

The Commonwealth of Massachusetts

**In the One Hundred and Ninetieth General Court
(2017-2018)**

SENATE, Thursday, June 14, 2018

The committee on Elder Affairs, to whom was referred the petition (accompanied by bill, Senate, No. 345) of Patricia D. Jehlen, Barbara A. L'Italien, Tackey Chan, Kenneth I. Gordon and other members of the General Court for legislation to authorize the option of providing basic common sense health services for residents of assisted living residences,- reports the accompanying bill (Senate, No. 2557).

For the committee,
Barbara A. L'Italian

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An Act authorizing the option of providing basic common sense health services for residents of assisted living residences.

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 1 of chapter 19D of the general laws, as appearing in the 2016
2 Official Edition, is hereby amended, by inserting after the definition for “elderly housing,” the
3 following new definition:-

4 “Basic Health Services”, injections; application or replacement of simple non-sterile
5 dressings, including wound dressing application for up to and including Stage 2 pressure
6 wounds; management of oxygen on a regular and continuing basis when the resident's medical
7 condition warrants; or application of ointments or drops.

8 SECTION 2. Section 10 of chapter 19D, is hereby amended by striking subsection (5),
9 and inserting in place thereof, the following subsection:-

10 (5) For all residents whose service plans so specify, either or both self-administered
11 medication management or basic health services by personnel meeting standards for professional
12 qualifications and training set forth in the regulations.

13 SECTION 3. Section 10 of chapter 19D, is hereby further amended in subsection (c) by
14 inserting after the words, “for the provisions of,” the following: - “basic health services, or.”

15 SECTION 4. Section 10 of chapter 19D, is hereby further amended by inserting after
16 subsection (7) (d), the following new subsections:-

17 (e) The sponsor may advertise, market, and otherwise promote or provide or arrange for
18 the provision of basic health services for assisted living residents and shall administer such care
19 and services in accordance with the requirements set forth herein. A sponsor may not provide
20 basic health services without submitting an operating plan to the Executive Office of Elder
21 Affairs for its approval that explains how the Residence’s basic health services will meet the
22 needs of its resident population or individual residents therein, and the staff qualifications and
23 training for providing such services. Said operating plan shall specify whether all, or certain, of
24 the enumerated basic health services will be offered, steps taken to provide adequate support and
25 training of nurses who will provide such care, oversight and evaluation of basic health services,
26 provided, however, that no such plan shall restrict resident choice in the delivery of said services
27 by outside health professionals.

28 (f) The sponsor shall disclose to each resident the costs associated with provision of basic
29 health services in the care plan of the resident. This disclosure shall be made upon initial
30 implementation of the resident’s care plan and upon all revisions of the plan. Residents shall
31 have the opportunity to discontinue receiving basic health services from the sponsor upon written
32 request to the sponsor and shall not be charged a cancellation fee or a fee for services not
33 provided due to discontinuation of said services.

34 (g) The Executive Office of Elder Affairs, in consultation with the Department of Public
35 Health, is, hereby, authorized and directed to promulgate appropriate regulations governing the
36 application, criteria for approval or disapproval, and ongoing oversight of basic health services
37 authorized in this section, which shall include, but not be limited to, the requirement that any
38 facility offering such basic health services shall have a registered nurse on-site 24 hours per
39 day".

40 (h) To ensure patient safety and clinical competence in the application of subsections (e)-
41 (g), the Executive Office of Elder Affairs and the Department of Public Health shall establish
42 and implement a plan to facilitate communication between the department and the executive
43 office and create a list of required components necessary for operating plans. The Executive
44 Office of Elder Affairs shall make available electronic copies of the required components of
45 operating plans on its website. The Executive Office of Elder Affairs may conduct annual
46 compliance reviews on the documentation created and maintained by the assisted living facility
47 for any assisted living resident who receives or has received basic health services within the
48 previous twelve month period.

49 SECTION 5. Section 11 of said chapter 19D, is hereby further amended by inserting after
50 the first sentence the following:-

51 "Except as permitted for residences which opt to provide basic health services,".