



**The Commonwealth of Massachusetts**  
JOINT COMMITTEE ON AGING AND INDEPENDENCE  
STATE HOUSE, BOSTON 02133

**Joint Committee on Aging and Independence**

Rep. Thomas M. Stanley  
House Chair

Sen. Patricia D. Jehlen  
Senate Chair

**PUBLIC HEARING NOTICE**

**Date of Hearing:** Tuesday, September 16, 2025

**Time:** 10:00 AM-1:00 PM

**Location:** A-2 and Virtual

**Joint Committee on Aging and Independence Hearing**

Please be advised that the schedule and agenda are subject to change at the agreement of the Chairs.

All matters filed in the House that are listed in the agenda for this hearing are required to be reported on by November 15, 2025, subject to extensions consistent with House Rule 27.

The public is invited to participate in this hybrid hearing, which will be livestreamed on the General Court website <https://malegislature.gov/>. Hearings will be recorded and posted publicly on the Joint Committee on Aging and Independence page.

At the discretion of the Chairs, and per committee rules, written testimony received by the committee will be made publicly available. The committee may limit availability or redact testimony that includes sensitive personal information, information about minors, or information that may jeopardize the health, wellness or safety of the testifier or others.

Written testimony can be submitted via email to [Joint Committee on Aging & Independence](mailto:JointCommitteeonAging&Independence@malegislature.gov) or physically mailed to:

Senate Chair Patricia Jehlen

Joint Committee on Aging & Independence

ATTN: Tara Christian, Legislative Aide

24 Beacon St., Room 424

Boston, MA 02133

**To register to testify in-person or virtually, please complete [this form](#) by September 14, 2025.** Those registering to testify virtually will receive further instructions by e-mail about how to participate. Same-day registration is only available to those testifying in person.

**For in-person and remote testimony please include:**

1. Name;
2. Organization you represent;
3. Whether on behalf of yourself or an organization;
4. Mailing address;
5. Email address;
6. Telephone number;
7. In-person or remote testimony;
8. Bills testifying on;
9. Whether support or oppose.

This hearing will be chaired by Senator Patricia Jehlen. If you have any questions regarding the hearing, legislation, format of the hearing, or reasonable accommodations required to ensure people with disabilities can participate fully in the committee process, please email: [Vicki Halal](mailto:Vicki.Halal@legis.state.tx.us). Chair Jehlen's office can be reached via telephone: (617) 722-1578.

If you have Accessibility needs, [click here](#).

Bill No.	Sponsor	Title
H759	Consalvo, Rob (HOU)	An Act improving oversight in long-term care facilities
H760	Consalvo, Rob (HOU)	An Act to increase access to the flu vaccine for older adults
H761	Cruz, Manny (HOU)	An Act to strengthen the long-term care workforce and capital trust fund
H763	Decker, Marjorie C. (HOU)	An Act relative to assessing the feasibility of in-state drug manufacturing
H766	Donato, Paul J. (HOU)	An Act relative to acute hospital and nursing home governance
H768	Gordon, Kenneth I. (HOU)	An Act relative to certified medical directors at skilled nursing facilities
H772	Kane, Hannah (HOU)	An Act establishing a commission to study the financial abuse of elders
H773	Kerans, Sally P. (HOU)	An Act relative to transparent name changes in nursing facilities
H790	Stanley, Thomas M. (HOU)	An Act to support quality improvement in nursing homes
H793	Turco, Jeffrey Rosario (HOU)	An Act protecting the rights of older adults and people with disabilities
H794	Turco, Jeffrey Rosario (HOU)	An Act clarifying responsibility for policy and budgetary decision-making in nursing homes
H795	Turco, Jeffrey Rosario (HOU)	An Act promoting infection prevention and privacy for residents of nursing homes
H797	Ultrino, Steven (HOU)	An Act requiring the certification of medical directors in skilled nursing facilities
H798	Walsh, Thomas P. (HOU)	An Act requiring dignity, privacy, and safety for residents in

Bill No.	Sponsor	Title
		nursing homes and rest homes
S479	Lovely, Joan B. (SEN)	An Act to improve transparency and accountability for residents of long-term care
S480	Lovely, Joan B. (SEN)	An Act promoting infection prevention and privacy for residents of nursing homes
S483	Montigny, Mark C. (SEN)	An Act providing for certification of skilled nursing facility medical directors
S485	Montigny, Mark C. (SEN)	An Act to establish safe staffing levels at skilled nursing facilities
S488	Oliveira, Jacob R. (SEN)	An Act requiring the certification of medical directors in skilled nursing facilities
S492	Tarr, Bruce E. (SEN)	An Act protecting the rights of older adults and people with disabilities
S493	Tarr, Bruce E. (SEN)	An Act to strengthen the long-term care workforce and capital trust fund
S494	Velis, John C. (SEN)	An Act relative to nursing home policies regarding notice of vacancy
S496	Velis, John C. (SEN)	An Act clarifying responsibility for policy and budgetary decision-making in nursing homes

Please be advised that the schedule and agenda are subject to change at the discretion of the chair per committee rules.

You may contact committee staff with any questions at (617) 722-2810 or (617) 722-1578.

**HOUSE . . . . . No. 759**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Rob Consalvo***

*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 improving oversight in long-term care facilities.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Rob Consalvo</i>	<i>14th Suffolk</i>	<i>1/15/2025</i>

**HOUSE . . . . . No. 759**

By Representative Consalvo of Boston, a petition (accompanied by bill, House, No. 759) of Rob Consalvo relative to monitoring devices in resident rooms at certain long-term care facilities. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act improving oversight in long-term care facilities.

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

1 Chapter 111 of the General Laws is hereby amended by inserting after section 72GG the  
2 following section:-

3 Section 72HH. (a) Notwithstanding section 99 of chapter 272 or any other general or  
4 special law to the contrary, a nursing home, rest home or other long-term care facility shall  
5 permit a resident or, with the resident’s consent, a resident’s family member or health care proxy  
6 to place a monitoring device, including a two-way camera, in the resident’s room to monitor the  
7 resident’s care and living arrangements; provided, that the resident resides in a private, single-  
8 occupancy room and the device does not monitor any other resident’s private residential space or  
9 any communal space. If the resident has not affirmatively objected to the monitoring device and  
10 the resident's physician determines that the resident lacks the ability to understand and appreciate  
11 the nature and consequences of remote monitoring, the resident’s health care proxy may consent  
12 on their behalf.

13           (b) A person placing a monitoring device in a resident's room pursuant to subsection (a)  
14 shall notify the facility prior to placing the monitoring device and post conspicuous signage to  
15 notify any person entering the room that the room is being remotely monitored.

16           (c) The facility shall inform its employees and contractors of any monitoring device in  
17 use pursuant to subsection (a).

18           (d) All costs related to the installation and maintenance of the monitoring device shall be  
19 borne by the person who installed the device.

20           (e) A recording produced from the monitoring device shall not be disseminated except for  
21 the purposes of making a complaint to the facility or a regulatory authority, for admission into  
22 evidence in a civil, criminal or administrative proceeding, or as otherwise required by law.

23           (f) The department shall promulgate regulations, pursuant to chapter 30A, which shall  
24 include minimum privacy and notification standards. The department shall develop a form for  
25 notification to the facility.

**HOUSE . . . . . No. 760**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Rob Consalvo***

*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 to increase access to the flu vaccine for older adults.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Rob Consalvo</i>	<i>14th Suffolk</i>	<i>1/16/2025</i>

**HOUSE . . . . . No. 760**

---

By Representative Consalvo of Boston, a petition (accompanied by bill, House, No. 760) of Rob Consalvo relative to immunizations against influenza virus to all inpatients sixty-five years of age and older. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act to increase access to the flu vaccine for older adults.

