



The Dignity Digest

Issue # 232

April 15, 2025

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

DignityMA Zoom Sessions

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

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.

Spotlight Sara Kalloch



Sara Kallock (1987-2024)
Sara's 38th birthday is April 15.

Sara Kallock was an active DignityMA participant for the last months of her life. Sara was diagnosed with Stage 4 metastatic cancer of the pancreas in mid-September 2023.

She became involved with DignityMA after months of advocating on behalf of her father who was a veteran receiving poor care in a nursing home. She was successful in getting him transferred to another facility. After his death, she committed her advocacy efforts to others by her involvement with DignityMA. Sara was an accomplished author, scholar, artist, and seasoned political and social activist. Sara completed her Ph.D in Politics from the University of Manchester, United Kingdom. She was a faculty member at Merrimac College in North Andover, MA

Leaving Nothing but an Opening By Sara Kallock

*What if I died leaving nothing?
Surely, I have so little to give.*

*The woman in the next room
Is searching for a hospital bed.*

*She and her friend are waiting
For the call that a room has been found.*

*Something is wrong on top
Of her cancer and they are anxious.*

*They are killing time talking.
I can hear the angle of sharp
tones and hostile words.*

*"Bus loads" "Pelosi" "Immigrant"
Words that say we are full
even in your need.*

*There is a crisis and I can hear
Their words choose a side: go away.*

*The crisis is a child arriving alone
At a checkpoint with a
desiccated bottle.*

*The crisis is: a Haitian student
Just settling in,
now being moved across the state.*

*The crisis is: a drowned body
Bobbing limply down the Rio Grande.*

*The crisis is: a family huddled
on concrete behind bars
awaiting deportation.*

<p>Her interests spanned reading, wildlife, nature, spirituality, volunteer work, gardening, farming, activism, printmaking, ceramics, poetry, singing, crafts, politics, and philosophy. Sara devoted her 37 years to defending the vulnerable and forging her own path with unyielding purpose.</p> <p><i>May she rest in peace and her spirit and advocacy continue on through the efforts of others.</i></p>	<p><i>The nurse comes into their room, They have found a bed. They have not been told to go away.</i></p> <p><i>I don't know if I will leave much to this world. But I hope I'll have never said go away.</i></p> <p>Sara's poem was published in The Radical Catholic, Worcester, MA, April/May 2024.</p>
<p>Quotes</p>	<p><i>[During the Covid pandemic] Massachusetts lost more than 22,000 lives; New England lost nearly 50,000; the United States lost more than 1.2 million, according to the Centers for Disease Control and Prevention.</i></p> <p><i>Yet the nation has never really reckoned with its loss. We have no official day of remembrance or national memorial to COVID victims.</i></p> <p>What do you remember most from COVID? Readers share their memories of isolation, camaraderie, loss, and hope, *Boston Globe, April 14, 2025</p> <p><i>"The programs that [the Administration on Community Living (ACL)] implements improve the lives of literally tens of millions of older adults, people with disabilities and their families and caregivers. There's no way to have these RIFs [Reductions in Force] and not impact the programs and the people who rely on them.</i></p> <p>Alison Barkoff, Administrator of the Administration on Community Living under President Biden and now director of a health law program at George Washington University's Milken Institute School of Public Health, HHS layoffs hit Meals on Wheels and other services for seniors and disabled, NPR – Shots, April 1, 2025</p> <p><i>An Ohio-based nonprofit managed care organization, [CareSource], is acquiring the financially-imperiled Commonwealth Care Alliance, which insures about 46,000 disabled and low-income people in Massachusetts, and plans to make all the same</i></p>

services available. . . The company . . . has more than two million members across 13 states and some 4,700 employees.

[Ohio-based CareSource acquiring Commonwealth Care Alliance,](#)

***State House News, April 9, 2025**

"Parents get overwhelmed, and they also can be isolated. Stress, depression, anxiety goes up for the whole family. Divorce is not uncommon. Sometimes, you can even see abuse happening in the household because everyone just gets very overwhelmed."

Katie Terino, chair of Advocates for Autism of Massachusetts (AFAM), [Autism prevalence fuels push for Turning 22 supports,](#)

***State House News, April 8, 2025**

"[Center for Health Information Analysis] (CHIA's) quarterly reports are no longer a warning sign; they are a red alert for the painful financial conditions our local hospitals are enduring. After half a decade of economic turmoil for Massachusetts healthcare providers, the consequences have become more dire and visible than ever — whether they be layoffs, packed EDs, or reduced investments in new technologies and facilities."

Daniel McHale, senior vice president of healthcare finance and policy at the Mass. Health and Hospital Association, [Care delivery changes reshaping hospital landscape,](#) ***State House News, April 8, 2025**

"Every veteran who has served our country deserves a safe place to call home. . . Together, we can create a stronger, more compassionate future for those who have sacrificed so much for our nation."

Veterans Transition House Executive Director James Reid, [Healey-Driscoll Administration Celebrates One Year of Progress in Ending Veteran Homelessness in Massachusetts,](#) **Office of Governor**

Maura Healey and Lt. Governor Kim Driscoll, April 9, 2025

"It's exciting to see this new program put to work, accelerating housing production to meet people's needs now as we work towards the goal of creating 222,000 homes over the next decade. The Momentum Fund, legalizing Accessory Dwelling Units

in every community, and putting multifamily zoning in place in our MBTA Communities are solutions the Commonwealth is putting in place for the homes that people, our communities, and the Commonwealth need to thrive.”

Rachel Heller, CEO of CHAPA, [Healey-Driscoll Administration and MassHousing Announce First-in-the-Nation Momentum Fund Commitment to Build More Reasonably Priced Housing](#), Office of Governor Maura Healey and Lt. Governor Kim Driscoll, April 9, 2025

A.D.H.D. [Attention-Deficit/Hyperactivity Disorder] is usually portrayed primarily as a medical condition — a neurodevelopmental disorder with a genetic cause — which is why we often look first to medication to treat it. But researchers are now discovering that A.D.H.D. symptoms can be highly responsive to the environment as well.

[5 Takeaways From New Research About A.D.H.D.](#), *New York Times, April 13, 2025

End Poverty, Now!: Poverty is not a bug, but a feature of American capitalism. The free market is inherently rigged against poor people, limiting their opportunities for employment or forcing them into low-wage, mostly part-time jobs with no benefits. The accelerating pace of technological change is making a bad situation worse, not just for poor people, but for the middle class, too.

[Should Massachusetts implement a program providing universal basic income?](#), CommonWealth Beacon, April 13, 2025

"Right, because Grandma is on X. This is corruption, plain and simple."

U.S. Senator Elizabeth Warren, commenting on the Social Security Administration to stop using traditional media outlets and communicating exclusively via "X", [Elizabeth Warren Slams Trump Admin Over Social Security Communicating Only On X: 'Right, Because Grandma Is On X'](#), Latin Times, April 11, 2025

"I celebrated my 68th birthday in September and decided that officially made me a member of the "old

ladies who don't give a flying fig" club. I have given myself permission to experience the grace of growing older."

Patricia Miller, Edgerton, Wisconsin, [All the joys of aging](#), *Washington Post, April 11, 2025

[In] some corners of the world, [end of life rituals] [have] been changing. "Living celebrations" (sometimes called "[living funerals](#)" or "pre-funerals") began slowly wading into the mainstream in [1990s Japan](#), where the practice is known as [seizenso](#).

[Why not attend your own funeral?](#), *Washington Post, April 14, 2025

"I found myself imagining a box of my own, one that could give my children, grandchildren and maybe even great-grandchildren some insights into my life—not necessarily what I accomplished, but who I was as a person. What would I put in this box, and how would I describe the significance of each item?"

Robbie Shell, [How Will My Grandchildren Remember Me? These Seven Objects May Tell Them My Story](#), *Wall Street Journal, April 14, 2025

"I have Alzheimer's."

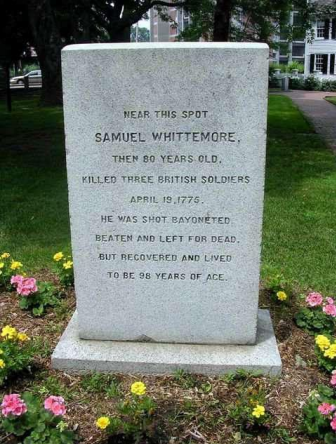
[When Is the Right Time to Tell People You Have Alzheimer's?](#), *Wall Street Journal, April 13, 2025

"The VA [Veterans Administration] through all the bashing it gets, it deals with the clientele. They know their clientele like no one else's business."


Ray Trombley, resident at the Northampton (MA) VA Medical Center, [Everyone agrees the VA needs an overhaul. Are Trump's layoffs the answer?](#), *Boston Globe, April 14, 2025

"We've got a responsibility to make sure that anything that I sign is within ... what we can sustain. The reality also is that every day we continue to see cuts and harm done to us from a federal administration that, you know, just doesn't seem to get it."

Governor Maura Healey, ["We're treading on thin ice." Trump's unpredictability threatens to upend Massachusetts spending plans.](#), *Boston Globe, April 13, 2025

<p>Patriot's Day Tribute</p> 	<p>Samual Whittemore, American Patriot</p> <p>As Americans, especially in Massachusetts, celebrate Patriot's Day 250 years after the "shot heard 'round the world" was first heard, Dignity Alliance honors an older adult who fought for liberty at Concord Bridge on April 19, 1775.- 80-year-old Samual Whittemore. In the Battle of Concord Bridge, Samuel Whittemore, age 80, killed three British soldiers, was shot, bayonetted, beaten and left for dead. He lived in dignity to age 98, long enough to see the fruits of victory and the birth of a new nation. Today's older adults display that same love of country and desire for independence. Dignity Alliance proudly stands with them at the bridge battling the twin enemies of ageism and ableism and fighting to protect the programs that serve all Americans such as Social Security, Medicare, Medicaid, the Older Americans Act and the Elder Justice Act.</p>
<p>Call for Presentations</p>	<p>Massachusetts Councils on Aging (MCOA) 2025 Fall Conference Call for Presentations</p> <p>Planning for the MCOA 2025 Fall Conference is now underway. This year's theme is "Facing the Future Together". MCOA's call for presentations is officially open. The organizers are looking for engaging, innovative, and impactful sessions to make this year's conference the best one yet. If you have knowledge, insights, or creative solutions to share with the aging services network, you are encouraged to submit a proposal. Submissions are due by May 19, 2025. Learn More & Apply</p> <p>National Consumer Voice for Quality Long-Term Care Call for Presentations</p> <p><i>Session Proposals for the Consumer Voice Conference Due May 2</i> 2025 Consumer Voice Conference at the Renaissance Arlington Capital View Hotel in Arlington, Virginia, November 3-6, 2025.</p> <p>Consumer Voice's Annual Conference educates and empowers long-term care consumers and consumer advocates. The conference covers long-term care issues, including current trends, best practices, advocacy opportunities, and new research. Attendees have the opportunity to learn, network, and exchange ideas with advocates from all over the country. Submit a Proposal to Present a Session: Review the Call for Proposals and Presenter Requirements. Submit your proposal via SurveyMonkey. NOTE: You will not be able to save incomplete submissions in SurveyMonkey, so you may want to review and print or save the PDF version of the proposal questions so you can plan your responses prior to starting the submission. Proposals are due by May 2, 2025. Late or incomplete proposals will not be considered.</p>
<p>Call to Action Take Action on the PNA</p> <p>Ask your legislators to co-sponsor PNA legislation.</p>	<p><i>Increase the personal needs allowance (PNA) for nursing home residents(</i> <i>Dignity Alliance Massachusetts' Top Legislative Proposal for the 2025-2026 Session</i> House Sponsor: Rep. Thomas Stanley; Senate Sponsor: Senator Joan Lovely</p>

