



The Dignity Digest

Issue # 301

September 22, 2026

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

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

DignityMA Zoom Sessions

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

Reflection

Reframing Healthy Aging as an Inherent Right to Dignity and Choice

September marks [Healthy Aging Month](#), an observance often filled with well-meaning advice about daily exercise, balanced nutrition, and preventive health screenings. While physical and healthy habits are undeniably vital, true healthy aging cannot be achieved in individual effort alone. It requires a society and a care system built on equity, access, and fundamental human dignity.

To age well is not merely to avoid illness or maintain physical vitality; it is the ability to live with purpose, self-determination, and community connection at every stage of life.

For older adults and persons with disabilities across the Commonwealth, healthy aging is intertwined with systemic infrastructure:

- **Autonomy in Setting Care:** Having the genuine choice to age in place within one's family and community, supported by robust, well-funded personal care attendant services.
- **Universal Access & Mobility:** Seamless, accessible, and fare-free public transit that keeps individuals connected to neighborhoods, healthcare, civic life, and community.
- **Safe, High-Quality Long-Term Care:** Institutional environments—when they exist—prioritize resident rights, adequate staffing, individualized attention, and transparency rather than corporate profit.
- **Dignity in Decision-Making:** Protecting individual legal rights and bodily integrity through supported decision-making models.

When we reduce "healthy aging" to a checklist of personal lifestyle choices, we risk overlooking structural barriers that deny so many the opportunity to age with security and grace. A truly and disability-inclusive Commonwealth recognizes that wellness is a collective responsibility.

As we reflect on Healthy Aging Month, let us recommit to advocacy that dismantles barriers and transforms our long-term services and supports. Healthy aging begins when dignity and voice are guaranteed to every person—wherever they call home.

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

Nursing Homes

- [Nursing Home Beds Are Becoming More Scarce](#) (New York Times, September 21, 2026 (updated))

	• <u>His Daughter Signed the Admission Agreement as “Responsible Party,” a Formality, the Nursing Home Said. When Dad’s Medicaid Application Failed, the \$32,000 Bill Came to Her</u> (24 17 Wall Street, September 20, 2026) Longevity • <u>Japan Reaches a Unique Milestone, With More Than 100,000 People Aged 100 or Over</u> (New York Times, September 16, 2026) Private Equity / Acquisitions • <u>Skilled Nursing Dealbook: \$413M in Financings Across 13 States; 2-Facility Nursing Home Portfolio Changes Hands</u> (Skilled Nursing News, September 16, 2026) Medicaid • <u>State Medicaid Programs At Risk of H.R. 1</u> (State Network, September 21, 2026) • <u>Guidance for Communicating New Medicaid Work Requirements</u> (State Network, September 21, 2026) • <u>Changes in Medicaid Coverage From 2020 to 2025 Reflect Shifts in Program</u> (U. S. Census Bureau, September 15, 2026) Office of Attorney General Andrea Campbell • <u>AG Campbell Sues To Block Trump Administration’s New Public Charge Rule</u> (Office of Attorney General Andrea Campbell, September 14, 2026) State Policy • <u>Census offers new snapshot of Mass. income, poverty</u> (State House News, September 15, 2026) Federal Policy • <u>Analyzing CMS Proposed Rules on SDPs & Provider Taxes</u> (State Network, September 21, 2016) • <u>Supplemental Poverty Rate Tops Official Rate in 26 States, DC</u> (U. S. Census Bureau, September 15, 2026) From Around the Country • <u>3 nursing home workers charged in death of resident</u> (Spectrum News, September 18, 2026) • <u>Police rush into burning nursing home to rescue patients in California</u> (KTLA, September 15, 2026) International • <u>Japan Grapples with Long-Term Care Crisis</u> (LTC News, July 24, 2024)
Quotes	<i>A new federal report shows that roughly 9% of Massachusetts residents are in poverty, a rate that it describes as being "significantly lower" than in 20 other states and the nation as a whole and "significantly higher" than eight peer states.</i>

