

Dignity The Dignity Digest

Issue # 252 September 30, 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 agenda and Zoom links, please send request info@DignityAllianceMA.org.

Quotes

All residents should be aware of their rights so they may be empowered to live with dignity and selfdetermination . . . This year's theme [for Residents' Rights Month] is "Stand with Me," highlighting the importance of solidarity and support for residents who stand up and support their rights

A Proclamation by Governor Maura Healey and Lt. Governor Maura Healey in recognition of October as Residents' Rights Month

Ageism toward older adults affects their dignity, health and longevity, financial well-being and the economy of Massachusetts. . . Preventing ageism in education, employment, housing, culture and healthcare will benefit all

A Proclamation by Governor Maura Healey and Lt. Governor Maura Healey in recognition of Ageism Awareness Day, October 9, 2025

The time for half-measures is over. Massachusetts must lead the nation in reforming nursing home oversight. That means requiring full disclosure of ownership structures, tying reimbursement to quality outcomes, and reinvesting in care-centered models that prioritize staffing, safety, and dignity.

Former State Senator Richard T. Moore, Chair, DignityMA Legislative Workgroup, When Profit Trumps Care: The Hidden Toll of For-Profit Nursing Homes in Massachusetts, September 24, 2025

"Massachusetts will continue to lead with science and protect access to life-saving vaccines. We are taking this action today so the people of Massachusetts know that you will continue to be able to get the vaccines you want and need — no matter what happens at the federal level."

Governor Maura Healey, (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, September 17, 2025)

New survey data from the Executive Office of Housing and Livable Communities shows that homeowners across Massachusetts are embracing accessory dwelling units (ADUs) following Governor Maura Healey's Affordable Homes Act, which allows ADUs to built by-right on single-family properties statewide. . . In the first six months of 2025, homeowners in 170 communities filed 844 applications to build ADUs on their properties, of which at least 550 had been approved as of July 2025.

<u>ADU applications surge statewide under Governor Healey's</u>
<u>Affordable Homes Act</u> (Office of Governor Maura Healey and Lt.
Governor Kim Driscoll, September 26, 2025)

The state's watchdogs have spent little of the \$6.5 million in funding they received more than four years ago to provide fiscal oversight of billions of dollars in federal pandemic related aid that flowed into the state.

<u>Funds to monitor COVID relief go unspent</u> (*Salem News, September 29, 2025)

"[Implementation of the <u>One Big Beautiful Bill</u> (OBBB)] means that many current and future nursing home residents will not receive the care they need, or will be harmed, because there are not enough staff available. It is estimated that 13,000 lives will be lost each year due to understaffing. Understaffing puts residents at increased risk of abuse and neglect. It

also increases the risks to workers of injury and harm."

<u>Lori Smetanka</u>, executive director of the National Consumer Voice for Quality Long-Term Care, <u>Three Striking Ways the 'Big Beautiful Bill' Affects Nursing Homes</u> (**Kiplinger**, September 26, 2025)

"This will make it harder for older adults to get and maintain Medicaid coverage by allowing states to maintain bureaucratic requirements, such as complex income verification paperwork and frequent renewals that currently prevent eligible people from gaining and maintaining coverage."

Justice in Aging, *Three Striking Ways the 'Big Beautiful Bill' Affects Nursing Homes* (**Kiplinger**, September 26, 2025)

New research shows that senior housing's preventative approach to care contributes to increased quality of life for residents and reduced healthcare costs over time.

(NORC at the University of Chicago (NORC), September 23, 2025) <u>Senior Housing Can Reduce Acute Care Services Needs for Older Adults</u> (NORC at the University of Chicago (NORC),0 September 23, 2025

Commentary Offered by DignityMA Participants



Richard T. Moore is Chair of the DignityMA Legislative Workgroup and a member of the Coordinating Committee.

When Profit Trumps Care: The Hidden Toll of For-Profit Nursing Homes in Massachusetts

September 24, 2025

The Boston Globe's recent article, "Profit-seeking model linked to increase in hospital ER fatalities," is a sobering reminder of what happens when healthcare is treated as a business first and a public good second. While the piece focused on emergency departments, the same profit-driven logic has quietly reshaped elder care across Massachusetts—with devastating consequences.

Today, over two-thirds of nursing homes in our Commonwealth are owned by for-profit entities. Many are controlled by private equity firms whose primary obligation is to investors, not residents. The result? A growing body of evidence shows that this model compromises safety, quality, and dignity. A 2023 study by the National Bureau of Economic Research found that private equity ownership of nursing homes led to an 11% increase in resident mortality. These facilities often operate with 10–15% fewer staff than their nonprofit

counterparts. They're more likely to rely on antipsychotic medications to manage behavior, and less likely to invest in long-term staff training or compliance with care standards. In short, they cut corners—because corners are where profits hide.

In Massachusetts, the Health Policy Commission has tracked the rapid expansion of private equity across our healthcare system. These deals frequently involve sale-leaseback arrangements and leveraged buyouts that saddle facilities with debt and divert resources away from direct care. This form of financial engineering may be sophisticated, but the outcomes are painfully simple: fewer nurses, more preventable injuries, and families left wondering whether their loved ones are truly safe.

At Dignity Alliance Massachusetts, we hear these stories every day. Residents left in soiled linens. Call bells unanswered for hours. Families are forced to become watchdogs because oversight is too often reactive, not proactive. These are not isolated incidents; they are symptoms of a system that has lost its moral compass.

This is not to say that all for-profit facilities are negligent. But when the dominant incentive is profit, care becomes transactional. The most vulnerable among us—older adults, people with disabilities, those without strong family advocates—are the ones who pay the price.

We stand at a crossroads: continue down a path where profit trumps care, or chart a new course rooted in transparency, accountability, and compassion. The time for half-measures is over. Massachusetts must lead the nation in reforming nursing home oversight. That means requiring full disclosure of ownership structures, tying reimbursement to quality outcomes, and reinvesting in care-centered models that prioritize staffing, safety, and dignity.

Our older adults deserve nothing less—and neither do we.

Remembering with Dignity

To access the submission form scan



or click on:

Dignity Alliance Massachusetts Launches "Remembering with Dignity," a Digital Memorial to Honor Those who Died During the COVID-19 pandemic

To honor the more than 25,000 Massachusetts residents who died during the COVID-19 pandemic, Dignity Alliance Massachusetts (DignityMA) has launched "Remembering with Dignity," a new online memorial. The public is invited to submit remembrances of those lost between January 2020 and May 2023.

https://tinyurl.com/DignityRe membrance or https://forms.gle/GbzP2H9R G1sWSzA3A.

