



The Dignity Digest

Issue # 174

February 13, 2024

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

***May require registration before accessing article.**

DignityMA Zoom Sessions

Dignity Alliance Massachusetts participants meet via Zoom every other Tuesday at 2:00 p.m. Sessions are open to all. To receive session notices with agenda and Zoom links, please send a request via info@DignityAllianceMA.org.

Quotes

"Critics of the current policy argue that estate recovery can reinforce cycles of poverty and prevent families from creating generational wealth, since the process often forces the sale of the deceased member's home to pay off Medicaid-related debt. . . While MassHealth has made reforms in recent years to reduce the burden of estate recovery on impacted members and families, more can be done."

From the report, [Holding on to Home: A Primer on MassHealth Estate Recovery and Options for Reducing its Impact on Members and Families, Report Calls For MassHealth Estate Recovery Reforms](#), State House News Service, February 7, 2024

"Something doesn't add up, and it's well past time for the Legislature to be asking questions and taking action. Rather than allowing millions of taxpayer dollars to continue to pay for temporary workers who don't know the residents they are serving, the Legislature should be insisting that these dollars be used to increase the pay and benefits for permanent staff members."

John Hale, a consultant and advocate for Iowa seniors, [Bill would cap payments from nursing homes and hospitals to temp agencies](#) (Iowa Capital Dispatch, February 6, 2024)

*"When it comes to disability, people think, 'Ooh, that's scary' or 'I'm going to say the wrong thing, so I better not even go near that...' So, I just say, you have to **start the journey and keep learning**...It's not about just getting it right. It's actually about messing up, too."*

Because if you're not making mistakes, how are you moving forward?"

Sarah Napoli, Learning Services Director, [New Road to Disability Inclusion stories are now available](#) (The Disability & Philanthropy Forum, February 8, 2024)

"A hospital is no place to be sick."

Samuel Goldwyn, [Remote Patient Monitoring: A Leading Anchor of the 'Hospital-at-Home' Paradigm](#) (The American Journal of Medicine, October 23, 2023)

"We leave a lot to the whims of the market and allow private players to dictate access to and quality of health care, and the case of Help at Home is a great example of that. At the end of the day, it's about money, and if we don't have guardrails in our policies to prevent these pullouts, they're going to keep happening."

Mary Bugbee, senior research and campaign coordinator for health care at the Private Equity Stakeholder Project, a research and advocacy group, [Private Equity's Growing Footprint In Home Health Care Draws Scrutiny](#) (Disability Scoop, February 8, 2024)

"I think discrimination as a wide is a major problem, and that our fair housing laws are there to protect individuals and individuals in protected classes, but that oftentimes those laws get ignored."

Jessica Drew, senior attorney with the Greater Boston Legal Services, [Massachusetts couple facing threat of eviction from mobile home park over handicapped ramp](#), WCVB, February 10, 2024 (updated)

"People in blue zones aren't consciously trying to live a long time; instead, their longevity is a product of their environment."

Dan Buettner, ["Blue Zones" Author Dan Buettner Shares the Secrets to a Long and Healthy Life](#) (Brain & Life, February / March 2024)

"He was just so dedicated to finding someone. And he actually met his girlfriend on Dateability. They happen to live in the same city. She's also on the autism spectrum and they're at the same place on the spectrum, so they're just such a good match."

Alexa Child, co-developer of Dateability, [Meet the Sisters Who Co-Founded a Dating App for People With Disabilities](#), **Nice News**, February 10, 2024

“The COVID pandemic resulted in some of the most acute-care issues in nursing homes and congregate care settings. That’s why we are focusing on strengthening industry standards.”

Governor Ned Lamont (CT), [Governor aims to post more nursing home data, pay providers incentives](#), **McKnights Long-Term Care News**, February 12, 2024

“We are not in a financial position to commit to financing anything to bail these people out [Steward Health System].”

House Speaker Ron Mariano, [Top House Dems Rule Out Steward Bailout](#) (**State House News**, February 8, 2024)

“There are no happy tomorrows in this situation.”

Joseph Drolet, 79, husband of Rebecca, 71 who was in a nursing home and is now in a hospice, [When a Spouse Goes to the Nursing Home](#), **New York Times (free access)**, February 3, 2024



“Too often, institutionalization is thought of as the end of family caregiving. It’s not.” In fact, shouldering the new tasks of overseeing care, advocating on behalf of the resident and monitoring the staff means that “in some ways, there’s a chance of substituting one set of challenges for another.”

Dr. Joseph Gaugler, a gerontologist at the University of Minnesota, [When a Spouse Goes to the Nursing Home](#), **New York Times (free access)**, February 3, 2024

“The prescription drug reforms in this law mark the most substantial changes to the Medicare D program since the drug benefit launched in 2006.”

Tricia Neuman, senior vice president of KFF, [If You’re on Medicare, You Could Save Money on Drugs This Year](#), **New York Times (free access)**, February 4, 2024

“I hate the notion of anybody ripping off Medicare. So many of us rely on it. It’s just plain ethically wrong.”

	<p>Linda Hennis, whose Medicare account was fraudulently charged for \$12,000 worth of catheters, Staggering Rise in Catheter Bills Suggests Medicare Scam, *New York Times, February 9, 2024</p> <p><i>“Each person was trapped in a world of their own fantasy. I learned validation from the people with whom I worked. I learned that they have the wisdom to survive by returning to the past.”</i></p> <p>Naomi, Feil, Naomi Feil, Who Promoted Empathy as a Response to Dementia, Dies at 91 (*New York Times, January 24, 2024)</p>
<p>Older Americans Month</p>  	<p>Administration on Community Living Older Americans Month 2024</p> <p>Every May, the Administration for Community Living leads the nation’s observance of Older Americans Month (OAM). The 2024 theme is Powered by Connection, which recognizes the profound impact that meaningful relationships and social connections have on our health and well-being. We will explore the vital role that connectedness plays in supporting independence and aging in place by combatting isolation, loneliness, and other issues.</p> <p>Join us in promoting the benefits of connecting with others. Here are some ways you can participate.</p> <ul style="list-style-type: none"> • Share facts about the mental, physical, and emotional health benefits of social connection and how it contributes to overall well-being. • Promote resources that help older adults engage, like community events, social clubs, and volunteer opportunities. • Connect older adults with local services, such as transportation, which can help them overcome obstacles to achieving or maintaining meaningful relationships. • Encourage partners to host a connection-centric event or program focused on older adult mentors to youth, peer-to-peer support, or similar efforts. • Challenge professional and personal networks to prioritize meaningful social connections and share the benefits. • Inspire older adults to share what connection means to them on social media using the hashtag #PoweredByConnection.
<p>Recruitment</p>	<p>Massachusetts Executive Office of Elder Affairs Assistant Secretary of Community Programs</p> <p>The Assistant Secretary of Community Programs reports to the Secretary of EOEA and is in charge of managing the daily operations of the Agency's "Front Door" for older people and caregivers. This "Front Door" includes MassOptions, EOEA's call center and the Community Care Ombudsman, who facilitates resolution of complaints about home-based or other services for older adults. The Assistant Secretary is also responsible for managing a \$4.4M dollar contract with the Massachusetts Council on Aging (MCOA) and our relationships with the network of 350 Councils on Aging (COA), including the formula and service incentive grants. This role will serve as liaison to federal grants officers as well as assisting with grant management. In addition, the role will be responsible</p>

