



The Dignity Digest

Issue # 95

June 24, 2022

The Dignity Digest is information compiled by Dignity Alliance Massachusetts concerning long-term services, support, living options, and care issued each Friday.

*May require registration before accessing article.

Quotes of the Week

Even though there are so many of us doing caregiving work, we're not talking to each other. We're just trying to keep it together. This podcast is a platform for that conversation. Hopefully, one that helps people feel less alone and more empowered.

Introduction to *The Shape of Care* podcast,
<https://tinyurl.com/ShapeOfCareIntro>

Asked how the Settlement Agreement affected him, Knicoma responded "Matter of respecting somebody – respect is letting others know that you honor him as a human being."

Knicoma, a beneficiary of the Olmstead Agreement, *Olmstead: Community Integration for Everyone*, <https://tinyurl.com/ADAGovOlmstead>

"I now have the right to just live and the freedom to open and close doors."

Rose, a beneficiary of the Olmstead Agreement, *Olmstead: Community Integration for Everyone*, <https://tinyurl.com/ADAGovOlmstead>

"Olmstead opened up a world for people like me who were trapped. I'm fifty-one years old and I don't trap well."

Neena, a beneficiary of the Olmstead Agreement, *Olmstead: Community Integration for Everyone*, <https://tinyurl.com/ADAGovOlmstead>

"With half of older Americans having no retirement savings, and millions living in poverty, it's far past time to address the future of Social Security."

Rep. Steve Cohen, D.-Tennessee, a cosponsor of [H.R.8005](#) Social Security Expansion Act, *Social Security bill would give seniors an extra \$2,400 a year.*

Here's how it would work, **CBS News MarketWatch**, June 16, 2022,
<https://tinyurl.com/Extra2400Year>

“This legislation ([H.R.8005 Social Security Expansion Act](#)) would ensure that the Social Security Trust Fund remains solvent for another 75 years, increase monthly benefits for most recipients by \$200, and alter the cost-of-living-adjustment (COLA) formula to meet the everyday needs of our nation’s seniors.”

Rep. Peter DeFazio, D-Oregon, *DeFazio, Sanders Introduce Legislation to Expand and Strengthen Social Security*, **Office of U. S. Congressman Peter DeFazio**, June 9, 2022, <https://tinyurl.com/DeFazioSandersIntroduceBill>

So, the bottom line is the long Covid risk is high. I think the number that the C.D.C. released lately of, quote, “as many as 1 in 5,” which is right down the middle of that 10 percent and 30 percent, feels right experientially. Does that mean that every single 1 in 5 is going to look a particular way? No. I think, again, there’s a huge diversity of experiences.

Dr. Lekshmi Santhosh, assistant professor of pulmonary and critical care medicine at U.C.S.F. Medical Center, and founder and medical director of U.C.S.F.’s Long Covid and Post-I.C.U. Clinic, *Two Years Later, We Still Don’t Understand Long Covid. Why?*, ***New York Times**, June 21, 2022,
<https://tinyurl.com/TwoYearsLaterLongCovid>

“The country’s top law enforcement agency has now stated plainly that denying health care and other vital services to people with opioid use disorder violates federal law. So, facilities like jails and skilled nursing facilities that routinely discriminate against people with opioid use disorder should see the writing on the wall, and that if they continue to discriminate, they shouldn’t be surprised when the Department of Justice comes knocking on their door or they get served with a lawsuit.”

Sally Friedman, senior vice president of legal advocacy at the Legal Action Center, *To protect people with addiction from discrimination, the Justice Dept. turns to a long-overlooked tool: the ADA*, **STAT News**, June 22, 2022,
<https://tinyurl.com/AddictionAndADA>

“We can ring the alarm to say to people, don’t make us come and have to find you.”

Rachael Rollins, U.S. attorney in Massachusetts, referencing that the provisions of the Americans with Disabilities Act applies to incarcerated persons, *To protect people with addiction from discrimination, the Justice Dept. turns to a long-overlooked tool: the ADA*, **STAT News**, June 22, 2022, <https://tinyurl.com/AddictionAndADA>

“At a time when many states are making it harder to vote, this new law will modernize our elections and make our democracy more accessible and equitable.”

Geoff Foster, executive director of Common Cause Massachusetts, *Gov. Baker signs bill ensuring mail-in ballots, early voting*, **Salem News**, June 23, 2022, <https://tinyurl.com/EnsuringMailInBallots>

“While such issues were significant before the pandemic, COVID-19 exacerbated the situation and created a large volume of patients who are ready for discharge from hospitals but cannot find an appropriate bed in a post-acute care setting. In some cases, patients who require specialized post-acute care services wait weeks or even months to find an appropriate bed or service.”

Massachusetts Hospital Association report, *Hospitals wrestle with backlog of discharges*, **Salem News**, June 23, 2022, <https://tinyurl.com/HospitalsWrestleBacklog>

“In previous waves, there were still substantial pockets of people who had not been vaccinated or exposed to the virus, and so were at the same risk of dying as people at the beginning of the pandemic,” said. “Those pockets don’t exist anymore.”

Dr. David Dowdy, epidemiologist at Johns Hopkins Bloomberg School of Public Health, *Despite Another Covid Surge, Deaths Stay Near Lows*, ***New York Times**, June 20, 2022, <https://tinyurl.com/DeathsStayLow>

“Debt is no longer just a bug in our system. It is one of the main products. We have a health care system almost perfectly designed to create debt.”

Dr. Rishi Manchanda, board member of the nonprofit RIP Medical Debt,

	<p><i>Sick and struggling to pay, 100 million people in the U.S. live with medical debt, NPR Shots, June 16, 2022, https://tinyurl.com/SickAndStruggling</i></p> <p><i>“If the Commonwealth can fix the front door of our behavioral health system by adding capacity to mental health clinics, it will reduce or eliminate the problem of people boarding in hospital emergency departments.”</i></p> <p>Lydia Conley, president and CEO of the Association for Behavioral Healthcare, <i>Fund behavioral health clinics to avoid the ER boarding crisis, *Boston Globe, June 20, 2022, https://tinyurl.com/FundingBehavioralHealthClinics</i></p> <p><i>It’s almost like I’m just watching the clock count down until I get it.</i></p> <p>Jay McGaffigan, who has yet to contract Covid, <i>‘Like playing a game of Russian roulette’: People who avoided COVID so far share how they’re feeling, *Boston Globe, June 21, 2022, https://tinyurl.com/PlayingRussianRoulette</i></p> <p><i>Like so many others who lived at the Belchertown State School, Donald Vitkus’s life was supposed to be about what he could not do. Vitkus was not supposed to join the military, was not set on a path to attend college, and certainly was not expected to someday become a state employee. According to conventional wisdom, the boy from Waltham who spent most of his childhood in an institution for the “feeble-minded” certainly should never have had children (he had two).</i></p> <p><i>Our chance to confront a hidden history in Massachusetts, Daily Hampshire Gazette, June 15, 2022, https://tinyurl.com/ConfrontHiddenHistory</i></p>
<p>Dignity Votes 2022</p>	<p>AARP</p> <p>Friday, June 24, 2022, 1:00 p.m.</p> <p><i>Disability Voting Rights Week Training</i></p> <p>Disability Voting Rights Week (formerly National Disability Voter Registration Week) is a national initiative led by the REV UP Voting Campaign to increase the political power of people with disabilities. We do this by getting disabled people registered and ready to vote and engaging our candidates and communities on issues impacting people with disabilities. Learn more at aapd.com/dvrw.</p> <p>This webinar will be led by the REV UP team at the American Association of People with Disabilities. To learn about REV UP, visit aapd.com/revup.</p>

Registration: <https://tinyurl.com/VotingRightsJune24>

Disability Voting Rights Week

September 12-16, 2022

What is Disability Voting Rights Week?

Every year, the REV UP Campaign coordinates Disability Voting Rights Week (formerly National Disability Voter Registration Week) to increase the political power of people with disabilities. We do this by getting disabled people registered and ready to vote and engaging our candidates and communities on issues impacting people with disabilities.

This year, Disability Voting Rights Week is September 12-16, 2022. In 2020, an estimated 38 million people with disabilities were eligible to vote, and we invite national, state, and local organizations and advocates to participate in this national initiative in order to continue to raise the disability voice and civic participation across the country in 2022 and beyond.