<p>https://dignityalliancema.org/take-action/#/25</p> <p>Residents, family, staff: Add your story about personal needs allowances. https://tinyurl.com/PNAStory</p>	<p>Please take a moment to contact your state senator and state representative, and other state legislators in your area to ask them to support the increase in the Personal Needs Allowance for nursing home residents both by supporting bills (SD2385, SD401, and HD830) that would increase the amount as well as amendments in the state budget when that gets debated in April and May.</p> <p>Nursing home residents are forced to make choices when purchasing items not provided by the nursing home since a monthly allowance of \$72.80 doesn't go very far today! If it had been linked to increases in inflation when it was last set in FY'07, it should be at least \$113.42.</p> <p>The Personal Needs Allowance is a minimal amount of monthly income that a nursing home resident can retain for personal use. It covers expenses such as clothing, hair appointments, vitamins, books, magazines, stationery, stamps, cell phone costs, and favorite snacks.</p> <p>By using our handy outreach form, it only takes a minute. In addition, if you should meet any state legislators in the next few months, let them know you'd appreciate their support of Dignity Alliance legislation and budget amendments.</p> <p>For more information / questions contact Dick Moore, DignityMA Legislative Workgroup Chair, rmoore8743@charter.net. Ask Legislators to Increase the MA Personal Needs Allowance</p>
<p>Advocacy Under the Golden Dome</p>	<p>Lobby Day for Human Rights and Freedom Tuesday, April 15, 2025, 1:00 p.m. Room 222, State House, Boston A coalition of advocates for incarcerated individuals host a lobby day. The event will focus on legislation dealing with elder and medical parole (H 2693 / S 1722), family and community visits (H 2591 / S 1720), and programming, education and vocational training for incarcerated people (H 2608 / S 1651). Organizers include Prisoners' Legal Services, Families for Justice as Healing, Mass. Against Solitary Confinement, the Keeping Families Connected Coalition, Campaign to End Life Without Parole, Drop Life Without Parole New England, and Progressive Mass. Registration Older Adult Lobby Day Tuesday, May 13, 2025 Great Hall, State House, Boston Organized by Mass Aging Access Multiple organizations, including DignityMA, will be participating. If you plan to attend, please register here: https://agingaccess.org/lobby-day/ For more information, contact Ellen Taintor, ETaintor@agingaccess.org</p>
<p>April Is National Volunteer Month</p>	<p>Dignity Alliance Massachusetts - Five Years of Collective Effort Five years ago, in the earliest days of the Covid pandemic, Dignity Alliance Massachusetts was established as a volunteer-driven to transform the provision of long-term services and care in the Commonwealth. Since that time, hundreds of individuals and organizations have used their collective voices and efforts to make a</p>

 <p>Link to response form: https://forms.gle/TKSA8Ga8QWP RkJ2FA</p>	<p>real difference through legislation, regulatory reform, public policy, and information sharing.</p> <p>On behalf of Massachusetts older adults, persons with disabilities, and caregivers, heartfelt appreciation is gratefully extended to all involved.</p> <p>Together, we look forward to even more and greater achievements in the year ahead.</p> <p>We welcome hearing from you about your involvement with DignityMA: what motivates your participation and what you would like to see accomplished in the year ahead.</p> <p>Link to response form: https://forms.gle/TKSA8Ga8QWP RkJ2FA</p>
<p>Recruitment</p>	<p>See: Listings on MASterList.com's Job Board for all current listings</p>
<p>Guide to news items in this week's <i>Dignity Digest</i></p>	<p>Nursing Homes ‘No Chance to Correct’: Rise in Sudden CMS Termination Notices Increases Special Focus Facility Closures, Wreaks Havoc (Skilled Nursing News, April 11, 2025) Judge rules against Biden rule to up nursing home staff (The Hill, April 8, 2025)</p> <p>Housing Healey-Driscoll Administration and MassHousing Announce First-in-the-Nation Momentum Fund Commitment to Build More Reasonably Priced Housing (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, April 9, 2025)</p> <p>Medicaid Ohio-based CareSource acquiring Commonwealth Care Alliance (*State House News, April 9, 2025)</p> <p>Disability Topics Autism prevalence fuels push for Turning 22 supports (*State House News, April 8, 2025) Proposed panel would consider service animal fraud penalties (*State House News, April 8, 2025)</p> <p>Health Topics 5 Takeaways From New Research About A.D.H.D. (*New York Times, April 13, 2025) Care delivery changes reshaping hospital landscape (*State House News, April 8, 2025) Study strengthens link between shingles vaccine and lower dementia risk (Stanford Medicine News Center, April 2, 2025)</p> <p>Aging Topics All the joys of aging (*Washington Post, April 11, 2025)</p> <p>End of Life Why not attend your own funeral? (*Washington Post, April 14, 2025) How Will My Grandchildren Remember Me? These Seven Objects May Tell Them My Story. (*Wall Street Journal, April 14, 2025)</p> <p>Veteran Topics Everyone agrees the VA needs an overhaul. Are Trump's layoffs the answer? (*Boston Globe, April 14, 2025)</p>

	<p><u>Healey-Driscoll Administration Celebrates One Year of Progress in Ending Veteran Homelessness in Massachusetts</u> (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, April 9, 2025)</p> <p>Alzheimer's and Other Dementia</p> <p><u>When Is the Right Time to Tell People You Have Alzheimer's?</u> (*Wall Street Journal, April 13, 2025)</p> <p>Covid / Long Covid</p> <p><u>What do you remember most from COVID? Readers share their memories of isolation, camaraderie, loss, and hope</u> (*Boston Globe, April 14, 2025)</p> <p>Public Policy</p> <p><u>Should Massachusetts implement a program providing universal basic income?</u> (CommonWealth Beacon, April 13, 2025)</p> <p>Federal Policy</p> <p><u>'We're treading on thin ice.' Trump's unpredictability threatens to upend Massachusetts spending plans.</u> (*Boston Globe, April 13, 2025)</p> <p><u>Elizabeth Warren Slams Trump Admin Over Social Security Communicating Only On X: 'Right, Because Grandma Is On X'</u> (Latin Times, April 11, 2025)</p> <p><u>HHS layoffs hit Meals on Wheels and other services for seniors and disabled</u> (NPR – Shots, April 1, 2025)</p> <p>Public Sessions</p> <p><u>Public Hearing</u> (Joint Committee on Financial Services, Tuesday, April 15, 2025, 10:00 a.m.)</p> <p><u>Public Hearing</u> (Joint Committee on Children, Families and Persons with Disabilities, Tuesday, April 15, 2025, 1:00 p.m.)</p> <p><u>Meeting</u> (PCA Workforce Council, Tuesday, April 15, 2025, 2:00 p.m.)</p> <p><u>Primary Care Access, Delivery, and Payment Task Force Meeting</u> (Health Policy Commission and the Executive Office of Health and Human Services, Wednesday, April 16, 2025, 10:00 a.m.)</p> <p>"Day on the Hill" (Brain Aneurysm Foundation, Wednesday, April 16, 2025, 11:00 a.m.)</p> <p><u>State Plan Committee Meeting</u> (Massachusetts State Rehabilitation Council, Wednesday, April 16, 2025, 11:00 a.m.)</p> <p>Community Meeting (Pappas Rehabilitation Hospital for Children, Wednesday, April 16, 2025, 6:00 p.m.)</p> <p><u>MCSPWD Workforce Supports Meeting</u> (Commission on the Status of Persons with Disabilities, Thursday, April 17, 2025, 12:00 p.m.)</p> <p><u>Health Policy Commission Board Meeting</u> Health Policy Commission, Thursday, April 17, 2025, 12:00 p.m.)</p>
DignityMA Study Session	<p><i>Social Security: It's history, current issues, and advocacy options</i></p> <p>Thursday, May 22, 2025, 2:00 p.m.</p> <p>Registration required:</p> <p><u>https://us02web.zoom.us/meeting/register/t5wRZ6KJTVKqmn-T6RIRhA</u></p> <p>Jim advises health care payers, providers, trade associations, and service providers on business matters, legislative and regulatory issues, governance, and personnel matters. He regularly represents medical device and medical process startups, including with respect</p>



James Roosevelt, former Associate Commissioner, U.S. Social Security Administration

to telehealth, artificial intelligence, and treatment utilizing legal psychedelics. He is also a national speaker and author on the Affordable Care Act, Medicare and Medicaid policy, and Social Security.

For more than 10 years, Jim was CEO of Tufts Health Plan, where he led a turnaround that nearly doubled the membership and achieved consistent profitability while attaining #1 ranking in the United States from the national accrediting organization. He was previously in-house General Counsel and was a former partner in the Health Care Practice Group of Choate, Hall and Stewart in Boston. Before joining Tufts Health Plan, he served as Associate Commissioner of the U.S. Social Security Administration.

In 2016, Jim was a visiting fellow at the Institute of Politics of the Harvard Kennedy School of Government. He continues as a clinical instructor in the Public Health and Community Medicine Department of Tufts University School of Medicine.

Webinars and Online Sessions

1. The Museum of Science and Perkins School for the Blind

Thursday, April 17, 2025, 7:00 p.m.

Live at the Museum and streaming

[Democracy is a Disability Issue](#)

The Museum and Perkins School for the Blind team up for this program highlighting how end-to-end accessibility is crucial for civic engagement. In a true democracy, everyone can participate equally. Explore how end-to-end accessibility — of media, voting processes and more — is essential for full civic participation of people with disabilities.

