



# The Dignity Digest

Issue # 214

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

**\*May require registration before accessing the 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](mailto:info@DignityAllianceMA.org).

## Spotlight

### [Massachusetts Could Better Ensure That Nursing Homes Comply With Federal Requirements for Life Safety, Emergency Preparedness, and Infection Control](#)

**U.S. Department of Health and Human Services  
Office of Inspector General**

November 9, 2024

#### **Why OIG Did This Audit**

- Nursing homes that participate in Medicare and Medicaid are required by CMS to comply with requirements intended to protect residents, including requirements related to sprinkler systems, smoke detector coverage, and emergency preparedness plans. Facilities are also required to develop infection control programs.
- In Massachusetts, the State’s Department of Public Health conducts surveys of nursing homes to ensure compliance with Federal requirements.
- This audit is one in a series of audits that assesses compliance with Federal requirements for life safety, emergency preparedness, and infection control.

#### **What OIG Found**

- We identified 236 deficiencies related to life safety, emergency preparedness, or infection control at the 20 nursing homes in Massachusetts that we reviewed.
- 128 Life Safety Deficiencies
- 57 Emergency Preparedness
- 51 Infection Control

These deficiencies put the health and safety of residents, staff, and visitors at an increased risk of injury or death during a fire or other emergency, or in the event of an infectious disease outbreak.

#### **What OIG Recommends**

We made four recommendations to Massachusetts to improve the health and safety of residents, staff, and visitors at nursing homes, including that it follow up with the 20 nursing homes where we identified deficiencies to ensure that they have taken corrective actions. We also recommended that Massachusetts work with CMS to identify nursing homes requiring frequent inspections. The full recommendations are in the report.

	<p>In written comments on our draft report, Massachusetts concurred with our recommendations and described the actions that it had taken or planned to take to address them.</p> <p><b>Report Materials</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Full Report (PDF, 3.8 MB)</a></li> <li>• <a href="#">Report Highlights (PDF, 365.0 KB)</a></li> </ul>
<p><b>Quotes</b></p>	<p><i>The [Department of Public Health] could better ensure that nursing homes in Massachusetts that participate in the Medicare or Medicaid programs comply with Federal requirements for life safety, emergency preparedness, and infection control if additional resources were available. . . The identified deficiencies occurred because of frequent management and staff turnover at the nursing homes, that contributed to a lack of awareness of, or failure to address, Federal requirements. In addition, the State agency had limited resources (i.e., staff) to conduct surveys of all nursing homes, including those with a history of multiple high-risk deficiencies, more frequently than required by CMS (i.e., every 15 months).</i></p> <p><a href="#">Massachusetts Could Better Ensure That Nursing Homes Comply With Federal Requirements for Life Safety, Emergency Preparedness, and Infection Control</a>, U.S. Department of Health and Human Services Office of Inspector General, November 9, 2024</p> <p><i>“Most nursing home residents have not been afforded the protection offered by vaccination against severe COVID-19, influenza, and RSV disease during the 2024-25 respiratory virus season. Addressing low coverage of vaccination against COVID-19, influenza, and RSV must be prioritized.”</i></p> <p>Hannah E. Reses, M.P.H., from the CDC in Atlanta, and colleagues, <a href="#">COVID-19, Flu, RSV Vaccine Coverage Low for Nursing Home Residents</a>, <b>Diabetes in Control</b>, November 26, 2024</p> <p><i>“For those of us who have to work these holidays, being away from our families while our bosses get to relax at home, it is frustrating that nursing home owners</i></p>

*have chosen this path instead of trying to address the staffing issues we all agree are a crisis.”*

Monyou Taye, nursing assistant and a member of SEIU Healthcare, [Minnesota nursing homes sue to block state pay rule for workers](#), MPRRadio, November 26, 2024

*“People with obesity deserve to have affordable access to medical treatment and support, including anti-obesity medications for this disease, just as a person with type 2 diabetes can access these medications to get healthy.”*

CMS administrator Chiquita Brooks-Lasure, [CMS’ obesity drug coverage implications for nursing home patients](#), McKnights Long-Term Care, November 27, 2024

*Despite the public health importance of vaccination, there is suboptimal uptake of Advisory Committee on Immunization Practices (ACIP)–recommended vaccines among adults in the United States (US), especially adult Medicaid beneficiaries.*

[Factors impacting vaccine uptake among adult Medicaid beneficiaries: a systematic literature review](#), Health Affairs Scholar, November 12, 2024

*Currently, 5 social determinants of health SDOH domains (i.e., food insecurity, housing instability, transportation needs, difficulty paying utilities, and interpersonal safety) have been introduced or proposed in 21 federal programs, initiatives, or guidance documents. These efforts reflect growing recognition of the importance of SDOH in driving optimal health and health care outcomes. Beyond the 5 SDOH domains, a growing body of literature demonstrates that social isolation has unfavorable health impacts independently of SDOH.*

[Charting new territory: the early lessons in integrating social determinant of health \(SDOH\) measures into practice](#), Health Affairs Scholar, November 14, 2024

*We think that it is reasonable to believe that a disabled person's level of functional limitations, in addition to*

*their socioeconomic status, experiences of ableism, access to needed accommodations, and characteristics of their built environment, may be associated with their level of social participation and exclusion. . . Based on findings from this study, coupled with prior evidence that the*

*Washington Group Short Set (WGSS) questions severely underestimate the overall disability population,<sup>3,4</sup> we recommend that the use of the WGSS questions be halted in all US federal surveys until further research can identify the cause of this underperformance.*

[Performance of the Washington Group questions in measuring blindness and deafness](#), Health Affairs Scholar, October 15, 2024

*As enrollment in Medicare Advantage (MA) continues to grow, and with MA currently providing coverage for the majority of Medicare beneficiaries,<sup>20</sup> it is increasingly important to address “Medicare Advantage Trap”. . . To ensure Medicare coverage choice for high-need beneficiaries, state- and federal-level policies should make it easier for beneficiaries to switch between Medicare coverage.*

[Medigap-guaranteed issue associated with Medicare Advantage disenrollment for beneficiaries administered a part B drug](#), Health Affairs Scholar, October 23, 2024

*“[Nursing home o]perators must assess returning residents at the time of their proposed return and there can be no determination that their needs cannot be met or that their return poses safety or health risks to others.”*

Randi Hansen, director of corporate compliance with Health Dimensions Group (HDG), [Last Gasp or Reckoning: Making Sense of 2025 Nursing Home Survey Changes](#), Skilled Nursing News, November 27, 2024

*Simplifying Medicare is no simple task. But it would increase competition, save taxpayers money and protect the solvency of a critical government program. It’s also the right thing to do for the 65 million seniors*

who currently face a maddening array of ambiguous choices.

[Good luck figuring out Medicare](#) (Bloomberg Opinion via Salem News, November 29, 2024)

*Sometimes, [Lauren] Doctoroff, [an internal medicine physician at Massachusetts General who splits her time between home visits and occasional hospital rounds,] spends more time driving to the homes of patients than seeing them. Patients get disappointed when their conditions deteriorate, forcing them back to the hospital. The program is not a great fit for people who need intensive treatment by specialists or extensive testing to diagnose their condition.*

*But Doctoroff has noticed that patients with dementia and other cognitive dysfunction find more solace in a familiar setting than a frenetic, destabilizing hospital. Some older patients warmly recall the days of doctors making house visits.*

*“Patients are much happier.”*

[When a home turns into the hospital](#) (\*Boston Globe, November 29, 2024)

*“It is crucial to acknowledge that many challenges persist for those [with disabilities] whose primary struggles remain unaddressed. In the coming years, it is imperative to rectify these policy shortcomings and continue building strides made in the fight for disability rights.”*

[National Disability Policy: A Progress Report, 2024](#), (National Council on Disability, October 31, 2024)

*Investigators themselves couldn’t locate staff when residents asked for help.*

[State Moves to Pull License for Corvallis Nursing Home](#), *Williamette Week*, November 28, 2024

*“This is not some slippery slope. We are shortening death, not life, for our patients. This is not life or death; this is death or death.”*

Peter Prinsley, a British Labour lawmaker and surgeon, [British Lawmakers Vote to Legalize Assisted Dying in Landmark Decision](#), \*New York Times, November 29, 2024

*Some lawmakers said they feared that some of those patients might end their lives prematurely to remove the physical or financial burden on their families.*

*“People often recognize coercion only after years have passed, yet within a month someone could be dead . Malign coercion cases may be few, but as a clinician working at the fringes of life, I heard my patients frequently say, ‘I don’t want to be a burden,’ or ‘I’d rather the money went to the grandchildren than on my care.’”*

*Rachel Maskell, a Labour lawmaker who worked as a senior physiotherapist in acute medical care, [British Lawmakers Vote to Legalize Assisted Dying in Landmark Decision](#), \*New York Times, November 29, 2024*

*“People with disabilities should not have to give up their lives in the community and be isolated in nursing facilities to get the services they need. This settlement agreement sends the message that people with disabilities deserve the same kinds of lives as others, and makes clear that our family members, friends, and neighbors with disabilities add value to our lives and strengthen our communities when they can receive the services they need right inside their own home.”*

*Assistant Attorney General Kristen Clarke, U. S. Justice Department’s Civil Rights Division, [Justice Department Secures Settlement Agreement with Colorado to Ensure Opportunities for People with Physical Disabilities to Live at Home](#), U. S. Department of Justice, November 1, 2024*

*"For a long time, it was, 'The poor blind guy.' That’s the way it was in the 1800s and going way, way back. But we’ve proved that that’s not what it is. It's not what it is for most disabled folks."*

*Cory Kadlik, assistive technology manager at Perkins School for the Blind in Watertown, [Artificial intelligence is opening doors for people with disabilities](#), WCVB, November 14, 2024*

*Voting assistance machines for those with disabilities broke down, while main entrances and exits to some precincts could only be accessed by stairs, [according to the report](#) issued by the Massachusetts Election Protection Coalition.*

*[Post-election report shows accessibility, ballot and registration issues](#),  
WBUR, November 21, 2024*

*“There are nearly 1 million family caregivers in Massachusetts who provide unpaid care to their loved ones. Being a family caregiver is often considered a full-time job in itself, and frequently leads to burnout, anxiety, and depression. Massachusetts is dedicated to supporting family caregivers.”*

*Governor Maura Healey, [Healey-Driscoll Administration Awarded Nearly Half a Million Dollars to Support Family Caregivers](#), Executive Office of Elder Affairs, November 8, 2024*

*“Family caregivers play a critical role in the home- and community-based services system by helping thousands of older people and individuals with disabilities and special needs to live and thrive in the communities of their choice.”*

*Lieutenant Governor Kim Driscoll, [Healey-Driscoll Administration Awarded Nearly Half a Million Dollars to Support Family Caregivers](#), Executive Office of Elder Affairs, November 8, 2024*

*From 2022 to 2060, the population of adults age 65 and older in the U.S. is projected to increase dramatically from 57.8 million to 88.8 million.<sup>16</sup> The number of adults age 85 and older is expected to nearly triple over the same period from 6.5 million to 17.5 million.*

*[Direct Care Workers in the United States: Key Facts 2024](#), PHI, September 2, 2024*

*In contrast to the rapid expansion of the older adult population, the population of adults age 18 to 64 is expected to remain relatively stable, which means that there will be fewer potential paid and unpaid caregivers available to support older adults. Currently, the ratio of*

*adults age 18 to 64 to adults age 85 and older is 31 to 1, but that ratio is projected to drop to 12 to 1 by 2060.*

[Direct Care Workers in the United States: Key Facts 2024](#), PHI, September 2, 2024

*“The era of tolerating poor treatment of airline passengers with disabilities is over. With this penalty, we are setting a new standard of accountability for airlines that violate the civil rights of passengers with disabilities.”*

U.S. Transportation Secretary Pete Buttigieg, [DOT Issues Landmark \\$50 Million Penalty Against American Airlines for Its Treatment of Passengers with Disabilities](#), U. S. Department of Transportation, October 23, 2024

*“People with disabilities need strong federal laws, policies and programs that take their needs and aspirations into account. The Heritage Foundation’s Project 2025 plan would eviscerate these standards and push disabled people back to an earlier, shameful era of isolation, exclusion and institutionalization.”*

Statement about Project 2025 from the Consortium for Constituents with Disabilities, a coalition of national disability organizations, [What Trump’s Win Could Mean For Medicaid, Disability Programs](#) (disabilitycoop, November 8, 2024)


*Regarding the 100% clawbacks, it’s “unconscionable that someone would find themselves facing homelessness or unable to pay bills, because Social Security withheld their entire payment for recovery of an overpayment.”*

Social Security chief Martin O’Malley, [Social Security Tackles Overpayment ‘Injustices,’ but Problems Remain](#), KFF Health News, November 18, 2024

*There has been a crisis brewing in primary care medicine in the country for decades. Many physicians complain of working long hours with an ever-growing list of responsibilities but without an increase in compensation and resources.*

[Citing ‘burnout,’ nearly 300 primary care doctors at Mass General Brigham take steps to unionize](#) (\***Boston Globe**, November 18, 2024)