	<p>for spurring innovation, identifying, and scaling best practices for the COA network and fostering improved connections with regional Aging Services Access Points (ASAPS).</p> <p>The Assistant Secretary of Community Programs serves as the strategic and operational lead for the \$55 million portfolio of state and federally-funded programs delivered in community settings. The programs in the Assistant Secretary's portfolio are the State Health Insurance Needs for Everyone (SHINE), which provides unbiased health insurance counseling to 100,000 Medicare-eligible people every year; Prescription Advantage, a payer of last resort for medications; and Options Counseling to help individuals at risk for nursing home admission consider home-based options. Most community programs rely on volunteers, and the Assistant Secretary is expected to develop and operationalize a strategy for the continued recruiting, training, and engagement of volunteers supporting EOEA programs.</p> <p><u>Duties and Responsibilities (these duties are a general summary and not all inclusive):</u></p> <p>The Assistant Secretary of Community Programs is directly responsible for several key initiatives, including, but not limited to:</p> <ul style="list-style-type: none"> • Lead, mentor, and manage Community Programs staff to ensure equitable access to all Community Programs, consistent quality in execution across all regions of the Commonwealth, and efficient and effective use of public resources. This includes: <ul style="list-style-type: none"> ○ Manage statewide programs including Information and Referral (I&R) ○ Community Care Ombudsman (CCO) ○ Aging and Disability Resource Consortia (ADRC) ○ Option Counseling (OC) ○ Serving the Health Insurance Needs of Everyone (SHINE) ○ Councils on Aging (COA) ○ Nutrition Program serving 1.6M older adults and people with disabilities. • Oversee intergovernmental affairs and emergency management operations. Identify opportunities for enhancing existing or building new tools to support older people and caregivers as needs change over the life course through Community Programs. • Serve as a member of EOEA's executive team by: <ul style="list-style-type: none"> ○ Collaborating with other executive team members regarding the broader work of the Agency ○ Representing EOEA in cross-agency work ○ Representing EOEA on Commissions and Councils as assignee ○ Representing the Secretary of EOEA at external meetings and events • Stay abreast of changes in state and federal policies affecting populations served by Community Programs
<p>Transitions</p>	<p><u>The Arc</u> <i>Maura Sullivan</i></p> <p>Maura Sullivan has been named deputy executive director of The Arc. She previously served as senior director of government affairs and health policy since 2011.</p>

<p>Anniversary Celebration</p>	<p>Boston Center for Independent Living <u>“BCIL 50 Years In: Triumphs, Lessons and What’s Next for Independent Living,”</u> Thursday, May 16, 2024, 1:00 to 4:00 p.m. Virtual Session</p> <p>2024 marks a major milestone for BCIL: They are celebrating our 50th Anniversary. As one of the first Independent Living Centers in the country, BCIL plays a transformative role in creating and advocating for equal access to health care, affordable housing, accessible transportation, job and educational opportunities, and ADA compliance for residents of Greater Boston and beyond. As they look ahead, this work remains as critical as ever and demands that they imbue every effort with a commitment to disability rights as a social justice issue.</p> <p>To amplify this momentous year with reflection, celebration, and action, they are hosting a virtual event, “BCIL 50 Years In: Triumphs, Lessons and What’s Next for Independent Living,” on May 16, 2024, from 1:00 pm to 4:00 pm ET.</p> <p>Speakers will reflect on the independent living movement nationwide and here in Boston exploring the future we are creating together. This event will include:</p> <ul style="list-style-type: none"> • Facilitator Dr. Lisa Iezzoni, disability rights advocate, Harvard Medical School professor, and BCIL Board Member, Boston. • Keynote speaker Maria Town, CEO of the American Association of People with Disabilities, Washington, DC. • Panelist Karen Tamley, President and CEO of Access Living, Chicago. • Panelist Alex Green, Advocate/Scholar, Harvard Kennedy School, Boston. • Panelist Dr. Anjali Forber-Pratt, Director of the National Institute on Disability, Independent Living and Rehabilitation Research, Washington, DC. <p>Additionally, they will have a conversation with several disability activists, ages 24-35, on where they believe IL must go. CART and ASL will be available. Register at https://bit.ly/BCIL50yrsIL</p>
<p>Older Adult Lobby Day Tuesday, February 27, 2024 11:00 a.m. to 2:00 p.m. Great Hall, State House Learn more and register here!</p>	<p>Older Adult Lobby Day Learn more and register here!</p> <p>Advocate for critical supports to help older adults and people with disabilities live healthy lives in the community</p> <p>Older adults and people with disabilities want to remain safely in their homes as they age. Many state programs and independent organizations exist to help people remain connected with friends, families, and communities while avoiding costly institutional care, but these programs need legislative commitment and strong funding. Please join us at the Statehouse to urge your legislators to fund and support quality, effective community-based services for older adults!</p> <p>Featured Speakers: Senator Patricia D. Jehlen Representative Thomas M. Stanley Chairs, Joint Committee on Elder Affairs</p> <p>Older Adult Lobby Day sponsors!</p>

	<p>The Older Adult Behavioral Health Network Massachusetts Association for Mental Health (MAMH) AARP Massachusetts Mass Home Care Dignity Alliance MA MA Senior Action Massachusetts Councils on Aging Massachusetts Guardianship Policy Institute Alzheimer's Association Action for Boston Community Development Learn more and register here!</p> <p>Box lunches are available courtesy of Mass Home Care, AARP, and Massachusetts Association of Councils on Aging. To request a box lunch: https://forms.gle/PVTFkUox5yfXorMY6</p>
<p>Legislative Advocacy</p>	<p>The Arc The 46th Annual Legislative Reception Great Hall, Massachusetts State House Wednesday, March 6, 2024 Check-in: 10:00 AM Program: 10:30 – 11:30 AM</p> <p>Theme: “Reaffirming Our Commitment to Those in Need” Honorees:</p> <ul style="list-style-type: none"> • Massachusetts Developmental Disabilities Council Legislator of the Year: Senator Jo Comerford (Hampshire, Franklin, and Worcester District) • The Arc of Massachusetts Legislator of the Year: Representative John Lawn (10th Middlesex District) <p>Registration Required</p>
<p>Guide to news items in this week’s <i>Dignity Digest</i></p>	<p>Nursing Homes When a Spouse Goes to the Nursing Home (New York Times (free access), February 3, 2024)</p> <p>Hospital at Home Remote Patient Monitoring: A Leading Anchor of the 'Hospital-at-Home' Paradigm (The American Journal of Medicine, October 23, 2023)</p> <p>Substance Use Eight Opportunities to Use the Law to Address Social Determinants of Health (Bill of Health, February 6, 2024)</p> <p>Covid / Long Covid / RSV Supreme Court to weigh whether Covid misinformation is protected speech (STAT News, February 6, 2024)</p> <p>Alzheimer’s Disease / Dementia The Financial Strain of Dementia Care: A Comprehensive Analysis (Medriva, February 11, 2024) Naomi Feil, Who Promoted Empathy as a Response to Dementia, Dies at 91 (*New York Times, January 24, 2024)</p> <p>Private Equity Private Equity’s Growing Footprint In Home Health Care Draws Scrutiny (Disability Scoop, February 8, 2024) Top House Dems Rule Out Steward Bailout (State House News, February 8, 2024)</p>

[Private Equity in Health Care: Trends, Impact and Policy](#)
(Massachusetts Health Policy Commission (PowerPoint Presentation, December 13, 2023)

[The Deadly Combination of Private Equity and Nursing Homes during a Pandemic](#) **(Americans for Financial Reform Education Fund, August 2020)**

Medicare

[Staggering Rise in Catheter Bills Suggests Medicare Scam](#) **(*New York Times, February 9, 2024)**

[If You're on Medicare, You Could Save Money on Drugs This Year](#)
(New York Times (free access), February 4, 2024)

Medicaid

[Report Calls For MassHealth Estate Recovery Reforms](#), **State House News Service, February 7, 2024**

[Holding on to Home: A Primer on MassHealth Estate Recovery](#)
(Massachusetts Blue Cross Blue Shield Foundation, February 7, 2024)

Older Americans Act

[Final Rule to Update Regulations for Older Americans Act Programs](#)
(Administration on Community Living, February 6, 2024)

Disability Topics

[Meet the Sisters Who Co-Founded a Dating App for People With Disabilities](#) **(Nice News, February 10, 2024)**

[Massachusetts couple facing threat of eviction from mobile home park over handicapped ramp](#) **(WCVB, February 10, 2024 (updated))**

[Audio describers work toward more emotional and diverse accessibility tools](#) **(The World (NPR) (audio report), February 9, 2024)**

[New Road to Disability Inclusion stories are now available](#) **(The Disability & Philanthropy Forum, February 8, 2024)**

Aging Topics

[People on this island in Italy live to 100—here's a look at their diet for longevity](#) **CNBC, February 2, 2024)**

Longevity

[We asked. You answered. Here are your secrets to healthy aging](#)
(Shots (NPR), February 10, 2024)

["Blue Zones" Author Dan Buettner Shares the Secrets to a Long and Healthy Life](#) **(Brain & Life, February / March 2024)**

[People on this island in Italy live to 100—here's a look at their diet for longevity](#) **(CNBC, February 2, 2024)**

Office of Attorney General

[AG Campbell Reaches \\$1.6M Settlement with North Dartmouth Ambulance Companies to Resolve False Billing Allegations](#) **(Office of the Attorney General, February 6, 2024)**

Emergency Preparedness

[How to Evacuate With Pets](#) **(*New York Times, September 26, 2022)**

From Other States

[Governor aims to post more nursing home data, pay providers incentives](#) **(McKnights Long-Term Care News, February 12, 2024)**

[Bill would cap payments from nursing homes and hospitals to temp agencies](#) **(Iowa Capital Dispatch, February 6, 2024)**

Webinars and Other
Online Sessions

1. REV UP Massachusetts and Disability Law Center

Wednesday, February 14, 2024, 1:00 p.m.

