The committee on Elder Affairs to whom was referred the petition (accompanied by bill, Senate, No. 404) of Cindy F. Friedman, Jack Patrick Lewis, Carol A. Doherty, Angelo J. Puppolo, Jr. and other members of the General Court for legislation to strengthen emergency preparedness for home care workers, the petition (accompanied by bill, House, No. 726) of Ruth B. Balser and others that the Department of Public Health establish an exchange to facilitate the purchasing of personal protective equipment by elder care providers, and the petition (accompanied by bill, House, No. 756) of Jon Santiago and others that the Executive Office of Health and Human Services be authorized to develop metrics, standards, and procedures that trigger emergency long-term care provider rates, reports recommending that the accompanying bill (House, No. 4472) ought to pass.

For the committee,

THOMAS M. STANLEY.
An Act to strengthen emergency preparedness for home care workers.

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

SECTION 1. Notwithstanding any general or special law to the contrary, the executive office of health and human services, in consultation with the department of elder affairs and the office of Medicaid, shall develop metrics, standards, and procedures that trigger emergency long-term care provider rates of payment that include hazard pay wage add-ons for employees of home health agencies and home care agencies that shall be implemented in response to any COVID-19 resurgence, statewide public health emergency, severe statewide weather emergency, or other statewide emergency incident. The executive office of health and human services shall also develop standard, comprehensive, timely and publicly accessible processes for provider reporting and state audits of the use of emergency rate increases for wage increases.

SECTION 2. Notwithstanding any general or special law to the contrary, the executive office of health and human services, in consultation with all appropriate state agencies and all relevant public stakeholders, shall develop and implement a mandatory infection control and public health training program that all new and incumbent direct care employees of home health agencies and home care agencies shall complete as a condition of employment. The executive
office shall establish contracts with labor-management training funds, community colleges, and
other entities capable of conducting the training program and shall ensure the training program is
implemented in a manner that is coordinated with the work of other state agencies and public and
private entities involved in health care workforce training, recruitment, and retention.

SECTION 3. Notwithstanding any general or special law to the contrary, the executive
office of health and human services shall write a personal protective equipment supply report.
Such report shall be submitted quarterly to the Joint Committee on State Administration and
Regulatory Oversight and the Joint Committee on Public Health and shall detail the state
government’s current and anticipated supply of necessary personal protective equipment for
long-term care workers, including but not limited to personal care attendants and all employees
of nursing facilities, resident care facilities, assisted living residences, adult day programs, home
health agencies, and home care agencies in the Commonwealth. Necessary personal protective
equipment shall include but not be limited to N95/KN95 and similarly protective masks, surgical
masks, gloves, and other related equipment that contributes to the health and safety of the long
term care workforce, nursing home resident, clients, and consumers.

If the Committees find that a quarterly report shows that the state’s personal protective
equipment supply is insufficient to meet expected need, the executive office shall: (i) identify
and offer qualified private wholesalers, manufacturers, and suppliers the opportunity to bid on
procurement of personal protective equipment to be posted on a state website; (ii) ensure that the
personal protective equipment offered by qualified private wholesalers, manufacturers and
suppliers complies with all federal and state requirements and specifications; and (iii) establish
and implement a comprehensive process to receive, negotiate, and finalize competitive pricing to
be offered for the personal protective equipment placed on the exchange.
All sales of the personal protective equipment from the website shall be private transactions by and between the private purchaser and private seller. The executive office shall operate the exchange and therefore facilitate such transactions but shall have no legal responsibility to offer payment for or the delivery of the personal protective equipment. The executive office may establish processes to subsidize or to discount the cost of personal protective equipment that is purchased through the website for certain purchasers.

SECTION 4. Notwithstanding any general or special law to the contrary, the executive office of health and human services, in consultation with the department of elder affairs and the office of Medicaid, shall develop and implement new standards and practices that use the worker contact information included in the Massachusetts Home Care Worker Registry established in Chapter 139 of the Acts of 2017 to ensure robust communication with the home care agency workforce during a state public health emergency or other state emergencies. Such communication shall include, but not be limited to, informing the home care agency workforce about any new provider rates designated for hazard pay, the availability of and standards for mandatory infection control trainings, and procedures for accessing personal protective equipment from any state-run online exchange.

SECTION 5. The personal protective equipment exchange established in Section 3 shall be implemented not later than 90 days after the effective date of this act.