	<p><i>“This station reconstruction will make Newtonville Commuter Rail station in Newton fully accessible with a state-of-the-art station supporting safety, security and comfort. This addresses a crucial need for riders with disabilities and others who have struggled with the existing station infrastructure. Finding ways to deliver projects like this go beyond infrastructure improvements—they’re also about fostering a more inclusive, accessible, and equitable MBTA for all who depend on public transit.</i></p> <p>MBTA General Manager and CEO Phillip Eng, <i>Healey, <a href="#">Healey-Driscoll Administration, MBTA, Congressman Auchincloss, Mayor Fuller Celebrate Commitment to Rebuild Newtonville Station</a>, Office of Governor Maura Healey and Lt. Governor Kim Driscoll</i>, November 25, 2024</p>
<p>DignityMA Study Session</p>	<p><b>DignityMA Study Session</b>  <a href="#">Learn about the role of Options Counselors</a>  <b>Friday, December 6, 2024, 9:00 a.m.</b>  <b>Registration is required: <a href="https://tinyurl.com/OptionsCounselors">https://tinyurl.com/OptionsCounselors</a></b></p> <p>Join Tri-Valley, Center for Living &amp; Working (CLW), and Elder Services of Worcester (ESWA) to learn about how their Option’s Counselors (OC) help individuals of all ages navigate not only Long-Term Services &amp; Supports (LTSS), but myriad other programs, benefits, and options that are available to help them make choices that enable them to live fully. We will discuss the history and evolution of the OC program, the value of Options Counselors across the LTSS spectrum, and demonstrate how strengthening the current OC system could be the beacon of the future. Tri-Valley, EWSA, and CLW are one of eleven Aging &amp; Disability Resource Consortia (ADRC) that cover all of Massachusetts. Open to all. Free registration. The session will be recorded with captions.</p> <p>Registration required: <a href="https://tinyurl.com/OptionsCounselors">https://tinyurl.com/OptionsCounselors</a></p> <p>Questions:  Meg Coffin, Center for Living &amp; Working, <a href="mailto:mcoffin@centerlw.org">mcoffin@centerlw.org</a>  Betsey Crimmins, Mass Aging Access, <a href="mailto:bcrimmins@agingaccess.org">bcrimmins@agingaccess.org</a></p>
<p>DignityMA Study Session</p> 	<p><b>DignityMA Study Session</b>  <a href="#">Massachusetts Long Term Care Ombudsman Program</a>  <b>Wednesday, December 11, 2024, 11:00 a.m. to 12:00 p.m.</b>  <b>Registration is required: <a href="https://tinyurl.com/MALTCOmbudsman">https://tinyurl.com/MALTCOmbudsman</a></b></p> <p>A Long-Term Care Ombudsman is certified to investigate any issues that arise in nursing homes, rest homes, or assisted living facilities, so the residents who live there can do so with dignity and respect. As an advocate, a Long-Term Care Ombudsman works to resolve problems between residents and nursing homes, rest homes, or assisted living facilities, as they relate to the health, welfare, and rights of those they serve.</p>

	<p>Long-Term Care Ombudsman often act as mediators, visiting facilities on a regular basis and allowing residents to voice their complaints and work toward resolution with staff before issues can escalate. Open to all. Free registration. The session will be recorded with captions.</p> <p><b>Session lead: Carolyn Fenn, Long Term Care Ombudsman for the Commonwealth of Massachusetts</b></p> <p>Registration is required: <a href="https://tinyurl.com/MALTCOmbudsman">https://tinyurl.com/MALTCOmbudsman</a>  Questions: <a href="mailto:paul.lanzikos@gmail.com">paul.lanzikos@gmail.com</a></p>
<p><b>Survey Requests</b></p>	<p><b>Christopher and Dana Reeve Foundation</b></p> <p>The Christopher and Dana Reeve Foundation would like to know which topics and public policy issues are the most important to you! The responses will help to inform which policies they will prioritize in the coming year. This survey will take about 10 minutes to complete.</p> <p><a href="#">Reeve Foundation Survey</a></p>
<p><b>Opportunity for Public Comment</b></p>	<p><b>Office of Attorney General Andrea Campbell</b>  <a href="#"><u><b>Attorney General’s Office Seeks Community Feedback To Inform Drafting Of Assisted Living Residences Regulations</b></u></a></p> <p><b>To submit comments:</b>  <a href="https://massgov.formstack.com/forms/community_feedback_on_a_go_assisted_living_residences"><u>https://massgov.formstack.com/forms/community_feedback_on_a_go_assisted_living_residences</u></a></p> <p>The Massachusetts Attorney General’s Office (AGO) is seeking public feedback to inform drafting consumer protection regulations for assisted living residences in Massachusetts. Members of the public can provide comments to the AGO through an online form, available <a href="#">here</a>. Through regulation, the AGO seeks to protect residents of assisted living residences from unfair and deceptive acts and practices, including misrepresentation of available services, improper fees, and unlawful evictions. The aging population served by these facilities would benefit greatly from stronger consumer protections in all of these areas, and owners and operators will benefit from greater specificity regarding their legal obligations. At this time, Massachusetts does not have consumer protection regulations specific to assisted living residences.</p> <p>“We know the best way to serve our constituents is by listening to them,” said <b>Attorney General Andrea Joy Campbell</b>. “Every resident of an assisted living facility has the right to live in a safe and habitable environment, free from abuse, neglect, and exploitation. Our older adults deserve to age safely with dignity and respect, which is why creating consumer protection regulations for assisted living facilities is so important and responsive to their advocacy.”</p> <p>Assisted living residences are designed for older adults who can live independently in a home-like environment, but may need help with daily activities like housekeeping, bathing, or medication assistance. According to the Executive Office of Elder Affairs, more than 17,000 people currently live in these residences in Massachusetts and have various options available to them. It is critical that consumers know what to expect when choosing an assisted living residence as their home. <a href="#">Chapter 93A</a>, the consumer protection statute, authorizes the Attorney General to promulgate regulations to protect consumers. These regulations can require that facilities make certain disclosures about their contractual terms, and they also can declare certain acts and practices to be unlawful.</p>

	<p>Those who wish to provide feedback on the creation of regulations can do so through an online form, which can be found <a href="#">here</a>.</p> <p>The AGO will use this feedback to inform draft regulations and will then proceed to promulgate regulations, a process which will include the publication of proposed regulations, a public hearing, and opportunities for the public to comment on the proposed regulations.</p> <p>This project is being handled by Director Mary Freeley and Deputy Director Valerie Frias of the AGO's <a href="#">Elder Justice Unit</a>. AG Campbell created the Unit in August 2023 to protect and promote the safety and well-being of elders through enforcement actions, legislative advocacy, and community engagement and education.</p> <p><b>Statements of Support:</b></p> <p><b>Acting Secretary Robin Lipson, Executive Office of Elder Affairs:</b> "We thank Attorney General Andrea Joy Campbell and her team for their dedication to protecting residents in assisted living. The demographics of these residents continues to evolve – they are now older, with more complex needs, and it is essential that we ensure these individuals are informed and protected as they navigate their living options. Elder Affairs looks forward to working with the Attorney General's Office as the team explores ways to address assisted living residence consumer issues."</p> <p><b>Former Senator Richard Moore, Co-Founder of Dignity Alliance and Member of the Leadership Council of the National Consumer Voice for Quality Long-Term Care:</b> "Protecting older adults in assisted living facilities from financial, or other forms of abuse, is an important goal for Dignity Alliance. Attorney General Campbell deserves high praise for taking action to expand consumer protections to this vulnerable population. And since October is designated as "Residents' Rights Month," it's a great time to launch the development of this vital effort."</p> <p><b>John Ford, Northeast Justice Center and Dignity Alliance:</b> "The Attorney General's concern for the residents of more than 250 Assisted Living Residences in Massachusetts echoes the concerns of many residents, their loved ones and their advocates. Their advocates in particular know the value and scope of the protections afforded by regulations issued pursuant to the Consumer Protection Act (chapter 93A), which give weight and specificity as to what would be an unfair act or practice. We applaud the Attorney General's commitment to the growing numbers of consumers who will be protected by the regulations."</p> <p><b>Kathleen Lynch Moncata and Liane Zeitz, Mass. Chapter of the National Academy of Elder Law Attorneys:</b> "Massachusetts has a long history of pioneering consumer protections for vulnerable populations such as nursing home residents and tenants and we welcome comparable protections for consumers of assisted living residences (ALRs). ALR residents currently have little legal recourse when they do not receive the quality of care they've contracted for or when their rights are violated. We support Attorney General Campbell's efforts to provide increased protections for this vulnerable population."</p> <p><b>To submit comments:</b>  <a href="https://massgov.formstack.com/forms/community_feedback_on_a_go_assisted_living_residences">https://massgov.formstack.com/forms/community_feedback_on_a_go_assisted_living_residences</a></p>
Input Opportunities	Massachusetts Health and Disability Program of the Department of Public Health

	<p><b>Health Care Professional Trainings</b></p> <p>The Massachusetts Health and Disability Program of the Department of Public Health is looking for feedback on two health care provider trainings:</p> <ol style="list-style-type: none"> <li>1. <a href="#">Responsive Practice: Providing Health Care and Screening to Individuals with Disabilities</a></li> <li>2. <a href="#">Responsive Practice: Accessible and Adaptive Communication.</a></li> </ol> <p>These trainings are intended to help “providers reduce barriers and improve access to health care and preventative services. In order to provide feedback, please take either (or both!) training and then submit a <a href="#">feedback form here</a>.</p>
<p><b>To Join Strategic Preparedness and Response Boards</b></p>	<p><b>Administration on Community Living (ACL)</b>  <a href="#">Strategic Preparedness and Response Boards</a></p> <p>ACL encourages stakeholders in our aging and disability networks to apply to join one of two advisory groups run by the National Advisory Committees that bring together top experts from across the country to provide valuable advice and recommendations to the Secretary of Health and Human Services. These committees, managed by the Administration for Strategic Preparedness and Response (ASPR), are the National Advisory Committee on Seniors and Disasters and the National Advisory Committee on Individuals with Disabilities and Disasters.</p> <p>Read the message below from ASPR to learn more about these advisory groups and committees and how to apply to join one:</p> <p><i>You Can Make a Difference by Serving on an HHS National Advisory Board/Committees</i></p> <p>Are you ready to make a meaningful impact on public health and emergency preparedness?</p> <p>Whether your passion lies in supporting individuals with disabilities, advocating for the well-being of older adults, or using science to combat emerging threats, you may be able to use your expertise to contribute to one of our national advisory groups.</p> <p>The National Advisory Committees (NAC) bring together top experts from across the country to provide valuable advice and recommendations to the Secretary of Health and Human Services (HHS). These boards/committees are managed by the Administration for Strategic Preparedness and Response (ASPR) and can also offer recommendations to the ASPR Administrator and Assistant Secretary when needed.</p> <p>Throughout the year, these nationally recognized subject matter experts meet in working groups and public sessions to tackle important issues and offer fresh insights that shape HHS strategies and programs. Each board/committee offers a unique opportunity to lend your expertise and help shape the future of disaster preparedness and response in the United States.</p> <p>By joining one of these advisory groups, you can help protect vulnerable communities, influence critical health policies, and be part of a national effort to save lives during public health emergencies. Explore the committees, find the one that speaks to your passion, and take the next step toward making a difference.</p>

	<p>Applications are open now through January 11, 2025. Your voice can help shape a more resilient and prepared nation.</p> <p><a href="#">Learn more and apply</a></p>
<p><b>NASW Committee Advocating for Older Adults and People with Disabilities</b></p> 	<p><b>National Association of Social Worker – Massachusetts Chapter</b>  <i>NASW Committee Advocating for Older Adults and People with Disabilities</i></p> <p>The NASW Nursing Home Committee has expanded its focus with the new name: The Committee Advocating for Older Adults and People with Disabilities. Our committee thrives on addressing issues in facilities and peoples' needs while living in the community. We meet the third Thursday of every month at 6:30 p.m. by Zoom--computer or phone line is fine.</p> <p>Whether you are a geriatric social worker, a person working with people with disabilities, a caregiver, a clinician, a macro social worker, or just interested in learning something new, we welcome you to join us. Contact <a href="mailto:bsilva.naswma@socialworkers.org">bsilva.naswma@socialworkers.org</a> to join the email list.</p>
<p><b>Recruitment</b></p>	<p><b>See:</b> <a href="#">Listings on MASterList.com's Job Board</a></p>
<p><b>Guide to news items in this week's Dignity Digest</b></p>	<p><b>Nursing Homes</b>  <a href="#">Last Gasp or Reckoning: Making Sense of 2025 Nursing Home Survey Changes</a> (Skilled Nursing News, November 27, 2024)  <a href="#">CMS' obesity drug coverage implications for nursing home patients</a> (McKnights Long-Term Care, November 27, 2024)</p> <p><b>Home and Community-Based Services</b>  <a href="#">Charting new territory: the early lessons in integrating social determinant of health (SDOH) measures into practice</a> (Health Affairs Scholar, November 14, 2024)</p> <p><b>Housing</b>  <a href="#">Main Street Lots Merged As Part Of Nursing Home Redevelopment</a> (The Falmouth Enterprise, November 27, 2024)</p> <p><b>Disability Topics</b>  <a href="#">Feds Examine Policies Affecting People With Disabilities</a> (SpecialNeedsAnswers.com, November 20, 2024)  <a href="#">Artificial intelligence is opening doors for people with disabilities</a>, WCVB, November 14, 2024  <a href="#">Justice Department Secures Settlement Agreement with Colorado to Ensure Opportunities for People with Physical Disabilities to Live at Home</a> (U. S. Department of Justice, November 1, 2024)  <a href="#">Performance of the Washington Group questions in measuring blindness and deafness</a> (Health Affairs Scholar, October 15, 2024)</p> <p><b>Healthcare Topics</b>  <a href="#">When a home turns into the hospital</a> (*Boston Globe, November 29, 2024)</p> <p><b>Medicare</b>  <a href="#">Good luck figuring out Medicare</a> (Bloomberg Opinion via Salem News, November 29, 2024)  <a href="#">Medigap-guaranteed issue associated with Medicare Advantage disenrollment for beneficiaries administered a part B drug</a> (Health Affairs Scholar, October 23, 2024)</p> <p><b>Covid / Long Covid</b>  <a href="#">COVID-19, Flu, RSV Vaccine Coverage Low for Nursing Home Residents</a> (Diabetes in Control, November 26, 2024)</p>