For more information or questions, contact:
Deborah W. Coogan
Chair, DignityMA's
"Remembering with Dignity" initiative
dwc@cooganlaw.com
617-332-8828

The COVID-19 pandemic caused unprecedented upheaval, and yet the 1.2 million Americans who died from the disease have no official national day or place of remembrance. During the COVID-19 emergency, widespread closures led to profound isolation. Many individuals died in healthcare and other facilities without the comfort of family, and survivors were often deprived of the ability to hold traditional funerals or grieve with their families and friends.

"The pandemic left a void, not just in our families but in our collective memory," said Deborah W. Coogan, Chair of the 'Remembering with Dignity' initiative. "So many died in isolation, and their stories risk being lost in the statistics. 'Remembering with Dignity' provides a way to honor their essence – the values they lived by – and ensures they are remembered as more than just a number. It is a first step toward healing and advocating for a future where we better protect our most vulnerable." The platform seeks to capture the spirit of each individual. Submissions can be made at DignityMA's website.

How to Submit a Remembrance:

- Visit <u>www.dignityalliancema.org</u> and navigate to the "Pandemic Memorial" page under the "Resources" tab or click on <u>https://tinyurl.com/DignityRemembrance</u> or <u>https://forms.gle/GbzP2H9RG1sWSzA3A</u>. The QR code below can also be used.
- A remembrance should be no more than 175 words.
- Rather than a formal obituary, each submission should describe the person's essence, values, and their story.
- Please include the circumstances of their passing (e.g., if they lived or worked in a high-risk setting such as a nursing home, rest home, group home, or hospital, or as a caregiver or essential worker).

DignityMA will host a virtual event in the fall of 2025 or early 2026. This gathering will provide a forum for survivors to honor their loved ones and channel their grief into advocacy for policies that better protect vulnerable populations during future public health crises. Details will be announced at a later date.

Ageism Awareness Day on Oct. 9

The Commonwealth of Massachusetts



A Proclamation by Governor Maura Healey and Lt. Governor Maura Healey

Whereas, Ageism refers to the stereotypes (how we think), prejudice (how we feel) and discrimination (how we act) toward others based on age; and

Whereas, There are an estimated 1.7 million older adults in Massachusetts over the age of sixty who are impacted by ageism; and

Whereas, Ageism toward older adults affects their dignity, health and longevity, financial well-being and the economy of Massachusetts: and

Whereas, Preventing ageism in education, employment, housing, culture and healthcare will benefit all; and

Whereas, Recognizing that it is up to all of us to ensure that older adults are respected and portrayed as capable, competent, effective and valued in all areas of society; and

Whereas, Ageism awareness and prevention of ageism is beneficial to all citizens of Massachusetts by improving quality of life within the Commonwealth.

Now, Therefore, I, Maura T. Healey, Governor of the Commonwealth of Massachusetts, do hereby proclaim October 9th, 2025, to be.

AGEISM AWARENESS DAY

And urge all the residents of the Commonwealth to take cognizance of this event and participate fittingly in its observance.

Given at the Executive Chamber in Boston, this first day of October, in the year two thousand and twenty-five, and of the Independence of the United States of America, the two hundred and forty-ninth.

American Society on Aging

Get Ready for Ageism Awareness Day

Ageism Awareness Day shines a light on how ageism—through stereotypes, prejudice, and discrimination—affects health, well-being, financial security, and our communities. Join ASA in taking action to build a more age-inclusive society. Visit the Ageism Awareness Day website for facts, guides and tools to spread awareness and get involved.

This Ageism Awareness Day, spread the word that aging is a rich and varied experience, but one that unites us, and offers an opportunity to build a society that works for all ages.

October Is Resident Rights Month



The Commonwealth of Massachusetts

A Proclamation by Governor Maura Healey and Lt. Governor Maura Healey

Whereas, As of January 2025, there were 34,500 residents living in 348 nursing homes, over 17.500 individuals living residences, and approximately 2,000 individuals living in 58 rest homes in the Commonwealth of Massachusetts; and

Whereas, The federal Nursing Home Reform Act of 1987 guarantees residents their individual rights to promote and maintain their disgnity and autonomy; and

Whereas, All residents should be aware of their rights so they may be empowered to live with dignity and self-determination; and

Whereas, All We wish to honor and celebrate these residents, to recognize their rich individuality, and reaffirm their right to vote and participate politically, including the right to have a say in their care; and

Whereas, This year's theme is "Stand with Me," highlighting the importance of solidarity and support for residents who stand up and support their rights. As well as the values of encouraging the commentary to join long-term care facility residents in sharing their voices;

Now, Therefore, I, Maura T. Healey, Governor of the Commonwealth of Massachusetts, do hereby proclaim October 2025, to be,

RESIDENTS' RIGHTS MONTH

And urge all the residents of the Commonwealth to take cognizance of this event and participate fittingly in its observance.

Given at the Executive Chamber in Boston, this first day of October, in the year two thousand and twenty-five, and of the Independence of the United States of America, the two hundred and forty-ninth.

From the Consumer Voice

Residents' Rights Month

In recognition of <u>Residents' Rights Month</u>, celebrated next month, we have created new resources and promotional materials:

Staying Engaged: Enrichment Booklet - The 2025 edition of the Staying Engaged enrichment booklet for long-term care residents has a variety of activities aiming to keep you mentally engaged, prompt self-reflection, and remind you of the importance of advocating for your rights, especially your right to make choices about how to live your life. Download for free or order hard copies in our store

Social Media Toolkit - Use our new toolkit to effectively use social media to spread awareness about Residents' Rights Month. Get social media tips, hashtags, and sample posts and graphics.

Promotional Templates - Spread the word about residents' rights by contacting your local newspaper or encouraging your governor and mayor to declare October Residents' Rights Month. Find templates on our website

What's going on in your city or state for RRM? Fill out this form to add your celebration or media coverage to our new interactive map, which will highlight activities and media from across the country.

<u>50 Resident Reflections</u> - In honor of Consumer Voice's 50th anniversary in 2025, we've created this book, *50 Resident Reflections*, to highlight a series of entries from residents of long-term care facilities from across the country, with residents sharing their insights on quality care and offering advice to family, friends, and caregivers.

