billion. 2. In RAD, units move to a Section 8 platform with a long-term contract that, by law, must be renewed in perpetuity. A Use Agreement is also recorded under RAD further enforcing HUD’s long-term interest. **This ensures that the units remain permanently affordable to low-income households**. 3. Residents benefit from a right of return, a prohibition against re-screening, and robust notification and relocation rights. Residents continue to pay 30% of their adjusted income towards the rent, **maintain the same basic rights** as they possess in the public housing program, and gain a new option to request tenant-based assistance if they wish to subsequently move from the property. 4. RAD **maintains the ongoing public stewardship** of the converted property through clear rules requiring ongoing ownership or control by a public or non-profit entity. 5. RAD is highly cost-effective, **relying on shifting existing levels of public housing funds to the Section 8 accounts** as properties convert.   <https://tinyurl.com/RentalAssistanceDevelopment> | | |
| Behavioral Health | 1. **National Council on Aging**   June 11, 2012  *Preventing Suicide in Older Adults*  <https://tinyurl.com/PreventingSuicideOlderAdults> | | |
| Crisis of Care | 1. **AP News**   September 16, 2021  *COVID-19 surge forces health care rationing in parts of West*  [N]early 92% of all the COVID-19 patients in St. Luke’s hospitals were unvaccinated. Sixty-one of the hospital’s 78 ICU patients had COVID-19. St. Luke’s physicians have pleaded with Idaho residents for months to get vaccinated and take steps to slow the spread of coronavirus, warning that hospitals beds were quickly running out.  <https://tinyurl.com/SurgeForcesRationing>   1. **\*New York Times**   September 16, 2021  *Idaho allows overwhelmed hospitals across the state to ration care if necessary.*  Crisis standards of care lay out guidelines for hospitals to follow when they cannot meet demand and must ration services. [Idaho](https://www.nytimes.com/interactive/2021/us/idaho-covid-cases.html) officials noted that patients may find themselves being treated in repurposed rooms, or that needed equipment is not available. Some patients may have to wait for beds to become available.  If the situation worsens, rationing could get more drastic, with hospitals having to decide which patients will get priority for limited supplies of oxygen or ventilators, potentially sending some patients with a low likelihood of survival to palliative care.  <https://tinyurl.com/IdahoHospitalsOverwhelmed>   1. **NBC News**   September 16, 2021  *Idaho declares statewide hospital resource crisis amid Covid surge*  State officials made the announcement, which will permit medical facilities to ration health care and triage patients. . . Under critical standards of care, the state allows health care providers to make difficult decisions about how to allocate and use scarce medical resources. That means some patients could go without treatment, as treatment is saved for those most likely to survive.  <https://tinyurl.com/IdahoDeclaresStatewideCrisis>   1. **\*New York Times**   September 15, 2021  *Alaska E.R. patients are waiting hours in vehicles as a major hospital rations care.*  At Providence Alaska Medical Center in Anchorage, the hospital said it was now operating under “crisis standards of care” — procedures put in place to prioritize resources in a way that may leave some patients with substandard care. Dr. Kristen Solana Walkinshaw, a senior leader at the Providence hospital, [wrote in a message to the community](https://int.nyt.com/data/documenttools/letter-from-medical-executive-committee-at-providence-alaska-medical-center-regarding-crisis-standards-of-care/1ee9f0e6d0b1d1d9/full.pdf) that the hospital did not have the necessary staff, space or beds to keep pace with demand.  <https://tinyurl.com/AlaskaHospitalsRationCare>   1. **\*New York Times**   September 14, 2021  *Covid Hospitalizations Hit Crisis Levels in Southern I.C.U.s*  Hospitals in the southern United States are running dangerously low on space in [intensive care units](https://www.nytimes.com/interactive/2020/us/covid-hospitals-near-you.html), as the Delta variant has led to spikes in coronavirus cases not seen since last year’s deadly winter wave.  One in four hospitals now reports more than 95 percent of I.C.U. beds occupied — up from [one in five last month](https://www.nytimes.com/interactive/2021/08/17/us/covid-delta-hospitalizations.html). Experts say it can become difficult to maintain standards of care for the sickest patients in hospitals where all or nearly all I.C.U. beds are occupied.  <https://tinyurl.com/CovidHospitalizationsHitCrisis> | | |