[Factors impacting vaccine uptake among adult Medicaid beneficiaries: a systematic literature review](#) (**Health Affairs Scholar**, November 12, 2024)

**Caregiving**

[Healey-Driscoll Administration Awarded Nearly Half a Million Dollars to Support Family Caregivers](#) (**Executive Office of Elder Affairs**, November 8, 2024)

[Direct Care Workers in the United States: Key Facts 2024](#) (**PHI**, September 2, 2024)

**End of Life**

[British Lawmakers Vote to Legalize Assisted Dying in Landmark Decision](#) (**\*New York Times**, November 29, 2024)

**Transportation**

[Healey-Driscoll Administration, MBTA, Congressman Auchincloss, Mayor Fuller Celebrate Commitment to Rebuild Newtonville Station](#) (**Office of Governor Maura Healey and Lt. Governor Kim Driscoll**, November 25, 2024)

[MBTA Go](#) (**MBTA**)

[DOT Issues Landmark \\$50 Million Penalty Against American Airlines for Its Treatment of Passengers with Disabilities](#) (**U. S. Department of Transportation**, October 23, 2024)

**Workforce**

[Citing 'burnout,' nearly 300 primary care doctors at Mass General Brigham take steps to unionize](#) (**\*Boston Globe**, November 18, 2024)

**Elder Abuse**

[Three Plymouth Women Arraigned On Charges Related To Fatal Elder Neglect Case](#) (**Office of the Attorney General Andrea Campbell**, November 22, 2024)

**Federal Administration Transition**

[What Trump's Win Could Mean For Medicaid, Disability Programs](#) (**disabilitycoop**, November 8, 2024)

**Public Policy**

[AG Campbell Issues Guidance On Donating To Charities Ahead Of Giving Tuesday And Holiday Season](#) (**Office of Attorney General Andrea Campbell**, December 2, 2024)

[Post-election report shows accessibility, ballot and registration issues](#) (**WBUR**, November 21, 2024)

[Voting Rights Coalition Releases Election Day Report](#) (**The Massachusetts Election Protection Program Steering Committee (Common Cause)**, November 20, 2024)

[NASW Submits Comments Regarding Strategic Framework for a National Plan on Aging](#) (**National Association of Social Workers**, October 2024)

**Social Security**

[Social Security Tackles Overpayment 'Injustices,' but Problems Remain](#) (**KFF Health News**, November 18, 2024)

**From Around the Country**

[State Moves to Pull License for Corvallis Nursing Home](#) (**Williamette Week**, November 28, 2024)

[A crisis of care: Connecticut seeing alarming rate of nursing home closures](#) (**Fox 61.com (video report)**, November 26, 2024)

	<p><a href="#">Minnesota nursing homes sue to block state pay rule for workers</a> (MPRRadio, November 26, 2024)</p> <p><b>Public Sessions</b> <i>Virtual public hearing (Executive Office of Veterans Services, Friday, December 6, 2024, 10:00 a.m.)</i></p>
<p><b>Webinars and Online Sessions</b></p>	<ol style="list-style-type: none"> <li>1. <b>National Institute of Health</b> Tuesday, December 3, 2024, 2:30 to 3:30 p.m. <a href="#">NIH Virtual Town Hall on Disability Research</a> The National Institutes of Health (NIH) is developing an agency-wide plan for disability research and is looking for <a href="#">community involvement</a> from people with disabilities, researchers, clinicians, and advocacy organizations. This town hall will be held virtually and will include a presentation and a Q&amp;A with the audience. ASL and CART will be provided.</li> <li>2. <b>THE NGO COMMITTEE ON AGEING-NEW YORK</b> Thursday, December 5, 2024, 10:00 to 11:00 a.m. <a href="#">The intersection of Disability, Aging, and Human Rights: An Often-Forgotten Perspective</a> Join in commemorating two important United Nations events every December: The International Day of Persons with Disabilities and Human Rights Day. Find out why aging is often forgotten in the celebrations and why it should be an integral part of the discussions on disability and human rights. The speaker, Bethany Brown, J.D., a noted authority on disability rights and aging, is the Director of Global Advocacy, at AARP, and has held senior positions with Human Rights Watch and HelpAge USA. This event will be moderated by Amanda McRae, Advocacy &amp; Accountability Director at Women Enabled International. This is a virtual Program. Use this link (no registration required): <a href="https://us02web.zoom.us/j/83884611006">https://us02web.zoom.us/j/83884611006</a></li> <li>3. <b>Institute for Human Centered Design</b> Tuesday, December 10, 2024, 12:00 p.m. <a href="#">Designing Multisensory Wayfinding for Paris 2024 Athletes' Village</a> Last summer, the 2024 Olympics and Paralympics Games took place in Paris. The goal of the French Olympic Committee was to rely as much as possible on existing infrastructure. However, new sports venues and living spaces were still created to accommodate athletes from around the world and their supporters. One example is the athletes' village, which was designed and built specifically for this event but intended to remain useful afterward. Located in Seine-Saint-Denis, near Paris, the village will house up to 6,000 residents and an equal number of employees starting in 2025, spread across 130 acres. As a symbol of social and environmental innovation, this site must serve as a model of inclusion. To do so, In partnership with the French Olympic Committee and Solidéo, the project manager for the site, Okeenea Group developed a concept for a tactile, sound, and visual orientation table to help people navigate the space. Placing universal accessibility and quality of life at the core of our approach, we aimed to go beyond mere compliance with standards and regulations, by integrating sensitivity to accessibility issues through different criteria such as considering the needs of the entire population, addressing various perceptual needs, seamlessly fitting into pedestrian pathways and fostering a positive connection to the evolving community. Over an 18-month participatory design phase, our teams applied universal design principles to create an innovative and inclusive urban signage tool.</li> </ol>

The outcome of this work allows everyone, with or without disabilities, to easily find their way around the space.

**About the speaker**

Sylvain Denoncin is a French accessibility expert. An international speaker, he has been sharing his expertise in wayfinding and mobility assistive technologies for 15 years.

A specialist in standards, particularly ISO and accessibility guidelines, he works alongside AFNOR, the French organization responsible for standardization.

For six years, he served as President of AFPAPH (French Association of Professionals for Accessibility to People with Disabilities), which brings together up to 60 stakeholders in the field. He is currently serving as the association's Vice President.

He also chairs the Okeenea Group, which encompasses several verticals (building, technology, and digital), a leading French company in accessibility and inclusion.

If you have any questions or concerns or would like to request an accommodation,

please email us at [communications@IHCDesign.org](mailto:communications@IHCDesign.org).

CART captioning will be provided.

[RSVP on Eventbrite for Zoom Link](#)

**4. AARP Massachusetts**

Tuesday, December 10, 2024, 12:00 to 12:30 p.m.

[Fraud Talk Tuesday: How to Avoid Real Estate Scams](#)

*From scams in apartment rentals to mortgage relief, explore real estate scams to look out for, how to avoid them and what to do if you've been targeted.*

**About the Event**

Whether you own your own home, are in the market to buy one or you're thinking about renting, you may be at risk for scammers. We'll look at home and apartment rental scams, reverse mortgages and mortgage relief scams. Join us to explore what real estate scams to look out for, how to avoid them and what to do if you've been targeted.

Sign in to your AARP.org account or create an account to register for [events](#). AARP membership is not required. You will receive an email with the Zoom link before class.

[Register](#)

**5. Health Affairs**

Monday, December 16, 2024, 1:00 to 2:00 p.m.

[Addressing Health Disparities Amid Growing Health Care Costs](#)

Health care costs and spending continue to increase, contributing to the lack of affordable health care and growing health inequities. What can be done to address this? Join Health Affairs December 16 for a virtual event exploring how efforts designed to increase access to and quality of care for underserved communities may align with efforts to address the rising cost of health care. On the heels of the second season of Research & Justice For All, this virtual event will provide an opportunity to discuss the impact of adopting drivers of health on achieving health equity, in the context of rising health care costs. This event is sponsored by Deloitte\*. Health Affairs' Director of Health Equity Vabren Watts, PhD, will moderate the virtual briefing.

Speakers include:



	<ul style="list-style-type: none"> <li>•Margarita Alegria, PhD, Massachusetts General Hospital and Harvard Medical School</li> <li>• Andrew Anderson, PhD, Johns Hopkins University</li> <li>• Nelson Dunlap, JD, Meharry Medical College</li> </ul> <p><a href="#">Register</a></p>
<p><b>Previously posted webinars and online sessions</b></p>	<p><b>Previously posted webinars and online sessions can be viewed at:</b>  <a href="https://dignityalliancema.org/webinars-and-online-sessions/">https://dignityalliancema.org/webinars-and-online-sessions/</a></p>
<p><b>Nursing Homes</b></p>	<p><b>6. Skilled Nursing News</b>  November 27, 2024  <a href="#"><i>Last Gasp or Reckoning: Making Sense of 2025 Nursing Home Survey Changes</i></a>  By Amy Stulick  This summary provides a comprehensive overview of the significant changes to the nursing home survey process for 2025. Key points include:  Key Changes:</p> <ul style="list-style-type: none"> <li>• Increased focus on reduction of unnecessary psychotropic medications and admission, transfer, and discharge processes.</li> <li>• Emphasis on resident rights and ensuring discharges meet appropriate criteria.</li> <li>• Stricter enforcement of MDS coding and documentation requirements.</li> <li>• Greater emphasis on infection control and enhanced barrier precautions.</li> </ul> <p>Potential Impacts:</p> <ul style="list-style-type: none"> <li>• Increased citations and regulatory scrutiny.</li> <li>• Challenges in balancing resident care with regulatory compliance.</li> <li>• Potential negative impact on resident quality of life and satisfaction.</li> <li>• Increased administrative burden on nursing home staff.</li> </ul> <p>Uncertainty Regarding Future Enforcement:</p> <ul style="list-style-type: none"> <li>• The incoming Trump administration may scale back or de-emphasize certain aspects of the new regulations.</li> <li>• The extent of the administration's ability to change regulations after they are in effect remains unclear.</li> </ul> <p>Recommendations for Nursing Homes:</p> <ul style="list-style-type: none"> <li>• Prioritize compliance with new regulations, especially regarding psychotropic medication reduction and MDS coding.</li> <li>• Develop clear protocols and procedures for admission, transfer, and discharge processes.</li> <li>• Enhance staff training and education on infection control and enhanced barrier precautions.</li> <li>• Strengthen documentation and record-keeping practices.</li> <li>• Stay informed about regulatory changes and industry best practices.</li> </ul> <p>Overall, the 2025 survey changes represent a significant shift in regulatory focus for nursing homes. While the future of these changes remains uncertain, it is crucial for providers to proactively address these areas to ensure compliance and maintain high-quality care.</p> <p><b>7. McKnights Long-Term Care</b>  November 27, 2024  <a href="#"><i>CMS' obesity drug coverage implications for nursing home patients</i></a>  By Zee Johnson  The Centers for Medicare &amp; Medicaid Services (CMS) has proposed a rule change that could expand Medicare coverage for anti-obesity medications.</p>

	<p>This change is aimed at improving the quality of care for individuals with severe obesity, a condition recognized as a chronic disease.</p> <p>Key points of the proposed rule:</p> <ul style="list-style-type: none"> <li>• Expanded coverage: Medicare Part D would cover anti-obesity medications for individuals with obesity, even if they don't have other related conditions like diabetes.</li> <li>• Potential benefits: This could improve the health and quality of life for many Medicare beneficiaries, especially those in nursing homes.</li> <li>• Increased costs: However, the rule could also lead to higher costs for Medicare and Medicaid.</li> <li>• Impact on nursing homes: The rule could reduce costs for nursing homes by improving the health of residents with obesity.</li> </ul> <p>This proposed rule change reflects the growing recognition of obesity as a serious health condition and the potential benefits of medical treatment.</p>
<p><b>Home and Community Based Services</b></p>	<p><b>8. Health Affairs Scholar</b> November 14, 2024 <a href="#"><u>Charting new territory: the early lessons in integrating social determinant of health (SDOH) measures into practice</u></a> By Adrianna Nava , Kristen Bishop, Polina Lissin, Rachel L. Harrington</p> <p><b>Abstract</b> Quality measures for social determinants of health (SDOH) have been introduced or proposed in more than 20 federal programs, initiatives, or guidance documents to capture performance, but understanding the scope of work needed to effectively collect and align with these new measurement requirements is still in its early stages. The National Committee for Quality Assurance (NCQA) recently developed the Social Need Screening and Intervention (SNS-E) measure and is currently building 2 new domains of interest: utility insecurity and social connection. Before these domains can be leveraged to drive population health, the feasibility of collecting and reporting on them must be assessed. This report describes qualitative data collection on the barriers and facilitators of collecting data elements for utility insecurity and social connection from 8 diverse health plans. Although plans reported that collecting SDOH data was feasible, they identified barriers associated with multiple data systems, coding, as well as data formatting, storage, extraction, and mapping. Further research is needed to explore additional codes, mechanisms for collecting SDOH data in a patient-centric manner, and ensuring that health plans, health care systems, and community partners can align with national measurement initiatives. Standardizing these data will be key to improving outcomes for all.</p>
<p><b>Housing</b></p>	<p><b>9. The Falmouth Enterprise</b> November 27, 2024 <a href="#"><u>Main Street Lots Merged As Part Of Nursing Home Redevelopment</u></a> By Katie Nelson</p> <p>In one of the shortest planning board meetings in recent history, the board heard plans to merge two lots that are part of developer Michael Galasso's planned redevelopment of the old Royal Falmouth Nursing &amp; Rehabilitation Center on Main Street into 67 units of workforce housing. . . .</p> <p>The housing project had received approval from the zoning board of appeals back in May. The units will consist of 30 year-round apartments (all rented as affordable) and 37 single-occupancy rooms rented month to month, intended to serve Falmouth's seasonal workforce. A 24-seat café is also proposed as part of the project.</p>
<p><b>Disability Topics</b></p>	<p><b>10. SpecialNeedsAnswers.com</b></p>

November 20, 2024

[Feds Examine Policies Affecting People With Disabilities](#)

In October 2024, the National Council on Disability (NCD) released its annual [progress report on national disability policy](#). The report covers developments in disability policy and law from the past year. It highlights recent advancements as well as ongoing challenges, evaluates emerging law, and offers recommendations regarding employment, travel, housing, technology, and disability population data collection.

