



Questions for Candidates for State Auditor

1. Most Massachusetts residents know someone who has needed long-term services or care due to issues related to aging or disabilities or experienced it themselves.

Has anyone close to you needed nursing home care, congregate living arrangements, or home and community-based services? What implications for public policy and regulatory enforcement do you draw from this experience?

2. Hundreds of millions of dollars of state and federal funds have been provided to Massachusetts nursing homes during the pandemic. There has been little to no analysis and accountability of the use of these funds. It is important to know if these expenditures were effective in order to direct future allocation decisions. It is equally essential to provide public assurance that the funding was used as intended.

As the state auditor, will you undertake a comprehensive public audit of the use of pandemic-related spending as an early priority?

3. The ownership of nursing homes is increasingly under the control of out-of-state, investor groups. The organizational structure has been segmented into many components, often under common ownership, e.g., a real estate entity, management company, therapy services, and more. This makes it difficult to determine who is controlling major staffing, operational and business decisions and who has responsibility and accountability. Consequently, it is critical to analyze how MassHealth funds are being used. Periodic, independent, comprehensive, and transparent public audits are necessary to assess how nursing homes operate and public funding is spent.

As the state auditor, will you undertake this type of audit on an ongoing basis? Would you support legislation to ensure transparency and accountability of nursing home ownership interests and control?

4. Under state law and federal requirements, the Massachusetts Department of Public Health (DPH) has the primary responsibility for ensuring the safety, well-being, and effectiveness of care for all nursing home residents including adherence to resident's rights. Over the past few years, DPH's performance has come under criticism in several state and federal studies. Additionally, nursing homes with recent state-approved changes of ownership experienced significant care giving failures. There also have been changes in DPH's key staffing. All put into question the adequacy and efficacy of nursing home oversight, licensure adherence, and quality of operations within the Department.

As the state auditor, what steps would you take to ensure that strong and comprehensive nursing home oversight and a thorough and transparent nursing home licensure process are vital responsibilities for the Department?

5. In recent years, there have been targeted MassHealth rate enhancements for nursing homes. Their efficacy has not been analyzed and reported publicly.

What can the state auditor do to ensure that current and future rate increases are effective and they accomplish intended goals?

6. In efforts to “rebalance” the provision of long-term services and care, Massachusetts has secured various Medicaid waivers from the federal government to expand eligibility for and availability of home and community-based alternatives to institutional care for older adults and persons with disabilities.

As the state auditor, what role do you have in analyzing the effectiveness of these waiver programs which have been implemented in Massachusetts?

7. The quality of care in nursing homes is directly correlated with the adequacy of staffing, namely certified nursing assistants (CNAs), registered nurses (RNs), and licensed practical nurses (LPNs). Yet the majority of MA nursing homes do not meet a newly established MA hourly standard of care. Strong oversight is necessary to ensure safe staffing levels to protect nursing home residents.

In your role as state auditor, what would be done to assure compliance with staffing requirements?

8. About one of four nursing home residents in Massachusetts is administered antipsychotic medications, one of the highest nursing home antipsychotic usage rates in the country. Massachusetts requires informed written consent of a patient or a patient’s representative’s representative prior to the administration of antipsychotics and other psychotropics to nursing home residents. Additionally, about 10% of Massachusetts nursing home residents have a diagnosis of schizophrenia, many of recent determination. This is a rate ten times greater than that of the general population.

As state auditor, what can be done to reduce the usage of antipsychotic medications as well as ensure meaningful compliance with existing requirements?

9. The Massachusetts Inspector General (IG) recently issued a report about the Holyoke Soldiers’ Home with a set of recommendations. The report noted that the Executive Office of Health and Human Services (EOHHS) is responsible for approximately one-third of the state’s annual budget. Among a number of observations, the IG recommended that EOHHS improve its oversight of each EOHHS subsidiary agency by ensuring direct reporting structures and clear chains of command and regularly evaluating the performance of agency heads through mandatory, structured, independent performance evaluations.

Do you concur with the Inspector General’s recommendations? Why or why not?

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Dignity Alliance Massachusetts is a state-wide, grass-roots coalition of aging and disability service and advocacy organizations and supporters dedicated to systemic transformation to ensure the dignity of older adults, people with disabilities, and caregivers. We are committed to advancing new ways of providing long-term services, support, living options, and care while respecting choice and self-determination. Dignity Alliance works through education, legislation, regulatory reform, and legal strategies to realize this vision throughout the Commonwealth.