	<u>Census offers new snapshot of Mass. income, poverty</u> (State House News, September 15, 2026) <i>The long lives of many Japanese could be attributed to healthy diet, active daily routines, and an affordable health system with regular check ups.</i> Stuart Gietel-Basten, professor of social science at the Hong Kong University of Science and Technology, <u>Japan Reaches a Unique Milestone, With More Than 100,000 People Aged 100 or Over</u> (New York Times, September 16, 2026) <i>“His original goal was to live to 100, but now he aims to reach 110.”</i> <u>Japan Reaches a Unique Milestone, With More Than 100,000 People Aged 100 or Over</u> (New York Times, September 16, 2026) <i>The AG's office said she was left alone in the facility's dining room, swallowed a meatball and began choking. One of the staff members allegedly noticed the resident was choking and did not call for help. That's where she remained for an hour and a half before other employees brought her to her room and called 911. She was pronounced dead in her room.</i> <u>3 nursing home workers charged in death of resident</u> (Spectrum News, September 18, 2026)
Spotlight	<u>Defining Home- And Community-Based Services</u> Health Affairs By Alexandra Bonardi, Valerie Bradley, Teresita Camacho-Gonsalves, and Sara Galantowicz September 17, 2026 Home- and community-based services (HCBS) are essential to helping older adults and individuals with disabilities remain in their homes and communities rather than entering institutional settings, yet the term is interpreted in diverse ways across different populations and policy contexts. While it can broadly describe a wide array of supports—ranging from post-hospital home health and pediatric nursing to job coaching and respite care—it is frequently used more narrowly to refer specifically to state-level, Medicaid-waiver-funded programs. This fragmentation in definition and funding structures can obscure

	policy goals, complicate cross-sector alignment, and hinder consistent outcome measurement. The conceptual roots of modern HCBS trace back to the 1960s, emerging alongside legislative milestones like the 1965 Older Americans Act as advocates increasingly questioned the heavy reliance on segregated custodial facilities for older adults and individuals with disabilities. Over the ensuing decades, policy frameworks expanded significantly, moving beyond basic nutritional and home-making assistance toward comprehensive, person-centered supports designed to foster community integration and autonomy. However, the absence of a universally agreed-upon definition has persisted as a structural hurdle for researchers, policymakers, and providers attempting to evaluate program efficacy. Recognizing these challenges, ongoing initiatives—such as those led by The SCAN Foundation and stakeholder groups—are working to establish clearer terminology and core consensus standards for HCBS. Although a shared definition alone cannot resolve all operational and financial strains facing the sector, establishing common language is critical for accurately tracking impact, holding programs accountable, and ensuring the equitable distribution of resources for community living.
Reports	<u>Poverty in the United States: 2025</u> U. S. Census Bureau By Christina Bijou and Emily Shrider September 15, 2026 This report provides estimates of two measures of poverty: the official poverty measure and the Supplemental Poverty Measure (SPM). The official poverty measure, produced since the 1960s, defines poverty by comparing pretax money income to a national poverty threshold adjusted by family composition. The SPM, first released in 2011 and produced in collaboration with the Bureau of Labor Statistics (BLS), extends the official poverty measure by accounting for several government programs that are designed to assist low-income families but are not included in official poverty measure calculations. The SPM also accounts for geographic variation in housing expenses when calculating poverty thresholds and includes federal and state taxes, work expenses, and medical expenses. This report presents estimates using the official poverty measure and the SPM for calendar year 2025. The estimates contained in the report are based on information collected in