[Polling Place Surveys – A Training Session](#)

A training session for volunteers interested in learning about how to survey their polling places during the upcoming election. This training is free. Participants will learn how to identify accessibility issues at polling sites and how to report issues using the REV UP survey tool.

[Registration](#)

2. KFF Health Wonk Shop

Thursday, February 22, 2024, 12:00 p.m.

[Prior Authorization in Health Insurance: A Needed Tool to Contain Costs or an Excessive Barrier to Needed Care?](#)

Nearly 1 in 5 consumers with health insurance say their insurer delayed or denied care in the past year due to its requirements for prior authorization, a process through which insurers can require patients to obtain approval in advance before they will agree to cover specific services.

Insurers point to prior authorization as a tool to limit unnecessary and ineffective care, thereby reducing costs. However, the practice is also drawing increased scrutiny amid concerns that it creates unreasonable barriers to patients getting needed care and generates excessive paperwork burdens on doctors and other providers. Last month, federal regulators finalized new rules to govern how insurers use prior authorization in Medicare Advantage, Medicaid, the Children's Health Insurance Program, and the Affordable Care Act's federal Marketplace plans, while lawmakers are weighing potential broader legislation.

A panel of four experts will join Larry Levitt, KFF's executive vice president for health policy, for a 45-minute discussion addressing the future of prior authorization requirements in health care. The panel will discuss why insurers use prior authorization, its impact on patients and providers, and how the new regulations may change current practices. They will also examine the potential for further regulatory or legislative actions to address ongoing concerns.

Moderator

- [Larry Levitt](#), Executive Vice President for Health Policy, KFF

Panelists

- [Troyen Brennan](#), MD, Adjunct Professor of Health Policy and Management, Harvard T.H. Chan School of Public Health, and a former executive at CVS Caremark and Aetna
- [Fumiko Chino](#), MD, Radiation Oncologist, Memorial Sloan Kettering Cancer Center
- [Anna Schwamlein Howard](#), Principal, Policy Development, American Cancer Society Cancer Action Network
- [Kaye Pestaina](#), Vice President and Director of the Program on Patient and Consumer Protection, KFF

[RSVP](#)

3. The Green House Project / Pioneer Network

Thursday, February 22, 2024, 2:00 p.m.

[Navigating the Future of Non-Profit Nursing Homes](#)

The data is stark: Faced with financial pressures and ever-changing regulatory oversight, non-profit organizations are increasingly exiting the nursing home space in favor of assisted living, memory care, and other less medically and operationally complex services.

	<p>But what does that mean for elders, families, and regulators who often look to non-profit organizations as superior, mission-driven care options? On Thursday, February 22 at 2 p.m. ET, join experts from Ziegler for a big-picture overview of the challenges and opportunities that non-profit providers face when considering the future of their nursing home operations — and learn why one provider in Rhode Island decided to both downsize and maintain its nursing home beds.</p> <p>4. Bipartisan Policy Center Wednesday, February 28, 2024, 2:00 to 3:00 p.m. BPC Virtual Forum: Mayors and Experts on Ending Homelessness Cities across the country are grappling with a growing homelessness crisis, exacerbated by the lack of affordable housing supply, the gradual withdrawal of pandemic-era supports, and challenges in addressing mental illness and substance use disorders. Local officials are at the forefront of responding to these intertwined issues. In this virtual forum, BPC will convene mayors and homelessness policy experts to engage in a candid dialogue about the scale of the problem nationwide, share insights into innovative policy approaches, and discuss how the federal government can be an effective partner to cities working to prevent and end homelessness.</p> <p>SPEAKERS</p> <ul style="list-style-type: none"> • Karen Bass Mayor of Los Angeles • Rosanne Haggerty President, Community Solutions • Annise Parker Former Mayor of Houston • Moderated by: • Henry Cisneros BPC Board Chair; Former Secretary, Department of Housing and Urban Development • Additional speakers to be announced
Recorded webinar	<p>5. Gray Panthers of NYC What Living as a Resident Can Teach Long-Term Care Staff January 30, 2024 Leslie Pedtke, administrator of a facility, invented a program where young CNAs volunteered to live as residents (e.g., blind, wheelchair-dependent, quarantined) for up to twelve days. The program was so successful in developing empathy that Pedtke required all her new employees to live with a resident for 24 hours</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>
Nursing Homes	<p>6. The Consumer Voice Related Party Transactions and CMS Role in Regulation February 6, 2024 (updated) What are related parties? How are related party transactions reported? CMS’s authority to regulate related party transactions</p> <p>7. New York Times (free access) February 3, 2024 When a Spouse Goes to the Nursing Home By Paula Span</p>

	<p>Even as the signals of approaching dementia became impossible to ignore, Joseph Drolet dreaded the prospect of moving his partner into a long-term care facility.</p> <p>Mr. Drolet, 79, and his beloved Rebecca, 71, both retired lawyers and prosecutors in Atlanta, had been a couple for 33 years, though they retained separate homes. In 2019, she began getting lost while driving, mishandling her finances and struggling with the television remote. The diagnosis — Alzheimer’s disease — came in 2021.</p> <p>Over time, Mr. Drolet moved Rebecca (whose surname he asked to withhold to protect her privacy) into his home. But serving as her round-the-clock caregiver, as she needed help with every daily task, became exhausting and untenable. Rebecca began wandering their neighborhood and “getting dressed in the middle of the night, preparing for trips that weren’t happening,” Mr. Drolet recalled.</p> <p>Last year, when he determined that Rebecca no longer really knew where she was, he felt it was time to move her to a memory-care residence in a nearby assisted living facility.</p> <p>Putting a spouse or partner in a long-term care facility, for any reason, represents a fraught transition for a couple, one that can mean release from the sometimes crushing burden of caregiving, but can also be accompanied by lingering depression, anxiety and guilt, studies have shown. . .</p> <p>Yet nursing-home placement poses particular challenges for spouses compared with other family caregivers. An early and often-cited 2004 study of long-term care for patients with Alzheimer’s disease found that spouses were more often depressed before placement than other family members and more likely to be depressed and anxious afterward. . .</p> <p>Adult children and siblings are less likely to have shared a home with the patient for decades and to experience its emptiness after the person leaves. However attentive the family members may be, if they also have jobs and families of their own, “we don’t expect them to do as much,” Dr. Schulz added. Only spouses took that vow about sickness and health, until parted by death.</p>
Homelessness	<p>8. Harvard Joint Center for Housing Studies February 12, 2024 Record Homelessness Amid Ongoing Affordability Crisis By Riordan Frost</p> <p>Homelessness spiked 12 percent (71,000 people) in 2023, with more than 650,000 people unhoused, the highest number recorded since data collection began in 2007. The US Department of Housing and Urban Development’s point-in-time estimates show an increase in nearly every state and also for both sheltered and unsheltered homelessness. The growing number of unhoused people is driven in part by the expiration of many pandemic-related relief measures and an influx of migrants. However, the most fundamental driver of the nation’s growing homelessness is the ongoing housing affordability crisis that has left a record number of renters cost-burdened, spending more than 30 percent of income on housing and utilities, as detailed in our latest report, America’s Rental Housing 2024.</p> <p>Pandemic-Era Relief Measures Are Expiring To help slow the spread of COVID-19 after the onset of the pandemic, homelessness service providers across the country restricted their shelter</p>