*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.

2 Section XXXXX is added to read:

3 Each year from October 1 through February 1 of the following year and in accordance  
4 with the latest recommendations of the Advisory Committee on Immunization Practices of the  
5 Centers for Disease Control and Prevention, each hospital shall offer, prior to discharge,  
6 immunizations against influenza virus to all inpatients sixty-five years of age and older, unless  
7 contraindicated, and contingent upon the availability of the vaccine.

**HOUSE . . . . . No. 761**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Manny Cruz*

*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 to strengthen the long-term care workforce and capital trust fund.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Manny Cruz</i>	<i>7th Essex</i>	<i>1/17/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/11/2025</i>

**HOUSE . . . . . No. 761**

---

By Representative Cruz of Salem, a petition (accompanied by bill, House, No. 761) of Manny Cruz relative to the long-term care workforce and capital trust fund. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act to strengthen the long-term care workforce and capital trust fund.

*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. Subsection (c ) of section 35TTT of chapter 10 of the general laws, as most  
2 recently amended by chapter 197 of the acts of 2024, is hereby further amended at the end  
3 thereof the following:

4           “Members of said advisory committee, who are not state employees, shall be deemed  
5 “special state employees,” pursuant to the provisions of chapter 268a of the general laws as  
6 appearing in the 2020 Official Edition.”

7           SECTION 2. Said subsection (e) of said section 35TTT of chapter 10, as amended by  
8 chapter 197 of the acts of 2024, is hereby amended by inserting after the word, “facilities,” the  
9 following words, “provided, however, that eligibility for any such no interest or forgivable  
10 capital loan shall be limited to not-for-profit entities; and by inserting in the same subsection,  
11 after the words “regional entities, the following: “ and (D) for the construction of free-standing

- 12 small house nursing homes serving less than fourteen residents, and operated in collaboration
- 13 with home and community-based supports and services.”

**HOUSE . . . . . No. 763**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Marjorie C. Decker*

*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 assessing the feasibility of in-state drug manufacturing.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Marjorie C. Decker</i>	<i>25th Middlesex</i>	<i>1/16/2025</i>
<i>Patrick Joseph Kearney</i>	<i>4th Plymouth</i>	<i>5/8/2025</i>
<i>Estela A. Reyes</i>	<i>4th Essex</i>	<i>5/28/2025</i>

**HOUSE . . . . . No. 763**

---

By Representative Decker of Cambridge, a petition (accompanied by bill, House, No. 763) of Marjorie C. Decker for an investigation by a special commission (including members of the General Court) relative to the feasibility of state-sponsored prescription drug manufacturing or distribution in the Commonwealth. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act relative to assessing the feasibility of in-state drug manufacturing.

*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. (a) Notwithstanding any special or general law to the contrary, there shall  
2 be a special commission to investigate and assess the feasibility of state-sponsored prescription  
3 drug manufacturing or distribution in the commonwealth. The special commission shall consist  
4 of: the secretary of health and human services or a designee, who shall serve as chair; the  
5 commissioner of insurance or a designee; the executive director of the center for health  
6 information and analysis or a designee; the executive director of the health policy commission or  
7 a designee; the president of the board of registration in pharmacy or a designee; the president of  
8 the University of Massachusetts or a designee; and 11 persons selected by the chair, 1 of whom  
9 shall be a representative of the Massachusetts Biotechnology Council, Inc., 1 of whom shall be a  
10 representative of the Massachusetts Health and Hospital Association, Inc., 1 of whom shall be a  
11 representative of the Massachusetts Medical Society, 1 of whom shall be a representative of a  
12 patient advocacy organization, 1 of whom shall be a representative of an advocacy organization

13 representing patients with lack of access to pharmaceutical products, including but not limited to,  
14 insulin, naloxone, albuterol inhalers and epinephrine, 1 of whom shall be a representative of a  
15 representative of the office of pharmaceutical policy and analysis established under the section 3  
16 of chapter 342 of the acts of 2024, 1 of whom shall be an individual with expertise in biomedical  
17 research, 1 of whom shall be a physician licensed to practice medicine under section 2 of chapter  
18 112 of the General Laws with expertise in the treatment of diabetes and related complications, 1  
19 of whom shall be a physician licensed under said section 2 of said chapter 112 with expertise in  
20 the treatment of substance use disorders and related complications, 1 of whom shall be a  
21 physician licensed under said section 2 of said chapter 112 with expertise in the treatment of  
22 allergic reactions and related complications and 1 of whom shall be a physician licensed under  
23 said section 2 of said chapter 112 with expertise in the treatment of asthma and related  
24 complications.

25 (b) The special commission shall study and report on the feasibility of state-sponsored  
26 drug manufacturing or distribution in the commonwealth. The special commission shall: (i) study  
27 the feasibility of manufacturing commonly used pharmaceutical products and their analogs,  
28 including but not limited to insulin, naloxone, albuterol inhalers and epinephrine; (ii) assess the  
29 feasibility of providing the drug and drug analogs to low-income residents of the commonwealth  
30 at no-cost or at a reduced cost on a means-tested basis; (iii) assess the feasibility of partnerships  
31 between the commonwealth and other entities, including but not limited to, public universities  
32 and existing drug manufacturers, or partnerships between other appropriate entities and an  
33 existing drug manufacturer to leverage existing research and manufacturing capacity; (iv)  
34 analyze if establishing a state-sponsored drug manufacturing program of commonly used  
35 pharmaceutical products and their analogs, including but not limited, to the drugs listed in clause

36 (i) of subsection (b), would lower prescription drug prices for public and private purchasers and  
37 consumers (v) study the example of other states that have initiated state-sponsored drug  
38 manufacturing and distribution initiatives; and (vi) issue a report on the commission's findings  
39 and policy recommendations.

40 (c) In its assessment, the commission shall consider the following factors: (i) the number  
41 of low-income residents who currently require the drugs listed in clause (i) of subsection (b); (ii)  
42 the ability of the commonwealth, the public university system or other appropriate entity, by  
43 themselves or in partnership with existing drug manufacturers, to produce the drugs listed in  
44 clause (i) of subsection (b); (iii) any long-term cost savings and revenue generation for the  
45 commonwealth; (iv) any long-term cost savings and other benefits to low-income residents of the  
46 commonwealth who would receive the drugs listed in clause (i) of subsection (b); (v) any costs to  
47 the commonwealth to produce the drugs listed in clause (i) of subsection (b), including additional  
48 administrative costs; (vi) state and federal regulatory or legal obstacles, including requirements  
49 for licensure, to the production and distribution of the drugs listed in clause (i) of subsection (b)  
50 within the commonwealth; (vii) available alternative methods for providing the drugs listed in  
51 clause (i) of subsection (b) to low-income residents of the commonwealth at low or no cost; (viii)  
52 options for capping copayments for the drugs listed in clause (i) of subsection (b) provided  
53 through private insurers; (ix) the potential for state-sponsored manufacturing of the drugs listed  
54 in clause (i) of subsection (b) to address drug shortages; (x) the potential for the commonwealth  
55 to engage in volume purchasing of the drugs listed in clause (i) of subsection (b) at reduced cost;  
56 (xi) the mechanisms by which the commonwealth could establish a program to distribute the  
57 drugs listed in clause (i) of subsection (b) to residents of the commonwealth; (xii) opportunities  
58 to establish an interstate compact with other New England states to reduce costs; (xiii)

59 opportunities to establish a public entity to manage the manufacturing, purchasing or distribution  
60 of the drugs listed in clause (i) of subsection (b); (xiv) opportunities to establish a model facility  
61 to affordably manufacture the drugs listed in clause (i) of subsection (b); and (xv) opportunities  
62 to procure dedicated funding to support the manufacture and distribution of the drugs listed in  
63 clause (i) of subsection (b) to residents of the commonwealth.