	the 2026 and earlier Current Population Survey Annual Social and Economic Supplements (CPS ASEC) conducted by the Census Bureau. Highlights Official Poverty Measure: • In 2025, the official poverty rate fell 0.5 percentage points to 10.2 percent. There were 34.5 million people in poverty in 2025. • The official poverty rate for children fell to a historic low of 13.4 percent in 2025. • Between 2024 and 2025, the official poverty rate for Hispanic individuals decreased to a historic low of 13.9 percent. Supplemental Poverty Measure • The SPM rate in 2025 was 13.1 percent, not statistically different from 2024. • Between 2024 and 2025, SPM rates increased for those without a high school diploma but did not change significantly for the other groups discussed in this report. • Social Security continues to be the largest antipoverty program, moving 28.8 million individuals out of SPM poverty in 2025. Poverty in the United States: 2025
	Congratulations to MAMH's own Cassie Cramer - a newly elected Board member of the National Coalition on Mental Health and Aging (NCMHA). NCMHA plays a leading role in policy analysis and development to improve availability and quality of mental health prevention and treatment strategies targeted to older adults and their families. NCMHA advocates on a wide range of issues including Medicare and Medicaid coverage restrictions, protecting mental health parity requirements, extending telehealth, and more. The coalition shares evidence-based resources, toolkits, and best practice guidance on integrated behavioral health for older adults. They also host online learning collaboratives to develop and strengthen local and state coalitions and inform members about federal funding sources for behavioral health.

	Learn more about the NCMHA or become a member today.
Dignity in the News	<i>College Student Pushes for Nursing Home Support</i> Boston 25 News (Video report) Twenty year old college student Noah Daube-Valois talks about the podcast he produced, <i>The \$72.80 Project</i>, and his efforts to increase the personal needs allowance for Massachusetts nursing and rest home residents. Watch the video here: https://youtu.be/-P6d9DjnCjA?is=YhIM9WDTHu76PTMy
Transitions	Skilled Nursing News September 14, 2026 <i>LeadingAge CEO Katie Smith Sloan to Step Down in March as Search for Successor Gets Underway</i> By Zahida Siddiqi LeadingAge President and CEO Katie Smith Sloan has announced she will step down from her role effective March 31, 2027. The LeadingAge board has initiated a national search for her successor, collaborating closely with Smith Sloan on a transition plan to ensure continuity for the association representing mission-driven and nonprofit aging services providers.
Recruitment	See: Listings on MASterList.com's Job Board for all current listings
In Person and / or Online Events	1. Conference on Healthcare Workplace Violence Wednesday, September 23, 2026, 11:00 a.m. Room 348 State House, Boston Conference committee resolving bills that aim to prevent violence against healthcare workers meets for the second time. House and Senate negotiators must decide whether to classify assaults against providers as a felony or misdemeanor offense. Rep. Michael Day of Stoneham and Sen. Cindy Friedman of Arlington are the lead negotiators. 2. Health Policy Commission (HPC) HPC Advisory Council Thursday, September 24, 2026, 12:00 p.m.. Discussion about current and future health planning initiatives, following a presentation from the HPC's new Office of Health Resource Planning. Livestream 3. REV UP Massachusetts September Meeting Thursday, September 24, 2026, 1:00 to 2:00 p.m. • Debrief on Disability Voting Rights Week, events from the last month

	• Discuss any polling place accessibility issues that came up during the November election • Prepare for the upcoming General Election in November • Discuss upcoming events ASL & CART requested Register for upcoming meetings! 4. Greater Boston Chamber of Commerce "Innovation and the Future of Mobility" Thursday, September 24, 2026, 4:30 p.m. Greater Boston Chamber of Commerce, 265 Franklin Street, Suite 1701, Boston Greater Boston Chamber of Commerce hosts "Innovation and the Future of Mobility" featuring MIT Mobility Initiative Executive Director John Moavenzadeh, who the chamber said will share "insights into the global trends reshaping transportation and what they could mean for Massachusetts the broader U.S. transportation landscape." Moavenzadeh will then join chamber CEO Jim Rooney for a fireside chat. The chamber said the conversation will also cover how innovations like autonomous vehicles, robotaxis, electrification and micromobility can be deployed at scale while earning public trust, and why public perceptions of emerging technologies may influence policy decisions, investment strategies and adoption. More Info and Register 5. The Caring Force Human Services Rally Friday, September 25, 2026, 9:30 a.m. WORK Inc. Headquarters, 25 Beach Street, Dorchester The Caring Force, the grassroots advocacy branch of the Providers' Council, hosts a Metro Boston rally where human services workers and advocates will gather to support the council's "pro-human services workforce agenda and spotlight the sector's ongoing workforce crisis" and "demand increased funding and fair wages for human services workers," according to the council. Sen. Nick Collins and Reps. Worrell, Livingstone, John Moran and Fluker-Reid will join a legislative panel. The force's legislative priorities include bills that would increase wages for human services workers (S 130, H 223) and create a student loan repayment program for human services workers (S 119, H 283). RSVP
Webinars and Online Sessions	6. Adding an LTSS at Home Benefit to Medicare Long Term Care Community Coalition Tuesday, September 22, 2026, 11:00 a.m. Speakers: About the Session:

	The Brookings Institute released a proposal in March which recommends reforming elder care through a universal Medicare home care benefit that includes a wealth-related cost-sharing system. The benefit would be universal; existing restrictive Medicaid asset cutoffs would be eliminated. Authored by experts including Richard G. Frank, Sherry Glied, and others, the plan replaces current asset caps with a progressive, income-based contribution model to ensure sustainable, dignified care. The report can be found here: https://www.brookings.edu/wp-content/uploads/2026/03/20260326_CHP_Frank_Longtermcare_FINAL.pdf About the Speakers: Richard Frank, PhD, is the Margaret T. Morris Professor of Health Economics emeritus in the Department of Health Care Policy at Harvard Medical School and a senior fellow and Director of the Center on Health Policy at the Brookings Institution. From 2009 to 2011, he served as the deputy assistant secretary for planning and evaluation at DHHS directing the office of Disability, Aging and Long-Term Care Policy. From 2013 to 2014, he served as a Special Advisor to the Office of the Secretary at the Department of Health and Human Services, and from 2014 to 2016 he served as Assistant Secretary for Planning and Evaluation in the Department of Health and Human Services. His research is focused on the economics of mental health and substance abuse care, long term care financing policy, prescription drug policy health care competition, and disability policy. He was elected to the Institute of Medicine (National Academy of Medicine) in 1997. Sherry Glied, PhD, is Professor of Public Service at New York University's Robert F. Wagner Graduate School of Public Service. She served as Dean of the school from 2013 to 2025. From 1989-2013, she was Professor of Health Policy and Management at Columbia University's Mailman School of Public Health and was Chair of the Department of Health Policy and Management from 1998-2009. She served as Assistant Secretary for Planning and Evaluation at the Department of Health and Human Services, from 2010 to 2012. She previously served as Senior Economist for health care and labor market policy on the President's Council of Economic Advisers in 1992-1993, under Presidents Bush and Clinton. Glied's principal areas of research are in health policy reform and mental health care policy. She is a Nonresident Senior Fellow of the Brookings Institution and an elected member of the National Academy of Medicine, National Bureau of Economic Research, National Academy of Social Insurance, and the American Academy of Arts and Sciences. Accessing the Meeting: REGISTRATION IS REQUIRED. Click here: https://us02web.zoom.us/meeting/register/FDP3PVRtRMad920_KVezfQ
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	7. New York Times September 21, 2026 (updated) <u>Nursing Home Beds Are Becoming More Scarce</u> By Paula Span As the oldest baby boomers turn 80 and the nation rapidly grays, researchers and elder-care advocates are growing increasingly concerned over a shrinking supply of nursing home beds. Facilities across the country are facing mounting capacity constraints and closures, exemplified by institutions like the San Vicente de Paúl Nursing Home in the South Bronx drastically scaling down operations. This tightening availability highlights a looming mismatch between shrinking institutional capacity and the explosive growth of an aging population requiring high-level care. Experts warn that without significant structural interventions or expanded options, the health system may struggle to accommodate the mounting demand for long-term residential care. 8. 24 /7 Wall Street September 20, 2026 <u>His Daughter Signed the Admission Agreement as "Responsible Party," a Formality, the Nursing Home Said. When Dad's Medicaid Application Failed, the \$32,000 Bill Came to Her</u> By Gerelyn Terzo When a daughter signed an admission agreement as a "responsible party" for her father under the assurance that it was a mere formality, she did not expect to face personal liability. However, when her father's Medicaid application stalled due to missing documentation, the nursing home hit her with a \$32,000 bill and a breach-of-contract lawsuit. While federal law (42 CFR § 483.15) strictly prohibits nursing facilities from demanding third-party financial guarantees as a condition of admission, these agreements often bind representatives to use the resident's available assets to pay for care and to cooperate fully with the Medicaid application process. Consequently, facilities can legally challenge representatives if they believe a breach of those administrative duties caused an unpaid balance, highlighting why family members must carefully review admission contracts and sign explicitly as an agent under a power of attorney rather than individually.
Private Equity / Acquisitions	9. Skilled Nursing News September 16, 2026 <u>Skilled Nursing Dealbook: \$413M in Financings Across 13 States; 2-Facility Nursing Home Portfolio Changes Hands</u> By Zahida Siddiqi CFG Bank recently announced the closing of 24 major transactions totaling more than \$413 million in financing across 13 states, supporting 54 skilled nursing and assisted living communities. Executed between late June and late August, the diverse capital package encompassed bridge loans, mezzanine financing, ground-up construction, and HUD Section 232/223(f) refinancings. This robust wave of lending highlights ongoing transaction momentum and capital investment across the senior housing and post-acute care sectors as operators actively pursue acquisitions, expansions, and portfolio refinancing.