<https://www.aapd.com/advocacy/voting/dvrw/>

Sign up as a partner: <https://www.surveymonkey.com/r/dvrw2022>

Interviews with candidates for State Auditor

As one aspect of the *Dignity Votes 2022* initiative, candidates for constitutional office have been invited to participate in individual interviews with a panel of Dignity Alliance Massachusetts members. Candidates for the office of state auditor have been the first to be invited. They will be interviewed by a panel consisting of

- Richard Moore, former Massachusetts Senate President Pro Tempore and Senate Chair, Joint Health Care Finance Committee
- Arlene Germain, Executive Director, Massachusetts Advocates for Nursing Home Reform
- Sandy Alissa Novack, MBA, MSW

Charles Carr, former Commissioner of the Massachusetts Rehabilitation Commission, will serve as moderator.

Interview schedule:

- Diana DiZoglio: Wednesday, June 29, 1:00 to 2:00 p.m.
- Chris Dempsey, Thursday, June 30, 1:00 to 2:00 p.m.
- Arthur Amore, Thursday, June 30, 2:00 to 3:00 p.m.

Information on how to register to observe interviews live will be distributed in a supplemental issue of *The Dignity Digest*. Interviews will be recorded and posted on the DignityMA website.

Fact Sheets and Issue Briefs

Prepared by Dignity Alliance Massachusetts Workgroups

Nursing Homes

- [Nursing Home Fact Sheet](#)
- [Nursing Home Staffing Issues](#)
- [Pandemic Issues in Nursing Homes](#)
- [Nursing Homes – Financial Responsibility](#)
- [Nursing Homes – Oversight, Licensures, Closures](#)
- [Nursing Homes – Small Home Model](#)

Home and Community Based Services

- [HCBS Fact Sheet](#)
- [HCBS Staffing Issues](#)
- [HCBS Care Coordination Issues](#)

	<p>Behavioral Health</p> <ul style="list-style-type: none"> • Behavioral Health Fact Sheet • BH Elder Mental Health Outreach Teams (EMHOT) Issues • BH Nursing Homes and Psychotropic/Antipsychotic Drugs Issues • Social Work Staffing Issues <p>Housing</p> <ul style="list-style-type: none"> • Housing Issues <p>Veterans</p> <ul style="list-style-type: none"> • Veterans Issues <p>https://dignityalliancema.org/2022-facts-and-issues/</p> <p>Salem News</p> <p>June 23, 2022</p> <p><i>Gov. Baker signs bill ensuring mail-in ballots, early voting</i></p> <p>A voting rights bill designed to ensure that mail-in ballots and early voting become permanent fixtures in future Massachusetts elections was signed into law Wednesday by Republican Gov. Charlie Baker.</p> <p>The new law, which had passed the Democrat-controlled Massachusetts House and Senate by wide margins, would also increase ballot access for voters with disabilities and service members overseas. It would make sure eligible voters who are incarcerated can request a mail-in ballot and take steps to modernize the state's election administration process.</p> <p>https://tinyurl.com/EnsuringMailInBallots</p>
Call for Advocacy	<p>1. The Action Network</p> <p><i>Free Our People - Make Olmstead Real</i></p> <p>On June 22, 1999, the U.S. Supreme Court Olmstead decision declared that unjustified segregation of persons with disabilities (PWDs) in nursing homes et al. is discrimination, in violation of the Americans with Disabilities Act (ADA). The Court held that public entities must provide community-based services to persons with disabilities.</p> <p>Tragically, governments bowed to the corporate greed of the nursing home industry, kept PWDs and seniors institutionalized, and then left them to die in great numbers in 'petri dishes for COVID.' Even now, facility owners are "super excited," that Biden and many governors are promising them more public funding, instead of implementing the principles of the ADA and Olmstead. Join dozens of disability-led organizations in telling President Biden and your governor to fully embrace the principles of Olmstead and the ADA. Each person should have the choice to live in the least restrictive environment possible, and a wide range of independent-living and non-institutional models made available. The nursing home industry - mostly publicly-funded for-profit businesses - abuses residents and exploits workers to maintain huge profitability, and uses those profits to lobby for ever more public money.</p> <p>It's not just 'a few bad apples.' There are workers and advocates trying to make the system better, but the industry is inherently oppressive and should be phased out -- in a planned transition that does not sacrifice fairness for facility employees in pursuit of justice for residents.</p> <p>Biden voted for the ADA in the senate. On this anniversary, ask President Biden to end the institutional bias and embrace the full implementation of Olmstead. The segregation must end.</p> <p>Access online advocacy form: https://tinyurl.com/OlmsteadAdvocacy</p>

Request for Input	<p>2. President Biden’s Committee for People with Intellectual Disabilities On June 2, 20 citizen members were sworn in as members of the President’s Committee for People with Intellectual Disabilities (PCPID). The PCPID is now getting ready for its first full committee meeting, which will be open to the public. More information about registration will be available soon, but please mark your calendars for July 28 from noon to 4 pm ET. Stakeholder input is very important to the PCPID. Comments and suggestions, especially from people with intellectual and developmental disabilities, are welcome at any time. If there are comments or feedback you would like to share with the PCPID as it begins to prioritize its work, please share them through this form on ACL.gov. Comments received by June 30 will be shared with the PCPID at the July meeting. (Comments received after June 30 will be compiled and shared with the PCPID quarterly.)</p> <p>About the President’s Committee for People with Intellectual Disabilities <i>Initially established in 1966 by President Lyndon B. Johnson, the PCPID advises the President and the Secretary of Health and Human Services on a broad range of topics that impact people with intellectual disabilities, as well as the professional fields that support people with intellectual disabilities and their families. Its goal is to improve the quality of life experienced by people with intellectual disabilities by upholding their full citizenship rights, independence, self-determination, and lifelong participation in their communities.</i></p> <p>3. New York Times (free access) June 14, 2022 <i>If Housing Is a Health Care Issue, Should Medicaid Pay the Rent?</i> There is a survey at the end of this article requesting responses to these questions:</p> <ul style="list-style-type: none"> • Should Medicaid help with housing? • What lessons do you take away from this story? • Do you think using Medicaid to address homelessness is making the issue better or worse? • Do you have a connection to the issue of homelessness or housing insecurity? • What would you like to tell us about your experience? <p>If you would like to provide input to this survey, you can access the response form at the end of the article. https://tinyurl.com/ShouldMedicaidPayRent</p>
Settlement Agreements	<p>4. United State Department of Justice June 1, 2022 <i>Massachusetts Parole Board Settlement</i> The allegation: Concerns with respect to the Parole Board’s compliance with the ADA’s non-discrimination requirements specifically involving policies and protocols related to substance use disorder. The settlement: A set of modifications to policies and protocols; reporting requirements. https://tinyurl.com/ADASettlementMAParoleBoard</p> <p>5. United State Department of Justice May 19, 2022 <i>Massachusetts Trial Court Settlement</i> The allegation:</p>

	<p>a. Requiring cessation of lawfully prescribed buprenorphine without an individualized medical assessment conducted to determine the medical appropriateness of requiring the individual to cease taking the prescribed medication.</p> <p>b. Non-medical personnel recommending drug court participants take injectable naltrexone to the exclusion or non-consideration of other treatment</p> <p>The settlement includes adherence to policies requiring decisions regarding a participant’s medication type and dosage shall be made only by a licensed prescriber or an opioid treatment program (“OTP”). Drug court personnel will not interfere with the licensed prescriber’s or OTP’s individualized assessment. Drug court personnel shall not express a preference for, or mandate, one medication over another.</p> <p>https://tinyurl.com/ADASettlementMATrialCourt</p>
REV UP Massachusetts	<p>6. REV UP Massachusetts</p> <p>Dignity Alliance MA voted to endorse and support the upcoming REV UP conference.</p> <p>REV UP Mass (Register! Educate! Vote! Use your Power!) is a local coalition that is part of the larger national REV UP network that exists to build the power of the disability vote. That means making sure that voters with disabilities are registered to vote and that they have equal access to democracy.</p> <p>REV UP Mass is holding the (free) virtual REV UP Mass Conference on July 21, 2022! The conference is currently planned for 10 a.m. – 3:15 p.m. with a break for lunch. The conference planning committee is hard at work finding Speakers and determining an Agenda that will highlight barriers to accessible voting in Mass, how to get out the disability vote, and why the disability vote is so important for the 2022 elections.</p> <p>If you have questions please do not hesitate to reach out to Amelia Fowler, Voting Rights Advocate at DLC, at afowler@dlc-ma.org OR 671-221-8451. Sign up for REV UP emails or check the REV UP website for more information. Conference signup link will be available soon!</p> <p>https://revupma.org/wp/</p>
Podcasts	<p>7. The Shape of Care</p> <p><i>Trailer for The Second Season</i></p> <p><i>The Shape of Care</i> is a dynamic podcast that explores the world of caregiving. <i>The Shape of Care illuminates the costs, financial and otherwise, of hiring (caregivers), the toll on the caregivers, and the need for a rethinking of a widening hole in the infrastructure of American health care.</i> – Phoebe Lett, The New York Times</p> <p>Season 2 begins with intimate stories of care workers and the people they care for. But their issues are larger than just one story. Personal and compelling stories are connected to the broader policy landscape – through interviews with nursing home leaders, policymakers, union activists, and more. The question explored is: What kinds of long-term care policies do we need so that anyone can receive quality, affordable care?</p> <p>The trailer features:</p> <ul style="list-style-type: none"> • U.S. Senator Bob Casey • Shazia Anwar, Professional Home Care Worker, and the woman she cares for, Darlen Wagenius • Paula Fox, Certified Nursing Assistant