64 (d) Not later than September 1, 2026, the commission shall submit its report to the clerks  
65 of the senate and house of representatives, the joint committee on health care financing and the  
66 joint committee on public health.

**HOUSE . . . . . No. 766**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Paul J. Donato***

*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 acute hospital and nursing home governance.**

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Paul J. Donato</i>	<i>35th Middlesex</i>	<i>1/16/2025</i>
<i>John Francis Moran</i>	<i>9th Suffolk</i>	<i>3/6/2025</i>
<i>Patrick Joseph Kearney</i>	<i>4th Plymouth</i>	<i>3/24/2025</i>
<i>Bruce E. Tarr</i>	<i>First Essex and Middlesex</i>	<i>4/7/2025</i>

**HOUSE . . . . . No. 766**

By Representative Donato of Medford, a petition (accompanied by bill, House, No. 766) of Paul J. Donato and John Francis Moran relative to acute hospital and nursing home governance. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act relative to acute hospital and nursing home governance.

*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 51 of chapter 111, as appearing in the 2022 Official Edition, is  
2 hereby amended by adding at the end thereof the following new paragraph:-

3 All acute-care hospitals as defined in section twenty-five B, shall have a registered nurse  
4 holding a current unencumbered license from the board of registration in nursing as a sitting and  
5 voting member of the governing entity responsible for developing the organization’s strategic  
6 plan, structure, systems, policies and programs.

7 SECTION 2. Section 71 of said chapter 111, is hereby amended by adding at the end  
8 thereof the following new paragraph:-

9 All nursing homes shall have a registered nurse holding a current unencumbered license  
10 from the board of registration in nursing as a sitting and voting member of the governing entity  
11 responsible for developing the organization’s strategic plan, structure, systems, policies and  
12 programs.

**HOUSE . . . . . No. 768**

---

**The Commonwealth of Massachusetts**

\_\_\_\_\_

PRESENTED BY:

***Kenneth I. Gordon***

\_\_\_\_\_

*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 certified medical directors at skilled nursing facilities.

\_\_\_\_\_

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Kenneth I. Gordon</i>	<i>21st Middlesex</i>	<i>1/14/2025</i>

**HOUSE . . . . . No. 768**

By Representative Gordon of Bedford, a petition (accompanied by bill, House, No. 768) of Kenneth I. Gordon relative to certified medical directors at skilled nursing facilities. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act relative to certified medical directors at skilled nursing facilities.

*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. For the purposes of this act the following terms shall, unless the context  
2 requires otherwise, have the following meanings:-

3 “Certified medical director”, an individual who has been certified as a certified medical  
4 director by the American Board of Post-Acute and Long-Term Care Medicine or an equivalent  
5 organization, as determined by the department of public health.

6 “Department”, the department of public health.

7 “Skilled nursing facility”, a facility that is licensed pursuant to section 71 of chapter 111  
8 of the General Laws, which primarily provides inpatient skilled nursing care and related services  
9 to patients who require medical, nursing or rehabilitative services but does not provide the level  
10 of care or treatment available in a hospital, including any skilled nursing facility that is operated  
11 as a distinct part of an acute care hospital.

12 SECTION 2. (a) No skilled nursing facility shall contract with a person as a medical  
13 director if the person is not, or will not be within 5 years of the date of initial hire as the facility's  
14 medical director, a certified medical director, except as set forth in subsection (b).

15 (b) A medical director already employed in a skilled nursing facility as of January 1,  
16 2025 shall have until January 1, 2030 to become a certified medical director.

17 SECTION 3. (a) Skilled nursing facilities seeking licensure pursuant to said section 71 of  
18 said chapter 111 shall submit to the department all of the following information on its medical  
19 director upon its initial application for licensure:

20 (1) the criminal history of the medical director;

21 (2) the medical director's resume; and

22 (3) proof of the medical director's certification as a certified medical director or, if the  
23 medical director is not yet certified, the expected date of certification.

24 (c) Skilled nursing facilities shall notify the department of any changes in its medical  
25 director by submitting the information required in subsection (a) within 10 calendar days of said  
26 changes.

27 (d) All skilled nursing facilities shall submit to the department the information required in  
28 subsection (a) no later than June 30, 2026.

29 SECTION 4. Whoever acts as a certified medical director or represents themselves to be  
30 a certified medical director without having been duly certified shall be punished by a fine of not  
31 less than \$500 or by imprisonment in a house of correction for not more than 6 months, or both.

32           SECTION 5. No later than January 1, 2033, the department shall submit a report to the  
33 clerks of the senate and house of representatives and the joint committee on public health. The  
34 report shall include a recommendation on a permanent requirement for skilled nursing facilities  
35 to contract with certified medical directors. The report may also include any other recommended  
36 legislation, regulations, policies or procedures related to certified medical directors.

37           SECTION 6. Sections 1 through 4, inclusive, are hereby repealed.

38           SECTION 7. Section 6 shall take effect on January 1, 2035.

**HOUSE . . . . . No. 772**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Hannah Kane and John C. Velis***

*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 establishing a commission to study the financial abuse of elders.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Hannah Kane</i>	<i>11th Worcester</i>	<i>1/7/2025</i>
<i>John C. Velis</i>	<i>Hampden and Hampshire</i>	<i>1/21/2025</i>
<i>Colleen M. Garry</i>	<i>36th Middlesex</i>	<i>1/25/2025</i>
<i>John R. Gaskey</i>	<i>2nd Plymouth</i>	<i>1/28/2025</i>
<i>Natalie M. Higgins</i>	<i>4th Worcester</i>	<i>2/23/2025</i>
<i>Patrick Joseph Kearney</i>	<i>4th Plymouth</i>	<i>1/22/2025</i>
<i>John J. Marsi</i>	<i>6th Worcester</i>	<i>3/19/2025</i>
<i>Michael O. Moore</i>	<i>Second Worcester</i>	<i>3/6/2025</i>
<i>Alyson M. Sullivan-Almeida</i>	<i>7th Plymouth</i>	<i>2/5/2025</i>
<i>Steven George Xiarhos</i>	<i>5th Barnstable</i>	<i>1/25/2025</i>

**HOUSE . . . . . No. 772**

---

By Representative Kane of Shrewsbury and Senator Velis, a joint petition (accompanied by bill, House, No. 772) of Hannah Kane, John C. Velis and others for an investigation by a special commission (including members of the General Court) relative to the financial abuse of elders. Elder Affairs.

---

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE HOUSE, NO. 632 OF 2023-2024.]

**The Commonwealth of Massachusetts**

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

An Act establishing a commission to study the financial abuse of elders.

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

1                   (a) The Massachusetts General Court shall initiate a commission to study and  
2 draft policies to combat the financial abuse of elders in the Commonwealth.

3                   (1) Said Commission shall have three members of the Massachusetts House of  
4 Representatives, two appointed by the Speaker of the House and one appointed by the Minority  
5 Leader;

6                   (2) Said Commission shall have three members of the Massachusetts Senate,  
7 two appointed by the President of the Senate and one appointed by the Minority Leader;

8                   (3)     Said commission shall have two attorneys, admitted to the Massachusetts  
9 Bar, who specialize in elder and estate law;

10                   (4)     Said Commission shall have a representative from an advocacy group,  
11 operating in Massachusetts, which has a history of advocating for the interests of the elder  
12 population in the Commonwealth;

13                   (5)     Said Commission shall have two representatives who are employed by  
14 Councils on Aging in the Commonwealth or any organization responsible for administering  
15 protective services to elders in the Commonwealth; and

16                   (6)     Said Commission shall have a representative from an association or  
17 advocacy group, operating in Massachusetts, which has a history of advocating on behalf of the  
18 real estate industry.