| Alzheimer’s | 1. **Health Day**   September 14, 2021  *Most Alzheimer's Patients Wouldn't Have Qualified for Controversial Drug's Trial: Stud*  U.S. approval of the Alzheimer's drug Aduhelm is already mired in controversy. Now a new study finds that most Alzheimer's patients could not have taken part in clinical trials that led to the green light.  "Clinical trials of aducanumab studied relatively healthy participants who do not reflect the majority of older adults with dementia in the U.S.." . . . "As a result, Medicare should consider restricting coverage for aducanumab to patients who meet the trial eligibility criteria."  <https://tinyurl.com/PatientsWouldntHaveQualified> | | |
| Veterans’ Services / Holyoke Soldiers’ Home | 1. **Stars and Stripes**   September 20, 2021  *Discharged LGBTQ veterans now eligible for benefits under new guidance issued by VA*  The announcement was made as part of the 10th anniversary of the repeal of Don’t Ask, Don’t Tell, which barred openly gay, lesbian, or bisexual individuals from serving in the military. The policy was enacted under former President Bill Clinton’s administration in 1993, and it was repealed by former President Barack Obama on Sept. 20, 2011.  <https://tinyurl.com/LGBTVeteransEligibleBenefits>   1. **\*Boston Globe**   September 20, 2021  *Sudders added as defendant in veterans’ lawsuit against Holyoke Soldiers’ Home officials*  The complaint seeks $176 million and certification as a class action lawsuit.  The 40-page amended complaint charges that the state “made a promise to its citizen-soldiers” to care for them after they served their country, but failed to stem the spread of COVID-19 through the home that it said “was preventable.” A second lawsuit had been filed by another deceased veteran’s family, but the two suits have been joined. A third suit was filed by workers who alleged they were subjected to “inhumane conditions” as the virus swept through the facility.  <https://tinyurl.com/SuddersAsDefendants>   1. **NJ.com**   September 17, 2021  *Veterans at nursing homes will have more rights in future emergencies under new N.J. laws*  Residents of New Jersey’s three veterans homes would be able to leave the facility during a public emergency and be entitled to more information about what is being done to protect them, [under a package of bills](https://www.nj.com/coronavirus/2021/07/nj-veterans-home-residents-would-have-more-rights-during-a-health-emergency-under-approved-package-of-bills.html) Gov. [Phil Murphy](https://www.nj.com/topic/phil-murphy/) signed Thursday.  <https://tinyurl.com/VeteransMoreRights>   1. **Veterans’ Health**   September 18, 2021  *United States Air Force Celebrates 74 Years of Service*  This message was issued by Colleen M. Richardson, Psy.D, Executive Director,  Caregiver Support Program:  September 18th commemorates the passing of the National Security Act of 1947 - the legislation that led to the emergence of the Department of Defense and the establishment of the United States Air Force (USAF) as a separate branch of military service from the U.S. Army. Today, the Caregiver Support Program (CSP) would like to thank all Airmen, both active duty and Veterans, as well as their caregivers, for their service.  For 74 years, USAF has provided incomparable airpower for our great Nation and those who depend on us around the world. For our active duty, you fly and fight every day --without fail-- to defend the country through the control of air and space. On flight support missions, you carry out base affairs to keep your fellow troops protected. We honor you for providing necessary relief, aid, and hope for our country and, most importantly, safe rescue missions. On behalf of CSP, thank you for Doing the Impossible, Every day.  We also honor our caregivers who continue to serve our Nation by providing care to those Veterans who may have been injured during their service to this great Nation. It’s because of your sacrifices and dedication our Veterans receive care with dignity, respect, and honor.  On behalf of the entire CSP staff, happy birthday to the United States Air Force! | | |