The NCD is an independent federal agency that seeks to advise federal and state governments and organizations on disability policies and enhance quality of life across the disability community.

**Health Care Policy**

The NCD aims in part to address the health care disparities affecting those with disabilities. The report states that many disabled Americans face barriers and bias in the U.S. health care system. Because of this, they often do not use it for preventative care, and some even see the system as harmful.

This population also has lower life expectancies and are three times more likely than those without a disability to experience such health conditions as arthritis, diabetes, and a heart attack.

The report outlines numerous recommendations specific to health care policy that the NCD deems crucial to ensuring people with disabilities have an equal opportunity to access health care.

Its first recommendation was achieved in September 2023, when the National Institute on Minority Health and Health Disparities (NIMHD) officially designated people with disabilities as a health disparities population, following the NCD's recommendation. This designation, the report states, will encourage more research on strategies to eliminate U.S. health care disparities.

Second, the NCD endorses a [pending bill](#) that would designate those with intellectual and developmental disabilities ([I/DD](#)) as a special medically underserved population. If enacted, the bill could lead to more government programs focused on increasing health care access for this group.

Other recommendations on health care policy in the report include requiring:

- medical, nursing, and health care professional schools to make disability clinical care curricula a standard in their education programs;
- U.S. government programs to improve collection of health data for individuals with disabilities and collaboration across agencies at the federal level;
- researchers to include people with disabilities in clinical trials; and
- that medical and diagnostic equipment, such as examination tables, mammography machines, and at-home medical tests, is accessible to all patients.

Notably, the federal government [finalized a rule](#) earlier this year strengthening health and social service program protections for people with disabilities.

**Transportation and Travel Policies**

To help travelers with disabilities, Congress [passed](#) the 2024 Federal Aviation Administration (FAA) Reauthorization Act in May 2024. This law aims to improve inclusion and access for these travelers. The legislation includes such enhancements as accommodations for disability-related seating requests, new training standards for airline staff on handling and

storing wheelchairs, and universal changing stations in all medium and large airports nationwide.

The NCD report also highlights other developments that constitute steps toward better transportation access:

- Amtrack continued to provide employee training in accessibility as well as more accessible stations and cars.
- The U.S. Access Board, a federal agency that works to secure accessibility for people with disabilities, outlined minimum guidelines that, once adopted, would ensure accessible public sidewalks and crosswalks for pedestrians with disabilities.

### **Employment Policy**

The NCD recommends phasing out the [AbilityOne Program](#) and replacing it with an amendment to Section 503 of the Rehabilitation Act requiring federal contractors to employ a percentage of individuals with significant disabilities or blindness. The AbilityOne Program, in place since 1938, provides employment for more than 36,000 people with disabilities nationwide.

The council also suggests that the federal government take steps to remedy the disparity in vocational programs and services available on tribal lands. As the report indicates, Tribal Vocational Rehabilitation Programs and American Indian tribes are not eligible for guaranteed annual funding. The NCD is currently finalizing a report addressing the experiences of people with disabilities on tribal lands.

### **Housing Policy**

In its report, while the NCD notes that accessibility in homes is an ongoing issue for the disability community, it focuses specifically on housing policy for people with disabilities amid disaster response. Under a new rule issued this past spring, the Federal Emergency Management Agency (FEMA) now has funding available to improve the accessibility of homes affected by declared disasters.

### **U.S. Census Disability Data**

In October 2023, the U.S. Census Bureau proposed a plan to change its disability questions. The NCD expressed concern that the revised questions would reduce the estimated population of people with disabilities in the U.S. from 13.9 percent to 8.1 percent.

The council encouraged the U.S. Census to work with the disability community to find a better counting method. After meetings with people across the disability community, the Census Bureau now states it [will not change](#) any of its disability census questions in 2025 or 2026.

### **Technology Policy**

The NCD's recommendations also include pushing for equitable access to digital programs and services. It notes that the Department of Justice issued a [final rule](#) earlier this year regarding Title II of the Americans with Disabilities Act (ADA) that requires state and local government entities to ensure that their web-based and mobile app programs are accessible to all users.

While the NCD recognizes the advances that have taken place in these diverse areas over the past year, it stresses that the executive and legislative branches of the U.S. government must continue working together to support people with disabilities.

"It is crucial to acknowledge that many challenges persist for those whose primary struggles remain unaddressed," the report concludes. "In the

coming years, it is imperative to rectify these policy shortcomings and continue building strides made in the fight for disability rights.”

[Read National Disability Policy: A Progress Report, 2024.](#)

#### 11. WCVB

November 14, 2024

[Artificial intelligence is opening doors for people with disabilities](#)

By Leanna Scachetti

Artificial intelligence (AI) is revolutionizing technology for people with disabilities, making it more accessible and inclusive.

Cory Kadlik, an assistive technology manager, highlights the significant advancements in recent years, such as AI-powered apps that can read photo descriptions, allowing users to independently perform tasks like choosing clothes.

AI's potential to further expand accessibility is immense, with self-driving vehicles being a prime example. Kadlik envisions a future where inaccessibility becomes a thing of the past.

Beyond technology, people with disabilities also seek greater access to housing, public transportation, and employment opportunities.

#### 12. U. S. Department of Justice

November 1, 2024

[Justice Department Secures Settlement Agreement with Colorado to Ensure Opportunities for People with Physical Disabilities to Live at Home](#)

The U.S. Department of Justice has reached a [settlement agreement](#) with Colorado to address discrimination against individuals with physical disabilities. The state was accused of unnecessarily segregating these individuals in nursing facilities, violating the Americans with Disabilities Act and the Olmstead decision.

The settlement requires Colorado to:

- Help nursing facility residents return to the community.
- Identify individuals at risk of unnecessary nursing facility admission.
- Provide information to individuals about community-based services.
- Improve access to Medicaid long-term care services.
- Increase opportunities for self-directed care.
- Support family caregivers.
- Facilitate timely transitions from nursing facilities to the community.
- Expand and improve affordable, accessible housing options.

The goal of the settlement is to increase community integration for individuals with physical disabilities and reduce reliance on nursing facilities.

#### 13. Health Affairs Scholar

October 15, 2024

[Performance of the Washington Group questions in measuring blindness and deafness](#)

Scott D. Landes, Bonnielin K. Swenor, Jean P. Hall

##### Abstract

The Washington Group Short Set (WGSS) questions are intended to measure the severity of disability and disability status in US federal surveys. We used data from the 2010–2018 National Health Interview Survey to examine the performance of the WGSS visual disability and hearing disability questions in capturing blindness and deafness. We found that the WGSS questions failed to capture 35.7% of blind adults and 43.7% of deaf respondents as having a severe disability, or, per their recommended cut point, as being disabled. Coupled with evidence demonstrating the poor performance of the WGSS questions in estimating the size of the overall

	<p>disability population, we contend that results from this study necessitate a halt in the use of the WGSS questions to measure disability in US federal surveys.</p>
<p><b>Medicare</b></p>	<p><b>14. Bloomberg Opinion via Salem News</b>  November 29, 2024  <a href="#"><u>Good luck figuring out Medicare</u></a>  To the stalwart seniors reviewing their Medicare coverage this fall: Godspeed.</p> <p>The open-enrollment process has become so convoluted that almost 70% of beneficiaries don't bother to compare their options. Many are opting to migrate to Medicare Advantage, a simpler, privately run alternative paid for by the government. By 2034, more than 60% of seniors will be enrolled, up from about half today.</p> <p>The popularity of Medicare Advantage would be good news if not for its exorbitant cost. The government spends 22% more on MA beneficiaries than similar enrollees in the traditional program, amounting to \$83 billion annually. MA beneficiaries, in return, enjoy more streamlined coverage and generous benefits while paying little or nothing in premiums.</p> <p>Unfortunately, Medicare's fiscal state doesn't leave much room for such extravagance. Its main trust fund is slated for insolvency by 2036. Total expenditures reached \$1 trillion last year — some 16% of the federal budget — up from \$575 billion a decade earlier. The demographics are similarly unfavorable: As the population ages, fewer workers will fund the program through payroll taxes.</p> <p>Lawmakers have taken steps to rein in MA spending, including a practice known as upcoding, which inflates insurer payments. They're also increasing scrutiny of care denials. Yet little's been done to address the deficiencies in the traditional program that have spurred the flight to MA.</p> <p>Medicare, the federal health plan for seniors, was created in 1965. It started with Parts A and B for hospital and doctor services. Over time, Congress added and standardized supplemental benefits, including Part D for prescription drugs and Medigap, which helps seniors cover out-of-pocket expenses. Both are optional and run by commercial insurers, though the government helps pay for Part D. Medicare Advantage is considered Part C. Each benefit in this patchwork abides by its own rules and imposes different costs. Part A typically has no premium and a high deductible; Part B has a moderate premium and lower deductible, with a 20% coinsurance rate for most visits. Neither has an out-of-pocket maximum. The average beneficiary can then choose from 10 Medigap policies and no less than 21 stand-alone Part D plans.</p> <p>MA, by contrast, is a one-stop shop. It bundles hospital and doctor visits and prescription drug coverage with perks such as vision, hearing and dental care, while caps on out-of-pocket spending eliminate the need for Medigap. The trade-off is a more limited provider network and restrictions on care. Yet satisfaction scores remain high.</p> <p>The choice between a larger network with higher out-of-pocket costs (Medicare) and a narrower one with lower costs (MA) isn't always an obvious one for a senior on a fixed budget. And the system's overriding complexity makes choosing much harder. As things stand, it often amounts to high-stakes guesswork.</p> <p>Simplifying Medicare is no simple task. But it would increase competition, save taxpayers money and protect the solvency of a critical government</p>

	<p>program. It's also the right thing to do for the 65 million seniors who currently face a maddening array of ambiguous choices.</p> <p><b>15. Health Affairs Scholar</b>  October 23, 2024  <a href="#"><u>Medigap-guaranteed issue associated with Medicare Advantage disenrollment for beneficiaries administered a part B drug</u></a>  By Angela Liu, David Pittman, Gerard Anderson, and Jianhui Xu</p> <p><b>Abstract</b>  While many Medicare beneficiaries are enrolling in Medicare Advantage (MA), some beneficiaries may want to return to traditional Medicare and purchase Medigap, especially beneficiaries who have greater medical needs. Beyond minimal federal regulations, states impose additional regulations that impact Medigap affordability. Beneficiaries in some states have greater difficulty obtaining Medigap coverage because the states where they live allow Medigap insurers to experience rate the beneficiary, which can make Medigap insurance prohibitively expensive. We examined beneficiaries who received physician-administered drugs, which can be expensive and subject to high cost sharing, to see if disenrollment from MA for these beneficiaries was greater in states with Medigap consumer protection policy levels. In 2020, we find a 1.0% average baseline average probability of MA disenrollment. For beneficiaries who received a physician-administered drug in our sample, the probability of MA disenrollment is 3.7 (95% CI, 2.6-4.8; <math>P &lt; .001</math>) percentage points higher in Medigap-guaranteed issue states compared with states with no protections. We find a greater association between MA disenrollment and Medigap protection policies with higher cost drugs. These findings suggest that beneficiaries who receive a high-volume and high-spending physician-administered drug are more likely to disenroll from MA back to traditional Medicare when Medigap is more affordable.</p>
<p><b>Healthcare Topics</b></p>	<p><b>16. *Boston Globe</b>  November 29, 2024  <a href="#"><u>When a home turns into the hospital</u></a>  By Fenit Nirappil  <i>As some health care providers treat the seriously ill outside of care facilities, critics see risks</i></p> <p>Summary:  The hospital-at-home model is gaining traction as a way to provide acute care to patients in their homes, reducing the strain on hospitals and offering a more comfortable and personalized experience for patients.</p> <p>Benefits of Home Hospitalization:</p> <ul style="list-style-type: none"> <li>• Patient Comfort: Patients can recover in their own familiar environment, reducing stress and anxiety.</li> <li>• Reduced Risk of Infection: Home settings have lower risks of hospital-acquired infections.</li> <li>• Improved Patient Outcomes: Studies suggest better outcomes and lower readmission rates for some patients.</li> <li>• Cost-Effectiveness: While not yet definitively proven, home care may offer long-term cost savings.</li> </ul> <p>Challenges and Concerns:</p> <ul style="list-style-type: none"> <li>• Family Burden: Caregiving responsibilities may fall on family members, which could be burdensome.</li> <li>• Limited Access to Specialized Care: Complex cases may still require traditional hospital settings.</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Technological Limitations:</b> Reliance on telehealth and remote monitoring can be challenging, especially for older or less tech-savvy patients.</li> <li>• <b>Regulatory Hurdles:</b> The future of home hospitalization programs depends on federal regulations and potential extensions.</li> </ul> <p>While the hospital-at-home model holds promise, it's crucial to carefully assess patient suitability and ensure adequate support systems are in place to maintain patient safety and well-being.</p>
<p><b>Covid / Long Covid</b></p>	<p><b>17. Diabetes in Control</b>  November 26, 2024  <a href="#"><u>COVID-19, Flu, RSV Vaccine Coverage Low for Nursing Home Residents</u></a>  By Elana Gotkine</p> <p>This research summary highlights the low vaccination rates among nursing home residents for COVID-19, influenza, and RSV during the 2024-2025 season. Despite the availability of vaccines for these respiratory illnesses, a significant portion of residents remain unvaccinated.</p> <p>Key findings include:</p> <ul style="list-style-type: none"> <li>• <b>Low COVID-19 vaccination rate:</b> Only 29.7% of residents had received the updated COVID-19 vaccine by November 10, 2024.</li> <li>• <b>Lower influenza and RSV vaccination rates:</b> Among facilities reporting influenza and RSV vaccination data, 58.4% and 17.9% of residents, respectively, had received these vaccines.</li> <li>• <b>Variation across regions and facilities:</b> Vaccination coverage differed based on geographic location, social vulnerability, and facility size.</li> </ul> <p>The researchers emphasize the need to prioritize vaccination efforts in nursing homes to protect vulnerable residents from severe illness caused by these respiratory viruses.</p> <p><b>18. Health Affairs Scholar</b>  November 12, 2024  <a href="#"><u>Factors impacting vaccine uptake among adult Medicaid beneficiaries: a systematic literature review</u></a>  By Emily Moss, Amanda L. Eiden, Louise Hartley, Justin Carrico, Raymond Farkouh, Sara Poston, Meghan Gabriel, Anna Hundt Golden, and Alexandra Bhatti</p> <p><b>Abstract</b></p> <p>Vaccine uptake is suboptimal among adult Medicaid beneficiaries. To evaluate factors affecting vaccine uptake among adult Medicaid beneficiaries and/or affecting healthcare providers who vaccinate adult Medicaid beneficiaries, we conducted a systematic literature review in Embase, Medline, Database of Abstracts of Reviews of Effects, and the Cochrane Library for articles published from January 2005 through July 2022 and relevant conferences. For included studies, data were extracted on the study characteristics, patient and provider cost barriers, patient and provider perceived risks/benefits, and other barriers faced by patients and providers. Quality assessments were conducted using a checklist from the Joanna Briggs Institute. Twenty-one studies analyzed patient-related factors (14 studies) and/or provider-related factors (8 studies). Reviewed studies indicate that vaccine uptake is influenced by insurance benefit and cost-coverage policies, including cost-sharing, access to vaccination services, and vaccine education and awareness. Financial factors, including reimbursement for vaccine acquisition and administration, influence providers' vaccination practices for Medicaid beneficiaries. Our findings suggest that reducing or eliminating vaccination cost-sharing, promoting vaccine education and awareness about the importance and safety of</p>