Residents' Rights T-Shirts - Pre-Order

Join Consumer Voice in showing support for Residents' Rights! Too often, those around us don't put much thought into long-term care until it directly affects them. These shirts are a great way to let others know that long-term care residents have rights; Dignity & Respect, Privacy & Confidentiality, Freedom from Abuse & Neglect, the Ability to Voice Concerns, and Freedom from Retaliation are not just suggestions.

T-shirts are navy blue, 100% cotton.

Currently available for pre-order. Shirts are expected to ship by the end of October.

https://theconsumervoice.org/product/residents-rights-t-shirts/

Healthy to 100: The Science of Social Connection SUBSCRIBE

Excerpt from the September 22, 2025 issue of the newsletter:

Why don't we oppose ageism as discrimination in a similar way to our opposition to racism or sexism?

-- Richard from Massachusetts

Response by Ken:

It may seem strange to have a question about ageism in a newsletter about social connection, but the topics are in fact closely connected. There are many costs to ageism, especially in a society which has been described by the anti-ageism crusader Ashton Applewhite as "grotesquely youth-centric," but among them is the negative self-perception of aging adopted by older people themselves. Over the course of a lifetime, older people have been conditioned to think of themselves as less useful, more forgetful, and less worthy of respect – with one of the results being that older

people are less likely to seek social connection, especially intergenerational social connection. To quote Pogo Possum from the comic strip Pogo, "We have met the enemy and he is us." It's not terribly surprising to me that lots of people don't take ageism seriously, because we are surrounded by social cues that tell us it is ok – even fun – to run down older adults. My colleague Emma reported to me that she recently went to buy a birthday card for someone turning 60 and all she could find were cards that said things like: "You deserve respect on your 60th birthday, so if anyone calls you old fart, you look them straight in the eye and say "that's Mr. Old Fart to you!"" Hilarious. My teenage son Nate has been making fun of my age since he was in the crib. I asked him how he picked up that particular bias and he blamed it on the modeling of his older, rotten cousins, who have been similarly chastising their parents for their age for decades. The Sterns have probably been passing it down through the generations, since our days in the shtetl, though perhaps it sounded better in the original Yiddish.

I do think that progress is being made, partly due to the tireless efforts of people like Ashton and organizations like the American Society on Aging. There is even an "anti-ageist birthday card project", so Emma will not have to resort to construction paper and magic markers after all. I've also been heartened by some trends in popular media that frame older adults in more central roles and depict them in fuller, more complex and meaningful ways. I'm personally excited for the return of Man on the Inside this November for its second season, because shows like that are likely more effective in shifting public perceptions around aging than long missives from people like me.

Recruitment

See: <u>Listings on MASSterList.com's Job Board</u> for all current listings

Guide to news items in this week's *Dignity Digest*

Nursing Homes

HHS ending appeals of nursing home staffing mandate cases (McKnights Long-Term Care News, September 24, 2025)

Housing

<u>ADU applications surge statewide under Governor Healey's</u>
<u>Affordable Homes Act</u> (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, September 26, 2025)
(NORC at the University of Chicago (NORC), September 23,

2025) <u>Senior Housing Can Reduce Acute Care Services Needs for Older Adults</u> (NORC at the University of Chicago (NORC),0 September 23, 2025

Healthcare Topics

<u>Healey-Driscoll Administration Issues Evidence-Based COVID-19</u>
<u>Vaccine Guidance to Ensure Access for Residents</u> (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, September 17, 2025)

Federal Policy

Staffing rule repeal would ease financial pressure on CCRCs with SNFs, Fitch says (McKnights Long-Term Care News, September 29. 2025) Three Striking Ways the 'Big Beautiful Bill' Affects Nursing Homes (Kiplinger, September 26, 2025) **State Policy** Funds to monitor COVID relief go unspent (*Salem News, September 29, 2025) **Public Sessions** MassHealth, Friday, October 3, 2025, 11:00 a.m., Public hearing, Proposed changes to managed care requirements. MassHealth, Friday, October 3, 2025, 12:00 p.m., Public hearing MassHealth holds a public hearing on an emergency regulation that took effect on Sept. 12 for adult foster care. MassHealth, Friday, October 3, 2025, 2:00 p.m., Public hearing. MassHealth holds a public hearing on an emergency regulation that took effect on Sept. 8 dealing with long-term care services, specifically for nursing facilities that have had an ownership change. DignityMA Study Unprecedented public policy changes have been occurring since the Sessions onset of the Trump Administration three months ago. Programs, policies, and initiatives of importance to older adults, persons with Special Focus on disabilities, and caregivers are not exempted. The implications are Changes in Federal starting to become known. The impacts will be experienced in the Policies, Programs, and months and years ahead. Services No sector is being spared. Health care, social services, Social Security, civil rights, housing, and more are all under historic attack. Some areas are being "downsized," some are being disrupted or radically modified, and others are being eliminated outright. Dignity Alliance Massachusetts has invited three nationally known experts regarding public policy and programs affecting older adults, persons with disabilities, and caregivers to share up-to-the-minute information, their analysis, and strategies for individuals and organizations to adopt in response. The presenters are: Bob Blancato, National Coordinator of the bipartisan 3000member Elder Justice Coalition • James Roosevelt, JD, former Associate Commissioner, U.S. Social Security Administration • Steven Schwartz, JD. Special Counsel, Center for Public Representation

DignityMA Study Session

Aging Policy Update: What We Know, What We Don't Know, and What We Should Fear

Recordings of Jim Roosevelt's and Steve Schwartz's presentations are available at https://dignityalliancema.org/videos/. Bob Blancato's

Wednesday, May 21, 2025, 2:00 p.m.

presentation is being rescheduled.

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Bob Blancato, National Coordinator, Elder Justice Coalition

Unfortunately, this session is being rescheduled. Date to be announced.

Presenter: Bob Blancato, National Coordinator of the bipartisan 3000member Elder Justice Coalition

Registration required:

https://us02web.zoom.us/meeting/register/kQRVG7FiR2iVrmQWN52M6g

Bob discusses the current state of aging policy at the national level under the new Congress and Administration. This presentation will focus on key shifts in aging policy, identifies emerging challenges, and outlines advocacy opportunities that will protect and shape services for older Americans in the coming year.