	<ul style="list-style-type: none"> • Dr. Ben Veghte, who developed the first-in-the-nation long term care insurance plan in Washington state • Sterling Harders, President of SEIU775, the union that organizes home care workers in Washington state and Oregon • And me... (!) <p>For the next four weeks, new episodes will be released, two focused on home- and community-based care, and two on nursing home care.</p> <p>https://tinyurl.com/TheShapeOfCareTrailer</p> <p>8. National Consumer Voice for Quality Long-Term Care <i>Addressing Abuse in Long-Term Care Facilities</i> Abuse is defined in the federal nursing home regulations as the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish. It can take many forms including physical abuse, verbal, sexual, mental, emotional, and financial. Even though federal law states that residents of long-term care facilities have the right to be free from abuse, it still does occur and is largely under-reported and inadequately investigated and addressed.</p> <p>Recent data indicates increased concern about incidences of abuse in long-term care facilities. That, along with the fact that June 15 is designated as World Elder Abuse Awareness Day (WEAAD), made us think it was important and timely to talk about this issue.</p> <p>Presenters:</p> <ul style="list-style-type: none"> • Dr. Laura Mosqueda, professor of Family Medicine and Geriatrics • Beverley Laubert, the National Ombudsman Program Coordinator at the Administration for Community Living <p>https://tinyurl.com/AbuseInLTCF</p>
Reports	<p>9. Centers for Medicare and Medicaid Services <i>Initiative to Reduce Avoidable Hospitalizations among Nursing Facility Residents</i> Overview: The Medicare-Medicaid Coordination Office, in collaboration with the Center for Medicare & Medicaid Innovation, has undertaken efforts to improve the quality of care for people in long-term care (LTC) facilities by reducing potentially avoidable inpatient hospitalizations.</p> <p>The Initiative to Reduce Avoidable Hospitalizations among Nursing Facility Residents, which ran from 2012 to 2020, focused on long-stay LTC facility residents, primarily those enrolled in the Medicare and Medicaid programs. The Initiative supported organizations that partner with LTC facilities to implement evidence-based interventions that both improve care and lower costs.</p> <p>Background: LTC facility residents often experience potentially avoidable hospital transfers. Unnecessary hospitalizations are expensive, disruptive, and disorienting for frail elders and people with disabilities. LTC facility residents are especially vulnerable to the risks that accompany hospital stays and transitions between nursing facilities and hospitals, including medication errors and hospital-acquired infections.</p> <p>Many LTC facility residents are enrolled in both the Medicare and Medicaid programs (Medicare-Medicaid enrollees). CMS research on this population has repeatedly found that a large number of hospital admissions could have been avoided.</p>

	https://tinyurl.com/CMSAvoidableHospitalizations
Virtual Conferences	<p>10. The 2022 REV UP MA Conference Thursday, July 21, 2022, 10:00 a.m. to 3:00 p.m. Speakers, agenda, and location to be announced Agenda will highlight barriers to accessible voting in Massachusetts, how to get out the disability vote, and why the disability vote is so important for the 2022 elections. Coalition partners:</p> <ul style="list-style-type: none"> • Disability Law Center • Disability Policy Consortium • Mass. Developmental Disabilities Council • Mass. Advocates Standing Strong • MASS Rainbow • MetroWest Center for Independent Living • The Arc of Massachusetts <p>Free registration; registration information forthcoming https://tinyurl.com/REVUpMAE2022Conference</p>
Webinars and online sessions	<p>11. AARP Friday, June 24, 2022, 1:00 p.m. <i>Disability Voting Rights Week Training</i> Disability Voting Rights Week (formerly National Disability Voter Registration Week) is a national initiative led by the REV UP Voting Campaign to increase the political power of people with disabilities. We do this by getting disabled people registered and ready to vote and engaging our candidates and communities on issues impacting people with disabilities. Learn more at aapd.com/dvrw. This webinar will be led by the REV UP team at the American Association of People with Disabilities. To learn about REV UP, visit aapd.com/revup. Registration: https://tinyurl.com/VotingRightsJune24</p> <p>12. Gray Panthers of NYC Transformation Tuesdays Tuesday, June 28, 2022, 2:00 p.m. <i>Reimagining Nursing Homes: The New Paradigm</i> The discussion will center on the state of the nursing home industry and how grassroots advocates can promote modern, more humane paradigms of the nursing home model and help address the ongoing crisis in New York and the rest of the country. The webinar is presented in partnership with EmergingAging NYC. Registration: https://tinyurl.com/ReimaginingNHGrayPanthers</p> <p>13. Long Term Care Discussion Group <i>Reducing Avoidable Hospitalizations Among Nursing Home Residents: Findings from an Evaluation of the CMS Initiative</i> Wednesday, July 20, 2022, 2:00 to 3:00 p.m. Every year, about 25% of people who live in nursing facilities are transferred to hospitals for acute care. Avoiding unnecessary hospitalizations of nursing facility residents can improve resident health, increase quality of care, and reduce health care costs. While some of these transfers are required to treat specific health conditions or complications, many may be avoided through timely diagnosis and treatment within the nursing facility. RTI evaluated a Centers for Medicare & Medicaid Services (CMS) Initiative to improve nursing facility resident health, increase care quality, and lower Medicare expenditures by reducing the number of avoidable hospitalizations.</p>

	<p>Using a mixed methods research design, the team collected and analyzed data to determine the CMS Initiative’s effects on hospital utilization, Medicare expenditures, and care quality.</p> <p>Two phases were evaluated. The first phase (2012-2016) evaluated the value of providing on-site clinical support for nursing facilities, which are generally understaffed and struggle with staff recruitment and retention. The second phase of the Initiative added a Medicare payment component (2016-2020) to incentivize participating nursing facilities and practitioners to provide on-site acute care for eligible long-stay residents.</p> <p>For report, see: https://tinyurl.com/CMSAvoidableHospitalizations</p> <p>The session will discuss the research design and findings from this comprehensive and important evaluation.</p> <p>Presenters:</p> <ul style="list-style-type: none"> • Galina Khatutsky, MS, is a senior policy analyst in the Aging, Disability, and Long-Term Care Program at RTI International. • Micah Segelman, Ph.D., is a senior health policy researcher in RTI’s Center for the Health of Populations. • Lawren Bercaw, Ph.D., is a senior researcher within RTI’s Center for the Health of Populations. • Zhanlian Feng, Ph.D., is a senior researcher in the Aging, Disability, and Long-Term Care Program at RTI International. <p>Access Zoom session at: https://tinyurl.com/LTCDiscussionJuly20Zoom</p>
Previously posted webinars and online sessions	<p>Previously posted webinars and online sessions can be viewed at: https://dignityalliancema.org/webinars-and-online-sessions/</p>
Behavioral Health	<p>14. *Boston Globe June 20, 2022 <i>Fund behavioral health clinics to avoid the ER boarding crisis</i> The one thing everyone can agree on is that the emergency department is the wrong venue for longer-term treatment of patients with acute behavioral health needs.</p> <p>Much has been said recently about the state’s behavioral health boarding crisis: Patients who arrive at a hospital emergency department in crisis can be kept there for days or even weeks waiting for a psychiatric bed to become available. Rather than addressing only the lack of pediatric and adult psychiatric inpatient beds, policy makers would be wise to strengthen the system’s front end — the behavioral health clinics where patients often first seek treatment before their illness becomes acute. These outpatient sites are beset with a number of challenges, including the most constrained workforce in decades and reimbursement rates, from both public and private health plans, which are inadequate to both retain and recruit clinical staff.</p> <p>The one thing everyone can agree on is that the emergency department is the wrong venue for longer-term treatment of patients with acute behavioral health needs. On a typical day last fall, there were 716 “stuck” patients statewide. . . Some help is on the way. The Baker administration has announced that MassHealth, the state Medicaid agency, will make supplemental payments to hospitals that have been dealing with the behavioral health crisis. This is an important step, as is developing a long-range plan to create adequate inpatient capacity. It also announced that new regional community behavioral health centers are expected to open in 2023 and there is urgent care expansion</p>