	<p>vaccines, increasing access, and exploring reimbursement rates equivalent with other public or private insurance plans could mitigate barriers to vaccination for the adult Medicaid population.</p>
<b>Caregiving</b>	<p><b>19. Executive Office of Elder Affairs</b> November 8, 2024 <a href="#"><u>Healey-Driscoll Administration Awarded Nearly Half a Million Dollars to Support Family Caregivers</u></a> Massachusetts is set to receive \$490,000 in grant funding to support family caregivers. This funding will be used to develop policies and resources to improve the well-being of caregivers and reduce stress. The state is one of four selected to lead the implementation of the national strategy to support family caregivers. The funding will be used to develop policy aimed at increasing the well-being and reducing the stress of family caregivers by identifying priorities for caregivers and barriers to accessing services. The Executive Office of Elder Affairs will also develop and distribute a guide to resources for information and referral specialists for caregivers. The Executive Office of Elder Affairs will lead the grant funding implementation and partner with the Department of Developmental Services to focus on breaking down silos at the state level and engaging diverse populations that have been historically underserved and under-resourced.</p> <p><b>20. PHI</b> September 2, 2024 <a href="#"><u>Direct Care Workers in the United States: Key Facts 2024</u></a> <i>Direct Care Workers in the United States: Key Facts</i> provides a new annual snapshot of the direct care workforce, including its demographics, occupational roles, job quality challenges, and projected job openings. The report includes detailed overviews of three segments of this workforce: home care workers, residential care aides, and nursing assistants in nursing homes. Key Takeaways</p> <ul style="list-style-type: none"> <li>• 'Direct Care Workers in the United States: Key Facts' provides a new annual snapshot of the direct care workforce.</li> <li>• When occupational transfers and labor force exits are also included, there will be an estimated 8.9 million total job openings in direct care from 2022 to 2032.</li> <li>• As a result of low wages and part-time hours, median annual earnings for direct care workers were only \$25,015.</li> </ul> <p><a href="#"><u>Download the Report</u></a></p>
<b>End of Life</b>	<p><b>21. *New York Times</b> November 29, 2024 <a href="#"><u>British Lawmakers Vote to Legalize Assisted Dying in Landmark Decision</u></a> By Stephen Castle The British Parliament has voted in favor of a bill that would allow assisted dying for terminally ill patients in England and Wales under strict conditions. The bill applies to adults with a terminal diagnosis and less than six months to live, requiring approval from two doctors and a judge. The fatal drugs must be self-administered. While this is a landmark moment, the bill still needs to go through parliamentary committees and amendments may be proposed. Proponents argue that assisted dying is a compassionate way to end suffering, while critics express concerns about potential coercion and the impact on the healthcare system.</p>
<b>Workforce</b>	<p><b>22. *Boston Globe</b></p>

	<p>November 18, 2024  <a href="#"><u>Citing 'burnout,' nearly 300 primary care doctors at Mass General Brigham take steps to unionize</u></a>          By Jonathan Saltzman          Summary:          Primary care physicians at Mass General Brigham (MGB) are taking steps to unionize, marking a significant shift in the healthcare industry. <a href="#"><u>The Doctors Council describes itself as the country's oldest and largest union of attending, or fully trained, physicians.</u></a> This move is driven by concerns over increasing workloads, insufficient pay, staff shortages, and a loss of autonomy.          Key points:</p> <ul style="list-style-type: none"> <li>• Unionization Effort: Primary care physicians at MGB are seeking to form a union with the Doctors Council.</li> <li>• Reasons for Unionization: Overwhelming workloads, inadequate compensation, staff shortages, and a decline in autonomy are the primary reasons for this move.</li> <li>• Impact on Healthcare: This could potentially set a precedent for other physicians at different health systems to follow suit.</li> <li>• Historical Context: This is the third time in a year and a half that MGB physicians have taken steps to unionize.</li> <li>• Industry-Wide Trend: The trend of physician unionization is growing nationwide as more doctors become employed by health systems.</li> </ul> <p>This development highlights the growing dissatisfaction among physicians and could lead to significant changes in the healthcare industry.</p>
<p><b>Transportation</b></p>	<p><b>23. Office of Governor Maura Healey and Lt. Governor Kim Driscoll</b>          November 25, 2024  <a href="#"><u>Healey-Driscoll Administration, MBTA, Congressman Auchincloss, Mayor Fuller Celebrate Commitment to Rebuild Newtonville Station</u></a>  <i>Newtonville Station will become the first fully accessible MBTA Commuter Rail station in the City of Newton</i>          The Healey-Driscoll Administration and local leaders are celebrating the commitment to rebuild Newtonville Station into the first fully ADA accessible Commuter Rail station in Newton. This project will improve accessibility, safety, and reliability for commuters. Key improvements include:</p> <ul style="list-style-type: none"> <li>• Two fully accessible, level-boarding platforms</li> <li>• Up-and-over bridge for wheelchair users</li> <li>• Elevators to access platforms</li> <li>• Track and signal upgrades</li> <li>• Benches, canopies, and improved lighting</li> <li>• Safety features like blue phones and CCTV cameras</li> <li>• Dedicated pick-up and drop-off areas</li> <li>• Bicycle racks</li> </ul> <p>This project is a significant step towards a more accessible and equitable transportation network for all. It will make commuting easier for people with disabilities, families with strollers, and travelers with luggage. The station's upgrades will also encourage transit-oriented development and improve connectivity between communities.</p> <p><b>24. MBTA</b>  <a href="#"><u>MBTA Go</u></a>          The MBTA has launched a new mobile app called "<a href="#"><u>MBTA Go</u></a>" that provides <a href="#"><u>accurate</u></a> real-time updates for all fixed route services and estimated arrival times for a rider's trip.</p>

	<p><b>25. U. S. Department of Transportation</b>  October 23, 2024  <a href="#"><u>DOT Issues Landmark \$50 Million Penalty Against American Airlines for Its Treatment of Passengers with Disabilities</u></a></p> <p>The U.S. Department of Transportation (DOT) has imposed a \$50 million penalty on American Airlines for numerous violations of disability rights. These violations included mishandling wheelchairs, providing unsafe physical assistance, and failing to provide prompt wheelchair assistance. DOT's investigation revealed that American Airlines had a significant number of violations and was one of the worst performers among U.S. airlines in terms of wheelchair mishandling. This penalty sets a new precedent for enforcing disability rights in the airline industry. Read the consent order <a href="#"><u>here</u></a>.</p> <p>Under the Biden-Harris Administration, DOT has also taken historic action to improve transportation for people with disabilities in air travel.</p> <ul style="list-style-type: none"> <li>• Published the <a href="#"><u>Airline Passengers with Disabilities Bill of Rights</u></a>, which describes the fundamental rights of air travelers with disabilities under the Air Carrier Access Act and its implementing regulation.</li> <li>• Established a <a href="#"><u>final rule</u></a> on accessible lavatories on aircraft, requiring airlines to make lavatories on new single-aisle aircraft large enough to permit a passenger with a disability and an attendant to approach, enter, and maneuver within as necessary to use the aircraft lavatory.</li> <li>• Funded accessibility improvements at airports through the Bipartisan Infrastructure <a href="#"><u>Law Airport Terminals Program</u></a>. Nearly 150 projects funded under this program are improving airport terminal access for people with disabilities and ensuring compliance with the Americans with Disabilities Act.</li> <li>• Proposed a <a href="#"><u>new rule</u></a> to ensure safe and dignified accommodations for air travelers with disabilities using wheelchairs. The proposed rule would set new standards for assistance, mandate enhanced training for airline employees and contractors who physically assist passengers with disabilities and handle passengers' wheelchairs, and outline actions that airlines must take to protect passengers when a wheelchair is damaged during transport. DOT is currently working towards issuing a final rule.</li> </ul>
<p><b>Federal Administration Transition</b></p>	<p><b>26. disabilityscoop</b>  November 8, 2024  <a href="#"><u>What Trump's Win Could Mean For Medicaid, Disability Programs</u></a>  By Michelle Diament</p> <p>"Based on actions taken during the first Trump administration, we are concerned with what (the) election will mean to the funding and structure of many important programs for people with disabilities like Medicaid, (Individuals with Disabilities Education Act) funding, enforcement of civil rights laws, among others," said Eric Buehlmann, deputy executive director for public policy at the National Disability Rights Network. "Efforts to radically restructure Medicaid and pay for tax cuts for corporations by cutting other programs, are things we saw last time and expect to be tried again."</p> <p>Many of these types of policy changes are echoed in Project 2025, a 900-page conservative playbook from the Heritage Foundation. Though Trump has distanced himself from the plan, it is widely viewed as a possible blueprint for his second term.</p> <p>Before this week's election, the Consortium for Constituents with Disabilities, a coalition of national disability organizations, was raising alarm</p>

	<p>bells about Project 2025. The group called out proposals to restructure Medicaid and impose lifetime eligibility limits on the government health program as well as sweeping changes to the way that special education is funded, a plan to eliminate the U.S. Department of Education and measures that they say would weaken civil rights protections for people with disabilities.</p>
<p><b>Elder Abuse</b></p>	<p><b>27. Office of the Attorney General Andrea Campbell</b>  November 22, 2024  <a href="#"><u>Three Plymouth Women Arraigned On Charges Related To Fatal Elder Neglect Case</u></a>  <i>Defendants Allegedly Neglected Elderly Victim Resulting in Death, Submitted False Claims to MassHealth</i>  Massachusetts Attorney General Andrea Joy Campbell and Plymouth County District Attorney Timothy Cruz today announced that Eva Cardoso, Kayla Cardoso, and Lisa Hamilton were indicted and arraigned in Brockton Superior Court on various charges including manslaughter, caretaker neglect of an elder, larceny, and Medicaid fraud. The Attorney General’s Office (AGO) and Plymouth County District Attorney’s Office (DAO) allege that the three women were responsible for the wellbeing of Dinora Cardoso, 79, but that their failure to properly care for her ultimately led to her death. The AGO and DAO allege that Eva Cardoso, Dinora’s daughter, was hired to be Dinora’s personal care attendant (PCA), and Kayla Cardoso, Dinora’s granddaughter and Eva’s niece, was Dinora’s health care proxy and PCA Program Surrogate. The women allegedly billed MassHealth for services that were not provided, including for services allegedly provided while Dinora was inpatient and after her death. Additionally, bank records show that Eva provided a portion of her PCA check to Kayla on a regular basis. MassHealth paid Eva over \$140,000 for her PCA care of Dinora. Ultimately, on May 17, 2023, Eva called 911 to report that her mother needed an ambulance. First responders discovered Dinora covered in cockroaches, bedbugs, and feces. Dinora died two days later at the hospital from necrotizing fasciitis and sepsis due to infected ulcers. Hamilton was a registered nurse who was responsible for visiting Dinora at least once per week to check on her care, medical conditions, and medication intake. Based on the AGO and DAO’s investigation, seven days before Eva called 911, Hamilton allegedly visited Dinora at home, but reported that she was clean, well cared for, alert, and that her diabetes was well-controlled. She made no mention of pressure ulcers, feces, bed bugs, or cockroaches. EMT and hospital records clearly showed that Dinora had completely uncontrolled diabetes. Additionally, an expert entomologist informed investigators that the level of insect infestation Dinora experienced would have taken at least several weeks to accumulate. A grand jury indicted the three women on November 19, and they were arrested and arraigned on November 22.</p>
<p><b>Social Security</b></p>	<p><b>28. KFF Health News</b>  November 18, 2024  <a href="#"><u>Social Security Tackles Overpayment ‘Injustices,’ but Problems Remain</u></a>  By David Hilzenrath and Jodie Fleischer, Cox Media Group  This summary provides a comprehensive overview of the efforts made by Social Security chief Martin O’Malley to address the issue of overpayments and clawbacks. Despite some progress, significant challenges remain.  <b>Key points:</b></p>