Bob is also the Executive Director of the National Association of

Nutrition and Aging Service Programs. He spent 17 years on the staff of the U.S. House Select Committee on Aging and has participated in four White House Conferences on Aging, including as the Executive Director of the 1995 White House Conference on Aging.

Community hearing and Resource Fair

Permanent Commission on the Status of Persons with Disabilities Meeting the Moment, A Community Hearing and Resource Fair

Tuesday, November 4, 2025, 5:00 to 7:00 p.m. Needham Town Hall

1471 Highland Ave. Needham

This is the first in a series of community hearings to listen and learn from individuals with disabilities, families, caregivers, service providers, and advocates, and to connect with local organizations, state agencies, and disability commissions at a resource fair. The evening will include:

- An introduction to the work of the Commission
- An opportunity for community members to share their experiences, needs, and priorities
- A resource fair with community organizations, state agencies, and local disability commissions

Community members are welcome to submit written testimony in advance. Testimony during the event will be limited to 2 minutes each, and if time allows, there will also be space for day-of sharing. Testimony can be submitted during registration here or via email at cspwdinfo@mass.gov.

ASL and CART services have been requested. Register

Webinars and Online Sessions

1. The Milbank Quarterly

Thursday, October 23, 2025,12:00 p.m.

Understanding the Structural Determinants of Health

Structural determinants of health are hierarchical patterns of advantage among socially constructed groups that affect health. Unlike social determinants of health, the structural determinants of health are maintained through power relations.

Panelists include:

	Tyson Brown, Duke University, coauthor of "The Future of Social		
	Determinants of Health: Looking Upstream to Structural Drivers"		
	Jonathan Heller, University of Wisconsin–Madison, coauthor of		
	"Keeping It Political and Powerful: Defining the Structural		
	Determinants of Health"		
	Jamila Michener, Cornell University, author of "Building Power for		
	Health: The Grassroots Politics of Sustaining and Strengthening		
	Medicaid" (Journal of Health Politics, Policy and Law)		
	<u>Register</u>		
Previously posted	Previously posted webinars and online sessions can be viewed at:		
webinars and online	https://dignityalliancema.org/webinars-and-online-sessions/		
sessions	2. Mal/wights Lang Tayer Cays		
Nursing Homes	2. McKnights Long-Term Care		
	September 24, 2025		
	HHS ending appeals of nursing home staffing mandate cases		
	By Kimberly Marselas		
	HHS Drops Appeals on Nursing Home Staffing Mandate		
	The Department of Health and Human Services (HHS) has requested		
	the dismissal of its appeals in two federal courts, effectively ending its		
	legal defense of the nursing home staffing mandate. This move aligns		
	with a recent White House proposal to repeal the rule, signaling the		
	mandate's likely defeat.		
	Key Developments		
	Legal Action: HHS filed motions to voluntarily dismiss its appeals in		
	the U.S. Court of Appeals for the Fifth and Eighth Circuits. The Fifth		
	Circuit has already granted the dismissal.		
	Reasoning: The administration's legal strategy is now consistent		
	with its recent proposal to rescind the staffing rule, which was		
	creating confusion.		
	Court Rulings: This decision upholds earlier rulings from District		
	Courts in Texas and Iowa, which had struck down key provisions of		
	the mandate, stating that the Centers for Medicare & Medicaid		
	Services (CMS) had overstepped its authority.		
	Industry Reaction		
	Support for Dismissal: Leaders from the American Health Care Association (ALICA) and be a dismandered to the American Health Care On the American Health Care On the American Health Care On the American Health Care		
	Association (AHCA) and LeadingAge expressed approval, calling		
	the mandate "misguided" and "one-size-fits-all."		
	Future Focus: Industry groups look forward to collaborating with		
	policymakers on more effective policies to improve care and support		
	the long-term care workforce.		
	Background on the Mandate		
	Requirements: The rule, finalized in early 2024, would have required Requirements: The rule, finalized in early 2024, would have required Requirements: The rule, finalized in early 2024, would have required.		
	all U.S. nursing homes to have around-the-clock registered nurse		
	(RN) staffing and established minimum care hours for RNs and		
	certified nursing assistants (CNAs).		
	Repeal Status: The full text of the CMS rule to repeal the mandate		
	has not yet been made public and is currently under review by the		
	Office of Management and Budget.		

Page

Housing

3. Office of Governor Maura Healey and Lt. Governor Kim Driscoll September 26, 2025

<u>ADU applications surge statewide under Governor Healey's Affordable</u> Homes Act

550+ approvals to date under new by-right rules in first half of 2025 Following Governor Maura Healey's Affordable Homes Act, which allows Accessory Dwelling Units (ADUs) to be built "by-right" statewide, there has been a significant increase in applications. ADUs, also known as in-law apartments, are seen as a strategy to increase housing supply and lower costs.

Key Statistics (January - June 2025)

- 844 applications were filed across 170 communities.
- At least 550 applications had been approved as of July 2025.
- The goal of the new law is to help seniors stay in their communities, allow families to earn extra income, and provide independent living space for individuals with disabilities or adult children.

Top Communities for ADU Applications

The communities with the most ADU applications filed (excluding Boston) are:

Plymouth: 32
Milton: 25
Worcester: 24
Newton: 19
Fairhaven: 18
Billerica: 18
Haverhill: 17

Revere: 17Lawrence: 14Falmouth: 14

Policy Change and Impact

- **Previous Law:** A complex patchwork of local zoning rules and discretionary approvals made it difficult to build ADUs.
- **New Law:** ADUs under 900 square feet can now be built byright in single-family zoning districts across the state. Boston has its own separate by-right ordinance.
- The change provides a clear pathway for homeowners to create additional housing.

Resources for Homeowners and Municipalities

- An interactive map tracking ADU applications is available at Mass.gov/ADU.
- Homeowners building an ADU for individuals with disabilities or people over 60 may qualify for no-interest financing through the Home Modification Loan Program.

 Municipalities can apply for funding to help draft and enact local ADU rules through the Community One Stop for Growth.

4. NORC at the University of Chicago (NORC)

September 23, 2025

<u>Senior Housing Can Reduce Acute Care Services Needs for Older</u> Adults

By Tim Jackson

New research shows that senior housing's preventative approach to care contributes to increased quality of life for residents and reduced healthcare costs over time. The analysis was conducted by NORC at the University of Chicago (NORC) and supported by NIC.