	<p>ramping up. These are important steps, but these centers alone cannot meet the tsunami of need.</p> <p>https://tinyurl.com/FundingBehavioralHealthClinics</p>
Covid	<p>15. *Boston Globe June 21, 2022 <i>'Like playing a game of Russian roulette': People who avoided COVID so far share how they're feeling</i></p> <p>More than two years into the pandemic, almost 60 percent of Americans — including 75 percent of children — have contracted COVID-19 at least once. The shrinking segment of the populace who hasn't say they feel a mixture of gratitude and fatalism over what seems inevitable: that sooner or later, the virus will come for them, too.</p> <p>The Globe receive more than 1,500 responses to a survey asking people who never got the virus how they feel.</p> <p>https://tinyurl.com/PlayingRussianRoulette</p> <p>16. *New York Times June 20, 2022 <i>Despite Another Covid Surge, Deaths Stay Near Lows</i></p> <p>Most Americans now carry some immune protection, experts said, whether from vaccines, infection, or both.</p> <p>For two years, the coronavirus killed Americans on a brutal, predictable schedule: A few weeks after infections climbed so did deaths, cutting an unforgiving path across the country.</p> <p>But that pattern appears to have changed. Nearly three months since an ultra-contagious set of new Omicron variants launched a springtime resurgence of cases, people are dying from Covid at a rate close to the lowest of the pandemic. Older people make up a larger share of Covid deaths than they did last year. The virus continues to kill unvaccinated people at much higher rates than vaccinated people, despite many unvaccinated people having some protection from prior infections. And those with weakened immune systems also face greater risks. Covid is still killing an average of 314 people daily.</p> <p>In the Northeast, where the Omicron subvariants first took hold this spring, deaths climbed as cases surged. In New York, the daily average of Covid deaths rose from eight in April to about 24 in mid-June. Daily deaths in New England increased from five to a peak of 34 over the same period. . .</p> <p>There are a number of possible reasons that Covid deaths have not fallen even further. With infection levels so high and few precautions being taken, the virus is inevitably reaching people who are more vulnerable because of their vaccine status, age, or underlying conditions. And even as some people gain immune protection during the pandemic, others become more susceptible to bad outcomes as they age or develop weakened immune systems.</p> <p>https://tinyurl.com/DeathsStayLow</p>
Long Covid	<p>17. *New York Times June 21, 2022 <i>Two Years Later, We Still Don't Understand Long Covid. Why?</i></p> <p>Dr. Lekshmi Santhosh parses what research has illuminated about long Covid, and what questions remain.</p> <p>Depending on the data you look at, between 10 percent and 40 percent of people who get Covid will still have inexplicable symptoms months later. For some people, that's going to be modest — a cough, some fatigue. For others, it</p>

	<p>can be life-altering — debilitating brain fog, constant exhaustion, cardiovascular problems, blood clotting.</p> <p>Audio interview and written transcript at: https://tinyurl.com/TwoYearsLaterLongCovid</p>
<p>Health Care</p>	<p>18. Salem News June 23, 2022 <i>Hospitals wrestle with backlog of discharges</i> More than 1,000 patients are stuck in Massachusetts hospitals waiting to be transferred to nursing homes and other facilities — in some cases for months — amid a lack of beds and other factors, according to a scathing new report. The report by the Massachusetts Health and Hospital Association found that delays in patient discharges to a variety of post-acute care settings have become a “growing challenge” for the state’s hospitals and post-acute care providers. . . The number of patients waiting for discharge to skilled nursing facilities with dementia diagnoses has increased by 71% since March. . . Hundreds of patients are still being “boarded” in emergency rooms across the state as they await beds in mental health facilities. As of June 6, there were 660 patients — including 156 children — awaiting beds in psychiatric facilities, according to the hospital association weekly report. https://tinyurl.com/HospitalsWrestleBacklog</p> <p>19. NPR Shots June 16, 2022 <i>Sick and struggling to pay, 100 million people in the U.S. live with medical debt</i> (M)ore than 100 million people in America — including 41% of adults — (are) beset by a health care system that is systematically pushing patients into debt on a mass scale, an investigation by KHN and NPR shows. The investigation reveals a problem that, despite new attention from the White House and Congress, is far more pervasive than previously reported. That is because much of the debt that patients accrue is hidden as credit card balances, loans from family, or payment plans to hospitals and other medical providers. In the past five years, more than half of U.S. adults report they've gone into debt because of medical or dental bills, the KFF poll found. . . A quarter of adults with health care debt owe more than \$5,000. And about 1 in 5 with any amount of debt said they don't expect to ever pay it off. . . Medical debt is piling additional hardships on people with cancer and other chronic illnesses. Debt levels in U.S. counties with the highest rates of disease can be three or four times what they are in the healthiest counties, according to an Urban Institute analysis. . . About 1 in 7 people with debt said they've been denied access to a hospital, doctor, or other provider because of unpaid bills, according to the poll. An even greater share — about two-thirds — have put off care they or a family member need because of cost. . . America's debt crisis is driven by a simple reality: Half of U.S. adults don't have the cash to cover an unexpected \$500 health care bill, according to the KFF poll. As a result, many simply don't pay. The flood of unpaid bills has made medical debt the most common form of debt on consumer credit records. . .</p>

- About 50 million adults — roughly 1 in 5 — are paying off bills for their own care or a family member's through an installment plan with a hospital or other provider, the KFF poll found. Such debt arrangements don't appear on credit reports unless a patient stops paying.
- One in 10 owe money to a friend or family member who covered their medical or dental bills, another form of borrowing not customarily measured.
- Still more debt ends up on credit cards, as patients charge their bills and run up balances, piling high interest rates on top of what they owe for care. About 1 in 6 adults are paying off a medical or dental bill they put on a card.

Today debt from medical and dental bills touches nearly every corner of American society, burdening even those with insurance coverage through work or government programs such as Medicare.

Nearly half of Americans in households making more than \$90,000 a year have incurred health care debt in the past five years, the KFF poll found.

Women are more likely than men to be in debt. And parents more commonly have health care debt than people without children.

<https://tinyurl.com/SickAndStruggling>

20. Gallup

June 15, 2022

Older Adults Sacrificing Basic Needs Due to Healthcare Costs

Story Highlights

- Over 1 in 3 adults 50+ have forgone basics such as food to pay for healthcare
- Some older Americans are skipping needed care and medication due to cost
- Americans aged 50-64, women, Black adults more likely to cut back on basics

Implications

The U.S. Census estimates that the aged 65 and older population will reach 77 million people by 2034, rising from about 52 million today. As sizable numbers of Americans 65 and older face tangible tradeoffs to pay for healthcare, many more Americans in the next decade will incur health and financial consequences because of high costs.

With adults aged 50-64 already sacrificing to a greater degree than their older counterparts, there will certainly be many older adults needing medical care because of the health outcomes of delaying or skipping treatment. According to the Organization for Economic Cooperation and Development, healthcare costs in the United States remain higher than those of other developed countries, but paying more for care is not resulting in better health outcomes.

Policymakers urgently need to grapple with how to improve efficiency and reduce costs of healthcare and prescription drugs in the United States, so Americans do not need to sacrifice basic needs to pay for healthcare or medicine -- or to avoid care entirely because it is too expensive.