19                   (7)     Said Commission shall have a representative from an association or  
20 advocacy group, operating in Massachusetts, which has a background in the financial services  
21 industry

22                   (b)     The commission will specifically study

23                   (1)     The economic impact and mechanisms of financial abuse on those over  
24 age 60 in the Commonwealth;

25                   (2)     The lending and refinancing practices of companies who target customers  
26 above the age of 60;

27                   (3)     Exploitative transfers of real estate or other valuable property from  
28 dependent elders to fiduciaries for significantly less than market value;

29                   (4)     Fraudulent or deceptive schemes that target elderly persons in the  
30 Commonwealth through telemarketing, the internet, or other means; and

31                   (5)     Any other form of elder financial abuse.

32                   (c)     Said commission shall file a report that includes policy recommendations  
33 prevent or better protect elders from financial abuse. They shall file their report with the clerk of  
34 either chamber, as well as the Chairmen of the Joint Committee on Elder Affairs and the Joint  
35 Committee on Financial Services, no later than December 31st, 2026.

**HOUSE . . . . . No. 773**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Sally P. Kerans***

*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 transparent name changes in nursing facilities.**

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Sally P. Kerans</i>	<i>13th Essex</i>	<i>1/14/2025</i>

**HOUSE . . . . . No. 773**

---

By Representative Kerans of Danvers, a petition (accompanied by bill, House, No. 773) of Sally P. Kerans relative to transparent name changes in nursing facilities. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act relative to transparent name changes in nursing facilities.

*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. Notwithstanding any other general or special law or regulation, whenever  
2 there is a change of name of any skilled nursing facility or assisted living residence, regardless of  
3 any related ownership change, the safety record of the facility under its previous name shall be  
4 transferred and credited to the facility under its new name. The department shall list the new and  
5 previous name of said facility, including any safety or disciplinary record, on the official website  
6 of said department and shall direct the facility to post the same information on the facility web  
7 site and any other social media platform managed by said facility in order to promote  
8 transparency and public information.

9           SECTION 2. Any skilled nursing facility or assisted living residence that fails to meet the  
10 requirements of section 12 of this act relative to notification of change of name, or fails to meet  
11 the requirements for change of ownership pursuant to the provisions of chapter 197 of the acts of  
12 2024 or department regulations shall be subject to such penalties as the department may direct  
13 through promulgation of enforcement regulations.

**HOUSE . . . . . No. 790**

---

**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 to support quality improvement in nursing homes.**

\_\_\_\_\_

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Thomas M. Stanley</i>	<i>9th Middlesex</i>	<i>1/15/2025</i>

**HOUSE . . . . . No. 790**

By Representative Stanley of Waltham, a petition (accompanied by bill, House, No. 790) of Thomas M. Stanley relative to providing technical assistance to long-term care facilities. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act to support quality improvement in nursing homes.

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

1 Chapter 111 of General Laws is hereby amended by inserting after section 73B the  
2 following section:-

3 Section 73C. (a) The commissioner shall establish a Long-Term Care Facility Quality  
4 Improvement Team that shall be responsible for identifying and providing technical assistance to  
5 long-term care facilities pursuant to section 72E of said chapter 111 as amended by section 14 of  
6 Chapter 197 of the Acts of 2024 that may require interventions to prevent the decline of health  
7 and safety of residents or the disruption of necessary health care services at the long-term care  
8 facility. The Long-Term Care Facility Quality Improvement Team shall comprise of individuals  
9 with relevant expertise in long-term care administration and management, nursing care, infection  
10 prevention, social work, quality improvement, and continuing professional education. The Long-  
11 Term Care Facility Quality Improvement Team’s role shall not include inspection and  
12 enforcement of regulatory standards and the authority to penalize a long-term care facility.

13 (b) The commissioner shall establish specific criteria by which a long-term care facility  
14 may be evaluated for operational and financial soundness, and the thresholds at which it may be  
15 considered to be in operational or financial distress or at risk of operational or financial distress.

16 (c) When a survey or inspection conducted, or complaint received by the department,  
17 through its division of health care facility licensure and certification, or by any other individual  
18 in the department, identifies a long-term care facility at risk of operational or financial distress  
19 based on any of the indicators established pursuant to subsection (b), the commissioner may  
20 dispatch the Long-Term Care Facility Quality Improvement Team to evaluate the long-term care  
21 facility and advise the facility as to any corrective measures it should take to resolve issues  
22 contributing or leading to operational or financial distress.

23 (d) Any facility to which a Long-Term Care Facility Quality Improvement Team is  
24 dispatched shall:

25 (1) cooperate with the team; and

26 (2) grant the team and the Long-Term Care Facility Quality Improvement Team; and  
27 DPH access to all physical plant operations and locations to all financial, operational, and  
28 programmatic information requested thereby.

29 (e) The Commissioner may adopt rules and regulations as are necessary to effectuate the  
30 provisions of this section.

**HOUSE . . . . . No. 793**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Jeffrey Rosario Turco*

*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 protecting the rights of older adults and people with disabilities.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Jeffrey Rosario Turco</i>	<i>19th Suffolk</i>	<i>1/17/2025</i>
<i>John J. Marsi</i>	<i>6th Worcester</i>	<i>4/3/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/18/2025</i>

**HOUSE . . . . . No. 793**

By Representative Turco of Winthrop, a petition (accompanied by bill, House, No. 793) of Jeffrey Rosario Turco relative to the rights of older adults and people with disabilities. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act protecting the rights of older adults and people with disabilities.

*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 72 of chapter 111 of the General Laws, as appearing in the 2020  
2 Official Edition is hereby amended by inserting, at the end thereof, the following:-

3 Notwithstanding any other general or special law, the department shall promulgate  
4 regulations to promote the dignity of residents, both permanent and temporary, of nursing homes  
5 licensed by said department that are equivalent to the protection of rights of residents of facilities  
6 licensed by the department of mental health and the department of developmental disabilities that  
7 shall be effective not later than July 1, 2027.

8 SECTION 2. Chapter 70E of chapter 111 of the general laws, as appearing in the 2020  
9 Official Edition, is hereby amended by inserting after the sentence which reads:

10 “Any person whose rights under this section are violated may bring, in addition to any  
11 other action allowed by law or regulation, a civil action under sections sixty B to sixty E,  
12 inclusive, of chapter two hundred and thirty-one,” the following additional paragraphs:

13           Every nursing home shall establish a Human Rights Committee which shall have the  
14 authority to receive and investigate, or investigate on its own motion, any complaints affecting  
15 the rights of residents. The department shall promulgate regulations regarding the composition,  
16 terms, and duties of said committee, and shall provide annual training for human rights  
17 committee members in its six regions.

18           The Commissioner shall designate not less than two employees per region who shall be  
19 trained in enforcement and resolution of violations of the human rights of nursing home residents  
20 and staff. Said Human Rights Officers shall work with nursing home human rights committees  
21 to provide assistance and support in processing resident complaints.

22           SECTION 3. Chapter 70E of chapter 111 of the general laws, as appearing in the 2020  
23 Official Edition, is hereby amended by inserting at the end thereof, “Rights of Residents shall  
24 include the enumerated rights of nursing home residents, as appearing in the Omnibus Budget  
25 Reform Act of 1987, guaranteed to residents receiving Medicare or Medicaid, and which shall  
26 apply for all residents whether the resident receives Medicare or MassHealth benefits.

**HOUSE . . . . . No. 794**

---

**The Commonwealth of Massachusetts**

\_\_\_\_\_

PRESENTED BY:

***Jeffrey Rosario Turco***

\_\_\_\_\_

*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 clarifying responsibility for policy and budgetary decision-making in nursing homes.