Longevity	10. New York Times September 16, 2026 Japan Reaches a Unique Milestone, With More Than 100,000 People Aged 100 or Over By Hisako Ueno and Tiffany May <i>Tetsuo Sato is one of 100,000 Japanese who are now over 100 years old. He plans on celebrating his 107th birthday at a hot springs hotel.</i> Japan's health ministry announced that the number of centenarians across the country has topped 100,000 for the first time, reaching a total of 107,677 individuals. Published ahead of the annual "Respect for the Aged" public holiday, the data marks the 56th consecutive year that this demographic has hit a record high, with women accounting for nearly 90 percent of those aged 100 or older. While this milestone highlights remarkable national longevity—leaving Japan with the second-oldest population in the world after Monaco—it also underscores a deepening demographic crisis. Coming on the heels of another record-low fertility rate, the rapidly aging population exacerbates a slow-burning emergency driven by labor shortages, a shrinking tax base, and a ballooning social security burden.
Medicaid	11. State Network September 21, 2026 State Medicaid Programs At Risk of H.R. 1 Beginning October 1, 2029, H.R. 1 will make significant changes to Medicaid's Payment Error Rate Measurement program. The National Health Law Program reviews how the law eliminates the "good faith waiver" by making penalties for error rates over 3% mandatory, and expands the definition of payments subject to penalties, presenting new risks for state budgets. 12. State Network September 21, 2026 Guidance for Communicating New Medicaid Work Requirements State Health and Value Strategies (SHVS) published Part 2 of messaging guidance to help state Medicaid agencies communicate clearly with people enrolled in Medicaid, new applicants, and community partners about work reporting requirements under H.R. 1. Part 2 reflects the June 2026 interim final rule and provides specific details on requirements, compliance, and exemptions. Related resource: Part 1 is available here. 13. U. S. Census Bureau September 15, 2026 Changes in Medicaid Coverage From 2020 to 2025 Reflect Shifts in Program By Lisa N. Bunch According to data from the U.S. Census Bureau's Current Population Survey Annual Social and Economic Supplements (CPS ASEC), overall Medicaid coverage declined between 2024 and 2025 for the second consecutive year. This downward trend follows significant policy shifts during the COVID-19 pandemic, notably the Families First Coronavirus Response Act of 2020 and the American Rescue Plan Act of 2021,