<https://tinyurl.com/SacrificingBasicNeeds>

21. Centers for Medicare and Medicaid Services

Initiative to Reduce Avoidable Hospitalizations among Nursing Facility Residents

Overview:

The Medicare-Medicaid Coordination Office, in collaboration with the [Center for Medicare & Medicaid Innovation](#), has undertaken efforts to improve the quality

	<p>of care for people in long-term care (LTC) facilities by reducing potentially avoidable inpatient hospitalizations.</p> <p>The Initiative to Reduce Avoidable Hospitalizations among Nursing Facility Residents, which ran from 2012 to 2020, focused on long-stay LTC facility residents, primarily those enrolled in the Medicare and Medicaid programs. The Initiative supported organizations that partner with LTC facilities to implement evidence-based interventions that both improve care and lower costs.</p> <p>Background:</p> <p>LTC facility residents often experience potentially avoidable hospital transfers. Unnecessary hospitalizations are expensive, disruptive, and disorienting for frail elders and people with disabilities. LTC facility residents are especially vulnerable to the risks that accompany hospital stays and transitions between nursing facilities and hospitals, including medication errors and hospital-acquired infections.</p> <p>Many LTC facility residents are enrolled in both the Medicare and Medicaid programs (Medicare-Medicaid enrollees). CMS research on this population has repeatedly found that a large number of hospital admissions could have been avoided.</p> <p>https://tinyurl.com/CMSAvoidableHospitalizations</p>
Caregiving	<p>22. The Shape of Care</p> <p><i>Trailer for The Second Season</i></p> <p><i>The Shape of Care</i> is a dynamic podcast that explores the world of caregiving. <i>The Shape of Care illuminates the costs, financial and otherwise, of hiring (caregivers), the toll on the caregivers, and the need for a rethinking of a widening hole in the infrastructure of American health care.</i> – Phoebe Lett, The New York Times</p> <p>Season 2 begins with intimate stories of care workers and the people they care for. But their issues are larger than just one story. Personal and compelling stories are connected to the broader policy landscape – through interviews with nursing home leaders, policymakers, union activists, and more. The question explored is: What kinds of long-term care policies do we need so that anyone can receive quality, affordable care?</p> <p>The trailer features:</p> <ul style="list-style-type: none"> • U.S. Senator Bob Casey • Shazia Anwar, Professional Home Care Worker, and the woman she cares for, Darlen Wagenius • Paula Fox, Certified Nursing Assistant • Dr. Ben Veghte, who developed the first-in-the-nation long term care insurance plan in Washington state • Sterling Harders, President of SEIU775, the union that organizes home care workers in Washington state and Oregon • Mindy Fried, <i>The Shape of Care</i> host <p>For the next four weeks, new episodes will be released, two focused on home- and community-based care, and two on nursing home care.</p> <p>https://tinyurl.com/TheShapeOfCareTrailer</p>
Social Security	<p>23. CBS News MarketWatch</p> <p>June 16, 2022</p>

Social Security bill would give seniors an extra \$2,400 a year. Here's how it would work.

Seniors and other Social Security recipients in the U.S. are being hit hard by inflation, which has outpaced increases in their benefits this year. Now, some lawmakers have a plan to boost Social Security payments by \$2,400 per recipient annually, while also shoring up the program financially.

The Social Security Expansion Act was [introduced](#) June 9 by Rep. Peter DeFazio, a Democrat from Oregon, and Senator Bernie Sanders, an Independent from Vermont. The plan comes after the Social Security Administration earlier this month [said](#) Americans will stop receiving their full Social Security benefits in roughly 13 years without actions to shore up the program.

Social Security recipients receive one cost-of-living adjustment, or COLA, each year, which is based on inflation and is supposed to keep their benefits in line with rising prices. But this year, beneficiaries are seeing their purchasing power wane as inflation overtakes their latest COLA increase of 5.9%. Inflation in May rose 8.6% from a year ago, [a four-decade high](#) that pushed up the cost of food, shelter, energy and other staples.

Here's what to know about the Social Security Expansion Act.

- A benefits boost: \$200, plus COLA changes
- More help for children of deceased workers
- The bill would increase the Social Security payroll tax on higher-income workers
- Expanding the payroll tax would boost the Social Security Administration's trust fund, ensuring its solvency through 2096.

<https://tinyurl.com/Extra2400Year>

24. Office of U. S. Congressman Peter DeFazio

June 9, 2022

DeFazio, Sanders Introduce Legislation to Expand and Strengthen Social Security
Congressman Peter DeFazio and Senator Bernie Sanders introduced joint legislation, the Social Security Expansion Act (SSEA), to strengthen and expand Social Security for current and future generations. . .

The Social Security Expansion Act would:

- **Extend the solvency of the Social Security trust fund 75 years, through 2096**, by requiring the wealthiest Americans to pay their fair share into the fund, just like everyone else. This legislation would lift the income tax cap and subject all income above \$250,000 to the Social Security Payroll tax. Under this bill, more than 93 percent of households would not see their taxes go up by one penny.
- **Expand Social Security benefits across-the-board for current and new beneficiaries.** Under this bill, Social Security benefits for someone turning 62 next year would be \$200 per month higher.
- **Increase Cost-of-Living Adjustments (COLAs).** This bill would more accurately measure spending patterns of seniors by adopting the Consumer Price Index for the Elderly (CPI-E), which would change the formula to reflect what seniors spend a disproportionate amount of their income on such as health care and prescription drugs.
- **Require millionaires and billionaires to pay their fair share into Social Security.** Currently, workers have 12.4 percent taken out of each paycheck and contributed to the Trust Fund, half paid by the employer and half by the worker. This bill would require the wealthy pay the same 12.4 percent on

	<p>their investments and business income by increasing the net investment income tax by 12.4 percent and applying it to certain business income not already covered by payroll taxes.</p> <ul style="list-style-type: none"> • Improve the Special Minimum Benefit for Social Security recipients. This bill will help low-income workers stay out of poverty by updating and increasing the Special Minimum Benefit and indexing the benefit level so that it is equal to 125 percent of the poverty line or about \$17,000 for a single worker who had worked their full career. • Restore student benefits up to age 22 for children of disabled or deceased workers if the child is a full-time student in a college or vocational school. This legislation restores student benefits to help educate children of deceased or disabled parents (these benefits were eliminated in 1983). • Combine the Disability Insurance Trust Fund with the Old Age and Survivors Trust fund to help senior citizens and persons with disabilities. https://tinyurl.com/DeFazioSandersIntroduceBill <p>25. Business Wire May 19, 2022 <i>Two-Thirds of Near-Retirees Barely Passed or Failed a Basic Social Security Quiz from MassMutual</i> Over 15,000 new people are added to the Social Security benefits payment pool every day, according to the Social Security Administration. The latest Social Security retirement benefits quiz of near-retirees from Massachusetts Mutual Life Insurance Company (MassMutual) exposes opportunity for better understanding of some basic Social Security facts and planning. In fact, two-thirds of near retirees barely passed or failed the latest quiz. . . https://tinyurl.com/BasicSocialSecurityQuiz</p>
<p>Incarceration / Criminal Justice</p>	<p>26. United State Department of Justice June 1, 2022 <i>Massachusetts Parole Board Settlement</i> The allegation: Concerns with respect to the Parole Board’s compliance with the ADA’s non-discrimination requirements specifically involving policies and protocols related to substance use disorder. The settlement: A set of modifications to policies and protocols; reporting requirements. https://tinyurl.com/ADASettlementMAParoleBoard May 19, 2022</p> <p>27. United State Department of Justice <i>Massachusetts Trial Court Settlement</i> The allegation: a. Requiring cessation of lawfully prescribed buprenorphine without an individualized medical assessment conducted to determine the medical appropriateness of requiring the individual to cease taking the prescribed medication. b. Non-medical personnel recommending drug court participants take injectable naltrexone to the exclusion or non-consideration of other treatment The settlement includes adherence to policies requiring decisions regarding a participant’s medication type and dosage shall be made only by a licensed prescriber or an opioid treatment program (“OTP”). Drug court personnel will not interfere with the licensed prescriber’s or OTP’s</p>