Researchers assessed the sustained impact senior housing has on residents' health and medical costs and found that older adults who remain in senior housing utilize less acute care services and see their health stabilize for several years after moving in.

Researchers also found that senior housing can promote health and wellness of residents with neurodegenerative diseases(NDD) by reducing the number of hospitalizations and readmissions, providing relief for family caregivers, and enabling timely access to care in a supportive environment, ultimately leading to greater longevity. Key takeaways:

- Approximately one in four residents had a hospital admission in year three, compared to one in three in the first year.
- The proportion of residents with an emergency department visit declined by 14% from year one to year three.
- Average total Medicare costs per patient were \$7.2K lower in year three than in year one.
- Top-performing senior housing communities created greater stability and safety for residents with NDD by reducing hospital visits, stays and readmissions—as well as lowering costs.

These findings suggest that senior housing continues to improve residents' health and well-being for several years post move-in as operators provide effective and efficient solutions that help address unique healthcare challenges.

The research is part of an <u>ongoing initiative</u> led by NIC, in collaboration with NORC, to assess how senior housing supports the health and well-being of older adults. For full methodology and findings, click here.

Healthcare Topics

5. Office of Governor Maura Healey and Lt. Governor Kim Driscoll September 17, 2025

<u>Healey-Driscoll Administration Issues Evidence-Based COVID-19</u> <u>Vaccine Guidance to Ensure Access for Residents</u>

The Massachusetts Department of Public Health (DPH) has released its evidence-based COVID-19 vaccine guidance for 2025-2026, aiming to protect access for residents. The guidance was issued before the federal Advisory Committee on Immunization Practices (ACIP) meeting to ensure that residents can continue to get the vaccines they need, regardless of federal-level decisions.

Vaccination Recommendations

The guidance, which aligns with recommendations from several professional medical societies, recommends the COVID-19 vaccine for the following groups:

- **Children 6-23 months:** Vaccination is recommended for all children in this age group.
- Children and adolescents 2-18 years: Vaccination is recommended for those at high risk, in long-term care, never vaccinated, or who have high-risk household members. Healthy individuals in this group may also be vaccinated.
- Adults 19-64 years: Vaccination is recommended for all adults, especially those with risk factors, higher exposure risk, or who live with high-risk individuals. Healthy adults may also be vaccinated.
- Adults 65 years and older: Vaccination is recommended for all individuals in this age group.
- **Pregnant and lactating individuals:** Vaccination is recommended for those who are pregnant, contemplating pregnancy, recently pregnant, or lactating.
- Immunocompromised individuals: These individuals should consult their healthcare provider about the need for additional doses.

Context and Rationale

Governor Healey stated that Massachusetts will "continue to lead with science and protect access to life-saving vaccines" and will not let political figures like Donald Trump or Robert Kennedy "take away your ability to make your own health care decisions." The administration is issuing this guidance before the ACIP and CDC finalize their recommendations to provide residents with guidance based on the best available science from leading medical organizations.

Additional Actions to Ensure Access

Several steps have been taken to ensure vaccine availability:

- A standing order was signed authorizing pharmacists to vaccinate all eligible individuals.
- A bulletin was issued requiring insurers to cover the cost of recommended vaccines.
- The Board of Registration in Pharmacy authorized pharmacists to administer any vaccine recommended by the Commissioner.

Federal Policy

6. McKnights Long-Term Care News

September 29, 2025

Staffing rule repeal would ease financial pressure on CCRCs with SNFs, Fitch says

By Kathleen Steele Gaivin

Repeal of Nursing Home Staffing Rule

The Trump administration has proposed a final rule to repeal the federal minimum staffing mandate for nursing homes, which was established by the Biden administration in 2024. The Department of Health and Human Services has also moved to dismiss its own appeals that were defending the mandate, making the rule's repeal almost certain.

Financial Impact on Retirement Communities

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According to Fitch Ratings, this repeal would provide significant financial relief to Continuing Care Retirement / Life Plan Communities (CCRCs), particularly those with a large component of Skilled Nursing Facilities (SNFs).

- Reduced Pressure: The repeal would alleviate wage, staffing, and operating pressures.
- Benefit for SNF-Heavy CCRCs: Communities with a higher concentration of SNF beds stand to benefit the most, as they have been under more severe financial strain.

Challenges for Communities with Skilled Nursing

CCRCs with a large number of SNF beds face distinct financial disadvantages compared to those focused on independent living.

- Limited Rate Increases: Their reliance on government payers like Medicaid, whose reimbursement rates have not matched rising staffing expenses, restricts their ability to raise prices.
- Inability to Reduce Beds: These facilities often depend on external admissions for their core operations, making it difficult to take SNF beds out of service to manage costs.
- **Credit Risk:** These financial pressures have led to lower credit ratings and, in some instances, default since the pandemic.

Flexibility in Independent Living Communities

CCRCs that consist mainly of independent living units have greater financial flexibility.

- **Cost Spreading:** They can use revenue from the independent living side to subsidize SNF-related costs.
- Adjustable Capacity: Operators have the option to temporarily reduce the number of skilled nursing beds to cut staffing and other expenses as needed.

Ongoing Labor Market Concerns

Despite the regulatory relief, Fitch notes that CCRCs will likely continue to face staffing and cost pressures due to a competitive healthcare labor market. Changes to immigration policies, such as H-1B visa fees, are expected to have a limited direct impact, as most bedside registered nurses in long-term care are recruited through EB-3 visas.

7. Kiplinger

September 26, 2025

<u>Three Striking Ways the 'Big Beautiful Bill' Affects Nursing Homes</u>
By Elaine Silvestrini

Reduced Staffing Requirements

- A new law, the "One Big Beautiful Bill" (OBBB), delays the implementation of a rule requiring minimum staffing standards in nursing homes for 10 years.
- This rule would have mandated a registered nurse on-site 24/7.
- Critics, like the National Consumer Voice for Quality Long-Term
 Care, warn this will lead to inadequate care, increased risk of abuse
 and neglect, and an estimated 13,000 preventable deaths annually.

Increased Costs for Medicaid Coverage

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The OBBB reduces the retroactive period for Medicaid coverage from three months to two, potentially leaving individuals with larger out-of-pocket expenses while their application is processed.

- The law also freezes for a decade rules intended to simplify Medicaid enrollment, making it more difficult for seniors to obtain and keep their coverage.
- Starting in 2028, a \$1 million cap on home equity will be implemented to qualify for Medicaid long-term care, and this cap will not be adjusted for inflation.