How might — and should — systems enable::

- People with blindness / low vision to engage with political information from maps/data visualizations?
- People with auditory and / or language processing issues to participate in community forums, town halls, and meetings with policymakers, amid the lack of standardized, real-time, high-quality captioning?
- People with neurocognitive disabilities to discern mis/disinformation, in order to make informed civic decisions?

Join the Museum of Science and Perkins for this vital evening of conversation examining how democracy truly is a disability issue.

Access Information: This event will have ASL interpretation and AI-generated live captioning. Seats will be reserved up front for those accessing interpretation/captions. The venue is wheelchair accessible. Virtual livestream tickets now available!

[Register for the Event](#)

Previously posted webinars and online sessions

Previously posted webinars and online sessions can be viewed at:

<https://dignityalliancema.org/webinars-and-online-sessions/>

Nursing Homes

2. Skilled Nursing News

April 11, 2025

['No Chance to Correct': Rise in Sudden CMS Termination Notices Increases Special Focus Facility Closures, Wreaks Havoc](#)

By Amy Stulick

This article from Skilled Nursing News details a recent surge in abrupt Medicaid and Medicare certification terminations for nursing homes on the Special Focus Facilities (SFF) list. These terminations are often occurring without warning or the opportunity for facilities to demonstrate improvement, leading to closures and legal battles.

Key Takeaways:

- Sudden Increase in Terminations: There has been a significant rise in unexpected termination notices for SFF nursing homes as of late February.
- Lack of Due Process: Facilities report a lack of progressive discipline, opportunity for correction, or access to Independent Dispute Resolution (IDR) before termination.
- Facility Closures: The abrupt terminations have resulted in the closure of facilities like Liberty Health and Wellness in Missouri and another in Topeka, Kansas.
- Legal Challenges: Some operators, like Vertical Health Services, have resorted to litigation to fight the terminations and keep their facilities open, but with limited success.
- Resident Impact: Closures lead to the displacement of residents, often separating couples and forcing individuals to move far away.
- Potential Reasons for the Trend: Attorneys suggest that turnover and staff reductions within CMS regional offices, leading to a loss of institutional knowledge, may be contributing to the increase in abrupt terminations. New CMS staff may be less familiar with the regulatory histories and contributions of individual SFFs.
- Past Policy Influence: The Biden administration's policy of imposing harsher penalties and stricter requirements for SFFs to exit the program is also cited as a potential factor.
- Difficulty in Fighting Terminations: Challenging termination notices is resource-intensive, time-consuming, and carries the risk of retribution from CMS, deterring many facilities from fighting back.
- One Successful Reversal: In a notable case, the law firm Hooper Lundy & Bookman successfully reversed a termination notice for a California client, highlighting the importance of strong advocacy.
- Concerns for the Future: Attorneys anticipate this trend of abrupt terminations will continue until new CMS leadership gains a better understanding of the unique circumstances of SFF facilities and ensures due process.

In essence, the article paints a picture of a more aggressive approach by CMS towards SFF nursing homes, leading to unexpected closures and significant disruption for residents and operators, with concerns raised about due process and the reasons behind this shift

3. The Hill

April 8, 2025

[Judge rules against Biden rule to up nursing home staff](#)

By Lauren Irwin

Here's a summary:

A U.S. District Court judge in Texas ruled against a Biden administration rule aimed at increasing staffing in long-term care facilities. The judge

	<p>argued the rule contradicted existing Congressional legislation. The Biden administration proposed the reforms due to high COVID-19 death rates in nursing homes, which were linked to staffing shortages. The rule faced bipartisan opposition, with groups like the American Health Care Association (AHCA) filing lawsuits, arguing it was too costly and would force nursing home closures. A coalition of 20 states also sued the administration over the policy.</p>
Housing	<p>4. Office of Governor Maura Healey and Lt. Governor Kim Driscoll April 9, 2025 <u>Healey-Driscoll Administration and MassHousing Announce First-in-the-Nation Momentum Fund Commitment to Build More Reasonably Priced Housing</u> <i>Innovative public-private financing partnership under Governor Healey's Affordable Homes Act will jumpstart the construction of nearly 100 new homes</i> Summary: The Healey-Driscoll Administration and MassHousing have announced the first financing commitment under the Momentum Fund, a new state revolving fund aimed at boosting the production of mixed-income housing in Massachusetts. This initial public equity financing will support the development of the Residences at East Milton in Milton, which will create 92 new rental homes, including 23 affordable units. This marks the first transaction of its kind in the state. The Momentum Fund, established through the Affordable Homes Act, seeks to accelerate housing production, particularly for middle-income households, by leveraging low-cost capital and partnering with private developers. MassHousing aims to create 1,000 new multifamily units with an initial \$50 million state investment and plans to explore co-investment partnerships to expand this goal. Governor Healey highlighted the importance of the Affordable Homes Act in increasing housing production across all income levels, while Lieutenant Governor Driscoll emphasized the Momentum Fund's transformative potential in developing mixed-income housing. Secretary of the Executive Office of Housing and Livable Communities Ed Augustus noted the fund's role in incentivizing market-driven housing for a range of incomes. MassHousing CEO Chrystal Kornegay underscored the fund's ability to unlock private investment and provide housing opportunities for working families. The Momentum Fund offers developers flexible equity financing designed to blend with private capital and revolve over time, creating a sustainable source for mixed-income housing growth. This approach aims to lower financing costs and encourage housing construction in a high-cost environment. The first committed project, the Residences at East Milton, will redevelop an underutilized commercial property into 92 mixed-income rental homes, with 23 designated as affordable. The project, sponsored by a joint venture between Joseph J. Corcoran Company and Falconi Properties, also includes streetscape improvements. MassHousing is committing \$5 million in Momentum Equity funding to this project, which was permitted under Chapter 40B. Statements of support were issued by Tamara Small, CEO of NAIOP Massachusetts, and Rachel Heller, CEO of CHAPA, both praising the Momentum Fund as a crucial tool in addressing the state's housing needs.</p>

<p>Medicaid</p>	<p>5. *State House News April 9, 2025 <u>Ohio-based CareSource acquiring Commonwealth Care Alliance</u> By Colin A. Young Summary: Ohio-based nonprofit managed care organization CareSource is acquiring the financially troubled Commonwealth Care Alliance (CCA), a Massachusetts-based nonprofit that provides insurance to approximately 46,000 disabled and low-income individuals. CareSource intends to maintain all of CCA's existing services, including its Senior Care Options and One Care plans, as well as its clinical delivery programs, which will now operate under the "CareSource Family of Brands." CareSource assures that CCA members will continue to receive care from their current teams and providers, enhanced by CareSource's resources. The acquisition comes after Massachusetts Health and Human Services Secretary Kate Walsh highlighted CCA's poor financial state, stemming from unsuccessful expansion efforts into other states. She indicated that this acquisition would allow CCA members to transition to a new plan with similar characteristics. As part of the transition, CCA President and CEO Chris Palmieri and board chairman David Klein will be departing the organization. CareSource clarified that the transaction involves CareSource or one of its nonprofit subsidiaries becoming the sole member of CCA and its subsidiary nonprofit entities.</p>
<p>Disability Topics</p>	<p>6. *State House News April 8, 2025 <u>Autism prevalence fuels push for Turning 22 supports</u> By Alison Kuznitz <i>Young adults face waitlists, service cuts</i> Summary: Massachusetts autism advocates, led by the Advocates for Autism of Massachusetts (AFAM), are urging state lawmakers to significantly increase funding for the human services workforce, particularly to support young adults with autism transitioning out of the special education system through the Turning 22 program. AFAM chair Katie Terino highlighted the increasing number of autistic individuals in the Turning 22 cohort, rising from 27% in 2019 to 51% currently, leading to concerns about waitlists and reduced services due to insufficient capacity. The Arc of Massachusetts is requesting an additional \$100 million for the Chapter 257 reserve to raise entry-level direct support professional pay from \$20.79 to \$22.35 per hour, aiming to alleviate workforce shortages and reduce waitlists. CEO Maura Sullivan emphasized the urgency of this investment, especially given potential federal funding cuts. Amit Basak, a parent of twins with profound autism, described the "Turning 22 cliff," where crucial services abruptly end. He noted the state government's struggle to address the increasing complexity of the autistic population and highlighted issues with overlapping and conflicting rules among agencies like DDS, DMH, and MassHealth, compounded by staffing shortages.</p> <p>7. *State House News April 8, 2025 <u>Proposed panel would consider service animal fraud penalties</u> By Chris Lisinski</p>

	<p>Summary: Massachusetts State Representative Kimberly Ferguson recounted an incident at a local establishment where she observed a small dog, purportedly a service animal due to its red vest, behaving aggressively towards others. This prompted her to advocate for legislation (H 1686 / S 1254) that would establish a commission to study potential reforms regarding service animals. The proposed commission would have until April 1, 2026, to report on the feasibility of prohibiting and penalizing service animal fraud and exploring the certification, registration, or licensing of service animals. Kara Milotte of NEADS World Class Service Dogs testified in support of the bill, highlighting the current lack of consequences for individuals fraudulently presenting pets as service animals in public spaces. Ferguson noted that at least 27 other states have already taken steps to implement stricter regulations on service animals. A similar bill passed the House last session but did not progress in the Senate.</p>
Health Topics	<p>8. *New York Times April 13, 2025 5 Takeaways From New Research About A.D.H.D. By Paul Tough This article discusses the rising rates of A.D.H.D. [Attention-Deficit/Hyperactivity Disorder] diagnoses and medication prescriptions in the US, highlighting that this increase hasn't been driven by new scientific breakthroughs in understanding the condition. Instead, the author argues that recent research has actually complicated our understanding of A.D.H.D., challenging previous assumptions. Here are the key findings from the new research discussed in the article:</p> <ul style="list-style-type: none"> • Defining A.D.H.D. is increasingly difficult: The search for a definitive biomarker (genetic or neurological) has been unsuccessful, leaving the diagnosis subjective. Furthermore, symptoms are often inconsistent throughout childhood, suggesting A.D.H.D. might be a temporary condition rather than an inherent biological trait. • Medication's long-term effectiveness is questionable: While medications like Ritalin can initially improve behavior, their benefits often fade over time, with long-term outcomes being no better than behavioral interventions or no intervention at all. • Medication improves behavior but not necessarily learning: Although medication can make students more compliant and engaged in the short term, it doesn't appear to improve their academic understanding or long-term learning. The drugs primarily affect emotions, making tasks seem more interesting without enhancing cognitive abilities. • A.D.H.D. exists on a spectrum, not as a binary condition: Researchers increasingly view A.D.H.D. symptoms as a continuum, with no clear cut-off for diagnosis. Focus should be directed towards more severe

cases, particularly those involving intense anger, which are linked to poorer long-term outcomes.