	<p>individualized assessment. Drug court personnel shall not express a preference for, or mandate, one medication over another. https://tinyurl.com/ADASettlementMATrialCourt</p>
<p>Disability Topics</p>	<p>28. Salem News June 23, 2022 <i>Gov. Baker signs bill ensuring mail-in ballots, early voting</i> A voting rights bill designed to ensure that mail-in ballots and early voting become permanent fixtures in future Massachusetts elections was signed into law Wednesday by Republican Gov. Charlie Baker. The new law, which had passed the Democrat-controlled Massachusetts House and Senate by wide margins, would also increase ballot access for voters with disabilities and service members overseas. It would make sure eligible voters who are incarcerated can request a mail-in ballot and take steps to modernize the state’s election administration process. https://tinyurl.com/EnsuringMailInBallots</p> <p>29. STAT News June 22, 2022 <i>To protect people with addiction from discrimination, the Justice Dept. turns to a long-overlooked tool: the ADA</i> In a 2020 settlement, the U.S. Justice Department found that MGH discriminated against Bryan under the Americans with Disabilities Act, the landmark 1990 civil rights law meant to ensure that people with disabilities have the same opportunities as everyone else. It’s not a well-known element, but the law classifies substance use disorder as a disability, meaning disfavoring someone for being in recovery or based on their past drug use is illegal. (The law does not extend its full protections to people still using drugs.) Increasingly, Justice Department attorneys are leveraging the law to try to overcome some of the rampant discrimination that people with substance use disorders face. The cases typically center on people who are penalized because they take medication for opioid addiction — treatments that are considered the gold-standard — and on people who are denied those medications, particularly in the criminal justice system. The underlying argument rests on the idea that imposing barriers on treatment for a disability is tantamount to doing so on the basis of the disability itself. . . In April, the Justice Department’s Civil Rights Division released guidance outlining how the ADA applies to substance use disorders, aiming to explain to people with addiction histories that they have rights they might not be aware of. In 2018, the Justice Department first advocated for the legal theory that “discrimination on the basis of treatment is discrimination on the basis of disability,” Dorchak said. It came in an investigation of Charlwell House, a skilled nursing facility in Massachusetts that refused a patient who took Suboxone. Change the prescription, the nursing facility told the patient, and we’ll reconsider. The department reached a settlement with Charlwell House, under which the facility had to adopt a non-discrimination policy and provide ADA training. It has since reached agreements with about eight other skilled nursing facility organizations. . .</p>

The ADA considers as a disability any physical or mental impairment that substantially limits major life activities, or a history of such an impairment. Congress signaled that the definition should be interpreted broadly and the protections extended widely, legal scholars say. Under that framework, people in recovery from opioid and other substance use disorders have disabilities and can't be discriminated against. . .

A federal court in 2018 [found](#) that a Massachusetts jail's refusal to allow a potential inmate to stay on methadone violated the ADA. (The judge [also raised](#) constitutional concerns.) And in 2019, a different federal court [ruled](#) similarly in a case involving a Maine jail's ban on buprenorphine. . .

Rachael Rollins, who was sworn in as the U.S. attorney in Massachusetts in January, told STAT that she intended to promote widely the work that the office has been doing in this area. Attorneys have done presentations for a trade group representing nursing facilities about ADA protections, and Rollins said she hopes to do trainings with medical schools and associations.

<https://tinyurl.com/AddictionAndADA>

30. Daily Hampshire Gazette

June 15, 2022

Our chance to confront a hidden history in Massachusetts

On a muggy afternoon just before Memorial Day, 100 people gathered in the woods at the Warner Pine Grove Cemetery of the former Belchertown State School. A bell was rung. The names of those who had passed since the last time we gathered were read aloud. The face of Pat Vitkus, wife of Donald Vitkus, looked out via FaceTime, her husband's grave marked in the background by a coffee cup. A personal touch.

Like so many others who lived at the Belchertown State School, Donald Vitkus's life was supposed to be about what he could not do. Vitkus was not supposed to join the military, was not set on a path to attend college, and certainly was not expected to someday become a state employee. According to conventional wisdom, the boy from Waltham who spent most of his childhood in an institution for the "feeble-minded" certainly should never have had children (he had two).

Most of all, the people who locked the door to his ward each night would have done all in their power to ensure he never saw the records of his life as a "moron" in the Belchertown State School. But against such resistance, Vitkus became a dedicated advocate for individuals with intellectual and developmental disabilities. He was committed to protecting and lifting up those who did not have a voice and he did it as an employee of the Department of Developmental Services.

At the same time Vitkus had to spend years crisscrossing the state with his son in search of the basic vital records of how he was taken from his mother, along with any of the records from his time in the State Schools, which had warehoused thousands of children like him in abhorrent and inhumane conditions. More than 30 massive institutions incarcerated disabled people — and those thought to be disabled — in the commonwealth for generations, including the Worcester State Hospital and the Belchertown State School. Many died and were buried in graves that had only anonymous, numbered markers. In the 1970s, parents at Belchertown ignited a statewide rights movement to

	<p>improve conditions in these institutions, earning hard-won victories and massive reforms.</p> <p>As he did with so much in his life, Vitkus succeeded in his own quest for answers. He got his records, but it took more than a decade. Today Beacon Hill has the opportunity to enact two pieces of legislation whose combined impact will honor his service and dedication to others by opening up documents at the Massachusetts Archives for public viewing after 90 years, making it easier for people born out of wedlock to access their birth records, and creating a commission to do for state institutions what Vitkus did for his own life by issuing the state’s first full report on their history.</p> <p>Vitkus, with the help of writer Ed Orzechowski, shared his life story in “You’ll Like It Here,” a book that not only gave a glimpse into Vitkus’s years as an “inmate” at the state school, but also called for an unflinching look at our history, which has driven the mission of groups like the Belchertown State School Friends Association, a group that was originally created at the state school and was revived in 2019. The Friends have secured part of the former state school site for the creation of a museum that will offer one of the few focused places in America to look at the legacy of institutionalization and disability rights. This work has brought people together to share and study the stories that remain, preserving them for the next generation. But so much of what will shape our understanding still cannot be publicly accessed for the same reasons that led Vitkus to race all over the Commonwealth for 10 years in search of his own history.</p> <p>In this regard, the commonwealth is an outlier. All across the country states open historical records for public view without precondition, often much more recently than 90 years. Moreover, Minnesota and California have already taken specific steps to use their documents in order to look into their history of abuses against disabled individuals. Where the proposed Massachusetts legislation differs is that its creation will be led by disabled individuals and it will investigate the matter of people buried in anonymous graves.</p> <p>Belchertown is one of two major models in America for doing that work. In the 1990s, a former Belchertown “inmate” Al Warner, persuaded the state to identify all of the graves at the state school cemetery, including his mother’s. When Vitkus passed in 2018, he chose to be buried out among them — his friends — making him the last person buried at the Warner Pine Grove Cemetery.</p> <p>A universe of stories like Vitkus’s exist, and we have an obligation to know them and understand their global meaning and significance. If the Legislature acts by passing S.2009/H.3150 and incorporating Senate Budget Amendment 863 in the combined legislative budget, we will honor that work by following in Donald Vitkus’s footsteps. Among the many things he was never supposed to be, he was never supposed to be a leader. Now, thanks in large part to his work, we have the chance to prove history wrong.</p> <p>https://tinyurl.com/ConfrontHiddenHistory</p>
	<p>*May require registration before accessing article.</p>
<p>Dignity Alliance Massachusetts Legislative Endorsements</p>	<p>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.</p>

Websites	<p>American Association of People with Disabilities (AAPD) https://www.aapd.com/</p> <p>The American Association of People with Disabilities (AAPD) is a convener, connector, and catalyst for change, increasing the political and economic power of people with disabilities.</p> <p>As a national cross-disability rights organization, AAPD advocates for full civil rights for the over 60 million Americans with disabilities by promoting equal opportunity, economic power, independent living, and political participation.</p> <p>ADA.gov/Olmstead https://tinyurl.com/ADAGovOlmstead</p> <ul style="list-style-type: none"> DOJ Olmstead Technical Assistance DOJ Olmstead Enforcement by Circuit Court DOJ Olmstead Enforcement by Case or Matter Olmstead Press, Speeches & Testimony DOJ Olmstead Enforcement by Issue Filing an Olmstead Complaint Faces of Olmstead <p>Association for Behavioral Healthcare https://www.abhmass.org/</p> <p>ABH is a statewide association representing over eighty community-based mental health and addiction treatment provider organizations. Members are the primary providers of publicly-funded behavioral healthcare services in the Commonwealth, serving approximately 81,000 Massachusetts residents daily.</p> <p>Core Values</p> <ul style="list-style-type: none"> • Bringing hope and health to individuals and families by promoting recovery and resiliency. • Ensuring access to quality person-centered and outcome-oriented care that is clinically and cost effective. • Committing to securing essential resources, including training, education, and adequate salaries, for the development of a committed and stable workforce. <p>Disability Voting Rights Week https://www.aapd.com/advocacy/voting/dvrw/</p>
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 <i>The Tuesday Digest</i> .
Previously posted funding opportunities	For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/ .
Nursing Home Closures	Closure Notices and Relocation Plans available at: https://tinyurl.com/MANursingHomeClosures
Websites of Dignity Alliance Massachusetts Members	See: https://dignityalliancema.org/about/organizations/
State Budget FY 2023	<p>Commonwealth of Massachusetts</p> <p>The Governor has submitted his proposed budget for FY 2023. The budget has been considered, amended, and voted on by the House of Representatives.</p> <p>The results of the debate in the Senate and outcome of proposed amendments can be viewed at: https://malegislature.gov/Budget/FY2023/SenateDebate</p>