	<ul style="list-style-type: none"> <li>• <b>Reduced Full Withholdings:</b> A major improvement, significantly reducing the number of beneficiaries facing 100% benefit withholding.</li> <li>• <b>Unresolved Burden of Proof:</b> The agency is working on shifting the burden of proof to the SSA but has yet to implement this change.</li> <li>• <b>Statute of Limitations:</b> The agency is looking to Congress to establish a time limit on overpayment recovery.</li> <li>• <b>Agency Overhaul:</b> O'Malley's efforts to streamline processes and improve customer service have yielded mixed results.</li> <li>• <b>Ongoing Challenges:</b> Many beneficiaries continue to face difficulties, including long wait times, unclear communication, and excessive clawbacks.</li> </ul> <p>While O'Malley's departure leaves the future of these reforms uncertain, the issue of overpayments and clawbacks remains a pressing concern for millions of Social Security beneficiaries.</p>
Public Policy	<p><b>29. Office of Attorney General Andrea Campbell</b> December 2, 2024 <a href="#"><u>AG Campbell Issues Guidance On Donating To Charities Ahead Of Giving Tuesday And Holiday Season</u></a> <i>Before Donating, Consumers are Advised to Research Their Charitable Organizations, Learn How Their Donations are Used, and Keep Records of Donations</i></p> <p>In anticipation of “Giving Tuesday” and the upcoming holiday season, Attorney General Andrea Joy Campbell is advising residents to make well-researched and informed decisions when donating to charitable organizations.</p> <p>“I encourage our residents to give charitably when they are able, and it is important that people take the necessary steps to ensure their donations are ending up in the right hands,” said <b>AG Campbell</b>. “I advise everyone to review my office's guidance on charitable giving as they head into this holiday season to ensure they are well informed on what to look out for when solicited for donations.”</p> <p>While some charities raise funds on their own, others pay professional solicitors to seek donations from the public. Charities and solicitors are required by statute to register with the Attorney General’s Office (AGO). The AGO encourages consumers who are solicited for donations to ask questions so that they can understand who is contacting them and where their money would go. Specifically, consumers can ask whether the person contacting them is a paid fundraiser. Consumers should find out how much of every dollar they donate will go to charity as opposed to being retained by the professional fundraiser.</p> <p>Consumers are encouraged to review the AGO’s <a href="#"><u>Giving Wisely Advisory</u></a> and the <a href="#"><u>Donating Dos and Don’ts: A Guide to Charitable Giving</u></a> for information, including tips on what to consider before donating to a charity. These guides can help prompt consumers with more questions to ask:</p> <ul style="list-style-type: none"> <li>• <b>Know your charity:</b> Before you donate, verify the charity’s name, address, number, email address, and website, if available.</li> <li>• <b>Find out where your money will go:</b> Ask how much of the money goes to charity and beware of statements such as “all proceeds go to charity” because terms like “proceeds” are not well-defined and could refer to net amounts after the fundraiser’s fee is deducted.</li> <li>• <b>Keep records:</b> Keep any and all receipts and canceled checks, along with emails and texts, in case you have a complaint later – they also</li> </ul>

come in handy when filing your annual income tax returns, if you are eligible to deduct charitable contributions from your gross income.

- **Don't feel pressured:** Take time to decide if you want to donate, a legitimate charity will tell you how it's using your money to make a difference.
- **Don't pay by cash or debit card:** Pay by credit card or check, especially if donating online. A record of the transaction will be created if you pay by credit card, and you may be able to stop payment if you later change your mind. Credit cards also provide more security for your donation rather than a debit card.

Under Massachusetts law, public charities operating within the state must register and file annual reports with the AGO's Non-Profit Organizations/Public Charities Division. These filings are available to the public [online](#) and provide valuable information about a charitable organization's programs, activities, and finances. In addition, consumers may check with the [IRS](#) to determine if donations to certain organizations are tax deductible.

Individuals with inquiries or complaints about charitable solicitations should call the Attorney General's [Non-Profit Organizations/Public Charities Division](#) at 617-963-2101 or [file a complaint online](#).

### 30. WBUR

November 21, 2024

[Post-election report shows accessibility, ballot and registration issues](#)

By Willoughby Mariano

A report by the Massachusetts Election Protection Coalition highlights several voting accessibility issues during the recent election. These issues included:

- **Accessibility Barriers:** Voting assistance machines for disabled voters malfunctioned, and some polling places lacked accessible entrances and exits.
- **Ballot Shortages:** Four polling places in Boston experienced a shortage of ballots.
- **Tabulation Machine Issues:** Tabulation machines jammed or broke down in multiple cities, including Peabody, Springfield, Lowell, Boston, and Malden.
- **Voter Registration Deadline:** Over 150 eligible voters were turned away due to missing the state's 10-day registration deadline.

The coalition recommends implementing several reforms, including accessibility audits of voting locations every four years and allowing same-day voter registration.

Secretary of State William Galvin's office is investigating the issues, particularly the ballot shortages in Boston, and may take over the management of the Boston Elections Commission.

### 31. The Massachusetts Election Protection Program Steering Committee (Common Cause)

November 20, 2024

[Voting Rights Coalition Releases Election Day Report](#)

*The Massachusetts Election Protection Program Steering Committee, a group of statewide civic and community-based organizations, released its analysis on voting conditions in Massachusetts in the 2024 presidential election.*

*Findings show Bay State voters experienced avoidable barriers*

	<p>The Massachusetts Election Protection Program Steering Committee, a group of statewide civic and community-based organizations, released its analysis on voting conditions in Massachusetts in the 2024 presidential election. The analysis, using data directly from the program’s field and poll monitor volunteers, identified major barriers to voting, including the ten-day voter registration blackout period, disability and physical accessibility issues, tabulators that jammed or broke, and polling locations in Boston that ran out of ballots before polls closed.</p> <p>The program trained and deployed over 400 nonpartisan Election Protection volunteers at 140 unique polling locations in 30 different municipalities across nine counties on Election Day. Voting access Issues identified by volunteers include:</p> <ul style="list-style-type: none"> <li>• 156 voters who showed up to vote in-person and who were otherwise eligible to vote but had not registered prior to the ten-day voter registration deadline on October 26;</li> <li>• Over 50 incidents of disability voting and other physical accessibility issues ranging from broken AutoMARK machines, limited handicapped parking spaces, lack of handicapped ramps, and a lack of automatic doors and/or doors that weren’t propped open;</li> <li>• 14 ballot tabulation machines that jammed or broke and;</li> <li>• <a href="#">Significant shortages of ballots</a> at least four Boston polling places the afternoon of Election Day.</li> </ul> <p>To read the report, <a href="#">click here</a>.</p> <p><b>32. National Association of Social Workers</b> October 2024 <a href="#">NASW Submits Comments Regarding Strategic Framework for a National Plan on Aging</a> This fall, NASW submitted comments to the Administration for Community Living in response to the federal Strategic Framework for a National Plan on Aging. Developed by 16 federal agencies and departments with input from community partners (including NASW) and leaders in the aging services network, the strategic framework lays the groundwork for a coordinated effort (across the private and public sectors and in partnership with older adults, family caregivers, the aging services network, and other stakeholders) to create a national set of recommendations for advancing age-inclusive communities and well-being for all of us as we age. Read NASW’s comments, which emphasized the role of social work in advancing the goals of the strategic framework. <a href="https://bit.ly/NASW-AgingPlan24">https://bit.ly/NASW-AgingPlan24</a></p>
<p><b>From Around the Country</b></p>	<p><b>33. Willamette Week</b> November 28, 2024 <a href="#">State Moves to Pull License for Corvallis Nursing Home</a> By Lucas Manfield <i>Investigators themselves couldn’t locate staff when residents asked for help.</i> State regulators are seeking to end the licensure of one of Oregon’s most troubled senior care facilities, Willamette Springs Memory Care in Corvallis. In September, the Department of Human Services issued Mosaic Senior Living, which has operated the facility since 2016, a “proposed non-renewal” of its license to operate. This is an exceedingly rare move; the state hasn’t taken such action against a similar facility in years. Willamette Springs has long battled state regulators and whistleblowers, who say it’s understaffed and mismanaged. Two former staffers filed whistleblower lawsuits, accusing Mosaic of covering up the problems at</p>

	<p>Willamette Springs. (Neither case made it to trial.) By 2022, regulators had tallied up so many serious violations that they put the facility under “enhanced supervision.”</p> <p>By 2024, the non-renewal notice says, the facility was so understaffed that residents lacked assistance with eating. Falls and altercations between residents were commonplace, and investigators themselves couldn’t locate staff when residents asked for help.</p> <p>The facility racked up \$18,000 in fines it hasn’t paid. “Our community continues to work diligently to ensure residents receive care and services consistent with regulatory requirements,” says facility administrator Sarah Sheaffer, who noted that Willamette Springs passed its most recent inspection earlier this month.</p> <p>A state spokesperson says DHS is continuing to review the facility’s compliance prior to making a final decision on its license renewal.</p> <p><b>34. Fox 61.com (video report)</b> November 26, 2024 <a href="#">A crisis of care: Connecticut seeing alarming rate of nursing home closures</a> One out of every three Connecticut residents will need to spend some time in a skilled nursing facility, but those facilities have been closing at an alarming rate.</p> <p><b>35. MPRRadio</b> November 26, 2024 <a href="#">Minnesota nursing homes sue to block state pay rule for workers</a> By Estelle Timar-Wilcox Here's a summary of the key points:</p> <ul style="list-style-type: none"> <li>• <b>New Holiday Pay Rule:</b> Minnesota's Nursing Home Workforce Standards Board approved a rule requiring nursing homes to pay workers time-and-a-half for 11 state holidays, effective January 1, 2024.</li> <li>• <b>Lawsuit Filed:</b> Two senior care provider associations, LeadingAge Minnesota and Care Providers of Minnesota, filed a lawsuit against the state's Department of Labor and Industry to block the rule.</li> <li>• <b>Arguments Against the Rule:</b> The associations argue that the rule violates federal labor laws by interfering with collective bargaining and existing employment contracts. They also claim it will be costly to implement on short notice.</li> <li>• <b>Labor Union's Perspective:</b> SEIU Healthcare, representing nursing home workers, supports the rule, arguing that it's fair for workers who have to work on holidays while employers can take time off.</li> <li>• <b>Board's Decision:</b> The Nursing Home Workforce Standards Board, established to address staffing shortages and low wages in nursing homes, passed the holiday pay policy with support from worker and government representatives. Industry leaders abstained.</li> <li>• <b>Department of Labor and Industry's Response:</b> The department has been notified of the lawsuit and is reviewing the complaint.</li> </ul> <p>Essentially, the dispute is between nursing home providers who argue the rule is unlawful and costly, and labor unions who support it as a fair benefit for workers who have to work on holidays.</p>
<p><b>Public Sessions</b></p>	<p><b>36. Executive Office of Veterans Services</b> Friday, December 6, 2024, 10:00 a.m. <i>Virtual public hearing</i> Regulations dealing with the responsibilities of veterans' agents for medical care. The proposed change would align Massachusetts standards with federal regulations. Officials say that the "existing regulation states that</p>



	<p>Veteran Service Officers will assist veterans in filing VA claims but it is silent regarding compliance with VA regulations for filing claims." Written testimony can be submitted by 5 p.m. on Dec. 20.</p> <p><a href="#">More Info and Access</a></p>
<p><b>Support Dignity Alliance Massachusetts</b></p> <p><b><a href="#">Please Donate!</a></b></p>	<p>Dignity Alliance Massachusetts is a grassroots, volunteer-run 501(c)(3) organization dedicated to transformative change to ensure the dignity of older adults, people with disabilities, and their caregivers. We are committed to advancing ways of providing long-term services, support, living options and care that respect individual choice and self-determination. Through education, legislation, regulatory reform, and legal strategies, this mission will become reality throughout the Commonwealth.</p> <p><b>As a fully volunteer operation, our financial needs are modest, but also real. Your donation helps to produce and distribute <i>The Dignity Digest</i> weekly free of charge to almost 1,000 recipients and maintain our website, <a href="http://www.DignityAllianceMA.org">www.DignityAllianceMA.org</a>, which has thousands of visits each month.</b></p> <p><b>Consider a donation in memory or honor of someone. Names of those recognized will be included in The Dignity Digest and posted on the website.</b></p> <p><a href="https://dignityalliancema.org/donate/">https://dignityalliancema.org/donate/</a></p> <p>Thank you for your consideration!</p>
<p><b>Dignity Alliance Massachusetts Legislative Endorsements</b></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: <a href="https://tinyurl.com/DignityLegislativeEndorsements">https://tinyurl.com/DignityLegislativeEndorsements</a></p> <p>Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at <a href="mailto:rmoores8473@charter.net">rmoores8473@charter.net</a>.</p>
<p><b>Websites</b></p>	<p><b>National Council on Disability</b>  <a href="https://www.ncd.gov">https://www.ncd.gov</a></p> <p>NCD's mission is to be a trusted advisor, in collaboration with people with disabilities to: The President; The Congress; Federal entities; State, tribal communities, and local governments; and Other entities and organizations</p> <p>NCD fulfills its advisory roles regarding disability policies, programs, procedures, and practices that enhance equal opportunity by:</p> <ul style="list-style-type: none"> <li>• Convening stakeholders to acquire timely and relevant input for recommendations and action steps</li> <li>• Gathering and analyzing data and other information</li> <li>• Engaging and influencing current debates and agendas</li> <li>• Identifying and formulating solutions to emerging and long-standing challenges; and</li> <li>• Providing tools to facilitate effective implementation</li> </ul> <p><b>Special Needs Answers</b>  <a href="https://specialneedsanswers.com">https://specialneedsanswers.com</a></p>