	<p>capacity and the level of sheltered homelessness fell as a result, from 355,000 people in January 2020 to 326,000 in January 2021. As many of these de-congregating measures ended, sheltered homelessness grew to 349,000 people in 2022 and further to 396,000 in 2023. Of course, this restoration of shelter capacity is not the only driver of rising homelessness since the current level of sheltered homelessness is higher than before the pandemic, and we did not see any complementary decrease in unsheltered homelessness. . .</p> <p>Policies encouraging the development of more affordable housing are key to easing both the housing and homelessness crises. However, shorter-term action is also needed to aid the record number of people struggling with homelessness—a number which may have grown since this last count in January 2023.</p>
Hospital at Home	<p>9. The American Journal of Medicine October 23, 2023 Remote Patient Monitoring: A Leading Anchor of the 'Hospital-at-Home' Paradigm Remote physiologic monitoring (RPM) of a patient's health status is rapidly becoming a leading tool of the “Hospital-at-Home” chronic care paradigm. .</p> <p>Moreover, every effort should be made to examine the impact of RPM and RTM (Remote Therapeutic Monitoring) on the promotion of patient safety as well as on the enhancement of patient satisfaction. After all, the very premise of RPM and RTM embraces the outlook that hospitalization is best viewed as a last resort. Stated differently, a substantial proportion of inpatients can now be cared for in an outpatient context assuming that adequate provider–patient communication can be maintained. A quote ascribed to Samuel Goldwyn says it all: “A hospital is no place to be sick.”</p>
Substance Use	<p>10. Bill of Health February 6, 2024 Eight Opportunities to Use the Law to Address Social Determinants of Health Addressing the opioid crisis cannot stop at providing better access to treatment for opioid use disorder (OUD), expanding and enhancing harm reduction efforts, and reimagining the role of law enforcement, as explored previously in this blog series. The response must go further to make treatment and harm reduction more effective, by acknowledging the opioid epidemic as a reflection of the conditions of the whole society, identifying those conditions, and addressing them head-on. A whole-person response to OUD and other substance use disorders needs a well-coordinated whole-of-government response to address myriad societal issues that are critical to effective drug treatment, including, but not limited to, housing, education, economic development, and tax policy. . .</p> <p>[W]e identified and published 84 opportunities for US drug policy reform at the federal, state, and local levels across four domains: drug policing, harm reduction, social determinants of health, and health care.</p>
Covid / Long Covid / RSV	<p>11. STAT News February 6, 2024 Supreme Court to weigh whether Covid misinformation is protected speech By Sarah Owerhohle</p>

	<p>As social media sites were flooded with misleading posts about vaccine safety, mask effectiveness, Covid-19's origins and federal shutdowns at the height of the pandemic, Biden officials urged platforms to pull down posts, delete accounts, and amplify correct information.</p> <p>Now the Supreme Court could decide whether the government violated Americans' First Amendment rights with those actions — and dictate a new era for what role, if any, officials can play in combating misinformation on social media.</p> <p>The Supreme Court is set to hear arguments next month in a case that could have sweeping ramifications for federal health agencies' communications in particular. Murthy v. Missouri alleges that federal officials coerced social media and search giants like Facebook, Twitter, YouTube, and Google to remove or downgrade posts that questioned vaccine safety, Covid's origins, or shutdown measures. Biden lawyers argue that officials made requests but never forced companies. . .</p> <p>Even if the court rejects broader controls on federal communications with social media sites, the case could have extensive implications for effective messaging from federal health officials, legal experts say.</p>
Alzheimer's Disease / Dementia	<p>12. Medriva February 11, 2024 The Financial Strain of Dementia Care: A Comprehensive Analysis By Anthony Raphael</p> <p>A recent study has shed light on the significant financial burden that individuals with dementia, and their families, endure. The research analyzed data from over 4,500 adults aged 70 and older and found that the median adult with dementia in residential facilities spent a staggering 97% of their monthly income on long-term care. Moreover, individuals in nursing homes spent nearly 83% of their income on these services. This new evidence highlights the financial strain of dementia care and underscores the urgency for increased funding for home- and community-based care to reduce this burden.</p> <p>13. *New York Times January 24, 2024 Naomi Feil, Who Promoted Empathy as a Response to Dementia, Dies at 91 By Sam Roberts</p> <p>Naomi Feil was only 8 years old when she moved into what was then known as a home for the aged, where her parents worked. Living there until she left for college, she learned firsthand, by trial and error, how to comfort and communicate with older adults.</p> <p>When she died at 91 on Dec. 24 at her home in Jasper, Ore., she had devoted her entire career to finding ways to comfort disoriented older people and their caregivers. . .</p> <p>As she refined her methods, she founded the nonprofit Validation Training Institute in 1982. She directed it until 2014 when she was succeeded by Ms. de Klerk-Rubin, her daughter.</p> <p>"She was a pioneer in this area of person-centered dementia care," Sam Fazio, the senior director of quality care and psychosocial research at the Alzheimer's Association, said in a phone interview. "What's key in connecting with a person with cognitive impairment is to meet them in their reality instead of expecting them to meet us in ours."</p>
Private Equity	14. Disability Scoop

February 8, 2024

[Private Equity's Growing Footprint In Home Health Care Draws Scrutiny](#)

By Anna Claire Vollers

Help at Home employed nearly 800 caregivers scattered across every county in Alabama, helping 1,100 older clients with disabilities with activities such as bathing, housework and meal preparation.

And then suddenly, it was gone.

Alabama's largest provider of home care services said it abruptly left the state last fall because the state's "reimbursement and regulatory environment" made it difficult to recruit and retain enough workers, according to Kristen Trenaman, the company's vice president of public relations. Its departure sent state agencies scrambling to find new caregivers for the people who relied on it. . .

Help at Home, owned by private equity firms Centerbridge Partners and Vistria Group, continues to provide in-home and community-based care in a [dozen other states](#), with 49,000 caregivers and 66,000 monthly clients. It's been aggressively expanding outside Alabama, acquiring home care companies and posting thousands of job openings on its website. Neither firm responded to Stateline's request for comment.

Proponents of private equity investment in health care say the infusion of capital helps smaller companies expand into new markets, streamline their costs and pay for new technology.

But critics point to Help at Home's departure from Alabama as a cautionary tale for what can happen when states that spend little on health care rely on private equity-owned providers to care for their most vulnerable residents.

Private equity-owned health care companies are focused on generating robust profits for investors. Typically, they want to cut costs, increase cash flow, use debt to fund expansion and then sell within a few years for maximum profit. In health care, critics say that business model can diminish the quality of care, increase costs and narrow access for patients — particularly in more lightly regulated industries such as home care and hospice care. . .

Private equity firms pool investments from pension funds, endowments, sovereign wealth funds and wealthy individuals to buy controlling stakes in companies. They've [drawn increasing legislative scrutiny and public outrage](#) as they've grown their footprint in U.S. health care companies. And while much of that negative attention has focused on [hospitals](#) and [nursing homes](#), many private equity firms also have turned their sights to the lucrative and less regulated home health care industry. . .

Private equity firms typically aim to acquire a company and boost profits before selling it within five to seven years. They often purchase companies with borrowed money, using the company's assets as collateral for the loans.

Help at Home's private equity owners, Centerbridge Partners and Vistria Group, partially funded their 2020 purchase of the company by [loading it with \\$745 million in debt](#). Now, Help at Home — and not its private equity owners — must pay off the debt and interest, which can leave it less able to turn a healthy profit in a state such as Alabama with low Medicaid reimbursement rates.

Piling debt onto a company to finance additional purchases or to pay investors a dividend is a private equity hallmark. The industry tends to use

debt more recklessly than publicly traded companies that must be more transparent about their financials, said Bugbee, of the Private Equity Stakeholder Project. Plus, there's an attitude of high risk, high reward.

Potential for regulation

Since private equity functions similarly across the health care sphere, state and federal laws that were spurred by [private equity's involvement in hospital systems](#) and other health care sectors also could work for home health agencies.

Last year, [24 states](#) enacted laws related to health system consolidation and competition, according to the National Conference of State Legislatures, an advisory think tank for lawmakers. . .

Improving transparency, requiring certain health care staff-to-patient ratios and boosting wages for health care workers can also help protect patients and communities.

This year California will begin enforcing a 2022 law that requires health care providers to [notify the state of major financial transactions](#), including mergers and acquisitions. In January, New York [increased minimum wages for home health care workers](#) to \$17.55-\$18.55, depending on the region. Those wages will continue to rise annually through 2026.