Higher Demand for Nursing Homes

- The new law may lead to cuts in optional Medicaid benefits like home and community-based care. This could force more people into nursing homes, increasing demand.
- Immigration crackdowns are exacerbating staffing shortages in nursing homes, which heavily rely on foreign-born workers.

State Policy

8. *Salem News

September 29, 2025

Funds to monitor COVID relief go unspent

By Christian M. Wade

Overview of Funding and Expenditures

- The state Legislature allocated **\$6.5 million** in 2021 to four watchdog agencies for the fiscal oversight of billions in federal pandemic aid, such as the American Rescue Plan.
- As of June 30, the agencies have spent only about \$1 million of the allocated \$6.5 million.
- The original deadline for using the oversight funds was December 31, 2022, but lawmakers **extended the deadline**.

Agency Spending Breakdown (from Allocated Share)

The total allocation was \$6.5 million. The following figures reflect spending from each agency's individual share (mostly **\$1.6 million** each):

- Inspector General's Office (IG): Spent the most at \$751,891. The IG's latest report showed \$779,879 spent as of June 30, primarily on payroll costs.
- State Comptroller's Office: Spent \$280,267.
- State Auditor Diana DiZoglio's Office: Spent only \$13,700. The office notes it is using other federal COVID-related funds for audits and will only use the oversight money when "truly necessary."
- Attorney General's Office: Has used none of its allocated funding.
 The office's fraud divisions are focused on prosecuting fraud, including COVID-19 cases, using other resources.

Criticism and Defense

Criticism of Lax Oversight:

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 Senate Minority Leader Bruce Tarr: Questioned the lack of oversight given the massive influx of federal money, citing the state's \$2.1 billion mistake in wrongly using federal funds for state unemployment benefits as an example of the high cost of lax oversight.

	 Paul Craney (Executive Director, Massachusetts Fiscal Alliance): Stated that the role of a taxpayer watchdog "doesn't exist" and criticized officials for not being serious about watching out for taxpayers. Defense from Watchdog Agencies: The agencies defend the low spending by stating they are being cautious with taxpayer dollars. They confirm they are conducting investigations and audits of pandemic funds, often using their own budgetary funds alongside the dedicated allocation.
	The IG's office has publicly disclosed investigations, including a case where a Florida woman was sentenced to 10 months in prison and ordered to pay \$222,074 in restitution for fraud related to a Massachusetts housing agency and the federal Paycheck Protection Program.
Public Sessions	9. MassHealth Friday, October 3, 2025, 11:00 a.m. Public hearing Proposed changes to managed care requirements. The changes replace outdated terminology and update eligibility for One Care and Senior Care Options plans, update copay requirements and clarify requirements for members who transfer managed care plans. The regulation would go into effect no earlier than Jan. 1, 2026. More Info and Access 10. MassHealth Friday, October 3, 2025, 12:00 p.m. Public hearing MassHealth holds a public hearing on an emergency regulation that took effect on Sept. 12 for adult foster care. It requires that providers at the time of accreditation or re-accreditation must be delivering adult foster care or group adult foster care services to at least eight individuals in order to "efficiently" provide care. More Info and Access 11. MassHealth Friday, October 3, 2025, 2:00 p.m. Public hearing MassHealth holds a public hearing on an emergency regulation that took effect on Sept. 8 dealing with long-term care services, specifically for nursing facilities that have had an ownership change. The regulatory change allows facilities that are enrolling in MassHealth to conditionally enroll once their Medicare certification is complete. "If the facility does not receive Medicare certification within nine months of the conditional enrollment, MassHealth payments will be suspended until such time as the Medicare certification is complete," the hearing notice says. More Info and Access
A Raise for Mom: Campaign to Increase the Personal Needs Allowance (PNA)	The Campaign to Increase the Personal Needs Allowance (PNA) For nearly 20 years, the Personal Needs Allowance for Nursing Home and Rest Home residents has been stuck at \$72.80 per month. If inflation had been factored since the amount was last

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set, the allowance should now be about \$113.42. Costs for everything have increased over the last two decades, but the PNA has remained unchanged. That means that folks residing in nursing homes and rest homes have been paying ever higher prices for their personal needs – items not covered within the care, room, and board required to be provided by nursing and rest homes. These residents are obligated to pay almost all their monthly Social Security and other income for their basic care leaving the PNA to cover all other life's necessities. Amplifying this situation, Massachusetts has the highest cost of living of any state in the continental United States – meaning these vulnerable residents can afford less each and every year.

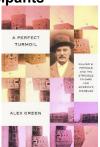
Three similar bills have been filed in the Massachusetts Legislature this year and are awaiting a public hearing with the Joint Committee on Health Care Financing, chaired by Senator Cindy Friedman and Representative John Lawn. The bills to raise the PNA are Senate Bill 887 by Senator Joan Lovely and others; Senate Bill 482 by Senators Patricia Jehlen and Mark Montigny and others; and House Bill 1411 by Representative Thomas Stanley and others. As of the middle of May, twenty-nine legislators (11 senators, 16 representatives) have already co-sponsored one or more of these bills. DignityMA, AARP Massachusetts, and LeadingAge Massachusetts are among the statewide organizations that have indicated support of the PNA legislation. There's still time for other legislators to become co-sponsors. Please contact your state senator and representative using this link: https://dignityalliancema.org/take-action/#/25. It literally takes less

If you are a nursing or rest home resident, family member, or caregiver and have a story about the inadequacy of the current PNA, your story can help put an important human face on why this raise is so necessary. Please submit your story via https://tinyurl.com/ForgetMeNotPNA or you can email your story to Dignity Alliance MA (info@DignityAllianceMA.org), noting at least your first name and town where you live so that we can include your story in the testimony submitted to the Legislature.

*We selected the Forget-me-not as our symbol to encourage

*We selected the Forget-me-not as our symbol to encourage legislators to remember older adults in nursing and rest homes who have gone so long without a raise in the PNA.

Books by DignityMA Participants



A Perfect Turmoil: Walter E. Fernald and the Struggle to Care for America's Disabled

than a minute to deliver the message.

By Alex Green

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

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www.DignityAllianceMA.org

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.

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, A Perfect Turmoil 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.

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

Books by DignityMA Participants



American Eldercide: How It Happened, How to Prevent It
By Margaret Morganroth Gullette

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. 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.