	<p>The Academy of Special Needs Planners consists of special needs planning professionals such as attorneys, financial planners and trust officers who provide the highest quality service and advice to persons with special needs and to their families. On this site, they aim to provide the best information available on the Internet on planning for people with special needs as well as access to a network of planners focusing their practices on special needs planning.</p>	
<b>Blogs</b>		
<b>Podcasts</b>		
<b>YouTube Channels</b>	<p><a href="#">AARP Massachusetts</a> Contains 164 videos on a variety of topics</p>	
Previously recommended websites	<p>The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: <a href="https://dignityalliancema.org/resources/">https://dignityalliancema.org/resources/</a>. Only new recommendations will be listed in <i>The Dignity Digest</i>.</p>	
Previously posted funding opportunities	<p>For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see <a href="https://dignityalliancema.org/funding-opportunities/">https://dignityalliancema.org/funding-opportunities/</a>.</p>	
Websites of Dignity Alliance Massachusetts Members	<p>See: <a href="https://dignityalliancema.org/about/organizations/">https://dignityalliancema.org/about/organizations/</a></p>	
Contact information for reporting complaints and concerns	<b>Nursing home</b>	<p><a href="#">Department of Public Health</a></p> <ol style="list-style-type: none"> <li>1. Print and complete the <a href="#">Consumer/Resident/Patient Complaint Form</a></li> <li>2. Fax completed form to (617) 753-8165</li> </ol> <p>Or Mail to 67 Forest Street, Marlborough, MA 01752 <a href="#">Ombudsman Program</a></p>
Money Follows the Person	<p><b>MassHealth</b> <a href="#">Money Follows the Person</a></p> <p>The Money Follows the Person (MFP) Demonstration helps older adults and people with disabilities move from nursing facilities, chronic disease or rehabilitation hospitals, or other qualified facilities back to the community.</p> <p>Statistics as of September 27, 2024: 710 people enrolled, most in nursing facilities 173 people transitioned out of nursing facilities 10 people through the cycle since 2023, off the program, living independently in the community. 38 people approved for AHVP ( <a href="#">Alternative Housing Voucher Program</a>) nursing home vouchers, 14 currently in use <a href="#">Open PDF file, 1.34 MB, MFP Demonstration Brochure</a> <a href="#">MFP Demonstration Brochure - Accessible Version</a> <a href="#">MFP Demonstration Fact Sheet</a> <a href="#">MFP Demonstration Fact Sheet - Accessible Version</a></p>	
Determination of Need (Pending proposals)	<p><a href="#">Massachusetts Department of Public Health</a> <a href="#">Lasell Village, Inc. – Conservation Long Term Care Project</a></p> <p>Lasell House is a thirty-eight (38) bed Medicare certified skilled nursing facility, located in Newton.</p> <p>This project is a phased renovation of the third floor Skilled Nursing Facility Lasell House. The facility has twenty-five (25) total bedrooms accommodating up to thirty-eight (38) residents. At present, all twenty-five (25) bedrooms have a toilet and sink with only one of the twenty-five (25) bedrooms having</p>	

its own shower (the Special Care Isolation Bedroom). The other patients are currently transported to the Tub/Shower Room resulting in patients having to wait to receive a shower when the room is not occupied.

Upon completion of the phased renovation, the facility will provide skilled nursing care in seventeen (17) Private Bedrooms and three (3) Semi-Private Bedrooms. The Semi-Private Bedrooms will be able to accommodate two residents or allow for a couple to remain together as they age through the Continuum of Care. The twenty (20) total bedrooms accommodate twenty-three (23) licensed beds with each bedroom having a full bathroom including toilet, sink, and shower. A select number of rooms will also be outfitted with additional structural blocking within the ceilings to accommodate Hoyer lifts in the future if they are needed. The tub room will be relocated to the lower level within the same building and located directly off the elevator. Service spaces will include a nursing station and two charting stations, a rehabilitation gym, dining space with nourishment kitchen, clean linen, clean utility room, medication room, oxygen storage, general storage, and public bathrooms. A new Linen Chute will be integrated into the building from the third floor emptying into a new Soiled Linen Room located in the lower level. The chute will alleviate the need for soiled linen closets to be located on the unit and will assist with infection prevention.

The feel of the existing facility is reminiscent of a hospital setting as was typical of most skilled nursing facilities when Lasell House was constructed. One of the goals of this renovation, and one that is tied to Lasell's overall desire to improve the culture is to create a more homelike and welcoming feel within the facility. To achieve this goal, the new design does not include a central nurse's station and instead locates nurses and charting stations directly off the corridors so that they are easily accessible and able to monitor patients without being in the main circulation space. While finished materials still need to be durable and meet the fire rated standards for a skilled nursing facility, the design team will choose warm and inviting materials that would feel more like a home setting. Patient bedrooms will have new beds, bedside cabinets, bureaus, chairs, and window treatments as part of the renovation. Common areas will have new furniture, tables, and other accessories. Regarding building systems, the existing main mechanical, electrical, and plumbing infrastructure will remain, and the new design will connect to these existing systems. Improvements for patient comfort will be made by providing each bedroom with its own thermostat to independently control heating and cooling as currently two bedrooms share a single thermostat control. Additionally, the existing windows on the third floor will be replaced with new high-performing energy efficient windows. The roof on the building will be replaced as it is past its useful life.

The Maximum Capital Expenditure (MCE) for the project is \$6,703,239.35.

**Application Documents**

- [Application \(PDF\)](#) | [\(DOCX\)](#)
- [Capital Costs \(XLSX\)](#)
- [Affiliated Parties \(PDF\)](#) | [\(DOCX\)](#)
- [Change in Service \(PDF\)](#) | [\(DOCX\)](#)
- [CPA Report \(PDF\)](#) | [\(DOCX\)](#)
- [Attachments \(PDF\)](#) | [\(DOCX\)](#)

<p>Nursing Home Closures (pending)</p>	<p><a href="#"><u>Massachusetts Department of Public Health</u></a>  <i>Phillips Manor Nursing Home</i>          Closure date: February 25, 2025</p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Notice of Intent to Close (PDF)</u></a>   <a href="#"><u>(DOCX)</u></a></li> <li>• <a href="#"><u>Draft of Closure and Relocation Plan (PDF)</u></a>   <a href="#"><u>(DOCX)</u></a></li> </ul> <p><i>Highview of Northampton</i>          Closure date: February 6, 2025  <a href="#"><u>Notice of Intent to Close (PDF)</u></a>   <a href="#"><u>(DOCX)</u></a>          “We would additionally request a one-year temporary deactivation of our license as we are in the architectural phase of evaluating the building.”  <a href="#"><u>Massachusetts Nursing Home Survey Performance Tool</u></a> and the <a href="#"><u>CMS Nursing Home Compare website</u></a>.</p>
<p>Nursing Home Closures</p>	<p><a href="#"><u>Massachusetts Department of Public Health</u></a>  <i>Marion Manor, South Boston</i>          Closure date: September 11, 2024  <i>Bridgewater Nursing &amp; Rehab, Bridgewater</i>          Closure date: May 24, 2024  <i>Savoy Nursing and Rehabilitation Center, New Bedford</i>          Closure date: April 3, 2024  <i>New England Sinai Hospital Transitional Care Unit</i>          Closure date: April 2, 2024  <i>South Dennis Health Care, Dennis</i>          Closure date: January 30, 2024  <i>Arnold House Nursing Home, Stoneham</i>          Closure date: September 22, 2023  <i>Willimansett East, Chicopee</i>          Closure date: June 6, 2023  <i>Willimansett West, Chicopee</i>          Closure date: June 6, 2023  <i>Chapin Center Springfield</i>          Closure date: June 6, 2023  <i>Governors Center, Westfield</i>          Closure date: June 6, 2023  <i>Emerson Rehabilitation and Transitional Care Unit</i>          Closure date: May 17, 2023  <i>Stonehedge Rehabilitation and Skilled Care Center, West Roxbury</i>          Closure date: February 10, 2022  <i>Heathwood Healthcare, Newton</i>          Closure date: January 5, 2022  <i>Mt. Ida Rest Home, Newton</i>          Closure date: December 31, 2021  <i>Wingate at Chestnut Hill, Newton, MA</i>          Closure date: October 1, 2021  <i>Halcyon House, Methuen</i>          Closure date: July 16, 2021  <i>Agawam HealthCare, Agawam</i>          Closure date: July 27, 2021  <i>Wareham HealthCare, Wareham</i>          Closure date: July 28, 2021  <i>Town &amp; Country Health Care Center, Lowell</i></p>

	Closure date: July 31, 2021
Nursing homes with admission freezes	<b>Massachusetts Department of Public Health</b> <a href="#"><u>Highview of Northampton</u></a>
Massachusetts Department of Public Health Determination of Need Projects	<b>Massachusetts Department of Public Health</b> <b>Determination of Need Projects: Long Term Care 2023</b> <a href="#"><u>Navigator Homes of Martha's Vineyard, Inc. – Long Term Care Substantial Capital Expenditure</u></a> <a href="#"><u>Royal Wayland Nursing Home, LLC – Conservation Long Term Care Project</u></a> <b>2022</b> <a href="#"><u>Ascentria Care Alliance – Laurel Ridge</u></a> <a href="#"><u>Ascentria Care Alliance – Lutheran Housing</u></a> <a href="#"><u>Ascentria Care Alliance – Quaboag</u></a> <a href="#"><u>Berkshire Healthcare Systems, Inc. – Windsor Long Term Care Conservation</u></a> <a href="#"><u>Fairlawn Rehabilitation Hospital-Hospital/Clinic Substantial Capital Expenditure</u></a> <a href="#"><u>Long Term Centers of Lexington – Pine Knoll – Long Term Care Conservation</u></a> <a href="#"><u>Long Term Centers of Wrentham – Serenity Hill – Long Term Care Conservation</u></a> <a href="#"><u>Next Step Healthcare LLC-Conservation Long Term Care Project</u></a> <a href="#"><u>Royal Falmouth – Conservation Long Term Care</u></a> <a href="#"><u>Royal Norwell – Long Term Care Conservation</u></a> <a href="#"><u>Wellman Healthcare Group, Inc</u></a> <b>2020</b> <a href="#"><u>Advocate Healthcare, LLC Amendment</u></a> <a href="#"><u>Campion Health &amp; Wellness, Inc. – LTC - Substantial Change in Service</u></a> <a href="#"><u>Heywood Healthcare, Inc. – Hospital/Clinic Substantial Capital Expenditure</u></a> <a href="#"><u>Notre Dame Health Care Center, Inc. – LTC Conservation</u></a> <b>2020</b> <a href="#"><u>Advocate Healthcare of East Boston, LLC.</u></a> <a href="#"><u>Belmont Manor Nursing Home, Inc.</u></a>
List of Special Focus Facilities	<b>Centers for Medicare and Medicaid Services</b> <i>List of Special Focus Facilities and Candidates</i> <a href="https://tinyurl.com/SpecialFocusFacilityProgram"><u>https://tinyurl.com/SpecialFocusFacilityProgram</u></a> <b>Updated April 24, 2024</b> 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?**

- 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.