15. State House News

February 8, 2024

[Top House Dems Rule Out Steward Bailout](#)

By Alison Kuznitz

After Huddle, Mariano and Michlewitz Cite State's Changing Fiscal Circumstances

Angered over the serious financial challenges at Steward Health Care that could jeopardize the future of safety net hospitals in eastern Massachusetts, top House Democrats insisted Thursday they will not bail out the company, which last week said it doesn't plan to shutter any facilities after securing a new funding stream.

Criticizing past financing deals struck by Steward CEO Ralph de la Torre, House Speaker Ron Mariano and Ways and Means Chairman Rep. Aaron Michlewitz sounded dubious as they discussed the [bridge funding deal](#) touted by a Steward executive to stave off the feared hospital closures for now. Steward operates nine hospitals in Massachusetts, serving tens of thousands of patients including many low-income residents who have public health insurance coverage.

16. Massachusetts Health Policy Commission (PowerPoint Presentation)

December 13, 2023

[Private Equity in Health Care: Trends, Impact and Policy](#)

By Zirui Song, MD, PhD, Havard Medical School

17. Americans for Financial Reform Education Fund

August 2020

[The Deadly Combination of Private Equity and Nursing Homes during a Pandemic](#)

Executive summary

Coronavirus has ripped through U.S. nursing homes, leaving a path of infection and death that has killed more than 50,000 residents. The pandemic has proved especially deadly in facilities owned or backed by private equity firms. Americans for Financial Reform Education Fund found that private equity owned and backed nursing home chains have higher resident infection and death rates and

a larger share of Coronavirus cases and deaths compared to their share of residents relative to for-profit, non-profit, and public facilities in New Jersey. Nationwide, about 40 percent of all Coronavirus deaths have been at nursing homes. By early July, nearly 30,300 New Jersey nursing home residents and staff have been infected and over 5,500 have died of Coronavirus. Coronavirus has exposed the long-standing failures of the nursing home industry that cares for the most medically vulnerable people — our parents, grandparents, spouses and siblings. Nursing homes have been chronically understaffed — both as a cost-cutting strategy and because of pitifully low wages and inadequate benefits — and staffing levels are the most critical factor in providing quality care to residents. The industry can often fail to provide basic hygiene and safety to residents; it was entirely unprepared to prevent the spread of a highly infectious and deadly disease.

Coronavirus has hit communities of color especially hard because long-standing racial economic and racial health disparities mean people of color are more likely to become exposed and infected and more likely to have medical conditions that put them at higher risk of death. In New Jersey, the vast majority of workers in nursing homes are women of color, low-paid, essential workers who have been unable to afford to get out of the path of the virus.

Private equity firms have bought up or financed the acquisition of thousands of nursing homes across the country. These Wall Street investment firms slash expenditures that could have provided care and extract value from nursing home chains through fees, dividends, and real estate transfers that imperil the financial stability of the facilities and their capacity to care for the residents. More than two-thirds of nursing homes are for-profit operations and a sizeable portion are owned or backed by private equity firms with intense profit maximizing incentives that can compromise the care that residents receive. About 70 percent of all U.S. nursing homes were run by for-profit owners, compared to only 18 percent of hospitals.

In New Jersey, for-profit firms control three quarters of the nursing homes (74.9 percent) and nearly one-quarter of the for-profit nursing homes are owned, operated or financially backed (including loans or investments) by private equity firms.

Americans for Financial Reform Education Fund’s detailed analysis of nursing home ownership in New Jersey found that private equity firms owned, operated, or backed 9 nursing home chains with 61 facilities (16.9 percent of facilities with 16.4 percent of certified beds and 15.2 percent of residents) in 2020. Many peer-reviewed academic studies, government reports, and media exposés have demonstrated that private equity owned nursing homes have lower staffing levels, lower quality ratings, more violations, and worse health outcomes for residents.

The structure of private equity nursing home deals insulates the firms from responsibility for repaying the often-heavy debt loads, financial mismanagement, or even legal liability for negligence or failing to provide adequate care.

The private equity profiteering, cost-cutting, and lower quality of care appears to have put New Jersey nursing home residents and staff at higher risk of contracting and succumbing to Coronavirus than those at public, non-profit, or other for-profit facilities. This case study utilizes New Jersey’s facility-level

	<p>Coronavirus case and death data to examine how private equity ownership impacted nursing homes in a state hard-hit by Coronavirus. The analysis also confirms that private equity nursing homes had important shortcomings in key nursing home quality metrics that could have contributed to greater Coronavirus risks for residents and staff.</p> <p>Key findings include:</p> <p>Residents at private equity nursing homes have higher Coronavirus infection and fatality rates.</p> <p>Private equity fatality rates were substantially higher in counties where people of color made up the majority of the population than in overwhelmingly white counties.</p> <p>Private equity nursing homes have a disproportionate number of resident Coronavirus cases and fatalities.</p> <p>Private equity nursing homes have a disproportionate share of staff Coronavirus cases and deaths.</p> <p>Private equity nursing homes had lower staffing ratios and more deficiencies.</p>
Medicare	<p>18. *New York Times February 9, 2024 Staggering Rise in Catheter Bills Suggests Medicare Scam By Sarah Kliff and Katie Thomas [Linda Hennis] is among more than 450,000 Medicare beneficiaries whose accounts were billed for urinary catheters in 2023, up from about 50,000 in previous years, according to a new report produced by the National Association of Accountable Care Organizations, an advocacy group that represents hundreds of health care systems across the country. The report used a federal database of Medicare claims that is available to researchers.</p> <p>The massive uptick in billing for catheters included \$2 billion charged by seven high-volume suppliers, according to that analysis, potentially accounting for nearly one-fifth of all Medicare spending on medical supplies in 2023. Doctors, state insurance departments and health care groups around the country said the spike in claims for catheters that were never delivered suggested a far-reaching Medicare scam.</p> <p>19. New York Times (free access) February 4, 2024 If You're on Medicare, You Could Save Money on Drugs This Year By Mark Miller Prescription drug costs are falling this year for more than a million seniors — in many cases, by thousands of dollars.</p> <p>The lower costs are the result of the Inflation Reduction Act, or I.R.A., which was signed into law by President Biden in 2022 and is known mainly for its investment of more than \$370 billion into climate and energy programs. Its changes to Medicare, which will help people who are enrolled in the prescription drug coverage plans known as Part D, are significant. Yet a recent survey by the nonprofit KFF found that most Americans weren't aware of them.</p> <p>The changes began last year with a \$35 monthly cap on the cost of insulin for diabetes patients, and free vaccines. This year, an annual out-of-pocket cap of \$3,300 will take effect, because people covered under Part D are no longer required to pay 5 percent of the cost of brand-name drugs once they reach that level of spending. Another provision penalizes drug</p>

	<p>companies for price increases that exceed the rate of general inflation. And the I.R.A. expands eligibility for financial assistance with Part D costs for low-income seniors.</p> <p>The law has also authorized Medicare to negotiate prices for expensive drugs with pharmaceutical companies for the first time. The first negotiations will be over 10 drugs, including the blood thinners Eliquis and Xarelto and the diabetes drugs Jardiance and Januvia. The effect of those talks is uncertain, and they have already provoked litigation by drug makers. . . .</p> <p>The stronger out-of-pocket protections arrive at a moment when other Medicare costs are rising. The standard Part B premium rose this year by 5.9 percent, to \$174.70, and the deductible increased by \$14, to \$240. Part D premiums are also rising. KFF estimated that Medicare recipients enrolled in stand-alone Part D plans who didn't switch providers this year experienced premium increases averaging 21 percent, to \$48 per month. (Medicare Advantage enrollees are unaffected since most do not pay a separate premium for drug coverage.)</p>
Medicaid	<p>20. *State House News Service February 7, 2024 Report Calls For MassHealth Estate Recovery Reforms By Michael P. Norton</p> <p>A new report released Wednesday called for reforms to address negative impacts of MassHealth's estate recovery policies, such as requiring the sale of a family home.</p> <p>The report from the nonprofit Blue Cross Blue Shield of Massachusetts Foundation concluded that Massachusetts is among the states that exceed federal cost recovery requirements when seeking to recoup costs of Medicaid-covered services provided to members over age 55. The approach in Massachusetts leads to effects on not just nursing home residents receiving long-term services and supports, but other MassHealth enrollees as well, the report said. . . .</p> <p>According to the report, MassHealth created additional hardship waivers in 2021 and reduced the number of estates subject to recovery, lowering its gross collections to \$23 million. Before that, Massachusetts recovered more from member estates than any other state in the nation. Still, the report says more change is needed. . . .</p> <p>Among the recommended reforms: waiving the first \$25,000 in value of estates subject to recovery claims; creating additional hardship criteria such as exempting homes of "modest value" or assets that are the sole income-producing asset of a family; banning estate recovery for non-mandatory services for individuals 55 or over, "meaning the state would only seek to recovery LTSS related costs and not those for services that the federal government does not require to be included in estate recovery."</p> <p>21. Massachusetts Blue Cross Blue Shield Foundation February 7, 2024 Holding on to Home: A Primer on MassHealth Estate Recovery Federal law requires states to recoup costs from certain Medicaid members' estates – the money and possessions left after someone dies – if they received long-term services and supports (LTSS), such as care in a nursing facility or at home. But some states, including Massachusetts, exceed the federal minimum and recover the cost of all Medicaid-covered</p>