The Senate adopted the following amendment:

Transparency and Accountability for Assisted Living Residences

“SECTION 56A. Notwithstanding any general or special law to the contrary, there shall be an assisted living commission to study and recommend policies to ensure assisted living residences adequately meet the health and safety needs of residents. The study shall examine: (i) the current statutory and regulatory oversight of assisted living residences; (ii) assisted living best practices in other states; (iii) the benefits and disadvantages of licensing or certifying residences; (iv) marketing information communicated by residences to potential residents and families; (v) regulatory procedures for opening, closing or changing ownership of a residence including determination of need processes and clustering of facilities; (vi) trends in incident reports made to the executive office of elder affairs and the long term care ombudsman’s office and resolutions of such incidents; (vii) methods to provide transparency of information for potential consumers and family members researching and comparing residences; (viii) safety standards; (ix) existing consumer protections in statute and regulation; and (x) the provision of health care services in residences.

The commission shall consist of: the secretary of elder affairs or a designee, who shall serve as chair; the commissioner of public health or a designee; the assistant secretary of MassHealth or a designee; the long term care ombudsman or a designee; the chairs of the joint committee on elder affairs or designees; and 8 members to be appointed by the governor, 1 of whom shall be a representative of the Massachusetts chapter of the National Academy of Elder Law Attorneys, 1 of whom shall be a representative of LeadingAge Massachusetts, Inc., 1 of whom shall be a representative of the Massachusetts Assisted Living Association, Inc., 1 of whom shall be a representative of AARP Massachusetts, 1 of whom shall be a representative of the New England chapter of the Gerontological Advanced Practice Nurses Association, 1 of whom shall be a representative of the Massachusetts chapter of the Alzheimer’s Association and 2 of whom shall be residents or family members of residents at an assisted living residence.

The commission shall meet not less than 6 times, including at least 1 public hearing, and shall produce a report detailing recommendations, which shall be published online by the executive office of elder affairs.

The commission shall file its report and recommendations, including proposed drafts of any necessary legislation or regulations, to the clerks of the senate and house of representatives, the joint committee on elder affairs and the house and senate committees on ways and means not more than 1 year following the effective date of this act.”.

The Senate budget included \$75 million in funding for nursing homes of which \$56.25 million would go for an add-on for direct care staffing costs, \$18.75 million for supplemental payments for quality improvement, and \$10 million in funding for rest home rate increases as well as language setting the asset limit at \$2,000 for eligibility for EAEDC for rest home residents, fixing a change that had been made in the FY22 budget that had eliminated the asset limit.

On May 26, 2022, the Senate passed the budget to be engrossed. It is now numbered [H4701](#).

The budget will now be considered by a Conference Committee consisting of three Senators (Sen. Rodrigues of Westport, Sen. Friedman of Arlington, and

	<p>Sen. O'Connor of Weymouth) and three Representatives (Rep. Michlewitz of Boston, Rep, Ferrante of Gloucester, and Rep. Smola of Sturbridge. https://malegislature.gov/Budget</p>												
<p>Nursing homes with admission freezes</p>	<p>Massachusetts Department of Public Health <i>Temporary admissions freeze</i> On November 6, the state announced that it would require certain high risk nursing homes and rest homes to temporarily stop all new admissions to protect the health and safety of residents and prevent further COVID-19 transmission. Stopping admissions enables homes to focus resources such as staff and PPE on the health and safety of its current residents and enables the home to stabilize before taking on new residents. Homes that meet certain criteria will be required to stop any new admissions until the Department of Public Health has determined that conditions have improved, and the facility is ready to safely care for new residents. The Commonwealth will work closely with homes during this time and provide supports as needed to ensure resident health and safety. There are a number of reasons why a facility may be required to stop admissions, and the situation in each facility is different. Some of the factors the state uses to make this decision include:</p> <ul style="list-style-type: none"> • Number of new COVID-19 cases within the facility • Staffing levels • Failure to report a lack of adequate PPE, supplies, or staff • Infection control survey results • Surveillance testing non-compliance <p>Facilities are required to notify residents' designated family members and/or representative when the facility is subject to an admissions freeze. In addition, a list of facilities that are currently required to stop new admissions and the reason for this admissions freeze will be updated on Friday afternoons, and as needed when the Department of Public of Health determines a facility can be removed from the list.</p> <p>Updated on June 22, 2022</p> <table border="1" data-bbox="500 1171 1515 1306"> <thead> <tr> <th>Name of Facility</th> <th>City/Town</th> <th>Date of Freeze</th> <th>Qualifying Factor</th> </tr> </thead> <tbody> <tr> <td>Oosterman's Melrose Rest Home</td> <td>Melrose</td> <td>12/18/21</td> <td>Noncompliance Testing</td> </tr> <tr> <td>Savoy Nursing and Rehab Center</td> <td>New Bedford</td> <td>4/19/22</td> <td>Infection control</td> </tr> </tbody> </table>	Name of Facility	City/Town	Date of Freeze	Qualifying Factor	Oosterman's Melrose Rest Home	Melrose	12/18/21	Noncompliance Testing	Savoy Nursing and Rehab Center	New Bedford	4/19/22	Infection control
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Savoy Nursing and Rehab Center	New Bedford	4/19/22	Infection control										
<p>List of Special Focus Facilities</p>	<p>Centers for Medicare and Medicaid Services <i>List of Special Focus Facilities and Candidates</i> https://tinyurl.com/SpecialFocusFacilityProgram Updated May 25, 2022 CMS has published a new list of Special Focus Facilities (SFF). SFFs are nursing homes with serious quality issues based on a calculation of deficiencies cited during inspections and the scope and severity level of those citations. CMS publicly discloses the names of the facilities chosen to participate in this program and candidate nursing homes. To be considered for the SFF program, a facility must have a history (at least 3 years) of serious quality issues. These nursing facilities generally have more deficiencies than the average facility, and more serious problems such as harm or injury to residents. Special Focus Facilities have more frequent surveys and are subject to progressive enforcement until it either graduates from the program or is terminated from Medicare and/or Medicaid.</p>												

	<p>This is important information for consumers – particularly as they consider a nursing home.</p> <p>What can advocates do with this information?</p> <ul style="list-style-type: none"> • Include the list of facilities in your area/state when providing information to consumers who are looking for a nursing home. Include an explanation of the SFF program and the candidate list. • Post the list on your program’s/organization’s website (along with the explanation noted above). • Encourage current residents and families to check the list to see if their facility is included. • Urge residents and families in a candidate facility to ask the administrator what is being done to improve care. • Suggest that resident and family councils invite the administrator to a council meeting to talk about what the facility is doing to improve care, ask for ongoing updates, and share any council concerns. • For long-term care ombudsmen representatives: Meet with the administrator to discuss what the facility is doing to address problems and share any resources that might be helpful. <p>Massachusetts facilities listed (updated April 27, 2022)</p> <p>Newly added to the listing</p> <ul style="list-style-type: none"> • None <p>Massachusetts facilities not improved</p> <ul style="list-style-type: none"> • Marlborough Hills Rehabilitation and Health Care Center, Marlborough https://tinyurl.com/MarlboroughHills <p>Massachusetts facilities which showed improvement</p> <ul style="list-style-type: none"> • Attleboro Healthcare, Attleboro https://tinyurl.com/AttleboroHealthcare <p>Massachusetts facilities which have graduated from the program</p> <ul style="list-style-type: none"> • None <p>Massachusetts facilities that are candidates for listing</p> <ul style="list-style-type: none"> • Hillcrest Commons Nursing and Rehabilitation Center, Pittsfield https://tinyurl.com/HillcrestCommons • Medway Country Manor Skilled Nursing and Rehabilitation https://tinyurl.com/MedwayManor • Parkway Health and Rehabilitation Center https://tinyurl.com/ParkwayHealthCenter • Plymouth Rehabilitation and Health Care Center (added in May) https://plymouthrehab.com/ • Revolution Charwell https://tinyurl.com/RevolutionCharwell • Tremont Health Care Center, Wareham (added in May) https://thetremontrehabcare.com/ • Vantage at South Hadley No website • Vero Health and Rehabilitation Center of Amesbury https://tinyurl.com/VeroAmesbury • Vero Health and Rehabilitation Center of Revere https://tinyurl.com/VeroRevere https://tinyurl.com/SpecialFocusFacilityProgram
<i>Nursing Home Inspect</i>	ProPublica

