HOUSE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Thomas M. Stanley

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 relative to assisted living and the frail elder waiver.

PETITION OF:

NAME:DISTRICT/ADDRESS:DATE ADDED:Thomas M. Stanley9th Middlesex1/9/2025

HOUSE No.

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The Commonwealth of Massachusetts

In the One Hundred and Ninety-Fourth General Court (2025-2026)

An Act relative to assisted living and the frail elder waiver.

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 shall, not later than 90 days after the effective date of this act, pursue and submit applications for new state plan amendments, state plan options or state plan waiver or demonstration requests for federal approval that will establish an assisted living service to allow individuals qualifying for Medicaid and at risk of entering a nursing home to reside in a certified assisted living residence; provided, however, that the average daily rate developed for such service, when combined with the average daily benefit assistance provided by the Supplemental Security Income program inclusive of the state supplementary payment program authorized under section 131 of chapter 6 of the General Laws and chapter 118A of the General Laws, shall not exceed 80 per cent of the cost of substantially similar institutional care for the equivalent waiver year as demonstrated by the Factor G value of Appendix J of the current MassHealth frail elder home and community-based services waiver, 0059.R08.00; provided further, that MassHealth shall implement a rate schedule for such assisted living service that uses disproportionate share payment methodologies to ensure equal economic access to the

assisted living care setting for long-term care services and supports when measured with consideration for the level of access that MassHealth members have for institutional services.

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SECTION 2. The executive office of health and human services shall, not later than 120 days after the effective date of this act, report to the house and senate committees on ways and means on the status of submitted and pending applications described in section 1 and the projected fiscal impact to the commonwealth of federal approval for such applications. The report shall include, but not be limited to, comment on the deliberations and decisions regarding: (i) amending the current MassHealth frail elder waiver to include assisted living services as a new waiver service in a manner comparable to how the District of Columbia Medicaid program has delivered services to members residing in assisted living settings; (ii) implementing a new home and community-based services waiver under section 1915(c) of the Social Security Act for the sole purpose of establishing assisted living services as an option for MassHealth members in a manner comparable to how the Ohio Medicaid program has delivered services to members residing in assisted living settings; and (iii) enabling assisted living as a setting of choice for MassHealth members participating in managed care programs with reference to "in lieu of services and setting" authority as enabled by 42 C.F.R. 435.3(e)(2) in a manner comparable to how the California Medicaid program has delivered services to members residing in assisted living settings.

SECTION 3. The executive office of aging and independence shall, not later than 180 days after the effective date of this act, report to the joint committee on elder affairs on the current structural, organizational or cultural barriers that are experienced by MassHealth members and such members' potential to reside at an assisted living residence that is located within their community. The report shall include, but not be limited to, particular consideration

- 38 of residents within qualified census tracts or difficult development areas and such residents'
- 39 ability and likelihood to access assisted living residences in comparison to their ability and
- 40 likelihood to access nursing facility services.