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.

Webpages:

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

Support Dignity Alliance Massachusetts

Please Donate!

Bringing People Home:

The Marsters Settlement

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

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	legal strategies, thi Commonwealth.	s mission will become reality throughout the		
	As a fully volunteer operation, our financial needs are modest, but also real. Your donation helps to produce and distribute <i>The Dignity Digest</i> weekly free of charge to almost 1,000 recipients and maintain our website, 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://dignityallia	ancema.org/donate/		
	Thank you for your	consideration!		
Dignity Alliance	Information about the	e legislative bills which have been endorsed by Dignity		
Massachusetts		etts, including the text of the bills, can be viewed at:		
Legislative		gnityLegislativeEndorsements		
Endorsements	Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at rmoore8473@charter.net .			
Websites				
Blogs				
Podcasts				
YouTube Channels				
Previously recommended websites	Alliance MA website:	list of recommended websites has migrated to the Dignity : https://dignityalliancema.org/resources/ . Only new ill be listed in <i>The Dignity Digest</i> .		
Previously posted funding opportunities		portunities previously posted in <i>The Tuesday Digest</i> gnityalliancema.org/funding-opportunities/.		
Websites of Dignity		lliancema.org/about/organizations/		
Alliance Massachusetts				
Members				
Contact information for	Nursing home	Department of Public Health		
reporting complaints and		Print and complete the		
concerns		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	MassHealth / Massa	achusetts Medicaid Income & Asset Limits for Nursing		
Information	Homes & Long-Ter			
		ntents (Last updated: December 16, 2024)		
		etts Medicaid Long-Term Care Definition		
		sset Limits for Eligibility		
	Income Defin	nition & 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
Worley Ollows the Ferson	
	Money Follows the Person
	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.
	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
	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	List of Determination of Need Applications regarding nursing homes since
Projects	2020:
	https://dignityalliancema.org/2025/04/07/list-of-determination-of-need-
	applications/
	Recent approval:
	Town of Nantucket – Long Term Care Substantial Capital
	Expenditure
	Approved May 5, 2025
1:1 (0 :15	Centers for Medicare and Medicaid Services
List of Special Focus	
Facilities	List of Special Focus Facilities and Candidates
	https://www.cms.gov/files/document/sff-posting-candidate-list-march-
	<u>2025.pdf</u>
	Updated March 26, 2025
	CMS has published a new list of Special Focus Facilities (SFF). SFFs are
	nursing homes with serious quality issues based on a calculation of
	deficiencies cited during inspections and the scope and severity level of
	those citations. CMS publicly discloses the names of the facilities chosen to
	participate in this program and candidate nursing homes.
	To be considered for the SFF program, a facility must have a history (at
	least 3 years) of serious quality issues. These nursing facilities generally
	have more deficiencies than the average facility, and more serious
	problems such as harm or injury to residents. Special Focus Facilities have
	more frequent surveys and are subject to progressive enforcement until it
	either graduates from the program or is terminated from Medicare and/or
	Medicaid.

This is important information for consumers – particularly as they consider a nursing home.

What can advocates do with this information?

- Include the list of facilities in your area/state when providing information to consumers who are looking for a nursing home. Include an explanation of the SFF program and the candidate list.
- Post the list on your program's/organization's website (along with the explanation noted above).
- Encourage current residents and families to check the list to see if their facility is included.
- Urge residents and families in a candidate facility to ask the administrator what is being done to improve care.
- Suggest that resident and family councils invite the administrator to a council meeting to talk about what the facility is doing to improve care, ask for ongoing updates, and share any council concerns.
- For long-term care ombudsmen representatives: Meet with the administrator to discuss what the facility is doing to address problems and share any resources that might be helpful.

Massachusetts facilities listed (updated) Newly added to the listing

• Salem Rehab Center, Salem

https://www.adviniacare.com/adviniacare-salem/

Nursing home inspect information:

https://projects.propublica.org/nursing-homes/homes/h-225644/

Fall River Healthcare

https://www.nextstephc.com/fallriver

Nursing home inspect information:

https://projects.propublica.org/nursing-homes/homes/h-225723/

Massachusetts facilities which have graduated from the program

 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

• Somerset Ridge Center, Somerset

https://somersetridgerehab.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/

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

• AdviniaCare Newburyport (13)

https://www.adviniacare.com/adviniacare-country-center/

Nursing home inspect information:

https://projects.propublica.org/nursing-homes/homes/h-225332

• Brandon Woods of New Bedford (1)

https://brandonwoodsnewbedford.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225264/ Cape Cod Post Acute, Brewster (9) https://capecodrehabhc.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225667/ • Charwell House Health and Rehabilitation, Norwood (37) https://tinyurl.com/Charwell Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225208 Life Care Center of Merrimack Valley, Billerica (2) https://lcca.com/locations/ma/merrimack-valley/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225546/ Medway Country Manor Skilled Nursing & Rehabilitation, Medway (1) https://www.medwaymanor.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225412 Pine Knoll Nursing Center, Lexington, (3) https://www.longtermcentersgroup.com/About-Pine-Knoll-Nursing-Center-Rehab Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225049/ • RegalCare at Glen Ridge (20) https://www.genesishcc.com/glenridge Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225523 West Newton Healthcare, West Newton (9) https://www.nextstephc.com/westnewton Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225324/ No longer operating South Dennis Healthcare, South Dennis https://tinyurl.com/SpeciialFocusFacilityProgram Nursing Home Inspect **ProPublica Nursing Home Inspect** Data updated April 23, 2025 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

The Dignity Digest

data on earlier cases). Massachusetts listing:

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https://projects.propublica.org/nursing-homes/state/MA