	<p>Nursing Home Inspect</p> <p>Data updated November 2021</p> <p>This app uses data from the U.S. Centers for Medicare and Medicaid Services. Fines are listed for the past three years if a home has made partial or full payment (fines under appeal are not included). Information on deficiencies comes from a home’s last three inspection cycles, or roughly three years in total. The number of COVID-19 cases is since May 8, 2020, when homes were required to begin reporting this information to the federal government (some homes may have included data on earlier cases). Massachusetts listing:</p> <p>https://projects.propublica.org/nursing-homes/state/MA</p> <p>Deficiencies By Severity in Massachusetts (What do the severity ratings mean?)</p> <table border="1"> <thead> <tr> <th># reported</th> <th>Deficiency Tag</th> </tr> </thead> <tbody> <tr> <td>233</td> <td>B</td> </tr> <tr> <td>70</td> <td>C</td> </tr> <tr> <td>6,739</td> <td>D</td> </tr> <tr> <td>1,754</td> <td>E</td> </tr> <tr> <td>452</td> <td>F</td> </tr> <tr> <td>517</td> <td>G</td> </tr> <tr> <td>23</td> <td>H</td> </tr> <tr> <td>59</td> <td>J</td> </tr> <tr> <td>22</td> <td>K</td> </tr> </tbody> </table>	# reported	Deficiency Tag	233	B	70	C	6,739	D	1,754	E	452	F	517	G	23	H	59	J	22	K
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<p>Nursing Home Compare</p>	<p>Centers for Medicare and Medicaid Services (CMS)</p> <p><i>Nursing Home Compare Website</i></p> <p>Beginning January 26, 2022, the Centers for Medicare and Medicaid Services (CMS) is posting new information on the that will help consumers have a better understanding of certain staffing information and concerns at facilities. This information will be posted for each facility and includes:</p> <ul style="list-style-type: none"> • Staff turnover: The percentage of nursing staff as well as the number of administrators who have stopped working at a nursing home over the past 12-month period. • Weekend staff: The level of weekend staffing for nurses and registered nurses at a nursing home over a three-month period. <p>Posting of this information was required as part of the Affordable Care Act, which was passed in 2010. In many facilities, staffing is lower on weekends, often meaning residents have to wait longer or may not receive all the care they need. High turnover means that staff are less likely to know the residents, recognize changes in condition, or implement preferred methods of providing care. All of this contributes to the quality-of-care residents receive and their quality of life.</p> <p>https://tinyurl.com/NursingHomeCompareWebsite</p>																				
<p>Long-Term Care Facilities Specific COVID-19 Data</p>	<p>Massachusetts Department of Public Health</p> <p><i>Long-Term Care Facilities Specific COVID-19 Data</i></p> <p><i>Coronavirus Disease 2019 (COVID-19) reports related to long-term care facilities in Massachusetts.</i></p> <p>Table of Contents</p> <ul style="list-style-type: none"> • COVID-19 Daily Dashboard • COVID-19 Weekly Public Health Report 																				

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DignityMA Call to Action	<ul style="list-style-type: none"> • The MA Senate released a report in response to COVID-19. Download the DignityMA Response to Reimagining the Future of MA. • Advocate for state bills that advance the Dignity Alliance Massachusetts' Mission and Goals – State Legislative Endorsements. • Support relevant bills in Washington – Federal Legislative Endorsements. • Join our Work Groups. • Learn to use and leverage Social Media at our workshops: Engaging Everyone: Creating Accessible, Powerful Social Media Content 																														
Access to Dignity Alliance social media	<p>Email: info@DignityAllianceMA.org Facebook: https://www.facebook.com/DignityAllianceMA/ Instagram: https://www.instagram.com/dignityalliance/ LinkedIn: https://www.linkedin.com/company/dignity-alliance-massachusetts Twitter: https://twitter.com/dignity_ma?s=21 Website: www.DignityAllianceMA.org</p>																														
Participation opportunities with Dignity Alliance Massachusetts Most workgroups meet bi-weekly via Zoom. Please contact workgroup lead for more information	<table border="1"> <thead> <tr> <th>Workgroup</th> <th>Workgroup lead</th> <th>Email</th> </tr> </thead> <tbody> <tr> <td>General Membership</td> <td>Bill Henning Paul Lanzikos</td> <td>bhenning@bostoncil.org paul.lanzikos@gmail.com</td> </tr> <tr> <td>Behavioral Health</td> <td>Frank Baskin</td> <td>baskinfrank19@gmail.com</td> </tr> <tr> <td>Communications</td> <td>Pricilla O'Reilly Samantha VanSchoick Lachlan Forrow</td> <td>prisoreilly@gmail.com svanschoick@cil.org lforrow@bidmc.harvard.edu</td> </tr> <tr> <td>Facilities (Nursing homes, rest homes, assisted living)</td> <td>Arlene Germain</td> <td>agermain@manhr.org</td> </tr> <tr> <td>Home and Community Based Services</td> <td>Meg Coffin</td> <td>mcoffin@centerlw.org</td> </tr> <tr> <td>Housing</td> <td>Shaya French</td> <td>sfrench@bostoncil.org</td> </tr> <tr> <td>Legislative</td> <td>Richard Moore</td> <td>rmoore8743@charter.net</td> </tr> <tr> <td>Legal Issues</td> <td>Clarence Richardson</td> <td>Clarence@massnaela.com</td> </tr> <tr> <td>Veteran Services</td> <td>James Lomastro</td> <td>jimlomastro@comcast.net</td> </tr> </tbody> </table>	Workgroup	Workgroup lead	Email	General Membership	Bill Henning Paul Lanzikos	bhenning@bostoncil.org paul.lanzikos@gmail.com	Behavioral Health	Frank Baskin	baskinfrank19@gmail.com	Communications	Pricilla O'Reilly Samantha VanSchoick Lachlan Forrow	prisoreilly@gmail.com svanschoick@cil.org lforrow@bidmc.harvard.edu	Facilities (Nursing homes, rest homes, assisted living)	Arlene Germain	agermain@manhr.org	Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org	Housing	Shaya French	sfrench@bostoncil.org	Legislative	Richard Moore	rmoore8743@charter.net	Legal Issues	Clarence Richardson	Clarence@massnaela.com	Veteran Services	James Lomastro	jimlomastro@comcast.net
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<i>The Dignity Digest</i>	<p>For a free weekly subscription to <i>The Dignity Digest</i>: https://dignityalliancema.org/contact/sign-up-for-emails/ Editor: Paul Lanzikos Primary contributor: Sandy Novack MailChimp Specialist: Sue Rorke</p>																														
Note of thanks	<p>Thanks to the contributors to this issue of <i>The Dignity Digest</i></p> <ul style="list-style-type: none"> • Charlie Carr • Judi Fonsh • Dale Mitchell • Dick Moore <p>Special thanks to Paul Spooner with the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of <i>The Dignity Digest</i>.</p>																														

	<i>If you have submissions for inclusion in <u>The Dignity Digest</u> or have questions or comments, please submit them to paul.lanzikos@gmail.com.</i>
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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 Dignity Digest" is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.

Previous issues of The Tuesday Digest and The Dignity Digest are available at: <https://dignityalliancema.org/dignity-digest/>

For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.