- **Environment plays a significant role in A.D.H.D.**

symptoms: A child's environment (classroom, home life, etc.) can significantly impact the manifestation of A.D.H.D. symptoms. Improvements in the environment can often lead to a reduction in symptoms, suggesting A.D.H.D. can be viewed as a mismatch between a child's brain and their surroundings.

The article concludes by suggesting a shift away from the purely "medical model" of A.D.H.D. towards a model that considers the interplay between internal factors and the environment. While medication can be helpful, understanding A.D.H.D. as a potential "temporary misalignment" influenced by external forces could lead to more effective and varied interventions.

9. ***State House News**

April 8, 2025

[Care delivery changes reshaping hospital landscape](#)

By Colin A. Young

Walsh: Rethinking needed as "iconic parts of communities" face threats

Summary: Massachusetts Health and Human Services Secretary Kate Walsh suggests a potential reshaping of the role of hospitals in the state following the Steward Health Care crisis in 2024, which involved the transfer of six hospital campuses and the closure of two others. Speaking at a budget hearing, Walsh emphasized the need to rethink what hospitals are and will be in the future, noting the financial challenges facing community hospitals nationwide, as highlighted by a recent CHIA report showing negative operating margins for a majority of Massachusetts hospitals.

Walsh pointed to the situation at Carney Hospital, where a combination of healthcare delivery, a school, and housing is being considered as an example of this new thinking. She stressed the importance of ensuring access to necessary services in the most effective way, noting that many in-demand services like cancer care, ambulatory surgery, and imaging can be delivered outside of traditional hospital settings.

In response to the closure of Nashoba Valley Medical Center, UMass Memorial Health plans to establish a standalone emergency department and offer imaging services in the region. Walsh assured that the Nashoba Valley will have a satellite emergency facility, aiming for a more durable and sustainable healthcare delivery system in an area where the previous hospital was not economically viable due to low utilization. She indicated that the conversations around the future of hospitals in Massachusetts are likely to continue in the coming years.

10. **Stanford Medicine News Center**

April 2, 2025

[Study strengthens link between shingles vaccine and lower dementia risk](#)

By Nina Bai

A new analysis of a vaccination program in Wales found that the shingles vaccine appeared to lower new dementia diagnoses by 20% — more than any other known intervention.

	<p>This summary describes a compelling study from Stanford Medicine, published in Nature, which suggests a significant link between the shingles vaccine and a reduced risk of dementia. Researchers analyzed health records of older adults in Wales and found that individuals who received the shingles vaccine were 20% less likely to develop dementia over a seven-year period compared to their unvaccinated counterparts. The study leverages a unique public health policy in Wales that created a "natural experiment" in the vaccine rollout. Eligibility for the live-attenuated shingles vaccine was initially determined by a specific birthdate, creating two very similar groups (those just under and just over the eligibility age of 79 on September 1, 2013), with the primary difference being access to the vaccine. This design helped to mitigate the bias often found in observational studies where vaccinated individuals tend to have other health-conscious behaviors.</p> <p>Key findings and implications include:</p> <ul style="list-style-type: none"> • The study provides strong evidence supporting the emerging theory that certain viral infections affecting the nervous system may increase the risk of dementia. • The observed reduction in dementia risk (20%) is substantial and suggests a potential preventive intervention is already available. <p>The vaccine also reduced the incidence of shingles itself by approximately 37% in the vaccinated group, consistent with clinical trial data.</p> <p>The protective effect against dementia was found to be more pronounced in women than in men.</p> <p>The researchers controlled for various other health conditions and socioeconomic factors, finding no significant differences between the vaccinated and unvaccinated groups other than the lower dementia rates.</p> <p>The study's design, resembling a randomized controlled trial, strengthens the evidence for a causal link between the shingles vaccine and reduced dementia risk.</p> <p>The researchers have replicated these findings in health records from other countries, further bolstering the evidence.</p> <p>Future research, including a randomized controlled trial using a placebo, is needed to definitively confirm the causal relationship and explore the underlying mechanisms. The researchers are currently seeking funding for such a trial.</p> <p>The findings suggest that vaccination against shingles may offer an unexpected benefit in reducing the risk of dementia, highlighting the potential for exploring the role of the immune system and viral infections in neurodegenerative diseases.</p>
<p>Aging Topics</p>	<p>11. *Washington Post April 11, 2025 All the joys of aging Letters to the Editor Readers reflect on essays by Anne Lamott about growing older. The newsletter series A User's Guide to Aging draws from a year's worth of essays by Anne Lamott about growing older. In each edition, they share journaling prompts and invite readers to share reflections on their own experiences with aging. The responses they've received so far have been thought-provoking, funny and moving. You can read some of them below.</p>

	To read the full newsletter, sign up here .
End of Life	<p>12. *Washington Post April 14, 2025 Why not attend your own funeral? By Daniel Pink <i>It's a chance to celebrate a life well lived.</i> One Saturday morning in August of 2021, more than 200 people assembled in an Arlington church for the funeral of Richard Hanneman, a onetime Capitol Hill staffer and longtime trade association executive who died of lung cancer at the age of 78. Four of Hanneman's seven children spoke at the service. So did two of his grandchildren and his best friend. Some of them told stories of blood drives and lobster bakes he'd organized. Others described his deep religious faith. A few choked back tears. Karen Hanneman, his wife of 54 years, sat in the front pew. Congregants sang a hymn at the beginning of the ceremony and the "Hallelujah" chorus from George Frideric Handel's "Messiah" toward the end. The service concluded with two of Hanneman's friends playing taps. But the most compelling presence was the third speaker on the program, a white-haired man in a dark suit. Earlier that summer, learning that he had perhaps two months to live, Hanneman decided to organize his own funeral and to hold it in time to attend. And on that August morning, with tubes stretching from a cannula in his nose to a portable oxygen tank, he told the crowd how grateful he was for the life he'd lived and the people he'd loved. For the last year, in The Post's Why Not? project, I've been proposing ideas that aim to push past the cynicism of our times and expand our sense of possibility. I've examined ideas for reimagining politics, education, civic life, sports, traffic and more. For my final column, I want to tackle a topic that will eventually touch us all: death. Maybe Dick Hanneman was on to something. Why not attend your own funeral? A final to-do list Human beings have been constructing rituals around death for at least 100,000 years, according to archaeologists. Whether those customs involve intricate rites and elaborate offerings or simple words and somber clothing, they help us mark a moment and find meaning in pain. The rituals are often rooted in religion. Catholics hold wakes. Muslims perform the Salat al-Janazah. Jews sit shiva. Sometimes the deceased's body is present. But almost by definition, the living person is not. Follow Opinions on the news Yet in some corners of the world, that has been changing. "Living celebrations" (sometimes called "living funerals" or "pre-funerals") began slowly wading into the mainstream in 1990s Japan, where the practice is known as seizenso. Versions have sprouted in South Korea as a way to help people reckon with their mortality and learn the principles of "dying well." Dick Hanneman didn't know about seizenso back in the summer of 2021. But he did know he was going to die. Soon. He'd battled lung cancer for years, one of the few nonsmokers to suffer from the disease. And although the cancer had slipped into remission in the past, the menace had reappeared with a vengeance and his options had run out. So, in</p>

early August, Dick sat down in the tidy office of the house he and Karen had lived in since 1973 and got to work. He'd always been a planner, Karen told me, a man energized by projects and to-do lists. "When I found out he was going to die, I was glad he could do it the way he wanted to do it," she said. He decided on two events. The first was a rollicking gathering, a farewell party of sorts, in their church social hall. On a Thursday night in late August — with Dick seated in the front of the room, and attendees planted at tables adorned with artifacts of his life — colleagues, acquaintances and relatives came to the microphone to recount memories and to thank him for his guidance and friendship. Several people, including Dick, wore leis. One friend played a ukulele. Two days later was the more formal ceremony, held in the church sanctuary. It began with dozens of family members posing for photographs, almost like they were attending a wedding. But the gathering itself bore all the trappings of a traditional funeral — prayers, music, a mix of eulogies and remembrances. "We gave him just the send-off he wanted," Karen told me. "He was a happy man."

Life (and death) imitates art

The dramatic possibilities of attending your own funeral have made it a staple of storytelling. In "The Adventures of Tom Sawyer," Tom, Joe and Huck hide in the gallery of a church listening to others eulogize them, then stride down the aisle to freak out Aunt Polly. From John Green's young adult novel, "[The Fault in Our Stars](#)," to the film "[Get Low](#)" to [an episode](#) of "Curb Your Enthusiasm," pop culture has repeatedly enlisted the trope.

Now life (and death) is imitating art. While there's little reliable data on living celebrations, [Kate Woodthorpe](#), who co-directs the [Centre for Death and Society](#) at the University of Bath, says they're becoming more common. For much of history, funerals were about family status and the fate of the soul, "but today we're seeing a decline in the solemnness of death and the reverence around it," she told me. A living funeral "reframes the moment in a way that feels less somber and more positive."

Several forces are powering the trend. Connections to organized religion are fraying. For instance, regular attendance at religious services [has declined by more than 25 percent](#) in the past 20 years. Some 30 percent of Americans claim [no religious affiliation](#) at all. And cremations have recently accounted for [well over half of end-of-life arrangements](#), making the presence of the body less central to the process of mourning.

Perhaps most important, the individualization of everything has come for funeral rites. Much as they've done for weddings, divorces and cohabitation, baby boomers are seeking to do death their way. They can now hire "[end-of-life doulas](#)" to help them navigate dying and [event planners](#) that specialize in [celebration of life ceremonies](#).

Of course, this alternative ritual works only in certain circumstances. The person's demise must be foreseeable and somewhat imminent. And the person being honored must have the capacity both to plan the event and participate in it. This approach doesn't satisfy everyone, though. For some attendees, the timing might not provide the sense of finality and closure they need to fully mourn.

But Woodthorpe argues that one of the deepest benefits of funerals is social cohesion. "The living funeral achieves that but with the dying

person as an active participant. They become a conduit between different groups, reintroducing people to one another, which gives everyone a great sense of comfort.”

Living celebrations afford the dying person a rare measure of control over their final days, a chance to find clarity and peace amid uncertainty. They can also be less burdensome, logistically and emotionally, for families. (Hanneman arranged to donate his body to science, sparing his family the responsibility of cremation or burial.)

‘Showing up’

Most of all, these new rituals can remake our relationship with the end. Death is a strange combination. It may be the most ubiquitous human experience. (The Grim Reaper will someday get us all.) Yet it is also one of the most taboo. When we talk about it at all, we speak in whispers.