Deficiencies By Severity in Massachusetts

information to the federal government (some homes may have included

	(What do the sever	ity ratings mean?))	
	Deficiency Tag		in # Facilities	MA facilities cited
	B B	315	222	Tag B
	C	106	82	Tag C
	D	7,445	1,401	Tag D
	Ē	2,133	767	Tag E
	F	676	314	Tag F
	G	517	339	Tag G
	H	58	35	Tag H
	l i'	3	2	Tag I
	'i	53	28	Tag J
	K	27	9	Tag K
		9	3	
	Updated April 23,	-	3	Tag L
Nursing Home Compare	Centers for Medicare and		ces (CMS)	
Nursing Home Compare	Nursing Home Compa		ces (CIVIO)	
	Beginning January 26,		c for Modicaro	and Madisaid
	Services (CMS) is pos	-		
	` , .	•		-
	better understanding o facilities.	i certain stanning	mormation and	a concerns at
	This information will be	nacted for each	facility and inc	ludos:
				well as the number
			working at a n	ursing home over the
	past 12-month peri		ad ataffing for n	vurses and registered
				nurses and registered
	nurses at a nursing		•	
	Posting this information	-	•	
	which was passed in 2			
	weekends, often mean			
	all the care they need.			
	know the residents, rec	•		· · · · · · · · · · · · · · · · · · ·
	methods of providing of			e quality-of-care
	residents receive and t			
	https://tinyurl.com/Nurs			
Data on Ownership of	Centers for Medicare and		ces	
Nursing Homes	Data on Ownership of Nur	_		
	CMS has released data gi	•	•	
	enforcement, researchers,			
	common owners of nursing			
	information can be linked t			
	facilities under common ov			
	nursing homes with a reco			
	nursing home ownership v			
DignityMA Call Action	Advocate for state bill			
	Mission and Goals – S			
	Support relevant bills	in Washington – į	Federal Legis	<u>lative</u>
	Endorsements.			
	 Join our Work Groups 	S.		

			dia at our workshops: Engaging werful Social Media Content		
Access to Dignity	Email: info@DignityAllianceMA.org				
Alliance social media	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	Workgroup	Workgroup lead	Email		
opportunities with	General Membership	Bill Henning	bhenning@bostoncil.org		
Dignity Alliance		Paul Lanzikos	paul.lanzikos@gmail.com		
Massachusetts	Assisted Living	John Ford	jford@njc-ma.org		
massasmassas	Behavioral Health	Frank Baskin	baskinfrank19@gmail.com		
Most workgroups meet	Communications	Lachlan Forrow	Iforrow@bidmc.harvard.edu		
bi-weekly via Zoom.	Facilities (Nursing	Jim Lomastro	jimlomastro@comcast.net		
bi Wookiy via Zooiii.	homes and rest	Arlene Germain	jimomastro (comeast. net		
	homes)	7 WICHE GERMAN			
	Home and	Meg Coffin	mcoffin@centerlw.org		
	Community Based	o o			
	Services				
	Legislative	Richard Moore	Dickmoore1943@gmail.com		
	Legal Issues	Stephen	sschwartz@cpr-ma.org		
Interest Groups meet		Schwartz			
periodically (monthly, bi-	Interest Group	Group lead	Email		
monthly, or quarterly).	Housing	Bill Henning	bhenning@bostoncil.org		
monthly, or quarterly).	Veteran Services	James Lomastro	jimlomastro@comcast.net		
Please contact group	Transportation	Frank Baskin	baskinfrank19@gmail.com		
leaders for more		Chris Hoeh	cdhoeh@gmail.com		
	Covid / Long Covid				
Lintormation	Covid / Long Covid	James Lomastro	<u>jimlomastro@comcast.net</u>		
information.	Incarcerated Persons	James Lomastro TBD	<u>jimlomastro@comcast.net</u> <u>info@DignityAllianceMA.org</u>		
Information. Bringing People Home:		TBD	info@DignityAllianceMA.org		
	Incarcerated Persons Website: https://marste	TBD ers.centerforpublic esentation	info@DignityAllianceMA.org rep.org/		
Bringing People Home:	Incarcerated Persons Website: https://marste Center for Public Repre 5 Ferry Street, #314, E	TBD ers.centerforpublic esentation asthampton, MA 0	info@DignityAllianceMA.org rep.org/		
Bringing People Home: Implementing the	Incarcerated Persons Website: https://marste Center for Public Repre 5 Ferry Street, #314, E 413-586-6024, Press 2	TBD ers.centerforpublic esentation asthampton, MA 0	info@DignityAllianceMA.org rep.org/		
Bringing People Home: Implementing the Marsters class action	Incarcerated Persons Website: https://marste Center for Public Repre 5 Ferry Street, #314, E 413-586-6024, Press 2 bringingpeoplehome@	TBD ers.centerforpublicesentation asthampton, MA 0 cpr-ma.org	info@DignityAllianceMA.org rep.org/ 1027		
Bringing People Home: Implementing the Marsters class action settlement	Incarcerated Persons Website: https://marste Center for Public Repre 5 Ferry Street, #314, E 413-586-6024, Press 2 bringingpeoplehome@ Newsletter registration:	TBD ers.centerforpublic esentation asthampton, MA 0 cpr-ma.org https://marsters.ce	info@DignityAllianceMA.org rep.org/ 1027 centerforpublicrep.org/7b3c2-contact/		
Bringing People Home: Implementing the Marsters class action settlement	Incarcerated Persons Website: https://marste Center for Public Repre 5 Ferry Street, #314, E 413-586-6024, Press 2 bringingpeoplehome@ Newsletter registration: REV UP Massachusett	TBD ers.centerforpublic esentation asthampton, MA 0 cpr-ma.org https://marsters.cs	info@DignityAllianceMA.org rep.org/ 1027 centerforpublicrep.org/7b3c2-contact/ e fair and civic inclusion of people		
Bringing People Home: Implementing the Marsters class action settlement	Incarcerated Persons Website: https://marste Center for Public Repre 5 Ferry Street, #314, E 413-586-6024, Press 2 bringingpeoplehome@ Newsletter registration: REV UP Massachusett with disabilities in every	TBD ers.centerforpublicesentation asthampton, MA 0 cpr-ma.org https://marsters.ces.advocates for the political, social, a	info@DignityAllianceMA.org rep.org/ 1027 centerforpublicrep.org/7b3c2-contact/ e fair and civic inclusion of people nd economic front. REV Up aims to		
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Note of thanks Thanks to the contributors to this issue of *The Dignity Digest:*• Charlie Carr

• Dick Moore Special thanks to the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of *The Dignity Digest*.

If you have submissions for inclusion in <u>The Dignity Digest</u> or have questions or comments, please submit them to <u>Digest@DignityAllianceMA.org</u>.

Dignity Alliance Massachusetts is a broad-based coalition of organizations and individuals pursuing fundamental changes in the provision of long-term services, support, and care for older adults and persons with disabilities.

Our guiding principle is the assurance of dignity for those receiving the services as well as for those providing them.

The information presented in "The Dignity Digest" is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.

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

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