**Massachusetts facilities listed (updated )**

**Newly added to the listing**

- Somerset Ridge Center, Somerset  
<https://somersestridgerehab.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>

**Massachusetts facilities not improved**

- None

**Massachusetts facilities which showed improvement**

- Marlborough Hills Rehabilitation and Health Care Center, Marlborough  
<https://tinyurl.com/MarlboroughHills>  
Nursing home inspect information:  
<https://projects.propublica.org/nursing-homes/homes/h-225063>

**Massachusetts facilities which have graduated from the program**

- 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>

**Massachusetts facilities that are candidates for listing (months on list)**

- AdviniaCare Newburyport (3)  
<https://www.adviniacare.com/adviniacare-country-center/>  
Nursing home inspect information:  
<https://projects.propublica.org/nursing-homes/homes/h-225332>
- Charwell House Health and Rehabilitation, Norwood (27)  
<https://tinyurl.com/Charwell>  
Nursing home inspect information:

	<p><a href="https://projects.propublica.org/nursing-homes/homes/h-225208">https://projects.propublica.org/nursing-homes/homes/h-225208</a></p> <ul style="list-style-type: none"> <li>• Fall River Healthcare (9) <a href="https://www.nextstephc.com/fallriver">https://www.nextstephc.com/fallriver</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225723/">https://projects.propublica.org/nursing-homes/homes/h-225723/</a></li> <li>• Glen Ridge Nursing Care Center, Medford (13) <a href="https://www.geneshcc.com/glenridge">https://www.geneshcc.com/glenridge</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225523">https://projects.propublica.org/nursing-homes/homes/h-225523</a></li> <li>• Mill Town Health and Rehabilitation, Amesbury (26) No website Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225318">https://projects.propublica.org/nursing-homes/homes/h-225318</a></li> <li>• Parkway Health and Rehabilitation Center, West Roxbury (7) <a href="https://www.bearmountainhc.com/locations/parkway-health-rehabilitation-center/">https://www.bearmountainhc.com/locations/parkway-health-rehabilitation-center/</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225497">https://projects.propublica.org/nursing-homes/homes/h-225497</a></li> <li>• Pioneer Valley Health &amp; Rehabilitation Center, South Hadley (24) <a href="https://pioneervalleyhealth.com/">https://pioneervalleyhealth.com/</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225757">https://projects.propublica.org/nursing-homes/homes/h-225757</a></li> <li>• Plymouth Harborside Healthcare (4) <a href="https://www.nextstephc.com/plymouth">https://www.nextstephc.com/plymouth</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225284/">https://projects.propublica.org/nursing-homes/homes/h-225284/</a></li> <li>• Plymouth Rehabilitation and Health Care Center (22) <a href="https://plymouthrehab.com/">https://plymouthrehab.com/</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225207">https://projects.propublica.org/nursing-homes/homes/h-225207</a></li> <li>• Royal Norwell Nursing &amp; Rehabilitation Center (4) <a href="https://norwell.royalhealthgroup.com/">https://norwell.royalhealthgroup.com/</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225482/">https://projects.propublica.org/nursing-homes/homes/h-225482/</a></li> </ul> <p><b>Massachusetts Facilities that have graduated from the program</b></p> <ul style="list-style-type: none"> <li>• Marlborough Hills Rehabilitation &amp; Health Care Center, Marlborough <a href="https://marlboroughhillsrehab.com/">https://marlboroughhillsrehab.com/</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225063/">https://projects.propublica.org/nursing-homes/homes/h-225063/</a></li> <li>• Oxford Rehabilitation &amp; Health Care Center, Haverhill <a href="https://theoxfordrehabhealth.com/">https://theoxfordrehabhealth.com/</a> Nursing home inspect information: <a href="https://projects.propublica.org/nursing-homes/homes/h-225218/">https://projects.propublica.org/nursing-homes/homes/h-225218/</a></li> </ul> <p><b>No longer operating</b></p> <ul style="list-style-type: none"> <li>• South Dennis Healthcare, South Dennis <a href="https://tinyurl.com/SpecialFocusFacilityProgram">https://tinyurl.com/SpecialFocusFacilityProgram</a></li> </ul>
<i>Nursing Home Inspect</i>	<p><b>ProPublica</b> <b><i>Nursing Home Inspect</i></b> <b>Data updated April 24, 2024</b> 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</p>

	<p>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:  <a href="https://projects.propublica.org/nursing-homes/state/MA">https://projects.propublica.org/nursing-homes/state/MA</a></p> <p><b>Deficiencies By Severity in Massachusetts</b>  <a href="#">(What do the severity ratings mean?)</a></p> <table border="1"> <thead> <tr> <th>Deficiency Tag</th> <th># Deficiencies</th> <th># Facilities</th> <th>MA facilities cited</th> </tr> </thead> <tbody> <tr> <td>B</td> <td>284</td> <td>198</td> <td><a href="#">Tag B</a></td> </tr> <tr> <td>C</td> <td>108</td> <td>85</td> <td><a href="#">Tag C</a></td> </tr> <tr> <td>D</td> <td>7,496</td> <td>1,469</td> <td><a href="#">Tag D</a></td> </tr> <tr> <td>E</td> <td>1,965</td> <td>788</td> <td><a href="#">Tag E</a></td> </tr> <tr> <td>F</td> <td>656</td> <td>317</td> <td><a href="#">Tag F</a></td> </tr> <tr> <td>G</td> <td>568</td> <td>384</td> <td><a href="#">Tag G</a></td> </tr> <tr> <td>H</td> <td>44</td> <td>33</td> <td><a href="#">Tag H</a></td> </tr> <tr> <td>I</td> <td>3</td> <td>2</td> <td><a href="#">Tag I</a></td> </tr> <tr> <td>J</td> <td>57</td> <td>27</td> <td><a href="#">Tag J</a></td> </tr> <tr> <td>K</td> <td>8</td> <td>5</td> <td><a href="#">Tag K</a></td> </tr> <tr> <td>L</td> <td>5</td> <td>2</td> <td><a href="#">Tag L</a></td> </tr> </tbody> </table> <p><b>Updated April 24, 2024</b></p>	Deficiency Tag	# Deficiencies	# Facilities	MA facilities cited	B	284	198	<a href="#">Tag B</a>	C	108	85	<a href="#">Tag C</a>	D	7,496	1,469	<a href="#">Tag D</a>	E	1,965	788	<a href="#">Tag E</a>	F	656	317	<a href="#">Tag F</a>	G	568	384	<a href="#">Tag G</a>	H	44	33	<a href="#">Tag H</a>	I	3	2	<a href="#">Tag I</a>	J	57	27	<a href="#">Tag J</a>	K	8	5	<a href="#">Tag K</a>	L	5	2	<a href="#">Tag L</a>
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Nursing Home Compare	<p><b>Centers for Medicare and Medicaid Services (CMS)</b>  <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"> <li>• <b>Staff turnover:</b> 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.</li> <li>• <b>Weekend staff:</b> The level of weekend staffing for nurses and registered nurses at a nursing home over a three-month period.</li> </ul> <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><a href="https://tinyurl.com/NursingHomeCompareWebsite">https://tinyurl.com/NursingHomeCompareWebsite</a></p>																																																
Data on Ownership of Nursing Homes	<p><b>Centers for Medicare and Medicaid Services</b>  <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 nursing homes with a record of poor performance. The data is available on nursing home ownership will be posted to <a href="https://data.cms.gov">data.cms.gov</a> and updated monthly.</p>																																																
DignityMA Call Action	<ul style="list-style-type: none"> <li>• The MA Senate released a report in response to COVID-19. <b>Download the <a href="#">DignityMA Response to Reimagining the Future of MA.</a></b></li> </ul>																																																



	<ul style="list-style-type: none"> <li>• <b>Advocate</b> for state bills that advance the Dignity Alliance Massachusetts' Mission and Goals – <a href="#">State Legislative Endorsements</a>.</li> <li>• <b>Support</b> relevant bills in Washington – <a href="#">Federal Legislative Endorsements</a>.</li> <li>• <b>Join</b> our <a href="#">Work Groups</a>.</li> <li>• <b>Learn</b> to use and leverage social media at our workshops: <a href="#">Engaging Everyone: Creating Accessible, Powerful Social Media Content</a></li> </ul>																																													
Access to Dignity Alliance social media	<p>Email: <a href="mailto:info@DignityAllianceMA.org">info@DignityAllianceMA.org</a>          Facebook: <a href="https://www.facebook.com/DignityAllianceMA/">https://www.facebook.com/DignityAllianceMA/</a>          Instagram: <a href="https://www.instagram.com/dignityalliance/">https://www.instagram.com/dignityalliance/</a>          LinkedIn: <a href="https://www.linkedin.com/company/dignity-alliance-massachusetts">https://www.linkedin.com/company/dignity-alliance-massachusetts</a>          Twitter: <a href="https://twitter.com/dignity_ma?s=21">https://twitter.com/dignity_ma?s=21</a>          Website: <a href="http://www.DignityAllianceMA.org">www.DignityAllianceMA.org</a></p>																																													
<p><b>Participation opportunities with Dignity Alliance Massachusetts</b></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><a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a> <a href="mailto:paul.lanzikos@gmail.com">paul.lanzikos@gmail.com</a></td> </tr> <tr> <td>Assisted Living</td> <td>John Ford</td> <td><a href="mailto:jford@njc-ma.org">jford@njc-ma.org</a></td> </tr> <tr> <td>Behavioral Health</td> <td>Frank Baskin</td> <td><a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a></td> </tr> <tr> <td>Communications</td> <td>Lachlan Forrow</td> <td><a href="mailto:lforrow@bidmc.harvard.edu">lforrow@bidmc.harvard.edu</a></td> </tr> <tr> <td>Facilities (Nursing homes and rest homes)</td> <td>Jim Lomastro Arlene Germain</td> <td><a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a> <a href="mailto:agermain@manhr.org">agermain@manhr.org</a></td> </tr> <tr> <td>Home and Community Based Services</td> <td>Meg Coffin</td> <td><a href="mailto:mcoffin@centerlw.org">mcoffin@centerlw.org</a></td> </tr> <tr> <td>Legislative</td> <td>Richard Moore</td> <td><a href="mailto:rmoore8743@charter.net">rmoore8743@charter.net</a></td> </tr> <tr> <td>Legal Issues</td> <td>Stephen Schwartz</td> <td><a href="mailto:sschwartz@cpr-ma.org">sschwartz@cpr-ma.org</a></td> </tr> <tr> <th>Interest Group</th> <th>Group lead</th> <th>Email</th> </tr> <tr> <td>Housing</td> <td>Bill Henning</td> <td><a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a></td> </tr> <tr> <td>Veteran Services</td> <td>James Lomastro</td> <td><a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a></td> </tr> <tr> <td>Transportation</td> <td>Frank Baskin Chris Hoeh</td> <td><a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a> <a href="mailto:cdhoeh@gmail.com">cdhoeh@gmail.com</a></td> </tr> <tr> <td>Covid / Long Covid</td> <td>James Lomastro</td> <td><a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a></td> </tr> <tr> <td>Incarcerated Persons</td> <td>TBD</td> <td><a href="mailto:info@DignityAllianceMA.org">info@DignityAllianceMA.org</a></td> </tr> </tbody> </table>	Workgroup	Workgroup lead	Email	General Membership	Bill Henning Paul Lanzikos	<a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a> <a href="mailto:paul.lanzikos@gmail.com">paul.lanzikos@gmail.com</a>	Assisted Living	John Ford	<a href="mailto:jford@njc-ma.org">jford@njc-ma.org</a>	Behavioral Health	Frank Baskin	<a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a>	Communications	Lachlan Forrow	<a href="mailto:lforrow@bidmc.harvard.edu">lforrow@bidmc.harvard.edu</a>	Facilities (Nursing homes and rest homes)	Jim Lomastro Arlene Germain	<a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a> <a href="mailto:agermain@manhr.org">agermain@manhr.org</a>	Home and Community Based Services	Meg Coffin	<a href="mailto:mcoffin@centerlw.org">mcoffin@centerlw.org</a>	Legislative	Richard Moore	<a href="mailto:rmoore8743@charter.net">rmoore8743@charter.net</a>	Legal Issues	Stephen Schwartz	<a href="mailto:sschwartz@cpr-ma.org">sschwartz@cpr-ma.org</a>	Interest Group	Group lead	Email	Housing	Bill Henning	<a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a>	Veteran Services	James Lomastro	<a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a>	Transportation	Frank Baskin Chris Hoeh	<a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a> <a href="mailto:cdhoeh@gmail.com">cdhoeh@gmail.com</a>	Covid / Long Covid	James Lomastro	<a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a>	Incarcerated Persons	TBD	<a href="mailto:info@DignityAllianceMA.org">info@DignityAllianceMA.org</a>
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	Interest Group	Group lead	Email																																											
	Housing	Bill Henning	<a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a>																																											
	Veteran Services	James Lomastro	<a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a>																																											
	Transportation	Frank Baskin Chris Hoeh	<a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a> <a href="mailto:cdhoeh@gmail.com">cdhoeh@gmail.com</a>																																											
Covid / Long Covid	James Lomastro	<a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a>																																												
Incarcerated Persons	TBD	<a href="mailto:info@DignityAllianceMA.org">info@DignityAllianceMA.org</a>																																												
<b>Bringing People Home: Implementing the Marsters class action settlement</b>	<p>Website: <a href="https://marsters.centerforpublicrep.org/">https://marsters.centerforpublicrep.org/</a>          Center for Public Representation          5 Ferry Street, #314, Easthampton, MA 01027          413-586-6024, Press 2  <a href="mailto:bringingpeoplehome@cpr-ma.org">bringingpeoplehome@cpr-ma.org</a>          Newsletter registration: <a href="https://marsters.centerforpublicrep.org/7b3c2-contact/">https://marsters.centerforpublicrep.org/7b3c2-contact/</a></p>																																													
<b>REV UP Massachusetts</b>	<p>REV UP Massachusetts advocates for the fair and civic inclusion of people with disabilities in every political, social, and economic front. REV Up aims to increase the number of people with disabilities who vote.</p> <p>Website: <a href="https://revupma.org/wp/">https://revupma.org/wp/</a>          To join REV UP Massachusetts – go to the <a href="#">SIGN UP page</a>.</p>																																													
<b>The Dignity Digest</b>	<p>For a free weekly subscription to <i>The Dignity Digest</i>:  <a href="https://dignityalliancema.org/contact/sign-up-for-emails/">https://dignityalliancema.org/contact/sign-up-for-emails/</a>          Editor: Paul Lanzikos          Primary contributor: Sandy Novack</p>																																													

	MailChimp Specialist: Sue Rorke
Note of thanks	<p>Thanks to the contributors to this issue of <i>The Dignity Digest</i>:</p> <ul style="list-style-type: none"> <li>• Wynn Gerhardt</li> <li>• Richard Moore</li> <li>• SCI Boston</li> </ul> <p>Special thanks to the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of <i>The Dignity Digest</i>.</p> <p><i>If you have submissions for inclusion in <u>The Dignity Digest</u> or have questions or comments, please submit them to <a href="mailto:Digest@DignityAllianceMA.org">Digest@DignityAllianceMA.org</a>.</i></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></p> <p><i>Our guiding principle is the assurance of dignity for those receiving the services as well as for those providing them.</i></p> <p><i>The information presented in “The Dignity Digest” is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.</i></p> <p><i>Previous issues of The Tuesday Digest and The Dignity Digest are available at: <a href="https://dignityalliancema.org/dignity-digest/">https://dignityalliancema.org/dignity-digest/</a></i></p> <p><i>For more information about Dignity Alliance Massachusetts, please visit <a href="http://www.DignityAllianceMA.org">www.DignityAllianceMA.org</a>.</i></p>	