	which mandated continuous coverage and drove up enrollment rates through boosted federal funding. The subsequent decline in coverage is primarily attributed to the "Medicaid unwinding" process that began in April 2023, when mandated continuous coverage ended and states resumed standard eligibility and reenrollment operations. Because the CPS ASEC measures health insurance status over the previous calendar year, coverage losses occurring throughout the 2024 unwinding period were fully captured in the 2025 estimates released in the 2026 data.
Office of Attorney General Andrea Campbell	14. Office of Attorney General Andrea Campbell September 14, 2026 <u>AG Campbell Sues To Block Trump Administration's New Public Charge Rule</u> <i>With the New Rule Set to Take Effect September 18, Coalition Warns it Could Deter Immigrant Families from Accessing Essential Public Benefits</i> Massachusetts Attorney General Andrea Campbell joined a multi-state coalition of attorneys general and the District of Columbia in filing a lawsuit to block the Trump administration's new "public charge" rule. The challenged policy grants immigration officials broad discretion to deny green cards to immigrants who lawfully use essential public benefits—such as healthcare, housing, and food assistance. The coalition argues that the rule violates the Administrative Procedure Act because it exceeds statutory authority and departs from decades of settled law, warning that fear and confusion surrounding the policy will cause immigrant families to disenroll from vital safety-net programs, thereby straining state and local healthcare systems.
State Policy	15. State House News September 15, 2026 <u>Census offers new snapshot of Mass. income, poverty</u> By Colin A. Young State-level data on poverty was released in the form of three-year averages, with Massachusetts' average landing at 9.1%, down a tenth of a percentage point from the three-year average reported a year ago. That puts the Bay State toward the low-poverty end of the 50-state spectrum: below the national rate and 20 states plus D.C., statistically tied with 21 other states, and with higher poverty than the eight lowest-poverty states. The eight states that the Census Bureau found had significantly lower poverty than Massachusetts over the three-year span were Maine, Minnesota, Nebraska, Vermont, Delaware, Maryland, Utah and New Hampshire.
Federal Policy	16. State Network September 21, 2016 <u>Analyzing CMS Proposed Rules on SDPs & Provider Taxes</u> On May 20 and July 21, the Centers for Medicare & Medicaid Services (CMS) released proposed rules implementing new restrictions on state-directed payments (SDPs) and provider taxes. During a SHVS webinar, experts from Manatt Health reviewed the policy changes in both

	proposed rules and discussed implications for state Medicaid agencies. Here is the recording. 17. U. S. Census Bureau September 15, 2026 Supplemental Poverty Rate Tops Official Rate in 26 States, DC By Em Shrider According to the U.S. Census Bureau's 2025 reports, the national Supplemental Poverty Measure (SPM) rate stood at 13.1%, outpacing the official poverty rate of 10.2% by 2.9 percentage points. While the traditional official poverty measure compares pre-tax gross income against a uniform national threshold based on family size, the SPM provides a more comprehensive look at economic hardship by factoring in geographic cost-of-living differences, housing tenure, taxes, and non-cash government assistance programs like SNAP and housing vouchers. These methodological differences result in geographic disparities—such as higher SPM rates in high-cost states like California and New York compared to their official rates—leading the SPM to surpass the official poverty rate in 26 states and the District of Columbia between 2023 and 2025.
From Around the Country	18. Spectrum News September 18, 2026 3 nursing home workers charged in death of resident By Spectrum News Staff Three employees at The Grand at Mohawk Valley nursing home in Ilion, New York, have been arrested and charged following the choking death of a 34-year-old resident with high-risk health conditions who required continuous one-on-one supervision. According to the New York Attorney General's Office, the facility administrator allegedly discontinued the mandatory supervision, leading to an incident where the resident was left unattended, choked on food, and was subsequently ignored by staff who failed to intervene or call for help for nearly an hour and a half. The administrator, a nurse, and a dietary aide are facing felony charges for endangering the welfare of a vulnerable person, with the dietary aide also facing a second-degree manslaughter charge. 19. KTLA September 15, 2026 Police rush into burning nursing home to rescue patients in California By John Ross Ferrara Eight people were inside the nursing home when it caught fire — two nurses and six elderly residents. Many of the patients were unable to walk, officials told Nexstar's KTLA.
International	20. LTC News July 24, 2024 Japan Grapples with Long-Term Care Crisis. By James Kelly Japan is experiencing a severe long-term care crisis driven by a rapidly aging population, mounting operational costs, and acute labor shortages that have resulted in record numbers of nursing home bankruptcies. While Japan utilizes a mandatory public Long-Term Care Insurance program to help citizens manage costs, providers struggle with low