\_\_\_\_\_

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Jeffrey Rosario Turco</i>	<i>19th Suffolk</i>	<i>1/17/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/18/2025</i>

**HOUSE . . . . . No. 794**

By Representative Turco of Winthrop, a petition (accompanied by bill, House, No. 794) of Jeffrey Rosario Turco relative to policy and budgetary decision-making in nursing homes. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act clarifying responsibility for policy and budgetary decision-making in nursing homes.

*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 115 of chapter 112 of the general laws as appearing in the 2022  
2 Official Edition is hereby amended by inserting after subsection (e) the following new subsection  
3 (f) Any person licensed as a nursing home administrator, or acting in the capacity of a  
4 nursing home administrator shall certify under the pains and penalties of perjury at the  
5 commencement of the fiscal year of the facility for which they are the administrator that the  
6 facility’s budget and staffing are sufficient to meet the regular and customary operational needs  
7 of the facility including, but not limited to meeting the care needs of all residents then residing in  
8 such facility. Said certification shall be counter-signed by the designated medical director for  
9 such facility in accordance with Center for Medicare and Medicaid Operations Manual 100.07,  
10 section 483 (i).

11 For purposes of this act, “care needs,” shall mean the sum total of the programs, services,  
12 staffing, dietary, recreational, rehabilitative, and medical equipment identified in the care plans

13 of each resident including, but not limited to the apportioned cost of all aspects of housing and  
14 management for said residents.

15 SECTION 2. Said subsection 115, is hereby further amended by adding the following  
16 new subsection:

17 (g) Whenever a nursing home administrator licensed pursuant to the laws and regulations  
18 of the Commonwealth and its agencies, fails to assent to the sufficiency of the facility budget,  
19 said licensee shall be suspended by the board of registration of nursing home administrators  
20 subject to such further disciplinary action as circumstances may require.

21 It shall not be an acceptable reason for failure to sign an affidavit of sufficiency of the  
22 budget of the facility for the nursing home administrator, or person acting in such capacity, to  
23 claim that corporate management of the facility had approved the budget without regard to the  
24 certification of sufficiency by the facility administrator. If, in the absence of an affidavit of  
25 sufficiency signed by the administrator and counter-signed by the medical director, the facility  
26 shall be prohibited from accepting any new residents until such affidavit is submitted to the  
27 satisfaction of the department of public health.

28 SECTION 3. If, upon determination by the department of public health, it appears that  
29 the budget of any facility licensed pursuant to the provisions of chapter 111 of the general laws  
30 as appearing in the 2022 Official Edition, is insufficient to meet the care needs of the residents,  
31 said department shall, after public hearing, may apply sanctions upon the facility up to, and  
32 including, revocation of the facility license or receivership. The department of public health is  
33 hereby authorized and directed to promulgate regulations to implement this provision.

34           SECTION 4. Said chapter 111, is hereby amended, by inserting Any adverse event or  
35 events that are found by said department to have adversely affected the health, safety or lives of  
36 residents, as the direct or indirect result of operating a facility with an insufficient budget, shall  
37 be considered the responsibility of the nursing home administrator and/or the medical director if  
38 there is a signed affidavit of budget sufficiency, or in the case of operation without a signed  
39 affidavit of sufficiency, to owners of the facility of record, may be held criminal and civil liable  
40 for such adverse event or events.

41           SECTION 5. The department of public health shall develop appropriate regulations to  
42 implement the provisions of section 6 of this act not later than July 1, 2027.

**HOUSE . . . . . No. 795**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Jeffrey Rosario Turco*

*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 promoting infection prevention and privacy for residents of nursing homes.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Jeffrey Rosario Turco</i>	<i>19th Suffolk</i>	<i>1/17/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/18/2025</i>

**HOUSE . . . . . No. 795**

---

By Representative Turco of Winthrop, a petition (accompanied by bill, House, No. 795) of Jeffrey Rosario Turco relative to single-occupancy rooms in nursing homes. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act promoting infection prevention and privacy for residents of nursing homes.

*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. Subsection (g) of Section 70E of chapter 111 of the general laws as  
2 appearing in the 2022 Official Edition is hereby amended by striking the remainder of the  
3 sentence after the words, “other rendering of care,” and inserting the following:

4           “and in their assigned room, including, but not limited to being the sole resident of such  
5 room, unless said resident, or their guardian or health care proxy, mutually agrees to share the  
6 room with a spouse or not more than one other resident, and that in the absence of a second  
7 resident, the bathroom is not shared with any other person.”

8           SECTION 2. The executive office of health and human services shall, if necessary, seek  
9 federal approval for any appropriate increase in rates for such single-occupancy rooms.

10           SECTION 3. The department of public health shall promulgate appropriate regulations to  
11 promote the use of single rooms and single bathrooms in every licensed facility in the  
12 Commonwealth.

13           SECTION 4. This act shall apply to any new or substantial renovation, of a licensed  
14 facility. Every facility that holds a valid license as of the effective date of this act shall be  
15 allowed not more than three years from the date of this act to achieve compliance with the  
16 provisions herein.

17           SECTION 5. Subsection (e) of said section 35TTT of chapter 10, as amended by chapter  
18 197 of the acts of 2024, is hereby amended by inserting after the word, “facilities,” the following  
19 words, “provided, however, that priority shall be given to projects that are intended to  
20 reconfigure facilities to provide single occupancy rooms for residents.

**HOUSE . . . . . No. 797**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Steven Ultrino*

*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 requiring the certification of medical directors in skilled nursing facilities.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Steven Ultrino</i>	<i>33rd Middlesex</i>	<i>1/15/2025</i>
<i>Jacob R. Oliveira</i>	<i>Hampden, Hampshire and Worcester</i>	<i>3/12/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/14/2025</i>

**HOUSE . . . . . No. 797**

By Representative Ultrino of Malden, a petition (accompanied by bill, House, No. 797) of Steven Ultrino for legislation to require the certification of medical directors in skilled nursing facilities. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act requiring the certification of medical directors in skilled nursing facilities.

*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. Chapter 111 of the general laws, as appearing in the 2020 Official Edition,  
2 is hereby amended by inserting after section H, the following new section:

3 Section 1. 70 I. Certification of Medical Directors of Skilled Nursing Facilities

4 For the purposes of this act the following terms shall, unless the context requires  
5 otherwise, have the following meanings:-

6 “Certified medical director”, an individual who has been certified as a certified medical  
7 director by the American Board of Post-Acute and Long-Term Care Medicine or an equivalent  
8 organization, as determined by the department of public health.

9 “Department”, the department of public health.

10           “Medical Director,” is a physician licensed by the Commonwealth and appointed as a  
11 medical director of a nursing home pursuant to the requirements of section 483.75 (i) of the CMS  
12 Manual 100.07, appendix PP/F501, and any subsequent revisions thereto.

13           “Skilled nursing facility”, a facility that is licensed pursuant to section 71 of chapter 111  
14 of the General Laws, which primarily provides inpatient skilled nursing care and related services  
15 to patients who require medical, nursing or rehabilitative services but does not provide the level  
16 of care or treatment available in a hospital, including any skilled nursing facility that is operated  
17 as a distinct part of an acute care hospital.

18           SECTION 2. (a) No skilled nursing facility shall contract with a person as a medical  
19 director if the person is not, or will not be within 5 years of the date of initial hire as the facility’s  
20 medical director, a certified medical director, except as set forth in subsection (b).

21           (b) A medical director already employed in a skilled nursing facility as of January 1,  
22 2027 shall have until January 1, 2030 to become a certified medical director.

23           SECTION 3. (a) Skilled nursing facilities seeking licensure pursuant to said section 71 of  
24 said chapter 111 shall submit to the department all of the following information on its medical  
25 director upon its original or renewal application for licensure, said information to be considered a  
26 public record:

27           (1) results of a criminal background check for the medical director;

28           (2) the medical director’s resume; and

29           (3) proof of the medical director’s certification as a certified medical director or, if the  
30 medical director is not yet certified, the expected date of certification.