Living celebrations raise the volume of the conversation. Contrary to what we might expect, those facing death aren’t always racked with terror and despair. Research has shown that people at the end of their lives exhibit [more positive emotions](#) than a typical living person.

Likewise, when the rest of us [contemplate our own demise](#), as pre-funerals prod us to do, our sense of well-being climbs. Why not normalize the inevitable and use death to affirm life?

Dick Hanneman spoke in a strong, unwavering voice when he stood before his friends and family and said goodbye. Acting on his philosophy that “80 percent of life is showing up,” here he was — showing up to describe the love “I’ve felt every day of my life,” to profess his faith in God and to offer “my heartfelt thanks to you for all the support you’ve given me.” Besides, he joked, “All the good ideas that I’ve been given credit for were mostly Karen’s anyway, so you’re not going to be losing those.” One evening a few weeks later, Sept. 20, 2021, his granddaughter made him dinner and Dick watched an [early season game](#) of his beloved Green Bay Packers. That night he told Karen, “I’ve done everything on my to-do list.”

The following morning, in his own bedroom with his wife and family by his side, he passed. The tears had been shed. The words had been said. It was, in its way, a beginning.

13. *Wall Street Journal

April 14, 2025

[How Will My Grandchildren Remember Me? These Seven Objects May Tell Them My Story.](#)

By Robbie Shell

The author reflects on a box of seemingly random items left by her mother, inherited from her grandmother, and realizes how little she knew about this distant relative. This prompts her to imagine creating her own box for future generations, filled with items that reveal her as a person, not just her accomplishments.

She describes seven objects she would include:

1. **"All About Me," an autobiography written at age 11:** This reveals her early love of reading and writing and her earnest approach to tasks.
2. **A copy of her first newspaper story:** A profile of artist/activist Mark di Suvero, representing her enjoyable years as a journalist, particularly feature writing and the competitive nature of beat reporting.

	<ol style="list-style-type: none"> 3. A smudged sheet of paper with six marriage promises: These promises to her husband, especially the pledge to be "guardians of each other's solitude," highlight the foundation of their enduring relationship. 4. A 3-inch-high smiling ape from birthing class: This symbolizes the birth of her sons and, more profoundly, her near-death experience during a postpartum hemorrhage, which instilled in her enduring gratitude and a sense of life's fragility. 5. The novel "Bud, Not Buddy": This book about a young Black boy searching for his father resonates with her own experience of her father's absence and her lingering regret at not truly knowing him. 6. A poem written for a 2-year-old with a brain tumor: This represents her decades of meaningful volunteer work with individuals facing hardship, including children with life-threatening illnesses. 7. A copy of her novel about honeybees: This signifies her pursuit of a new passion in retirement, inspired by the dedication, teamwork, and efficiency of bees, and the successful realization of a long-term project. <p>The author concludes that these seven items, along with the essay and family photos, would offer clues to her life and identity, encouraging future generations to create their own "boxes" and share their stories.</p>
Veteran Topics	<p>14. *Boston Globe April 14, 2025 <u>Everyone agrees the VA needs an overhaul. Are Trump's layoffs the answer?</u> By Kay Lazar <i>Internal VA documents suggest terminating thousands of staffers won't fix the agency's problems.</i></p> <p>This article examines the challenges facing the Department of Veterans Affairs (VA) as it experiences a surge in demand for healthcare and disability benefits, leading to a dramatic budget increase. Ray Trombley, a veteran receiving VA compensation and care for liver cancer, serves as a personal lens through which to view these issues.</p> <p>The article highlights that the VA's budget has more than doubled since 2015, reaching \$336 billion, prompting the Trump administration to propose significant cuts, including the termination of approximately 80,000 staff. This proposal has sparked controversy among lawmakers and advocates who fear a reduction in services.</p> <p>The article delves into the reasons behind the VA's growth, citing internal documents showing a significant increase in the average degree of disability among veterans, from 30% between 1950 and 2000 to 63% currently. This is attributed to advancements in battlefield medicine leading to more survivors with severe injuries, as well as an aging veteran population with increasing healthcare needs, including Vietnam veterans like Trombley.</p> <p>Furthermore, Congressional actions, such as the 2014 Choice Act, the 2018 MISSION Act, and the 2022 PACT Act, have expanded veterans' access to community-based care and added numerous medical conditions eligible for coverage, further driving up costs and claims. Despite the increased spending on community care, there is limited evidence suggesting it is more timely or of higher quality than VA care. The VA also faces a backlog of over 244,000 disability claims.</p>

The article presents differing opinions on how to address the VA's budgetary challenges. Some argue for increased staffing to manage the growing workload, while others advocate for privatizing the VA. Trombley, while acknowledging past issues with the VA's timeliness, expresses concern about staff cuts potentially impacting regional facilities he relies on and opposes privatization. Ultimately, the article portrays a VA system grappling with increasing demands and costs due to a growing population of veterans with more complex health needs and expanded benefits mandated by Congress. While proposed budget cuts and potential privatization are debated, the article underscores the VA's crucial role in serving its unique clientele, as experienced by veterans like Ray Trombley.

15. Office of Governor Maura Healey and Lt. Governor Kim Driscoll

April 9, 2025

[Healey-Driscoll Administration Celebrates One Year of Progress in Ending Veteran Homelessness in Massachusetts](#)

Nearly 200 veterans got permanent or transitional housing through Governor Healey's End Veteran Homelessness Campaign; 330 housing units slated for development in 2025

The Healey-Driscoll Administration is reporting significant progress one year after launching its End Veteran Homelessness (EVH) campaign in Massachusetts. Key achievements include:

- **HOPE Program:** Over 500 veterans have been enrolled in the Homelessness Outreach to Placement Effort (HOPE) program since its July 2024 launch. This program streamlines housing placements and coordinates support services.
- **Housing Placements:**
 - 96 veterans have been placed in permanent housing with an average placement time of 19 days.
 - 89 veterans have been placed in transitional housing with an average placement time of 10 days.
- **Financial Assistance:** More than \$300,000 (\$318,989) in financial assistance has been provided to over 300 veteran families for expenses such as rent, security deposits, moving costs, and emergency housing.
- **Housing Development:** Over 330 veteran housing units are slated for development in 2025, supported by a \$13 million investment.
- **Support Services:** Since July 2024, over 111,000 essential services have been delivered to nearly 8,500 unique veterans, including:
 - Over 27,000 food pantry visits.
 - Over 16,000 housing-related services.
 - Over 7,600 mental health and substance use treatment services.
 - 1,900 employment and education-related services.

The \$20 million EVH campaign, the largest targeted investment in veteran housing and services in state history, focuses on five

	<p>key pillars: HOPE, Capital Investments Supporting Veteran Housing, Aligning Supportive Services with Veteran Housing Goals, the End Veteran Homelessness Advisory Council, and Empowering and Supporting Veteran Service Providers. The administration emphasizes its commitment to making veteran homelessness in Massachusetts rare, brief, and nonrecurring through cross-agency collaboration and strong partnerships.</p>
<p>Alzheimer's and Other Dementia</p>	<p>16. *Wall Street Journal April 13, 2025 <i>When Is the Right Time to Tell People You Have Alzheimer's?</i> By Marc Agronin</p> <p>This article, written by the director of a memory disorders clinic, discusses the difficult decision many individuals with early-stage Alzheimer's face: when, how, and whom to tell about their diagnosis. The author highlights that <u>advancements in early detection</u> mean more people are grappling with this disclosure. While some, like an orthodontist patient, find surprising support and empathy, others face stigma, infantilization, or professional repercussions. The author emphasizes the importance of the diagnosed individual having their voice heard and being reminded that they are "still here."</p> <p>The article offers guidance on when to disclose, suggesting it should serve a purpose, such as dispelling suspicions or enabling understanding and support. Key considerations include having a clear and certain diagnosis, the ability to explain it accurately, focusing on the present without speculation, and considering the timing and audience to ensure a positive outcome. Selective disclosure may be necessary to avoid unintended negative consequences, as illustrated by the salon worker's experience. As the disease progresses, broader disclosure becomes an opportunity for education and support.</p> <p>Regarding how to tell, the author advises tailoring the message to the recipient's level of understanding and involvement. Close contacts benefit from a direct explanation of the diagnosis and how it was determined, along with specific requests for support. When informing children, age-appropriate language, reassurance, and normalization are crucial. Disclosing to employers carries risks, and a confidential discussion with HR is recommended, with an Alzheimer's specialist best positioned to assess work-related impacts.</p> <p>Finally, the article provides "golden rules" for those receiving the news: listen without making it about oneself, avoid offering unsolicited theories or therapies, maintain normal social interaction, focus on strengths, and offer support to both the individual and their caregivers.</p> <p>The author concludes by emphasizing the profound impact of care and support on the course of the disease and encourages readers to "do it right," even when challenging, to make a significant positive difference in the lives of those affected by Alzheimer's.</p>
<p>Covid / Long Covid</p>	<p>17. *Boston Globe April 14, 2025 <i>What do you remember most from COVID? Readers share their memories of isolation, camaraderie, loss, and hope</i> By Emily Spatz and Andrew Nguyen</p>

	<p>[Access the article online to review scores of reports dating January 2020 through May 2023.]</p> <p>Five years ago last month, Governor Charlie Baker declared a state of emergency in Massachusetts.</p> <p>State employees were forced to cancel travel plans, among other measures. Within days, all schools would be closed in the state and the nation would be plunged into the worst public health crisis since the 1918 Spanish flu.</p> <p>Massachusetts lost more than 22,000 lives; New England lost nearly 50,000; the United States lost more than 1.2 million, according to the Centers for Disease Control and Prevention.</p> <p>Yet the nation has never really reckoned with its loss. We have no official day of remembrance or national memorial to COVID victims. To give our community the chance to share collective memories of a dark time, the Globe asked readers to submit stories and remembrances from the early days of the COVID-19 pandemic. In response, we received an outpouring of photos, videos, and stories of birth, death, unexpected moments of joy, and lasting grief.</p> <p>For many of our neighbors, these moments represent some of the most difficult times of their lives. At least for some, those moments brightened as the pandemic neared its end.</p>
Public Policy	<p>18. Commonwealth Beacon</p> <p>April 13, 2025</p> <p><i>Should Massachusetts implement a program providing universal basic income?</i></p> <p>By James Peyser</p> <p>This issue brief examines the proposal (see here and here) to enact a universal basic income (UBI) plan in Massachusetts, aiming to provide every household with a minimum monthly income to cover essential living expenses. The author highlights the complexities and differing perspectives surrounding this policy proposal, moving beyond simplistic "bumper sticker" arguments to explore the evidence-based cases for and against UBI.</p> <p>The Proposal: Enact a universal basic income plan in Massachusetts to ensure a minimum monthly income for all households to cover essential living expenses.</p> <p>Background: UBI is presented as an anti-poverty and income stability measure that guarantees income with minimal conditions. Massachusetts has seen limited UBI pilot programs in five cities, and a state senator has proposed a larger pilot aiming for a monthly income equivalent to a living wage. The concept has historical roots in Milton Friedman's negative income tax and is related to existing programs like the Earned Income Tax Credit (EITC) and the Child Tax Credit (CTC). The idea has gained renewed traction, particularly after the COVID-19 pandemic.</p> <p>"Bumper Stickers and Sticking Points":</p> <ul style="list-style-type: none"> • Pro ("End Poverty, Now!"): Argues that poverty is inherent in capitalism and exacerbated by technological change, necessitating a government-guaranteed income as the only solution. • Con ("No More Handouts!"): Contends that cash welfare discourages work, creates dependency, undermines personal responsibility, and saps the economy's entrepreneurial spirit.