	wages, recruitment difficulties, and increasing financial strain, paralleling systemic long-term care challenges also faced in the United States.
A Raise for Mom: Campaign to Increase the Personal Needs Allowance (PNA)	<i>The Campaign to Increase the Personal Needs Allowance (PNA)</i> 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 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 than a minute to deliver the message. 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. <i>*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.</i>
Books by DignityMA Participants	<u>A Perfect Turmoil: Walter E. Fernald and the Struggle to Care for America's Disabled</u> By Alex Green <u>Buy the book here</u> 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. <u>American Eldercide: How It Happened, How to Prevent It</u> By <u>Margaret Morganroth Gullette</u>

	Buy the book here. 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 <i>Agewise</i>, <i>Aged by Culture</i>, and <i>Ending Ageism, or How Not to Shoot Old People</i>. Her writing has appeared in publications such as the <i>New York Times</i>, <i>Washington Post</i>, <i>Guardian</i>, <i>Atlantic</i>, <i>Nation</i>, and the <i>Boston Globe</i>. She is a resident scholar at the Women's Studies Research Center, Brandeis, and lives in Newton, Massachusetts.
Bringing People Home: The Marsters Settlement	Webpages: https://www.centerforpublicrep.org/court_case/marsters-et-al-v-healey-et-al/ https://marsters.centerforpublicrep.org/ Marsters data for the calendar year 2025: • 499 people who have returned and are active in the community • Efforts to validate status of 63 others who are in the community • Target for 2025 and 2026 is 600 transitions • 1,369 currently enrolled • 100 AHVP vouchers issued for transitions: 71 used, 10 in process. The Alternative Housing Voucher Program (AHVP) is a state-funded rental assistance program in Massachusetts specifically designed for non-elderly (under age 60) people with disabilities who have low incomes.
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 <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://dignityalliancema.org/donate/ Thank you for your consideration!
Dignity Alliance Massachusetts Legislative Endorsements	Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at: https://tinyurl.com/DignityLegislativeEndorsements Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at dickmoore1943@gmail.com.

Websites			
Blogs	<u>Risking Old Age in America</u> <u>https://okayboomer.substack.com/</u> By Harry Margolis With 65 million Baby Boomers becoming older by the day, the United States is facing a looming elder care crisis. This blog explores how the nation and individuals can prepare for it.		
Podcasts			
YouTube Channels			
Previously recommended websites	The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: <u>https://dignityalliancema.org/resources/</u> . 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 <u>https://dignityalliancema.org/funding-opportunities/</u> .		
Websites of Dignity Alliance Massachusetts Members	See: <u>https://dignityalliancema.org/about/organizations/</u>		
Contact information for reporting complaints and concerns	<table border="1"> <tr> <td>Nursing home</td><td> <u>Department of Public Health</u> 1. Print and complete the <u>Consumer/Resident/Patient Complaint Form</u> 2. Fax completed form to (617) 753-8165 Or Mail to 67 Forest Street, Marlborough, MA 01752 <u>Ombudsman Program</u> </td></tr> </table>	Nursing home	<u>Department of Public Health</u> 1. Print and complete the <u>Consumer/Resident/Patient Complaint Form</u> 2. Fax completed form to (617) 753-8165 Or Mail to 67 Forest Street, Marlborough, MA 01752 <u>Ombudsman Program</u>
Nursing home	<u>Department of Public Health</u> 1. Print and complete the <u>Consumer/Resident/Patient Complaint Form</u> 2. Fax completed form to (617) 753-8165 Or Mail to 67 Forest Street, Marlborough, MA 01752 <u>Ombudsman Program</u>		
MassHealth Eligibility Information	<u>MassHealth / Massachusetts Medicaid Income & Asset Limits for Nursing Homes & Long-Term Care</u> Table of Contents (Last updated: December 16, 2024) <u>Massachusetts Medicaid Long-Term Care Definition</u> <u>Income & Asset Limits for Eligibility</u> <u>Income Definition & Exceptions</u> <u>Asset Definition & Exceptions</u> <u>Home Exemption Rules</u> <u>Medical / Functional Need Requirements</u> <u>Qualifying When Over the Limits</u> <u>Specific Massachusetts Medicaid Programs</u> <u>How to Apply for Massachusetts Medicaid</u>		
Money Follows the Person	MassHealth <u>Money Follows the Person</u> 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 <u>Open PDF file, 1.34 MB, MFP Demonstration Brochure</u> <u>MFP Demonstration Brochure - Accessible Version</u> <u>MFP Demonstration Fact Sheet</u> <u>MFP Demonstration Fact Sheet - Accessible Version</u>		