31 (c) Skilled nursing facilities shall notify the department of any changes in its medical  
32 director by submitting the information required in subsection (a) within 10 calendar days of said  
33 changes.

34 (d) All skilled nursing facilities shall submit to the department the information required in  
35 subsection (a) no later than June 30, 2027.

36 SECTION 4. Whoever acts as a certified medical director or represents themselves to be  
37 a certified medical director without having been duly certified shall be punished by a fine of not  
38 less than \$500. Each day that such person shall act or represent themselves as certified shall  
39 constitute a separate violation.

40 SECTION 5. Skilled nursing facilities licensed pursuant to the provisions of chapter 111  
41 of the general laws as appearing in the 2022 Official Edition shall annually certify to the  
42 department of public health under the pains and penalties of perjury the name and contact  
43 information for the person designated by said facility as its medical director, and that said  
44 director is the primary agent of the facility responsible for (i) implementation of resident care  
45 policies, and (ii) the coordination of medical care in said facility.

46 The facility shall identify specifically how the designated medical director is expected to  
47 fulfill their responsibilities to effectively implement resident care policies and coordinate  
48 medical care for residents of said facility. The facility shall give evidence at the time of any  
49 inspection by the department that all responsibilities of said director are effectively performed to  
50 ensure that residents attain or maintain their highest practicable physical, mental, and  
51 psychosocial well-being.

52           SECTION 6. The medical director designated in accordance with the provisions of this  
53 act, shall report to the department of public health whenever in their opinion the management or  
54 ownership of the facility has failed to fully address any issue designated by such medical director  
55 which appears to be harmful or potentially harmful to one or more residents or staff, such report  
56 to be considered public record.

57           SECTION 7. Said medical director designated in accordance with the provisions of this  
58 act, shall report to the resident and family council of such facility, if any, not less than twice a  
59 year. In the absence of a resident and family council, the medical director shall report annually  
60 to the department such information as the department, by regulation, believes shall provide  
61 evidence of patient-centered care, quality and safety.

**HOUSE . . . . . No. 798**

---

**The Commonwealth of Massachusetts**

\_\_\_\_\_

PRESENTED BY:

***Thomas P. Walsh***

\_\_\_\_\_

*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 requiring dignity, privacy, and safety for residents in nursing homes and rest homes.

\_\_\_\_\_

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Thomas P. Walsh</i>	<i>12th Essex</i>	<i>1/15/2025</i>

**HOUSE . . . . . No. 798**

---

By Representative Walsh of Peabody, a petition (accompanied by bill, House, No. 798) of Thomas P. Walsh relative to the dignity, privacy, and safety of residents in nursing homes and rest homes. Elder Affairs.

---

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE HOUSE, NO. 655 OF 2023-2024.]

**The Commonwealth of Massachusetts**

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

An Act requiring dignity, privacy, and safety for residents in nursing homes and rest homes.

*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. Pursuant to the provisions of section 3, of chapter 111 of the General Laws, as  
2    appearing in the 2022 Official Edition, the department shall promulgate regulations providing  
3    that each nursing home and rest home as defined in section 71 of said chapter 111, shall submit a  
4    plan to the department demonstrating how said facility shall treat all residents with dignity at all  
5    times, and shall demonstrate that treatment of residents with dignity shall be the basis of any  
6    rules and regulations and in training and orientation of all staff.

7           Section 2. Said plan shall demonstrate how such facility shall guarantee single occupancy  
8    rooms to all residents with individual lavatory for each room not later than July 1, 2027. The  
9    department may provide an extension of said deadline provided that the applicant demonstrates  
10   good faith effort toward compliance within a reasonable time period.

11 Section 3. No resident of a nursing home or rest home shall be compelled to live in a  
12 room with a roommate, provided, however, a resident may opt to share a room under the  
13 following circumstances.

14 a. Married couples or partners

15 b. Family members who choose to share a room

16 c. Individual whose treatment plan indicate that they need the stimulation to minimize  
17 health deterioration.

18 A semi-private room shall be defined by regulation promulgated by the department, but  
19 shall be sufficiently spacious to provide privacy for each resident, space for facility equipment,  
20 beds, supplies, television, personal item and clothing storage and seating for visitors.

21 Section 4. Said nursing home or rest home shall provide that residents shall be given the  
22 option of in room dining at no additional increase in fees.

23 Section 5. No nursing home or rest home shall permit three or more residents per room.

24 Section 6. Penalties. Failure of a nursing home or rest home to comply with the  
25 provisions of this chapter, unless a waiver of the deadline as provided in section 2, shall be  
26 determined to be deficient and a fine of \$1,000 dollars per day for each room determined to be  
27 deficient.

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 479

**TITLE** An Act to improve transparency and accountability for residents of long-term care

**SPONSORS** Senators Lovely, Comerford, and Eldridge

**CURRENT LAW**

M.G.L. c.111 § 70E; c. 10 § 35TT

**SUMMARY**

This bill seeks to enhance the availability of single-occupancy rooms in licensed health care facilities across Massachusetts. It amends specific regulations to ensure that residents have the option to be the sole occupants of their rooms unless they choose to share with a spouse or one other resident, with a mandate on sharing bathroom facilities only if a second resident is present. The bill instructs the executive office of health and human services to pursue any required federal approvals for rate changes associated with single-occupancy accommodations. Additionally, the Department of Public Health is given the responsibility of formulating regulations to promote single-room and single-bathroom use in all licensed facilities. The bill stipulates that existing facilities must comply within three years from the date of enactment, with the requirements applicable to both new constructions and major renovations. Moreover, the bill revises funding guidelines to give priority to projects focused on creating single-occupancy rooms, reflecting changes in subsection (e) of section 35TTT of chapter 10 (as amended by chapter 197 of the acts of 2024)..

**SENATE . . . . . No. 479**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Joan B. Lovely*

*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 to improve transparency and accountability for residents of long-term care.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Joan B. Lovely</i>	<i>Second Essex</i>	
<i>Joanne M. Comerford</i>	<i>Hampshire, Franklin and Worcester</i>	<i>1/31/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/9/2025</i>

**SENATE . . . . . No. 479**

---

---

By Ms. Lovely, a petition (accompanied by bill, Senate, No. 479) of Joan B. Lovely and Joanne M. Comerford for legislation to improve transparency and accountability for residents of long-term care. Elder Affairs.

---

---

**The Commonwealth of Massachusetts**

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

An Act to improve transparency and accountability for residents of long-term care.

*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. Subsection (g) of Section 70E of chapter 111 of the general laws as  
2 appearing in the 2022 Official Edition is hereby amended by striking the remainder of the  
3 sentence after the words, “other rendering of care,” and inserting the following:

4           “and in their assigned room, including, but not limited to being the sole resident of such  
5 room, unless said resident, or their guardian or health care proxy, mutually agrees to share the  
6 room with a spouse or not more than one other resident, and that in the absence of a second  
7 resident, the bathroom is not shared with any other person.”

8           SECTION 2. The executive office of health and human services shall, if necessary, seek  
9 federal approval for any appropriate increase in rates for such single-occupancy rooms.

10           SECTION 3. The department of public health shall promulgate appropriate regulations to  
11 promote the use of single rooms and single bathrooms in every licensed facility in the  
12 Commonwealth.

13           SECTION 4. This act shall apply to any new or substantial renovation, of a licensed  
14 facility. Every facility that holds a valid license as of the effective date of this act shall be  
15 allowed not more than three years from the date of this act to achieve compliance with the  
16 provisions herein.

