

SENATE No. 758

The Commonwealth of Massachusetts

In the Year Two Thousand Nine

An Act to ensure adequate adult day health services..

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Section 7 of Chapter 118G of the General Laws is hereby amended by
2 adding the following new paragraph after the third paragraph:

3 The division shall establish rates for providers of adult day health services which:
4 recognize two levels of care with one corresponding rate for each: Basic and Complex;
5 Are not less than the rates and reimbursements in effect for Adult Day Health and for
6 Dementia-Specific Adult Day Health Home and Community-based waiver clients as of June 30,
7 2002;

8 Reimburse dementia-specific adult day health programs at not less than the Complex
9 level of care for any participant with dementia, provided that the Complex rate may be less than
10 the aforementioned Home and Community-based rate for participants other than those in
11 dementia-specific programs.

12 SECTION 2. Chapter 118G of the General Laws is hereby amended by adding a new
13 Section 17B as follows:

14 §17B Adult Day Health Services

15 The commissioner shall review and approve or disapprove rates for the Basic and
16 Complex levels of adult day health services. Any participant in a dementia-specific adult day
17 health program with dementia shall be considered in need of Complex care for purposes of
18 reimbursement. The commissioner shall include cognitive criteria in determining clinical
19 eligibility for the Complex level of adult day health services. Such criteria shall include, but not
20 be limited to:

21 sensory impairments indicated by communication, hearing and vision deficits;

22 mental-state or cognitive impairments such as confusion, disorientation to time, place, or
23 person, memory loss and defective judgment;

24 impairments that require staff intervention and supervision in planning and organizing
25 daily routines;

26 impairments that require the member to rely on staff to conduct daily routines; and

27 behavior problems including:

28 wandering with no rational purpose, oblivious to his or her own needs of safety;

29 verbal abusiveness such as threatening, screaming or cursing;

30 physical abusiveness such as hitting, shoving and scratching; sexual abusiveness; socially
31 inappropriate or disruptive behavior such as disruptive sounds, noisiness, screaming, self-abusive
32 acts, sexual behavior; disrobing in public, smearing throwing, rummaging, or repetitive behavior;
33 and resistance to taking medications or injections, ADL assistance, eating, or changes in

- 34 position; provided that a member who has made an informed choice to exercise his or her right to
- 35 refuse treatment is not considered resistant to care.