

The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
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Maura T. Healey
Governor

Kimberley Driscoll
Lieutenant Governor

Kiame Mahaniah, MD, MBA
Secretary

Robert Goldstein, MD, PhD
Commissioner

February 4, 2025

Sen. Patricia D. Jehlen
Joint Committee on Aging and Independence
State House, Room 424
Boston, MA 02133

Sen. Michael J. Rodrigues
Senate Committee on Ways & Means
State House, Room 212
Boston, MA 02133


Rep. Thomas M. Stanley
Joint Committee on Aging and Independence
State House, Room 167
Boston, MA 02133

Rep. Aaron M. Michlewitz
House Committee on Ways & Means
State House, Room 243
Boston, MA 02133

Dear Chairs,

Pursuant to Section 2UUUU of Chapter 29 of the Massachusetts General Laws, please find enclosed a report from the Department of Public Health entitled *Long-Term Care Facility Quality Improvement Fund Annual Report FY25*.

Sincerely,


Robert H. Goldstein, MD, PhD
Commissioner
Department of Public Health

MAURA T. HEALEY
GOVERNOR

KIMBERLEY DRISCOLL
LIEUTENANT GOVERNOR



KIAME MAHANIAH, MD, MBA
SECRETARY

ROBERT GOLDSTEIN, MD, PhD
COMMISSIONER

Long-Term Care Facility Quality Improvement Fund Annual Report

2025 Annual Report

Legislative Mandate

This report is issued pursuant to Section 2UUUU of Chapter 29 of the Massachusetts General Laws (“M.G.L.”) which reads as follows:

There shall be a Long-Term Care Facility Quality Improvement Fund. The commissioner of public health shall administer the fund and shall make expenditures from the fund for measures to improve the safety and quality of care provided in long-term care facilities including, but not limited to: (i) staff training and education; (ii) technical assistance to implement best practices; (iii) dissemination of best practice models on quality of care; (iv) state operation of facilities pending correction of deficiencies or closure; (v) costs of relocating residents from 1 facility to another; and (vi) funding to support adequate department resources to inspect facilities under state and federal law.

The fund shall consist of: (i) revenue generated from fines and penalties imposed by the department on long-term care facilities under section 73 of chapter 111; (ii) revenue from appropriations or other money authorized by the general court and specifically designated to be credited to the fund; and (iii) funds from public or private sources including, but not limited to, gifts, grants, donations, rebates and settlements received by the commonwealth that are specifically designated to be credited to the fund. The department may incur expenses and the comptroller may certify for payment amounts in anticipation of expected receipts; provided, however, that no expenditure shall be made from the fund that shall cause the fund to be deficient at the close of a fiscal year. Amounts credited to the fund shall not be subject to further appropriation and money remaining in the fund at the close of a fiscal year shall not revert to the General Fund. The commissioner shall report annually, not later than October 1, on the fund's activity to the senate and house chairs of the joint committee on elder affairs and the house and senate committees on ways and means. The report shall include, but not be limited to: (1) revenue received by the fund; and (2) expenditures from the fund, including the recipient, date and reason for the expenditure.

Annual Report for the Long-Term Facility Quality Improvement Fund (the “Fund”)

This annual report provides the revenue received by, and expenditures from, the Fund during state fiscal year (“FY”) 2025, which runs from July 1, 2024 through June 30, 2025 (“FY25”). Revenue for the Fund is primarily generated by fines and penalties imposed pursuant to [M.G.L. c. 111, § 73](#) and funds from settlements with long-term care facilities received by the Office of Attorney General . Section 73 authorizes the Department to impose fines and penalties on long-term care facilities that operate unlicensed or otherwise violate any provision of M.G.L. c. 111, §§ 71 through 73 or any rule or regulation promulgated under M.G.L. c. 111, §§ 71, 72, and 72C.

Pursuant to the regulatory promulgation requirements established in [M.G.L. c. 30A](#), the Department is engaged in amending 105 CMR 153.000 to align to recent legislative changes to M.G.L. c. 111, § 73 increasing the fines that the Department may impose.¹ Such increases have not yet been implemented through the promulgation of amended regulations. Therefore, during FY25, the Department was authorized to impose an initial fine of \$500 dollars on a long-term care facility that operates without a license, or who licensed, violates a statutory requirement under sections 71 through 73. For subsequent violations, the Department is authorized to impose a fine of not more than \$1,000. The Department is further authorized to impose an initial fine of \$50 on a long-term care facility that is found to have violated any rule or regulation promulgated under sections 71, 72, and 72C and \$50 per day for each day the cited violation remains uncorrected after the date directed by the Department.

The chart below documents the balance of the Fund at the beginning and end of FY25, as well as the amounts received into and expended from the Fund during that period.

Description	Amount
Fund Balance Beginning FY25	\$1,341,494.46
Total Revenue Received	\$658,205.41
Total Expenditures	\$402,514.19
Fund Balance Ending FY25	\$1,597,185.68

In FY25, the expenditures were disbursed to several entities as follows:

Amount	Disbursed to	Reason
\$57,485.34	Eastern Research Group	Contract for a legislative report on the topic of the Need and Feasibility of Qualified Professional Guardians in the Commonwealth, as required by

¹St. 2024, c. 197, § 18 amended M.G.L. c. 111, § 73, effective December 5, 2024. The Department anticipates the amended regulation will authorize the Department to impose an initial fine of \$1,000 on a long-term care facility that operates without a license, or who licensed, violates at statutory requirement under sections 71 through 73. For subsequent violations, the regulation will authorize the Department to impose a fine of not more than \$2,000 and further authorize the Department to impose an initial fine of \$500 on a long-term care facility that is found to have violated any rule or regulation promulgated under sections 71, 72, and 72C and \$500 per day for each day the cited violation remains uncorrected after the date directed by the Department. The regulation is anticipated to authorize the Department to impose higher fines under M.G.L. c. 111, § 73(b) if it determines such higher amount is appropriate in accordance with [42 CFR 488.438](#).

		Chapter 197 of the Acts of 2024, An Act to Improve Quality and Oversight of Long-term Care
\$8,080.26	Environmental Systems	To purchase an advanced geospatial analysis software license (ArcGIS) to enable healthcare capacity analysis and reporting through a publicly available resource: https://www.mass.gov/info-details/health-care-capacity-interactive-dashboard
\$93,469.69	Fenway Community Health Center	Ongoing contract to develop and host a web-enabled training program to support long-term care facilities to welcome members of the LGTBQIA+ community. This expenditure aligns with the requirements of Chapter 197 of the Acts of 2024, An Act to Improve Quality and Oversight of Long-term Care
\$43,297.02	Mass Senior Care Association	Administration of a project that reimburses Massachusetts licensed Rest Homes that need technical assistance to complete applications for COVID-19 Public Health Emergency supplies
\$38,842.13	Motion Recruitment Partners	Funding for a temporary epidemiologist employee, who worked on long-term care analyses, including a special project evaluating the use of antipsychotic medications in long-term care facilities
\$161,314.80	National Fund for Center Disease and Prevention	Funding for a CDC fellow to support a special project as project manager, evaluating the use of antipsychotic medications in long-term care facilities, including supporting all communications with the 50 facilities that were identified for the project and scheduling and facilitating calls with an outside CMS-funded vendor to provide one-on-one technical assistance

The Department continues to explore additional opportunities for expenditures from the Fund for measures that may improve the safety and quality of care provided in long-term care facilities.