| Workforce / Caregiving | 1. **Health Affairs Blog**   September 15, 2021  *Investing In A 21st Century Health Workforce: A Call for Accountability*  The US health workforce is receiving a massive boost in federal investment under the $1.9 trillion [American Rescue Plan Act of 2021](https://www.congress.gov/bill/117th-congress/house-bill/1319/text). Included provisions will allow states to receive higher federal matching funds through Medicaid, adding approximately [$12.7 billion](https://homehealthcarenews.com/2021/03/house-passes-1-9-trillion-american-rescue-plan-securing-relief-for-home-based-care-providers/) over the next year to strengthen the workforce for home- and community-based services; rural health providers will see an additional [$8.5 billion](https://www.aha.org/advisory/2021-03-17-summary-american-rescue-plan-act-2021-and-provisions-affecting-hospitals-and) in Provider Relief Fund dollars; more than [$7.0 billion](https://www.whitehouse.gov/briefing-room/statements-releases/2021/05/13/fact-sheet-biden-harris-administration-to-invest-7-billion-from-american-rescue-plan-to-hire-and-train-public-health-workers-in-response-to-covid-19/) will be invested to expand, train, and retain the public health workforce; $1.55 billion will be allocated to expand critical programs that strengthen the workforce in underserved communities and address unmet health care needs; and nearly [$250.0 million](https://www.aha.org/advisory/2021-03-17-summary-american-rescue-plan-act-2021-and-provisions-affecting-hospitals-and) will be used to strengthen behavioral health workforce capacity. This infusion of health workforce investments comes on the heels of substantial provider support already allocated by the Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020 and is likely to be followed by additional investments under the infrastructure plan proposed by President Joe Biden.  It is imperative that these public funds be used wisely to build a workforce that responds to the urgent and enduring health care needs of society, rather than the interests of health care organizations, health insurers, or professional groups. These societal needs include bolstering access to maternity care while rural hospitals are closing, filling the long-standing shortage of primary care services, increasing the availability of mental health and substance use disorder services for patients and providers as behavioral health needs and “[deaths of despair](https://www.sciencenews.org/article/deaths-of-despair-depression-mental-health-covid-19-pandemic)” have dramatically increased during the COVID-19 pandemic, mitigating critical shortfalls in long-term care, and effectively addressing social determinants that prompt and exacerbate health inequities. Taking full advantage of these new funds will require a consensus understanding among stakeholders of the specific changes needed to reshape the workforce. It will also require development and implementation of accountability mechanisms to routinely evaluate the impact of these investments.  <https://tinyurl.com/21stCenturyHealthWorkforce>   1. **HuffPost**   September 6, 2021 (updated)  *America Faces a Severe Caregiver Shortage, As This Grad Student Learned Firsthand*  A case study in how the pandemic has affected people with disabilities — and what could be done about it.  <https://tinyurl.com/GradStudentFirsthand> | | |
| Disability Rights | 1. **Disability Advocates Advancing our Healthcare Rights (DAAHR)**   Wednesday, September 22, 2021, 1:00 p.m.  *DAAHR Forum on One Care!*  ***What’s working for you? What can be better?***  For present, past, or future enrollees of: **Tufts Unify, Commonwealth Care Alliance (CCA), and soon United Health Care.**   * Concerns on PCAs, DME, meds, supplies, homemaking services, meals? * Is your care team functioning? Do you have easy access to your medical team and specialists? * What has best supported recovery and independent living for you? * What has changed since you’ve been a part of One Care? * Were there services you used to receive that you don’t get anymore?   After registering, you will receive a confirmation email containing information about joining the meeting.  ASL & CART will be provided.  Contact Jessica Podesva at jpodesva@bostoncil.org regarding accommodation requests or more information.  Please attend - your voice is vital!  Registration: <https://tinyurl.com/DAAHRForumOneCare>   1. **\*Boston Globe**   September 9, 2021  *Remote work made life easier for employees with disabilities. Advocates say the option should stay*  <https://tinyurl.com/WorkersDisabilitiesRemoteWork>   1. **\*New York Times**   August 18, 2021  *Accessibility Is a Right. This Restaurant Treats It That Way.