17           SECTION 5. Subsection (e) of said section 35TTT of chapter 10, as amended by chapter  
18 197 of the acts of 2024, is hereby amended by inserting after the word, “facilities,” the following  
19 words, “provided, however, that priority shall be given to projects that are intended to  
20 reconfigure facilities to provide single occupancy rooms for residents.

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 480

**TITLE** An Act promoting infection prevention and privacy for residents of nursing homes

**SPONSORS** Senators Lovely, Keenan, and Eldridge

**SIMILAR MATTERS** H.795 (Rep. Turco)

### **CURRENT LAW**

M.G.L. c. 111 § 70E and M.G.L. c. 10 § 35TTT

### **SUMMARY**

The bill focuses on enhancing resident privacy in licensed health care facilities throughout the Commonwealth by mandating single occupancy rooms. It amends Section 70E of Chapter 111 to ensure that residents can occupy a single room unless they or their authorized representatives consent to share under specific, mutually agreed conditions. Bathrooms within these rooms must not be shared with individuals outside of an agreed roommate situation. The executive office of health and human services is responsible for obtaining federal approval for any necessary rate increases to accommodate this change. The department of public health is charged with creating regulations to promote the use of single rooms and bathrooms in licensed facilities. This requirement applies to new and significantly renovated facilities, while existing facilities have a three-year compliance window. Furthermore, the bill adjusts Section 35TTT of Chapter 10 (as amended by chapter 197 of the acts of 2024) to prioritize funding for projects focused on reconfiguring facilities to offer single-occupancy rooms.

**SENATE . . . . . No. 480**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Joan B. Lovely*

*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 promoting infection prevention and privacy for residents of nursing homes.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Joan B. Lovely</i>	<i>Second Essex</i>	
<i>John F. Keenan</i>	<i>Norfolk and Plymouth</i>	<i>4/2/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>6/16/2025</i>

**SENATE . . . . . No. 480**

---

---

By Ms. Lovely, a petition (accompanied by bill, Senate, No. 480) of Joan B. Lovely for legislation to promote infection prevention and privacy for residents of nursing homes. Elder Affairs.

---

---

**The Commonwealth of Massachusetts**

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

An Act promoting infection prevention and privacy for residents of nursing homes.

*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. Subsection (g) of Section 70E of chapter 111 of the general laws as  
2 appearing in the 2022 Official Edition is hereby amended by striking the remainder of the  
3 sentence after the words, “other rendering of care,” and inserting the following:

4           “and in their assigned room, including, but not limited to being the sole resident of such  
5 room, unless said resident, or their guardian or health care proxy, mutually agrees to share the  
6 room with a spouse or not more than one other resident, and that in the absence of a second  
7 resident, the bathroom is not shared with any other person.”

8           SECTION 2. The executive office of health and human services shall, if necessary, seek  
9 federal approval for any appropriate increase in rates for such single-occupancy rooms.

10           SECTION 3. The department of public health shall promulgate appropriate regulations to  
11 promote the use of single rooms and single bathrooms in every licensed facility in the  
12 Commonwealth.

13           SECTION 4. This act shall apply to any new or substantial renovation, of a licensed  
14 facility. Every facility that holds a valid license as of the effective date of this act shall be  
15 allowed not more than three years from the date of this act to achieve compliance with the  
16 provisions herein.

17           SECTION 5. Subsection (e) of said section 35TTT of chapter 10, as amended by chapter  
18 197 of the acts of 2024, is hereby amended by inserting after the word, “facilities,” the following  
19 words, “provided, however, that priority shall be given to projects that are intended to  
20 reconfigure facilities to provide single occupancy rooms for residents.

# Joint Committee on Aging and Independence

## Bill Summary

---

<b><u>BILL NUMBER</u></b>	Senate, No. 483
<b><u>TITLE</u></b>	An Act providing for certification of skilled nursing facility medical directors
<b><u>SPONSORS</u></b>	Senator Montigny
<b><u>SIMILAR MATTERS</u></b>	S.488 (Sen. Oliveira); H.768 (Rep. Gordon); H.797 (Rep. Ultrino)

### **PRIOR HISTORY**

2023-2024: S.389 referred to the joint committee on Elder Affairs and accompanied a senate study order.

### **CURRENT LAW**

M.G.L. c. 111 § 71

### **SUMMARY**

The bill requires that a skilled nursing facility to hire medical director for the facility who is a certified medical director or will be within 5 years. A medical director already employed in a skilled nursing facility as of January 1, 2027 shall have until January 1, 2030 to become a certified medical director. Facilities seeking licensure shall submit the medical director's background information to the department of public health.

**SENATE . . . . . No. 483**

---

**The Commonwealth of Massachusetts**

\_\_\_\_\_

PRESENTED BY:

***Mark C. Montigny***

\_\_\_\_\_

*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 providing for certification of skilled nursing facility medical directors.

\_\_\_\_\_

PETITION OF:

NAME:

*Mark C. Montigny*

DISTRICT/ADDRESS:

*Second Bristol and Plymouth*

**SENATE . . . . . No. 483**

---

---

By Mr. Montigny, a petition (accompanied by bill, Senate, No. 483) of Mark C. Montigny for legislation to provide for certification of skilled nursing facility medical directors. Elder Affairs.

---

---

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 389 OF 2023-2024.]

**The Commonwealth of Massachusetts**

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

An Act providing for certification of skilled nursing facility medical directors.

*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. For the purposes of this act the following terms shall, unless the context  
2 requires otherwise, have the following meanings:-

3           “Certified medical director”, an individual who has been certified as a certified medical  
4 director by the American Board of Post-Acute and Long-Term Care Medicine or an equivalent  
5 organization, as determined by the department of public health.

6           “Department”, the department of public health.

7           “Skilled nursing facility”, a facility that is licensed pursuant to section 71 of chapter 111  
8 of the General Laws, which primarily provides inpatient skilled nursing care and related services  
9 to patients who require medical, nursing or rehabilitative services but does not provide the level

10 of care or treatment available in a hospital, including any skilled nursing facility that is operated  
11 as a distinct part of an acute care hospital.

12 SECTION 2. (a) No skilled nursing facility shall contract with a person as a medical  
13 director if the person is not, or will not be within 5 years of the date of initial hire as the facility's  
14 medical director, a certified medical director, except as set forth in subsection (b).

15 (b) A medical director already employed in a skilled nursing facility as of January 1,  
16 2027 shall have until January 1, 2030 to become a certified medical director.

17 SECTION 3. (a) Skilled nursing facilities seeking licensure pursuant to said section 71 of  
18 said chapter 111 shall submit to the department all of the following information on its medical  
19 director upon its original or renewal application for licensure:

20 (1) results of a criminal background check for the medical director;

21 (2) the medical director's resume; and

22 (3) proof of the medical director's certification as a certified medical director or, if the  
23 medical director is not yet certified, the expected date of certification.

24 (c) Skilled nursing facilities shall notify the department of any changes in its medical  
25 director by submitting the information required in subsection (a) within 10 calendar days of said  
26 changes.

27 (d) All skilled nursing facilities shall submit to the department the information required in  
28 subsection (a) no later than June 30, 2027.

29           SECTION 4. Whoever acts as a certified medical director or represents themselves to be  
30 a certified medical director without having been duly certified shall be punished by a fine of not  
31 less than \$500 or by imprisonment in a house of correction for not more than 6 months, or both.

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 485

**TITLE** An Act to establish safe staffing levels at skilled nursing facilities

**SPONSORS** Senator Montigny

### **PRIOR HISTORY**

2023-2024: S.394 (Montigny) referred to the joint committee on Elder Affairs and accompanied a senate study order.

2021-2022: S423 (Montigny) was referred to the joint committee on Elder Affairs and accompanied a new draft, H4780 (An Act to improve quality and oversight of long-term care).