	<p>services that are provided to members over age 55. This means far more members are affected because it is not just limited to those who use LTSS. By limiting the passing down of assets – including homes – the practice of estate recovery may perpetuate wealth disparities and intergenerational poverty. While MassHealth has made reforms in recent years to reduce the burden of estate recovery on impacted members and families, more can be done.</p> <p>These materials are intended to educate stakeholders, policymakers, and others about MassHealth’s estate recovery program. They include:</p> <ul style="list-style-type: none"> • An issue brief that describes Massachusetts’ estate recovery policy and practices and what is known about its impact on members and their families. The brief also identifies policy and programmatic options that the state could pursue to reduce the burden of estate recovery. • A series of qualitative profiles that tell the stories of how estate recovery has impacted four individuals in Massachusetts after the loss of a loved one. <p>Download the Executive Summary Download the Issue Brief Download the Profiles Report: The Lived Experience of Estate Recovery in Massachusetts</p>
Older Americans Act	<p>22. Administration on Community Living Final Rule to Update Regulations for Older Americans Act Programs February 6, 2024</p> <p>CL has released a final rule to update regulations for implementing its Older Americans Act (OAA) programs. The first substantial update to most OAA program regulations since 1988, the rule aligns regulations to the current statute, addresses issues that have emerged since the last update and clarifies a number of requirements. It aims to better support the national aging network that delivers OAA services and improve program implementation, with the ultimate goal of ensuring that the nation's growing population of older adults can continue to receive the services and supports they need to live — and thrive — in their own homes and communities.</p> <p>Among other things, the final rule clarifies provisions for meeting OAA requirements for prioritizing people with the greatest social and economic needs; addresses emergency preparedness and response; establishes expectations for legal assistance and activities to prevent elder abuse; and clarifies the role of the aging network in defending against the imposition of guardianship and in promoting alternatives to guardianship.</p> <p>Learn More: Implementation Timeline and Technical Assistance The rule will take effect on March 15, 2024, but regulated entities have until October 1, 2025, to comply.</p> <p>In the coming months, ACL will share resources and provide robust technical assistance to support states, tribes and tribal organizations, area agencies on aging, and others in the aging network in complying with the provisions of the updated regulations. Save the date for this upcoming webinar:</p> <ul style="list-style-type: none"> • Back to Basics technical assistance webinar: On Thursday, Feb. 15 from 2-3:30 p.m. (Eastern), ACL will host the first in a series of webinars to support the network in implementing the updated regulations. ACL will provide more information about these opportunities and registration.

	<p>Additional information, including a link to the final rule, can be found on ACL.gov. (The final rule was posted “on display” in the Federal Register on February 6, 2024, and will officially be published on February 14, 2024.)</p>
<p>Disability Topics</p>	<p>23. Nice News February 10, 2024 Meet the Sisters Who Co-Founded a Dating App for People With Disabilities By Rebekah Brandes After Jacqueline Child graduated from Colorado College in 2016, she moved about an hour and a half north to Denver, and like many young adults, started searching for love via dating apps. That’s a frequently fraught undertaking for anybody, but Jacqueline, who became disabled at age 14 due to chronic illness, found the experience particularly discouraging. . . [T]he pair launched Dateability, a unique dating app for members of the disabled and chronically ill communities. Available on iOS, Android, and the web, the platform is designed to fit in with modern, mainstream dating apps. It has all the familiar features, such as swiping on a match and setting a specific location to search within. What sets it apart are sections like Dateability Deets, which allows its nearly 14,000 users from all over North America to select from an extensive list of broad terms like intellectual disability, neurodivergent, and immunocompromised. Those terms then show up on their profile.</p> <p>24. WCVB February 10, 2024 (updated) Massachusetts couple facing threat of eviction from mobile home park over handicapped ramp By Brittany Johnson A Massachusetts property manager is taking steps to evict a woman living with an aggressive form of brain cancer after her husband had a wheelchair ramp installed to help her get in and out of their Cape Cod home. . . Phil Austin sent the Frigons a 30-day notice to Quit, a legal document and a first step in an eviction process, which informs a tenant they have 30 days to leave. In the document, Austin stated the Frigons "...have constructed an unapproved structure (i.e. a ramp) on the site in Violation of Rule 15d" of the Rules and Regulations of the Park at Pocasset. Rule 15d states, "any structural modifications to home or site, may only be made with written approval of the owner/operator." . . . Jessica Drew, senior attorney with the Greater Boston Legal Services, has no involvement in the Frigon's case but believes Austin's eviction attempt is illegal. "I would argue that it isn't legal," she said. "What Frigon is asking for is a reasonable modification to his home so that his wife can safely enter and exit the home." Drew also said cases like this could violate several federal and state laws.</p> <p>25. The World (NPR) (audio report) February 9, 2024 Audio describers work toward more emotional and diverse accessibility tools By Bianca Hillier</p>

	<p>Audio descriptions of dance and other performances are an accessibility service initially created so that people who are visually impaired know what's happening on stage. They have been available for a few decades, but recently, the industry has seen a shift, with some productions creating more exploratory and diverse audio descriptions.</p> <p>26. The Disability & Philanthropy Forum February 8, 2024 New Road to Disability Inclusion stories are now available Each journey tells a story. In The Road to Disability Inclusion Report, three stories are examined:</p> <ol style="list-style-type: none"> 1. How Do We Create an Accessible, Tech-Forward World? (Read More) 2. The Benefits of Disability Disclosure in Philanthropic Workplaces (Read More) 3. Fostering a Culture of Inclusion: A Road Paved with Progress, Not Perfection (Read More) <p>Collectively, each story is reflective of the journey we at the Disability & Philanthropy Forum have been on and where the disability community is moving forward. The three featured articles reflect the course we are traveling to a disability-inclusive philanthropic sector.</p>
Aging Topics	<p>27. CNBC February 2, 2024 People on this island in Italy live to 100—here's a look at their diet for longevity By Raeleen D'Agostino Mautner Sardinia, Italy is one of the world's five "Blue Zones" — or places around the world where an unusually large number of people live to 100 or longer. .. Here's how to eat like a Sardinian for a longer life: Use Sardinian-inspired ingredients Grow some of your own food Eat out less Move Move</p>
Longevity	<p>28. Shots (NPR) February 10, 2024 We asked. You answered. Here are your secrets to healthy aging By Andrea Muraskin That's why NPR asked our listeners and readers to share their secrets to living a long and healthy life, as part of our new series, How to Thrive as You Age. To date we've received over 1,000 responses from readers and listeners ages 16 to 103. Here are some of our favorites, edited for clarity and brevity.</p> <ul style="list-style-type: none"> • Make friends across generations • It's never too late to set new goals • To stay active, keep adapting • Put your mental health first • Start work-life balance early • Make your exercise social and your socializing active • Get creative about eating your veggies! • Keep engaged with mental challenges and creative projects • No matter your age, sleep and rest are essential