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/ Recent approval: Town of Nantucket – Long Term Care Substantial Capital Expenditure Approved May 5, 2025																																																
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-march-2025.pdf 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.																																																
Nursing Home Inspect	ProPublica <i>Nursing Home Inspect</i> Data updated October 15, 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 (July 1, 2022 through September 30, 2025). Massachusetts listing: https://projects.propublica.org/nursing-homes/state/MA Deficiencies By Severity in Massachusetts (What do the severity ratings mean?) <table><tr><td>Deficiency Tag</td><td># Deficiencies</td><td>in # Reports</td><td>MA facilities cited</td></tr><tr><td>B</td><td>257</td><td>187</td><td>Tag B</td></tr><tr><td>C</td><td>77</td><td>63</td><td>Tag C</td></tr><tr><td>D</td><td>5,993</td><td>1,193</td><td>Tag D</td></tr><tr><td>E</td><td>1,872</td><td>630</td><td>Tag E</td></tr><tr><td>F</td><td>446</td><td>226</td><td>Tag F</td></tr><tr><td>G</td><td>420</td><td>278</td><td>Tag G</td></tr><tr><td>H</td><td>54</td><td>30</td><td>Tag H</td></tr><tr><td>I</td><td>2</td><td>1</td><td>Tag I</td></tr><tr><td>J</td><td>64</td><td>31</td><td>Tag J</td></tr><tr><td>K</td><td>30</td><td>9</td><td>Tag K</td></tr><tr><td>L</td><td>7</td><td>2</td><td>Tag L</td></tr></table> Updated October 15, 2025	Deficiency Tag	# Deficiencies	in # Reports	MA facilities cited	B	257	187	Tag B	C	77	63	Tag C	D	5,993	1,193	Tag D	E	1,872	630	Tag E	F	446	226	Tag F	G	420	278	Tag G	H	54	30	Tag H	I	2	1	Tag I	J	64	31	Tag J	K	30	9	Tag K	L	7	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. 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	• 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. Interest Groups meet periodically (monthly, bi-monthly, or quarterly). Please contact group leaders for more information.	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	jimlomastro@comcast.net
	Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org
	Legislative	Richard Moore	Dickmoore1943@gmail.com
	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
<i>Bringing People Home: Implementing the Marsters</i> 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/		
<i>REV UP Massachusetts</i>	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 .		

<i>The Dignity Digest</i>	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>: • Noah Daube-Valois • Wynn Gerhard • Dick Moore • David Roush Special thanks to the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of <i>The Dignity Digest</i>. If you have submissions for inclusion in <i>The Dignity Digest</i> or have questions or comments, please submit them to Digest@DignityAllianceMA.org.
<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. 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.</i> <i>Previous issues of The Tuesday Digest and The Dignity Digest are available at: https://dignityalliancema.org/dignity-digest/</i> <i>For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</i>	