	<p>Evidence-Based Case in Favor:</p> <ul style="list-style-type: none"> • Simplification and Increased Participation: UBI could streamline the complex web of existing welfare programs, potentially increasing participation and reducing "cliff effects." • Financial Stability and Security: A guaranteed income could improve household financial stability, reduce food and housing insecurity, and create a better environment for raising children, especially given wage stagnation and labor market disruptions. • Positive Outcomes in Developing Countries: Programs like Prospera in Mexico and Bolsa Familia in Brazil have shown positive impacts on health, education, employment, and intergenerational mobility. • Promising US Pilot Program Results: US city pilots show that UBI payments are primarily spent on basic needs (food, housing, transportation, healthcare) and haven't been used for frivolous or self-destructive purposes. • Positive Local Pilot Findings: Studies in Chelsea and Cambridge, Massachusetts, showed that UBI increased food security, reduced income volatility and housing cost burden, and even led to positive educational effects for children. • Impact of Expanded Child Tax Credit: The temporary expansion of the federal CTC during COVID-19 significantly reduced child poverty, demonstrating the potential impact of direct cash assistance. <p>Evidence-Based Case Opposed:</p> <ul style="list-style-type: none"> • High Cost: Implementing a universal basic income program can be extremely expensive, potentially increasing the fiscal impact of existing social welfare programs significantly. • Limited Impact on Employment and Earnings: Studies suggest that UBI programs may not significantly improve employment rates or individual earnings. • Failure to Escape Poverty: While UBI can improve living conditions, evidence suggests it may not necessarily help families escape poverty entirely. • Existing Welfare Spending in Massachusetts: Massachusetts already has significant spending on programs like SNAP and TAFDC, providing substantial average annual benefits to recipients, in addition to federal and state EITC and CTC. <p>In conclusion, the brief presents UBI in Massachusetts as a complex issue with potential benefits in poverty reduction and financial stability, supported by evidence from pilot programs and the expanded CTC. However, it also raises significant concerns about the potential cost and the limited evidence of its impact on employment and poverty escape, especially considering existing welfare spending in the state.</p>
Federal Policy	<p>19. *Boston Globe April 13, 2025 <i>'We're treading on thin ice.' Trump's unpredictability threatens to upend Massachusetts spending plans.</i> By Matt Stout Summary: Massachusetts faces significant fiscal uncertainty due to volatile economic conditions and potential federal funding cuts, prompting calls for cautious state budgeting. A state budget watcher recommends reducing revenue estimates by \$1 billion, while House Speaker Ron Mariano indicates a likely approach of maintaining current</p>

funding levels for many agencies due to the unpredictability. He also warned of potential mid-year budget cuts if federal aid decreases. The uncertainty stems from the Trump administration's aggressive federal spending cuts across sectors like education and healthcare, as well as potential deep cuts to Medicaid being considered by Congress, which is crucial for Massachusetts' MassHealth program. The state typically relies on around \$16 billion in federal aid. The state's own tax revenue is also vulnerable to the fluctuating national economy, influenced by unpredictable federal policy shifts.

Experts emphasize the "fragility" of the current economic situation, attributing it to self-inflicted factors rather than traditional recession triggers. They advise lawmakers to lower spending plans to account for potential declines in state tax collections and suggest that tapping the state's record \$8 billion emergency savings may be necessary, as significant federal aid during a downturn is unlikely.

The state also faces exposure through federally funded salaries for approximately 4,000 state workers and \$5 billion in other federal grants vital for government operations. While the House plans to avoid tax or fee increases in its upcoming budget, it will likely be selective in allocating funds and may scale back earmarks. Other states are responding to the fiscal uncertainty with varied approaches, including tax cuts in some and considering increased "sin taxes" in others.

Massachusetts' budget process will continue with the Senate crafting its version after the House, with a final proposal expected to reach Governor Healey this summer, acknowledging that the fiscal landscape remains subject to daily changes and federal actions. Governor Healey stressed the need for a sustainable budget given the ongoing federal cuts.

20. Latin Times

April 11, 2025

[Elizabeth Warren Slams Trump Admin Over Social Security Communicating Only On X: 'Right, Because Grandma Is On X'](#)

By Demian Bio

"This is corruption, plain and simple," said the senator.

[Democratic](#) Sen. Elizabeth Warren slammed the [Trump](#) administration on Friday over a report that the Social Security Administration (SSA) will exclusively communicate through X, the social media platform owned by DOGE head Elon Musk.

"Right, because Grandma is on X. This is corruption, plain and simple," said Warren. The report, [published](#) by Wired, details that the agency will stop communicating with the media and the public through press releases and "dear colleague" letters amid major staffing cuts.

[SSA](#) regional commissioner Linda Kerr-Davis told managers earlier this week that, instead, "the agency will be using X to communicate to the press and the public ... so this will become our communication mechanism."

Trump officials rejected that the change would impact beneficiaries, with White House spokesperson Liz Huston saying the SSA is "actively communicating with beneficiaries and stakeholders."

"There has not been a reduction in workforce. Rather, to improve the delivery of services, staff are being reassigned from regional offices to front-line help – allocating finite resources where they are most needed. President Trump will continue to always protect Social Security," she added.

The outlet also detailed that the SSA's regional office workforce is set to be cut by almost 90% and that since February the agency has cut 7,000 jobs. The agency currently has 547 employees in almost a dozen regional offices, with the figure expected to drop to about 70 after the cuts.

Kerr-Davis acknowledged to an SSA employee that the restructuring can limit SSA's ability to combat fraud. "Won't losing subject matter experts lead directly to fraud, waste, and abuse?" the staffer asked. "Yes, I mean, we do rely on [their] help ... Things are going to break, and they're going to break fast," she replied.

21. NPR – Shots

April 1, 2025

[HHS layoffs hit Meals on Wheels and other services for seniors and disabled](#)

By Joseph Shapiro

The [layoffs](#) at the Department of Health and Human Services slashed the staffs of major federal aging, disability and anti-poverty programs, leaving the future of those programs uncertain.

At least 40% of staff got layoff notices and many were turned away at the front door Tuesday when they showed up for work at the Administration for Community Living, or ACL, which coordinates federal policy on aging and disability. That's according to the agency's former director under the Biden Administration, Alison Barkoff, who says she talked to multiple members of her former staff.

The agency funds programs that run senior centers and distribute 216 million meals a year to older and disabled people through the Meals on Wheels program.

"The programs that ACL implements improve the lives of literally tens of millions of older adults, people with disabilities and their families and caregivers," says Barkoff, now director of a health law program at George Washington University's Milken Institute School of Public Health. "There's no way to have these RIFs and not impact the programs and the people who rely on them."

Last week, the [announcement](#) of the coming layoffs at HHS said that ACL's responsibilities would go to different parts of HHS.

But [Project 2025](#), the Heritage Foundation's guide for reshaping government, had suggested ACL take on work on special education services once the Department of Education was dismantled. It's not clear where that work will be done now.

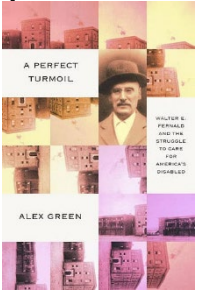
In addition, every staff member was laid off from the Division of Energy Assistance, according to two employees who lost their jobs on Tuesday, Andrew Germain and Vikki Pretlow. The office runs the Low-Income Home Energy Assistance Program, or LIHEAP, which helps 5.9 million low-income households pay heat and cooling bills and pay for home repairs to boost energy efficiency.

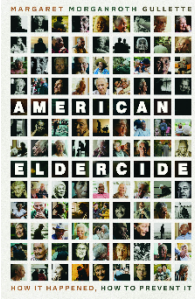
The staffers said layoffs of about 20 workers came as a surprise and they expressed concern about whether the program would continue once funding runs out at the end of September and impoverished people face rising heating bills in fall and winter.

LIHEAP provides "life-saving services," says Germain. One way the funds are used is to help low-income people pay their electric bills when they rely upon oxygen or other medical devices or need to keep the refrigerator running to store insulin or other medicines.

	<p>Germain ran compliance monitoring to make sure states used the LIHEAP money correctly. He said fraud is rare. But LIHEAP was scrutinized by Project 2025. It noted a "loophole" – fixed by Congress more than ten years ago, in 2014 – that was used by about 10 states to give minimal energy assistance in a way that then qualified impoverished people for a bigger SNAP, or food stamp, payment. Congress appropriated \$4.1 billion to LIHEAP in fiscal year 2024. Germain says without federal staff to run the program, it's unclear how it will continue after the current appropriation ends in September. Pretlow, who lost her job as a program specialist in the LIHEAP office, said: "You can be paid much more in a different place, you can be praised more in a different place, you can be appreciated more in a different place. But the people I worked with have a great heart for service."</p>
Public Sessions	<p>22. Joint Committee on Financial Services Tuesday, April 15, 2025, 10:00 a.m. Room A-2, State House, Boston and Virtual Public Hearing The Joint Committee on Financial Services holds a public hearing on two dozen bills dealing with consumer protection, credit unions and housing. Bills from Rep. Barber and Sen. Gomez (H 1090 / S 765) would establish a foreclosure prevention program, which involves a mediation process that explores alternatives to foreclosure. Proposals from Rep. Murphy and Sen. Feeney (H 1270 / S 741) aim to protect seniors and people with disabilities from financial exploitation, including by permitting financial institutions to delay transactions under certain cases of suspected exploitation. Also on the agenda is the Debt Collection Fairness Act from Rep. Nguyen and Sen. Eldridge (H 1275 / S 735), which the Senate passed last session but then stalled in the House Ways and Means Committee. Agenda and Livestream</p> <p>23. Joint Committee on Children, Families and Persons with Disabilities Tuesday, April 15, 2025, 1:00 p.m. Room A-1, State House, Boston and Virtual Public Hearing The Joint Committee on Children, Families and Persons with Disabilities holds an informational hearing featuring testimony from agency leaders. Speakers includes Commission for the Deaf and Hard of Hearing Commissioner Opeoluwa Sotonwa, Department of Developmental Services Commissioner Sarah Peterson, Massachusetts Commission for the Blind Commissioner John Oliveira, MassAbility Commissioner Toni Wolf, Department of Transitional Assistance Commissioner Jeff McCue, Department of Children and Families Commissioner Staverne Miller, and Office of the Child Advocate Director Maria Mossaides. The Children's Trust Executive Director Jenn Valenzuela also testifies. Agenda and Livestream</p> <p>24. PCA Workforce Council Tuesday, April 15, 2025, 2:00 p.m. Meeting Meeting focused on MassHealth and MassHealth updates. Zoom</p>