	<ul style="list-style-type: none"> • Stay engaged with what gives you purpose • Mindset matters <p>29. Brain & Life February / March 2024 <u>“Blue Zones” Author Dan Buettner Shares the Secrets to a Long and Healthy Life</u> By Robert Firpo-Cappiello <i>The keys to a long, healthy life can be found in five far-flung destinations—but you can easily bring them home.</i> In blue zones, strong social networks and community bonds also have proved vital for people's mental and emotional well-being. . . Some blue zones, such as Sardinia, have traditions that involve sensory experiences, like wine making or crafting. These activities may stimulate the brain and help maintain cognitive vitality. . .</p> <p>30. CNBC February 2, 2024 <u>People on this island in Italy live to 100—here’s a look at their diet for longevity</u> By Raeleen D’Agostino Mautner Sardinia, Italy is one of the world’s five “<u>Blue Zones</u>” — or places around the world where an unusually large number of people live to 100 or longer. . . Here’s how to eat like a Sardinian for a longer life: Use Sardinian-inspired ingredients Grow some of your own food Eat out less Move Move</p>
Office of the Attorney General	<p>31. Office of the Attorney General February 6, 2024 <u>AG Campbell Reaches \$1.6M Settlement with North Dartmouth Ambulance Companies to Resolve False Billing Allegations</u> Attorney General Andrea Joy Campbell and her office have reached a \$1.6 million settlement with affiliated transportation providers STAT Ambulance Services, Inc. and Southcoast Emergency Medical Services, Inc., along with their owner Carol Mansfield, to resolve allegations that the companies submitted false claims to MassHealth, the state’s Medicaid program, and that Southcoast submitted false claims to the Medicare program. STAT Ambulance Service, Inc. and Southcoast Emergency Medical Services, Inc. are transportation and ambulance companies headquartered in North Dartmouth and owned by Carol Mansfield of Mattapoisett. Both companies are MassHealth transportation providers.</p>
Emergency Preparedness	<p>32. *New York Times September 26, 2022 <u>How to Evacuate With Pets</u> By Christine Chung <i>Owners should make every attempt not to leave their pets behind, animal advocates say. You can avoid the worst by planning ahead.</i> When disaster strikes, household pets’ lives are among the most vulnerable. Evacuating animals during any type of emergency — whether</p>

	<p>a hurricane, wildfire or earthquake — adds a layer of stress in a turbulent situation. However, experts with animal-advocacy organizations say that taking care of our furry, purry, feathered and scaly housemates is an imperative lifesaving effort that can be conducted smoothly with advance planning.</p> <p>Assemble a disaster kit for your pet.</p> <p>Emergencies can happen at any time, so this kit should be updated regularly and kept in a convenient, easily accessible place in your home, advocates said.</p> <p>The kit should include enough nonperishable food and water to last at least a week.</p> <p>It should also contain:</p> <ul style="list-style-type: none"> • food and water receptacles • a first-aid kit • a couple of weeks' supply of medications, if needed • a printed document or USB stick with medical records, such as a rabies vaccine certificate, key details about your pet's diet, any behavioral issues and contact information for your veterinarian, all enclosed in a waterproof container • a toy or two for those idle hours • hygiene supplies such as poop bags or a litter box • a current picture of you and your pet, in case you later need to prove ownership or reclaim it
From Other States	<p>33. McKnights Long-Term Care News February 12, 2024 Governor aims to post more nursing home data, pay providers incentives By Josh Henreckson</p> <p>A new bill aims to increase public access to state nursing home performance data for consumers — and also begin providing care quality incentives for facilities designated as “centers of excellence.”</p> <p>Proposed by Gov. Ned Lamont (Connecticut- D) Wednesday, the measure would mandate the creation of a website to publish transparency data about quality ratings, complaints, staffing levels and other metrics provided by Connecticut state health officials and ombudsmen.</p> <p>The bill also would require the Department of Public Health to design a voluntary pilot program that would “provide incentives” to nursing homes that apply and demonstrate a high quality of care, including using “available federal funding”. . .</p> <p>The new bill is the latest in a recent push to regulate elder care by Connecticut policymakers. In the past two years, for example, they have raised the required staffing hours for facilities and increased regulatory oversight of mergers and acquisitions. . .</p> <p>But the bill's proposed incentives signal that the state is willing to do more than simply punish nursing homes that are struggling to provide high-quality care.</p> <p>Other states have taken similar action to increase their access to nursing home quality data in recent years, such as New Jersey in 2022. At that time, regional care leaders told <i>McKnight's</i> that New Jersey would also be looking at data similar to what's available at the federal level, but that sometimes this data isn't fully up to date or doesn't capture the full picture of how care is provided at a certain facility.</p> <p>34. Iowa Capital Dispatch</p>

	<p>February 6, 2024 Bill would cap payments from nursing homes and hospitals to temp agencies By Clark Kauffman A bill that's intended to cap the fees Iowa's medical providers pay to temporary-staffing agencies was approved by a committee Tuesday and sent to the House floor for consideration. The bill, House File 2199, is intended to provide financial relief for nursing homes, hospitals and other health care facilities that rely heavily on temporary-staffing agencies in the midst of the current workforce shortage. The bill establishes maximum allowable charges that agencies may impose on any health care entity for the nursing services provided by agency-employed workers. The bill would require the Iowa Department of Health and Human Services to annually establish a schedule of statewide maximum allowable charges for nursing services provided by agency workers. The maximum charges must be no greater than 150% of the statewide average wage paid by specific types of health care facilities to various nursing services professionals. . . The only entities registered with the Legislature as being in support of the bill are the groups representing Iowa's nursing home industry: the Iowa Health Care Association and the Leading Age Iowa.</p>
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 rmoores8473@charter.net .
Websites	<p>Dateability https://info.dateabilityapp.com/ Dateability is a dating app designed for the disabled and chronically ill communities. People with disabilities and chronic illness often encounter ableism on other dating apps. We understand the unique circumstances that present when dating with a disability, which is why we created a safe and accepting space to create meaningful connections for people with physical, intellectual, and psychiatric disabilities.</p> <p>Private Equity Stakeholder Project https://pestakeholder.org/ Vision To bring transparency and accountability to the private equity industry and empower impacted communities. Mission The mission of the Private Equity Stakeholder Project is to identify, engage, and connect stakeholders affected by private equity with the goal of engaging investors and empowering communities, working families, and others impacted by private equity investments.</p>
YouTube Channels	
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 Dignity 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/ .	
Websites of Dignity Alliance Massachusetts Members	See: https://dignityalliancema.org/about/organizations/	
Contact information for reporting complaints and concerns	Nursing home	Department of Public Health 1. Print and complete the Consumer/Resident/Patient Complaint Form 2. Fax completed form to (617) 753-8165 Or Mail to 67 Forest Street, Marlborough, MA 01752 Ombudsman Program
Nursing Home Closures	Massachusetts Department of Public Health <i>South Dennis Health Care</i> Target closure date January 30, 2024 Notice of Intent to Close (PDF) (DOCX)	
Nursing homes with admission freezes	Massachusetts Department of Public Health <i>Temporary admissions freeze</i> There have been no new postings on the DPH website since May 10, 2023.	
Massachusetts Department of Public Health Determination of Need Projects	Massachusetts Department of Public Health <i>Determination of Need Projects: Long Term Care 2023</i> Navigator Homes of Martha's Vineyard, Inc. – Long Term Care Substantial Capital Expenditure Royal Wayland Nursing Home, LLC – Conservation Long Term Care Project 2022 Ascentria Care Alliance – Laurel Ridge Ascentria Care Alliance – Lutheran Housing Ascentria Care Alliance – Quaboag Berkshire Healthcare Systems, Inc. – Windsor Long Term Care Conservation Fairlawn Rehabilitation Hospital-Hospital/Clinic Substantial Capital Expenditure Long Term Centers of Lexington – Pine Knoll – Long Term Care Conservation Long Term Centers of Wrentham – Serenity Hill – Long Term Care Conservation Next Step Healthcare LLC-Conservation Long Term Care Project Royal Falmouth – Conservation Long Term Care Royal Norwell – Long Term Care Conservation Wellman Healthcare Group, Inc 2020 Advocate Healthcare, LLC Amendment Campion Health & Wellness, Inc. – LTC - Substantial Change in Service Heywood Healthcare, Inc. – Hospital/Clinic Substantial Capital Expenditure Notre Dame Health Care Center, Inc. – LTC Conservation 2020 Advocate Healthcare of East Boston, LLC. Belmont Manor Nursing Home, Inc.	