*  Contento, in East Harlem, sets an example for an industry that is rarely welcoming to diners with disabilities*.*  Restaurants in buildings constructed in the past 30 years tend to have entrances and restrooms that comply with the Americans with Disabilities Act of 1990. Even so, they may jam the seats in too tightly, fail to leave a clear path to the restroom, or provide no dining surfaces at wheelchair height, a common mistake at more expensive sushi bars and tasting counters. In older buildings, layouts are often worse. The A.D.A. requires owners to remove barriers to wheelchair use when that is “readily achievable.” This exception explains why diners may still find restrooms the size of a broom closet, hallways about as wide as a goat path, and steps or full staircases in the most inconvenient places. But too many places let the pre-existing conditions of their space determine who is going to be able to eat there. And too many owners treat the A.D.A. as if it were a building code. It is not. It is a civil-rights law.  <https://tinyurl.com/AccessibilityIsAStandard>   1. **The National Center on Law & Elder Rights (NCLER)**   Updated August 2021  *Stimulus Payments and Representative Payees: What You Need to Know*  Under recent COVID-19 legislation, most people receiving SSI and Social Security benefits have received multiple stimulus payments.  This money belongs to the recipient, not the representative payee.  <https://tinyurl.com/StimulusPaymentsRepPayees>   1. **The National Center on Law & Elder Rights (NCLER)**   Updated August 2021  *Important Change for SSI Recipients and Applicants*  The Social Security Administration (SSA) recently changed their rules about how pandemic-related financial assistance can affect an individual’s eligibility for Supplemental Security Income (SSI) or monthly SSI benefit amount. Previously, SSA had been counting many types of assistance as income and resources for SSI purposes, resulting in individuals having their SSI benefits reduced or suspended, or having their applications for SSI benefits denied. However, due to the severity of the ongoing COVID-19 pandemic, SSA has decided they will not count most types of pandemic-related financial assistance against SSI eligibility or benefit amount.  <https://tinyurl.com/ChangesForSSIRecipients> | | |
| Covid-19 | 1. **STAT**   September 20, 2021  *Winter is coming, again: What to expect from Covid-19 as the season looms*  Now indoor weather again looms in many parts of this country, and daily case counts are rising well into the six figures. The highly transmissible [Delta variant](https://www.statnews.com/2021/09/09/covid19-delta-variant-transmission/) is driving spread, even among fully vaccinated people. Children are back in classrooms that can function as germ incubators. As you walk around in public you see noses poking out of masks, masks under chins, faces that are mask free.  <https://tinyurl.com/STATWinterIsComingAgain>   1. **STAT**   September 20, 2021  *Seeing the butterfly effect in hospital transfers for Covid-19 patients*  The [butterfly effect](https://fs.blog/2017/08/the-butterfly-effect/), one of the best-known aspects of chaos theory, posits that small changes can have nonlinear impacts on complex systems. Covid-19 isn’t, by any stretch of the imagination, a small change. Even before the pandemic, hospital capacity in the U.S. (defined as the number of beds plus the staffing and resources needed to care for the patients in them) was considered to be a limited resource. [Now, health care workers are seeing a troubling trend](https://www.forbes.com/sites/joewalsh/2021/08/19/these-6-states-have-almost-no-icu-beds-left-as-covid-hospitalizations-soar/?sh=4cec3a7d6bb5): Covid-19 patients, many from states without [strict vaccine mandates or masking protocols](https://www.nytimes.com/interactive/2021/us/cdc-mask-guidance-states.html), are [overwhelming their states’ capacity](https://www.statnews.com/2021/08/18/health-workers-overwhelmed-covid-deaths-among-unvaccinated/) to care for them, forcing patients in high-transmission states to compete with those in low-transmission states for appropriately staffed acute-care beds.  <https://tinyurl.com/ButteflyEffect>   1. **Kaiser Health News**   September 16, 2021  *When Covid Deaths Are Dismissed or Stigmatized, Grief Is Mixed with Shame and Anger*  When a person dies from something controversial . . . that’s called a “disenfranchising death.” The term refers to a death that people don’t feel comfortable talking about openly because of social norms.  