

HOUSE No. 625

The Commonwealth of Massachusetts

PRESENTED BY:

Smitty Pignatelli

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

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

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Smitty Pignatelli</i>	<i>4th Berkshire</i>	<i>1/18/2019</i>
<i>Paul McMurtry</i>	<i>11th Norfolk</i>	<i>2/1/2019</i>
<i>Danielle W. Gregoire</i>	<i>4th Middlesex</i>	<i>2/1/2019</i>

HOUSE No. 625

By Mr. Pignatelli of Lee, a petition (accompanied by bill, House, No. 625) of Smitty Pignatelli, Paul McMurtry and Danielle W. Gregoire for legislation to authorize the option of providing basic common sense health services for residents of assisted living residences. Elder Affairs.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-First General Court
(2019-2020)**

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; management of oxygen on a regular and continuing basis when the resident's medical
6 condition warrants; or application of ointments or drops.

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

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

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

14 “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 fees associated with provision of basic
29 health services within the assisted living residence’s residency agreement, and shall review such
30 fees with the resident upon implementation and any revision to a service plan which includes
31 provision of basic health services. Residents shall have the opportunity to discontinue receiving
32 basic health services from the sponsor upon written request to the sponsor and shall not be

33 charged a cancellation fee or a fee for services not provided due to discontinuation of said
34 services.

35 (g) The Executive Office of Elder Affairs, in consultation with the Department of Public
36 Health, is, hereby, authorized and directed to promulgate appropriate regulations governing the
37 application, criteria for approval or disapproval, and ongoing oversight of basic health services
38 authorized in this section.

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

48 SECTION 5. Section 11 of said chapter 19D, is hereby further amended by inserting, in
49 the first sentence, after the word “supervision”, the following:-

50 “except as permitted for residences which opt to provide basic health services.”