<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 March 29, 2023 CMS has published a new list of <u>Special Focus Facilities</u> (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. This is important information for consumers – particularly as they consider a nursing home. 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 March 29, 2023) Newly added to the listing</p> <ul style="list-style-type: none"> • Somerset Ridge Center, Somerset https://somersetridge rehab.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225747 • South Dennis Healthcare https://www.nextstephc.com/southdennis Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225320 <p>Massachusetts facilities not improved</p> <ul style="list-style-type: none"> • None <p>Massachusetts facilities which showed improvement</p> <ul style="list-style-type: none"> • Marlborough Hills Rehabilitation and Health Care Center, Marlborough https://tinyurl.com/MarlboroughHills
---	---

	<p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225063</p> <p>Massachusetts facilities which have graduated from the program</p> <ul style="list-style-type: none"> • The Oxford Rehabilitation & Health Care Center, Haverhill https://theoxfordrehabhealth.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225218 • Worcester Rehabilitation and Health Care Center, Worcester https://worcesterrehabcare.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225199 <p>Massachusetts facilities that are candidates for listing (months on list)</p> <ul style="list-style-type: none"> • Charwell House Health and Rehabilitation, Norwood (15) https://tinyurl.com/Charwell Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225208 • Glen Ridge Nursing Care Center (1) https://www.genesishcc.com/glenridge Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225523 • Hathaway Manor Extended Care (1) https://hathawaymanor.org/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225366 • Medway Country Manor Skilled Nursing and Rehabilitation, Medway (1) https://www.medwaymanor.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225412 • Mill Town Health and Rehabilitation, Amesbury (14) No website Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225318 • Plymouth Rehabilitation and Health Care Center (10) https://plymouthrehab.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225207 • Tremont Health Care Center, Wareham (10) https://thetremontrehabcare.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225488 • Vantage at Wilbraham (5) No website Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225295 • Vantage at South Hadley (12) No website Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225757 https://tinyurl.com/SpecialFocusFacilityProgram
Nursing Home Inspect	ProPublica Nursing Home Inspect

	<p>Data updated November 2022</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).</p> <p>Massachusetts listing: https://projects.propublica.org/nursing-homes/state/MA</p> <p>Deficiencies By Severity in Massachusetts (What do the severity ratings mean?)</p> <table border="0"> <thead> <tr> <th># reported</th> <th>Deficiency Tag</th> </tr> </thead> <tbody> <tr> <td>250</td> <td>B</td> </tr> <tr> <td>82</td> <td>C</td> </tr> <tr> <td>7,056</td> <td>D</td> </tr> <tr> <td>1,850</td> <td>E</td> </tr> <tr> <td>546</td> <td>F</td> </tr> <tr> <td>487</td> <td>G</td> </tr> <tr> <td>31</td> <td>H</td> </tr> <tr> <td>1</td> <td>I</td> </tr> <tr> <td>40</td> <td>J</td> </tr> <tr> <td>7</td> <td>K</td> </tr> <tr> <td>2</td> <td>L</td> </tr> </tbody> </table>	# reported	Deficiency Tag	250	B	82	C	7,056	D	1,850	E	546	F	487	G	31	H	1	I	40	J	7	K	2	L
# reported	Deficiency Tag																								
250	B																								
82	C																								
7,056	D																								
1,850	E																								
546	F																								
487	G																								
31	H																								
1	I																								
40	J																								
7	K																								
2	L																								
Nursing Home Compare	<p>Centers for Medicare and Medicaid Services (CMS) <i>Nursing Home Compare Website</i></p> <p>Beginning January 26, 2022, the Centers for Medicare and Medicaid Services (CMS) is posting new information that will help consumers have a better understanding of certain staffing information and concerns at facilities.</p> <p>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 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>																								
Data on Ownership of Nursing Homes	<p>Centers for Medicare and Medicaid Services <i>Data on Ownership of Nursing Homes</i></p> <p>CMS has released data giving state licensing officials, state and federal law enforcement, researchers, and the public an enhanced ability to identify common owners of nursing homes across nursing home locations. This information can be linked to other data sources to identify the performance of facilities under common ownership, such as owners affiliated with multiple</p>																								

	nursing homes with a record of poor performance. The data is available on nursing home ownership will be posted to data.cms.gov and updated monthly.																																													
Long-Term Care Facilities Specific COVID-19 Data	<p>Massachusetts Department of Public Health <i>Long-Term Care Facilities Specific COVID-19 Data</i> <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 • Additional COVID-19 Data • CMS COVID-19 Nursing Home Data 																																													
DignityMA Call 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>																																													
<p>Participation opportunities with Dignity Alliance Massachusetts</p> <p>Most workgroups meet bi-weekly via Zoom.</p> <p>Interest Groups meet periodically (monthly, bi-monthly, or quarterly).</p> <p>Please contact group lead for more information.</p>	<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>Lachlan Forrow</td> <td>lforrow@bidmc.harvard.edu</td> </tr> <tr> <td>Facilities (Nursing homes and rest homes)</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>Legislative</td> <td>Richard Moore</td> <td>rmoore8743@charter.net</td> </tr> <tr> <td>Legal Issues</td> <td>Jeni Kaplan</td> <td>jkaplan@cpr-ma.org</td> </tr> <tr> <th>Interest Group</th> <th>Group lead</th> <th>Email</th> </tr> <tr> <td>Assisted Living</td> <td>John Ford</td> <td>jford@njc-ma.org</td> </tr> <tr> <td>Housing</td> <td>Bill Henning</td> <td>bhenning@bostoncil.org</td> </tr> <tr> <td>Veteran Services</td> <td>James Lomastro</td> <td>jiplomastro@comcast.net</td> </tr> <tr> <td>Transportation</td> <td>Frank Baskin Chris Hoeh</td> <td>baskinfrank19@gmail.com cdhoeh@gmail.com</td> </tr> <tr> <td>Covid / Long Covid</td> <td>James Lomastro</td> <td>jiplomastro@comcast.net</td> </tr> <tr> <td>Incarcerated Persons</td> <td>TBD</td> <td>info@DignityAllianceMA.org</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	Lachlan Forrow	lforrow@bidmc.harvard.edu	Facilities (Nursing homes and rest homes)	Arlene Germain	agermain@manhr.org	Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org	Legislative	Richard Moore	rmoore8743@charter.net	Legal Issues	Jeni Kaplan	jkaplan@cpr-ma.org	Interest Group	Group lead	Email	Assisted Living	John Ford	jford@njc-ma.org	Housing	Bill Henning	bhenning@bostoncil.org	Veteran Services	James Lomastro	jiplomastro@comcast.net	Transportation	Frank Baskin Chris Hoeh	baskinfrank19@gmail.com cdhoeh@gmail.com	Covid / Long Covid	James Lomastro	jiplomastro@comcast.net	Incarcerated Persons	TBD	info@DignityAllianceMA.org
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	Lachlan Forrow	lforrow@bidmc.harvard.edu																																												
Facilities (Nursing homes and rest homes)	Arlene Germain	agermain@manhr.org																																												
Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org																																												
Legislative	Richard Moore	rmoore8743@charter.net																																												
Legal Issues	Jeni Kaplan	jkaplan@cpr-ma.org																																												
Interest Group	Group lead	Email																																												
Assisted Living	John Ford	jford@njc-ma.org																																												
Housing	Bill Henning	bhenning@bostoncil.org																																												
Veteran Services	James Lomastro	jiplomastro@comcast.net																																												
Transportation	Frank Baskin Chris Hoeh	baskinfrank19@gmail.com cdhoeh@gmail.com																																												
Covid / Long Covid	James Lomastro	jiplomastro@comcast.net																																												
Incarcerated Persons	TBD	info@DignityAllianceMA.org																																												
The Dignity Digest	For a free weekly subscription to <i>The Dignity Digest</i> :																																													

	<p>https://dignityalliancema.org/contact/sign-up-for-emails/ Editor: Paul Lanzikos Primary contributor: Sandy Novack MailChimp Specialist: Sue Rorke</p>
<p>Note of thanks</p>	<p>Thanks to the contributors to this issue of <i>The Dignity Digest</i></p> <ul style="list-style-type: none"> • Wynn Gerhard • Chris Hoeh • Margaret Morganroth Gullette • Dick Moore • Norma Swenson <p>Special thanks to the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of <i>The Dignity Digest</i>. If you have submissions for inclusion in <i>The Dignity Digest</i> or have questions or comments, please submit them to Digest@DignityAllianceMA.org.</p>
<p><i>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.</i> 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 <i>The Tuesday Digest</i> and <i>The Dignity Digest</i> are available at: https://dignityalliancema.org/dignity-digest/ For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</p>	