	<p>25. Health Policy Commission and the Executive Office of Health and Human Services Wednesday, April 16, 2025, 10:00 a.m. Primary Care Access, Delivery, and Payment Task Force Meeting The panel, led by the Health Policy Commission and the Executive Office of Health and Human Services, will explore ways to improve the state's primary care system, a priority for policymakers given the difficulty residents are having accessing primary care. The panel will make recommendations for establishing a primary care spending target, propose models to increase primary care reimbursements, and map out workforce development plans. More Info and Livestream</p> <p>26. Brain Aneurysm Foundation Wednesday, April 16, 2025, 11:00 a.m. <i>"Day on the Hill"</i> Brain Aneurysm Foundation hosts a to raise awareness about a condition with significant risks. Organizers say 2% to 5% of the population has an unruptured brain aneurysm, and even though only a small number of those ever rupture, "half of those who do will not survive the trauma, with others facing the possibility of lifelong disability." Reps. Lawn and Donato join the event alongside Brain Aneurysm Foundation Executive Director Christine Buckley and Dr. Christopher Ogilvy of the Beth Israel Deaconess Medical Center Brain Aneurysm Institute.</p> <p>27. Massachusetts State Rehabilitation Council Wednesday, April 16, 2025, 11:00 a.m. State Plan Committee Meeting Agenda includes a discussion about MassAbility's priorities, including improving career services for young adults and bolstering relationships with employers. Agenda and Livestream</p> <p>28. Pappas Rehabilitation Hospital for Children <i>Community Meeting</i> Wednesday, April 16, 2025, 6:00 p.m. Congregational Church of Canton, 1541 Washington St., Canton Sen. Feeney and Rep. Galvin hold a community meeting about Pappas Rehabilitation Hospital for Children in Canton, which serves patients ages 7-22 with severe cognitive and physical disabilities. Gov. Healey proposed closing the public health hospital in her budget and renovating a wing at another state-run hospital in western Massachusetts, though the administration paused that plan after public uproar. Lawmakers say they will discuss "next steps" for advocacy as they chart a path forward for Pappas.</p> <p>29. Commission on the Status of Persons with Disabilities Thursday, April 17, 2025, 12:00 p.m. MCSPWD Workforce Supports Meeting This is a meeting of the Workforce Supports Subcommittee of the permanent Commission on the Status of Persons with Disabilities. This subcommittee will collect data and analyze initiatives that address the workforce crisis for people who provide services to individuals with disabilities. Agenda 1. Welcome, Roll Call</p>
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	<ol style="list-style-type: none"> 2. Immigrant workers' rights and resources for workers, Lauren Goldman Moran, Chief of the Fair Labor Division at the MA Office of the Attorney General 3. Update on the youth and young adults with disabilities, job coaching, and inclusive employment pathways event 4. Adjournment <p>Registration form for Zoom link</p> <p>30. Health Policy Commission Thursday, April 17, 2025, 12:00 p.m. Health Policy Commission Board Meeting Members plan to vote to issue the Cost and Market Impact Review report on the proposed clinical affiliation between Dana-Farber Cancer Institute, Beth Israel Deaconess Medical Center and Harvard Medical Faculty Physicians. The HPC released a preliminary report on Feb. 27 that found the transaction would likely reduce spending on inpatient care, while raising spending on outpatient care. The Public Health Council recently approved plans for Dana-Farber to build a standalone cancer hospital in the Longwood Medical Area as part of its split from Mass General Brigham. The agenda also features a vote on establishing the 2026 health care cost growth benchmark. More Info and Livestream</p>
<p>Books by DignityMA Participants</p>  <p>About the Author: Alex Green teaches political communications at Harvard Kennedy School and is a visiting fellow at the Harvard Law School Project on Disability and a visiting scholar at Brandeis University Lurie Institute for Disability Policy. He is the author of legislation to create a first-of-its-kind, disability-led human rights commission to investigate the history of state institutions for disabled people in Massachusetts.</p>	<p><u>A Perfect Turmoil: Walter E. Fernald and the Struggle to Care for America's Disabled</u> By Alex Green</p> <p>From the moment he became superintendent of the nation's oldest public school for intellectually and developmentally disabled children in 1887 until his death in 1924, Dr. Walter E. Fernald led a wholesale transformation of our understanding of disabilities in ways that continue to influence our views today. How did the man who designed the first special education class in America, shaped the laws of entire nations, and developed innovative medical treatments for the disabled slip from idealism into the throes of eugenics before emerging as an opponent of mass institutionalization? Based on a decade of research, <i>A Perfect Turmoil</i> is the story of a doctor, educator, and policymaker who was unafraid to reverse course when convinced by the evidence, even if it meant going up against some of the most powerful forces of his time.</p> <p>In this landmark work, Alex Green has drawn upon extensive, unexamined archives to unearth the hidden story of one of America's largely forgotten, but most complex, conflicted, and significant figures. Buy the book here</p>
<p>Books by DignityMA Participants</p>	<p><u>American Eldercide: How It Happened, How to Prevent It</u> By Margaret Morganroth Gullette</p> <p>A bracing spotlight on the avoidable causes of the COVID-19 Eldercide in the United States. Twenty percent of the Americans who have died of COVID since 2020 have been older and disabled adults residing in nursing homes—even though they make up fewer than one percent of the US population. Something about this catastrophic loss of life in government-monitored facilities has never added up.</p>



About the Author:

Margaret Morganroth Gullette is a cultural critic and anti-ageism pioneer whose prize-winning work is foundational in critical age studies. She is the author of several books, including *Agewise*, *Aged by Culture*, and *Ending Ageism, or How Not to Shoot Old People*. Her writing has appeared in publications such as the *New York Times*, *Washington Post*, *Guardian*, *Atlantic*, *Nation*, and the *Boston Globe*. She is a resident scholar at the Women's Studies Research Center, Brandeis, and lives in Newton, Massachusetts.

Until now. In *American Eldercide*, activist and scholar Margaret Morganroth Gullette investigates this tragic public health crisis with a passionate voice and razor-sharp attention to detail, showing us that nothing about it was inevitable. By unpacking the decisions that led to discrimination against nursing home residents, revealing how governments, doctors, and media reinforced ageist or ableist biases, and collecting the previously little-heard voices of the residents who survived, Gullette helps us understand the workings of what she persuasively calls an eldercide.

Gullette argues that it was our collective indifference, fueled by the heightened ageism of the COVID-19 era, that prematurely killed this vulnerable population. Compounding that deadly indifference is our own panic about aging and a social bias in favor of youth-based decisions about lifesaving care. The compassion this country failed to muster for the residents of our nursing facilities motivated Gullette to pen an act of remembrance, issuing a call for pro-aging changes in policy and culture that would improve long-term care for everyone.

[Buy the book here.](#)

Bringing People Home: The Marsters Settlement

Webpages:

https://www.centerforpublicrep.org/court_case/marsters-et-al-v-healey-et-al/
<https://marsters.centerforpublicrep.org/>

Support Dignity Alliance Massachusetts

[Please Donate!](#)

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.

As a fully volunteer operation, our financial needs are modest, but also real. Your donation helps to produce and distribute *The Dignity Digest* weekly free of charge to almost 1,000 recipients and maintain our website, www.DignityAllianceMA.org, which has thousands of visits each month.

Consider a donation in memory or honor of someone. The names of those recognized will be included in The Dignity Digest and posted on the website.

<https://dignityalliancema.org/donate/>

Thank you for your consideration!

Dignity Alliance Massachusetts

Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at:

Legislative Endorsements	https://tinyurl.com/DignityLegislativeEndorsements Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at rmooore8473@charter.net .	
Websites	<p>Meals on Wheels America https://www.mealsonwheelsamerica.org/</p> <p>Meals on Wheels America is the leadership organization supporting the more than 5,000 community-based programs across the country that are dedicated to addressing senior hunger and isolation. Powered by a trusted volunteer workforce, this network delivers a comprehensive solution that begins with a meal and is proven to enable independence and well-being through the additional benefits of tailored nutrition, social connection, safety and much more.</p> <p>Care Source https://www.caresource.com</p> <p>CareSource is a nationally recognized, nonprofit managed care organization serving over 2 million members. Founded in 1989, CareSource administers one of the largest Medicaid managed care plans in the U.S. The organization offers a variety of health insurance plans, including Medicaid, Medicare and Health Insurance Marketplace products. As a mission-driven and member-centric organization, CareSource is transforming health care by providing innovative programs to members in a growing number of states, including Arkansas, Georgia, Indiana, Kentucky, Michigan, North Carolina, Ohio, West Virginia and Wisconsin.</p> <p>Veterans Healthcare Policy Institute https://veteranspolicy.org/</p> <p>The Veterans Healthcare Policy Institute is a non-partisan non-profit research and policy organization that studies the provision of healthcare and other services to the those who served in the U.S. military, as well as their families and communities.</p>	
Blogs		
Podcasts		
YouTube Channels		
Previously recommended websites	The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: https://dignityalliancema.org/resources/ . Only new recommendations will be listed in <i>The Dignity Digest</i> .	
Previously posted funding opportunities	For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/ .	
Websites of Dignity Alliance Massachusetts Members	See: https://dignityalliancema.org/about/organizations/	
Contact information for reporting complaints and concerns	Nursing home	Department of Public Health 1. Print and complete the Consumer/Resident/Patient Complaint Form 2. Fax completed form to (617) 753-8165 Or Mail to 67 Forest Street, Marlborough, MA 01752 Ombudsman Program
MassHealth Eligibility Information	MassHealth / Massachusetts Medicaid Income & Asset Limits for Nursing Homes & Long-Term Care Table of Contents (Last updated: December 16, 2024)	

