

**SENATE . . . . . No. 365**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Patricia D. Jehlen***

*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:	
<i>Patricia D. Jehlen</i>	<i>Second Middlesex</i>	
<i>Steven Ultrino</i>	<i>33rd Middlesex</i>	<i>1/29/2019</i>
<i>Brian M. Ashe</i>	<i>2nd Hampden</i>	<i>1/29/2019</i>
<i>Denise Provost</i>	<i>27th Middlesex</i>	<i>1/31/2019</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>2/1/2019</i>
<i>Michael O. Moore</i>	<i>Second Worcester</i>	<i>2/13/2019</i>

**SENATE . . . . . No. 365**

---

By Ms. Jehlen, a petition (accompanied by bill, Senate, No. 365) of Patricia D. Jehlen, Steven Ultrino, Brian M. Ashe, Denise Provost 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. Elder Affairs.

---

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 2557 OF 2017-2018.]

**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  
8 (5),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: - “basic health services, or.”

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

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

27 (f) The sponsor shall disclose to each resident the fees associated with provision of basic  
28 health services within the assisted living residence’s residency agreement, and shall review such  
29 fees with the resident upon implementation and any revision to a service plan which includes  
30 provision of basic health services. Residents shall have the opportunity to discontinue receiving

31 basic health services from the sponsor upon written request to the sponsor and shall not be  
32 charged a cancellation fee or a fee for services not provided due to discontinuation of said  
33 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.

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

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

49 “Except as permitted for residences which opt to provide basic health services,”