The concept was first explored in the 1980s, along with a related concept: “disenfranchised grief.” This occurs when mourners feel they don’t have the right to express their loss openly or fully because of the cultural stigma about how the person died. For example, deaths from drug overdoses or suicide are frequently viewed as stemming from a supposed “moral” failure, and those left behind to mourn often fear others are judging them or the dead person’s choices and behaviors.  “For instance, if I say my brother died of lung cancer, what’s the first question you’re going to ask — was he a smoker? And somehow, if he was a smoker, he’s responsible.” Some predict that Americans who have lost loved ones to covid in communities where the disease isn’t taken seriously may also encounter similar efforts to shift responsibility — from the virus to the person who died.  <https://tinyurl.com/CovidDeathsStigmatized>   1. **\*Barron’s**   September 16, 2021  *Many Insurers Have Stopped Waiving the Cost of Covid Treatment. Is That Fair?*  <https://tinyurl.com/StoppedWaivingCost>   1. **\*Wall Street Journal**   September 14, 2021  *Covid-19 Deaths in Delta Surge Trend Younger in U.S.*  Vaccines have shielded older people from the worst outcomes, leaving younger people who haven’t gotten shots at risk . Age is a major risk factor for people with Covid-19. [People in their 30s](https://www.wsj.com/articles/new-covid-19-hospitalizations-for-30-to-39-year-olds-at-record-rate-11628938800?mod=article_inline) are four times as likely to die from infections as people ages 18 to 29, according to the CDC. For people ages 75 to 84, the risk of death is 220 times as high. Older Americans still account for the most Covid-19 deaths, but their higher vaccination rates have helped hold down the numbers. About 54% of the overall U.S. population and 63% of eligible people ages 12 and above are fully vaccinated, while the average among nursing homes is 84% for their residents, federal data show.  <https://tinyurl.com/DeltaDeathsSurge> | | |
| Other | 1. **NPR**   September 20, 2021  *There Were More Deaths Than Births in Alabama Last Year, A Grim First for The State*  In 2020, for the first time in recorded history, more people died in Alabama than were born in the state. The state saw some 64,714 total deaths last year compared with about 57,641 births. And the 2020 milestone may not be unique for long. Alabama could see higher deaths than births again in 2021 if the state continues its current grim trajectory.  <https://tinyurl.com/NPRAlabamaMoredDeathsBirths>   1. **CommonWealth**   September 19, 2021  *DPH needs to stop being a paper tiger*  Every time a hospital spends capital dollars to add inpatient beds or ambulatory sites to its footprint, the Department of Public Health is tasked with conducting an analysis to determine whether new expenditures are actually needed, and whether the expenditure promotes competition. The goal is to keep the supply of hospital beds or clinic sites in line with the demand so that total spending by consumers and businesses can stay in check, rather than increase to cover either redundant costs or higher prices that are often sought to help pay for these investments. . . If past performance is any guide, DPH is way too lenient in reviewing mergers and other expansions.  <https://tinyurl.com/APaperTiger>   1. **MedCity News**   September 19, 2021  *CMS suspends enrollment in UnitedHealthcare, Anthem MA plans*  The agency has suspended enrollment in three UnitedHealthcare plans and one Anthem plan for 2022 because the plans did not spend enough of their premium incomes on medical benefits and claims. The payers can contest the suspension, though it is unclear if they plan to*.*  <https://tinyurl.com/CMSSuspendsUnitedHealthCare>   1. **Innovation Hub (podcast)**   September 17, 2021  *Why Exercise?*  Exercise is a relatively recent phenomenon. After all, it’s difficult to imagine a caveman on a treadmill. And it’s safe to say that paleolithic humans never pumped iron. But something changed as we moved from the plow to the Peloton. Exercise - physical exertion for the purpose of improving health or fitness - became a huge part of modern life, and a nearly $100 billion global industry. But why do we spend so much time and money at the gym or on the track and does it actually help our well-being? And why is exercise, at least for some of us, such a miserable experience? Daniel Lieberman, professor of human evolutionary biology at Harvard University and author of the book “Exercised: Why Something We Never Evolved to Do Is Healthy and Rewarding,” has some fascinating answers.  <https://www.wnyc.org/story/why-exercise>   1. **Christian Science Monitor**   September 14, 2021  *For some seniors, pandemic trials have brought renewal*  As older adults have faced increased social isolation, health officials have defined this age group as living in pandemic precarity. Yet many like Ms. Bierman have overcome labels of frailty and demonstrated resilience. They say trials in lockdown unlocked a new chapter of personal growth.  <https://tinyurl.com/TrialsBroughtResilency>   1. **\*New York Times**   August 31, 2021  *How Exercise May Help Keep Our Memory Sharp*  Irisin, a hormone produced by muscles during exercise, can enter the brain and improve cognition, a mouse study suggests.  An [intriguing new study](https://www.nature.com/articles/s42255-021-00438-z) shows how exercise may bolster brain health. The study was in mice, but it found that a hormone produced by muscles during exercise can cross into the brain and enhance the health and function of neurons, improving thinking and memory in both healthy animals and those with a rodent version of Alzheimer’s disease. Earlier research shows that people produce the same hormone during exercise, and together the findings suggest that moving could alter the trajectory of memory loss in aging and dementia.  <https://tinyurl.com/ExcerciseMemorySharp> | | |
|  | \*May require registration before accessing article. | | |
| Dignity Alliance Massachusetts Legislative Endorsements | Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at:  <https://tinyurl.com/DignityLegislativeEndorsements>  Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at [rmoore8473@charter.net](mailto:rmoore8473@charter.net). | | |
| Previously recommended websites | The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: <https://dignityalliancema.org/resources/>. Only new recommendations will be listed in *The Tuesday Digest.* | | |
| Previously posted funding opportunities | For open funding opportunities previously posted in *The Tuesday Digest* please see <https://dignityalliancema.org/funding-opportunities/>. | | |
| Nursing Home Closures | **Mt. Ida Rest Home,** 32 Newtonville Ave., Newton, MA 02460  Scheduled closing date: December 31, 2021  Public hearing: Thursday, September 30, 2021, 6:00 p.m. Dial-in number: 888-390-5007 Participant passcode: 5911571  Closure Notices and Relocation Plans available at: <https://tinyurl.com/MANursingHomeClosures> | | |
| Websites of Dignity Alliance Massachusetts Members | See: <https://dignityalliancema.org/about/organizations/> | | |
| **Participation opportunities with Dignity Alliance Massachusetts**  Most workgroups meet bi-weekly via Zoom.  Please contact workgroup lead for more information | **Workgroup** | **Workgroup lead** | **Email** |
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| Note of thanks | Thanks to the contributors to this issue of *The Tuesday Digest*   * Wynn Gerhard * Bill Henning * Sandy Hovey * Jim Lomastro * Dick Moore * Sandy Novack * Dorothy Weitzman   Special thanks to Sue Rorke and Paul Spooner with the MetroWest Center for Independent Living for their assistance with the website and MailChimp versions of *The Tuesday Digest.*  *If you have submissions for inclusion in The Tuesday Digest or have questions or comments, please submit them to* [*paul.lanzikos@gmail.com*](mailto:paul.lanzikos@gmail.com)*.* | | |
| *Dignity Alliance Massachusetts is a broad-based coalition of organizations and individuals pursuing fundamental changes in the provision of long-term services, support, and care for older adults and persons with disabilities.*  *Our guiding principle is the assurance of dignity for those receiving the services as well as for those providing them.*  *The information presented in “The Tuesday Digest” is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.*  *Previous issues of The Tuesday Digest are available at:* [*https://dignityalliancema.org/the-tuesday-digest/*](https://dignityalliancema.org/the-tuesday-digest/)  *For more information about Dignity Alliance Massachusetts, please visit* [*www.DignityAllianceMA.org*](http://www.DignityAllianceMA.org)*.* | | | |