	Massachusetts Medicaid Long-Term Care Definition Income & Asset Limits for Eligibility Income Definition & Exceptions Asset Definition & Exceptions Home Exemption Rules Medical / Functional Need Requirements Qualifying When Over the Limits Specific Massachusetts Medicaid Programs How to Apply for Massachusetts Medicaid
Money Follows the Person	MassHealth Money Follows the Person <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 March 31, 2025: 344 people transitioned out of nursing facilities in 2024 49 transitions in January and February 2025 910 currently in transition planning</p> Open PDF file, 1.34 MB, MFP Demonstration Brochure MFP Demonstration Brochure - Accessible Version MFP Demonstration Fact Sheet MFP Demonstration Fact Sheet - Accessible Version
Nursing Home Closures	List of Nursing Home Closures in Massachusetts Since July 2021: https://dignityalliancema.org/2025/04/07/nursing-home-closures-since-july-2021/
Determination of Need Projects	List of Determination of Need Applications regarding nursing homes since 2020: https://dignityalliancema.org/2025/04/07/list-of-determination-of-need-applications/ Pending: Town of Nantucket – Long Term Care Substantial Capital Expenditure
List of Special Focus Facilities	Centers for Medicare and Medicaid Services <i>List of Special Focus Facilities and Candidates</i> https://www.cms.gov/files/document/sff-posting-candidate-list-november-2024.pdf <p>Updated December 4, 2024</p> <p>CMS has published a new list of Special Focus Facilities (SFF). SFFs are nursing homes with serious quality issues based on a calculation of deficiencies cited during inspections and the scope and severity level of those citations. CMS publicly discloses the names of the facilities chosen to participate in this program and candidate nursing homes.</p> <p>To be considered for the SFF program, a facility must have a history (at least 3 years) of serious quality issues. These nursing facilities generally have more deficiencies than the average facility, and more serious problems such as harm or injury to residents. Special Focus Facilities have more frequent surveys and are subject to progressive enforcement until it either graduates from the program or is terminated from Medicare and/or Medicaid.</p> <p>This is important information for consumers – particularly as they consider a nursing home.</p> <p>What can advocates do with this information?</p>

	<ul style="list-style-type: none"> • Include the list of facilities in your area/state when providing information to consumers who are looking for a nursing home. Include an explanation of the SFF program and the candidate list. • Post the list on your program's/organization's website (along with the explanation noted above). • Encourage current residents and families to check the list to see if their facility is included. • Urge residents and families in a candidate facility to ask the administrator what is being done to improve care. • Suggest that resident and family councils invite the administrator to a council meeting to talk about what the facility is doing to improve care, ask for ongoing updates, and share any council concerns. • For long-term care ombudsmen representatives: Meet with the administrator to discuss what the facility is doing to address problems and share any resources that might be helpful. <p>Massachusetts facilities listed (updated)</p> <p>Newly added to the listing</p> <ul style="list-style-type: none"> • Somerset Ridge Center, Somerset https://somersestridgerehab.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225747 • Tremont Healthcare Center, Wareham https://thetremontrehabcare.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225488/ <p>Massachusetts facilities which have graduated from the program</p> <ul style="list-style-type: none"> • 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 <p>Massachusetts facilities that are candidates for listing (months on list)</p> <ul style="list-style-type: none"> • AdviniaCare Newburyport (10) 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 (34) https://tinyurl.com/Charwell Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225208 • Fall River Healthcare (16) https://www.nextstephc.com/fallriver Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225723/ • Norwood Healthcare (5) https://www.nextstephc.com/norwood Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225597 • Plymouth Harborside Healthcare (5) https://www.nextstephc.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225284 • Plymouth Rehabilitation & Health Care Center (29)
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	<p>https://plymouthrehab.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225207</p> <ul style="list-style-type: none">• RegalCare at Glen Ridge (20) https://www.genesishcc.com/glenridge Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225523• Royal Norwell Nursing & Rehabilitation Center (11) https://norwell.royalhealthgroup.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225482/ <p>Massachusetts Facilities that have graduated from the program</p> <ul style="list-style-type: none">• Marlborough Hills Rehabilitation & Health Care Center, Marlborough https://marlboroughhillsrehab.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225063/• Oxford Rehabilitation & Health Care Center, Haverhill https://theoxfordrehabhealth.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225218/ <p>No longer operating</p> <ul style="list-style-type: none">• South Dennis Healthcare, South Dennis https://tinyurl.com/SpecialFocusFacilityProgram																																																
<i>Nursing Home Inspect</i>	<p>ProPublica Nursing Home Inspect Data updated April 24, 2024 This app uses data from the U.S. Centers for Medicare and Medicaid Services. Fines are listed for the past three years if a home has made partial or full payment (fines under appeal are not included). Information on deficiencies comes from a home’s last three inspection cycles, or roughly three years in total. The number of COVID-19 cases is since May 8, 2020, when homes were required to begin reporting this information to the federal government (some homes may have included data on earlier cases). Massachusetts listing: https://projects.propublica.org/nursing-homes/state/MA Deficiencies By Severity in Massachusetts (What do the severity ratings mean?)</p> <table><tr><th>Deficiency Tag</th><th># Deficiencies</th><th>in # Facilities</th><th>MA facilities cited</th></tr><tr><td>B</td><td>284</td><td>198</td><td>Tag B</td></tr><tr><td>C</td><td>108</td><td>85</td><td>Tag C</td></tr><tr><td>D</td><td>7,496</td><td>1,469</td><td>Tag D</td></tr><tr><td>E</td><td>1,965</td><td>788</td><td>Tag E</td></tr><tr><td>F</td><td>656</td><td>317</td><td>Tag F</td></tr><tr><td>G</td><td>568</td><td>384</td><td>Tag G</td></tr><tr><td>H</td><td>44</td><td>33</td><td>Tag H</td></tr><tr><td>I</td><td>3</td><td>2</td><td>Tag I</td></tr><tr><td>J</td><td>57</td><td>27</td><td>Tag J</td></tr><tr><td>K</td><td>8</td><td>5</td><td>Tag K</td></tr><tr><td>L</td><td>5</td><td>2</td><td>Tag L</td></tr></table> <p>Updated April 24, 2024</p>	Deficiency Tag	# Deficiencies	in # Facilities	MA facilities cited	B	284	198	Tag B	C	108	85	Tag C	D	7,496	1,469	Tag D	E	1,965	788	Tag E	F	656	317	Tag F	G	568	384	Tag G	H	44	33	Tag H	I	3	2	Tag I	J	57	27	Tag J	K	8	5	Tag K	L	5	2	Tag L
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Nursing Home Compare	Centers for Medicare and Medicaid Services (CMS) <i>Nursing Home Compare Website</i> 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. This information will be posted for each facility and includes: <ul style="list-style-type: none"> • Staff turnover: The percentage of nursing staff as well as the number of administrators who have stopped working at a nursing home over the past 12-month period. • Weekend staff: The level of weekend staffing for nurses and registered nurses at a nursing home over a three-month period. 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. https://tinyurl.com/NursingHomeCompareWebsite		
Data on Ownership of Nursing Homes	Centers for Medicare and Medicaid Services <i>Data on Ownership of Nursing Homes</i> 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 data.cms.gov and updated monthly.		
DignityMA Call Action	<ul style="list-style-type: none"> • Advocate for state bills that advance the Dignity Alliance Massachusetts' Mission and Goals – State Legislative Endorsements. • Support relevant bills in Washington – Federal Legislative Endorsements. • Join our Work Groups. • Learn to use and leverage social media at our workshops: Engaging Everyone: Creating Accessible, Powerful Social Media Content 		
Access to Dignity Alliance social media	Email: info@DignityAllianceMA.org Facebook: https://www.facebook.com/DignityAllianceMA/ Instagram: https://www.instagram.com/dignityalliance/ LinkedIn: https://www.linkedin.com/company/dignity-alliance-massachusetts Twitter: https://twitter.com/dignity_ma?s=21 Website: www.DignityAllianceMA.org		
Participation opportunities with Dignity Alliance Massachusetts Most workgroups meet bi-weekly via Zoom.	Workgroup	Workgroup lead	Email
	General Membership	Bill Henning Paul Lanzikos	bhenning@bostoncil.org paul.lanzikos@gmail.com
	Assisted Living	John Ford	jford@njc-ma.org
	Behavioral Health	Frank Baskin	baskinfrank19@gmail.com
	Communications	Lachlan Forrow	lforrow@bidmc.harvard.edu
	Facilities (Nursing homes and rest homes)	Jim Lomastro Arlene Germain	jimlomastro@comcast.net agermain@manhr.org

Interest Groups meet periodically (monthly, bi-monthly, or quarterly). Please contact group lead for more information.	Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org
	Legislative	Richard Moore	rmoore8743@charter.net
	Legal Issues	Stephen Schwartz	sschwartz@cpr-ma.org
	Interest Group	Group lead	Email
	Housing	Bill Henning	bhenning@bostoncil.org
	Veteran Services	James Lomastro	jimlomastro@comcast.net
	Transportation	Frank Baskin Chris Hoeh	baskinfrank19@gmail.com cdhoeh@gmail.com
	Covid / Long Covid	James Lomastro	jimlomastro@comcast.net
	Incarcerated Persons	TBD	info@DignityAllianceMA.org
Bringing People Home: Implementing the Marsters class action settlement	Website: https://marsters.centerforpublicrep.org/ Center for Public Representation 5 Ferry Street, #314, Easthampton, MA 01027 413-586-6024, Press 2 bringingpeoplehome@cpr-ma.org Newsletter registration: https://marsters.centerforpublicrep.org/7b3c2-contact/		
REV UP Massachusetts	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. Website: https://revupma.org/wp/ To join REV UP Massachusetts – go to the SIGN UP page .		
The Dignity Digest	For a free weekly subscription to <i>The Dignity Digest</i> : https://dignityalliancema.org/contact/sign-up-for-emails/ Editor: Paul Lanzikos Primary contributor: Sandy Novack MailChimp Specialist: Sue Rorke		
Note of thanks	Thanks to the contributors to this issue of <i>The Dignity Digest</i> : <ul style="list-style-type: none">• Wynn Gerhard• Dick Moore Special thanks to the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of <i>The Dignity Digest</i> . <i>If you have submissions for inclusion in The Dignity Digest or have questions or comments, please submit them to Digest@DignityAllianceMA.org.</i>		
<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> <i>Our guiding principle is the assurance of dignity for those receiving the services as well as for those providing them.</i> <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> <i>Previous issues of The Tuesday Digest and The Dignity Digest are available at:</i> https://dignityalliancema.org/dignity-digest/ <i>For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</i>			