### **CURRENT LAW**

105 CMR 150.001; 105 CMR 150.007

### **SUMMARY**

The bill requires the department of public health to establish, in regulations, minimum safe staffing levels at skilled nursing facilities and long term care facilities to ensure that these facilities employ an adequate number of nurses, certified nurse assistants, and other staff to meet all resident needs and ensure that sufficient nursing staff with the appropriate competencies is working at any given time to assure resident safety.

**SENATE . . . . . No. 485**

---

**The Commonwealth of Massachusetts**

\_\_\_\_\_

PRESENTED BY:

***Mark C. Montigny***

\_\_\_\_\_

*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 to establish safe staffing levels at skilled nursing facilities.

\_\_\_\_\_

PETITION OF:

NAME:

*Mark C. Montigny*

DISTRICT/ADDRESS:

*Second Bristol and Plymouth*

**SENATE . . . . . No. 485**

---

By Mr. Montigny, a petition (accompanied by bill, Senate, No. 485) of Mark C. Montigny for legislation to establish safe staffing levels at skilled nursing facilities. Elder Affairs.

---

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 394 OF 2023-2024.]

**The Commonwealth of Massachusetts**

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

An Act to establish safe staffing levels at skilled nursing facilities.

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

1           The department of public health shall establish minimum staffing requirements at skilled  
2 nursing care facilities and for all level I, II and III long-term care facilities as defined in 105  
3 CMR 150.001. Working with 1199SEIU and other appropriate stakeholders, the department shall  
4 develop amendments to the existing nursing services regulations contained in 105 CMR 150.007  
5 that ensure these facilities employ an adequate number of nurses, certified nurse assistants, and  
6 other staff to both meet all resident needs and ensure that sufficient nursing staff with the  
7 appropriate competencies is working at any given time to assure resident safety and attain or  
8 maintain the highest practicable physical, mental, and psychosocial well-being of each resident,  
9 as determined by resident assessments and individual plans of care. Said amended regulations  
10 shall include specific standards, including but not limited to, a minimum 4.1 hours of care per

11 patient per day as well as direct-care staff-to-resident ratios to ensure consistent delivery of  
12 quality care in a safe and sanitary facility.

13 The department shall issue public recommendations on these issues no later than six  
14 months following final passage of this act.

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 488

**TITLE** An Act requiring the certification of medical directors in skilled nursing facilities

**SPONSORS** Senators Oliveira, Comerford, and Eldridge

**SIMILAR MATTERS** S.483 (Montigny); H. 768 (Rep. Gordon); H.797 (Rep. Ultrino)

**CURRENT LAW**

M.G.L. c. 111 § 71

**SUMMARY**

This bill would require that within a reasonable time, all nursing facility medical directors are certified and publicly identified to ensure safe, high quality resident care. Non-compliance would be subject to a \$500 fine.

**SENATE . . . . . No. 488**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Jacob R. Oliveira***

*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 requiring the certification of medical directors in skilled nursing facilities.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Jacob R. Oliveira</i>	<i>Hampden, Hampshire and Worcester</i>	
<i>Joanne M. Comerford</i>	<i>Hampshire, Franklin and Worcester</i>	<i>1/30/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/11/2025</i>

**SENATE . . . . . No. 488**

By Mr. Oliveira, a petition (accompanied by bill, Senate, No. 488) of Jacob R. Oliveira and Joanne M. Comerford for legislation to require the certification of medical directors in skilled nursing facilities. Elder Affairs.

**The Commonwealth of Massachusetts**

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

An Act requiring the certification of medical directors in skilled nursing facilities.

*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. For the purposes of this act the following terms shall, unless the context  
2 requires otherwise, have the following meanings:-

3 “Certified medical director”, an individual who has been certified as a certified medical  
4 director by the American Board of Post-Acute and Long-Term Care Medicine or an equivalent  
5 organization, as determined by the department of public health.

6 “Department”, the department of public health.

7 “Medical Director,” is a physician licensed by the Commonwealth and appointed as a  
8 medical director of a nursing home pursuant to the requirements of section 483.75 (i) of the CMS  
9 Manual 100.07, appendix PP/F501, and any subsequent revisions thereto.

10 “Skilled nursing facility”, a facility that is licensed pursuant to section 71 of chapter 111  
11 of the General Laws, which primarily provides inpatient skilled nursing care and related services

12 to patients who require medical, nursing or rehabilitative services but does not provide the level  
13 of care or treatment available in a hospital, including any skilled nursing facility that is operated  
14 as a distinct part of an acute care hospital.

15 SECTION 2. (a) No skilled nursing facility shall contract with a person as a medical  
16 director if the person is not, or will not be within 5 years of the date of initial hire as the facility's  
17 medical director, a certified medical director, except as set forth in subsection (b).

18 (b) A medical director already employed in a skilled nursing facility as of January 1,  
19 2027 shall have until January 1, 2030 to become a certified medical director.

20 SECTION 3. (a) Skilled nursing facilities seeking licensure pursuant to said section 71 of  
21 said chapter 111 shall submit to the department all of the following information on its medical  
22 director upon its original or renewal application for licensure, said information to be considered a  
23 public record:

24 (1) results of a criminal background check for the medical director;

25 (2) the medical director's resume; and

26 (3) proof of the medical director's certification as a certified medical director or, if the  
27 medical director is not yet certified, the expected date of certification.

28 (c) Skilled nursing facilities shall notify the department of any changes in its medical  
29 director by submitting the information required in subsection (a) within 10 calendar days of said  
30 changes.

31 (d) All skilled nursing facilities shall submit to the department the information required in  
32 subsection (a) no later than June 30, 2027.

33 SECTION 4. Whoever acts as a certified medical director or represents themselves to be  
34 a certified medical director without having been duly certified shall be punished by a fine of not  
35 less than \$500. Each day that such person shall act or represent themselves as certified shall  
36 constitute a separate violation.

37 SECTION 5. Skilled nursing facilities licensed pursuant to the provisions of chapter 111  
38 of the general laws as appearing in the 2022 Official Edition shall annually certify to the  
39 department of public health under the pains and penalties of perjury the name and contact  
40 information for the person designated by said facility as its medical director, and that said  
41 director is the primary agent of the facility responsible for (i) implementation of resident care  
42 policies, and (ii) the coordination of medical care in said facility.

43 The facility shall identify specifically how the designated medical director is expected to  
44 fulfill their responsibilities to effectively implement resident care policies and coordinate  
45 medical care for residents of said facility. The facility shall give evidence at the time of any  
46 inspection by the department that all responsibilities of said director are effectively performed to  
47 ensure that residents attain or maintain their highest practicable physical, mental, and  
48 psychosocial well-being

49 SECTION 6. The medical director designated in accordance with the provisions of this  
50 act, shall report to the department of public health whenever in their opinion the management or  
51 ownership of the facility has failed to fully address any issue designated by such medical director  
52 which appears to be harmful or potentially harmful to one or more residents or staff, such report  
53 to be considered public record.

54           SECTION 7. Said medical director designated in accordance with the provisions of this  
55 act, shall report to the resident and family council of such facility, if any, not less than twice a  
56 year. In the absence of a resident and family council, the medical director shall report annually  
57 to the department such information as the department, by regulation, believes shall provide  
58 evidence of patient-centered care, quality and safety.

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 492

**TITLE** An Act protecting the rights of older adults and people with disabilities

**SPONSORS** Senators Tarr, Durant, and Eldridge

**SIMILAR MATTERS** H.793 (Rep.Turco)

### **CURRENT LAW**

M.G.L. c. 111 § 72 ; Chapter 70E of chapter 111

### **SUMMARY**

The bill sets out to promote the dignity of residents in nursing homes licensed by the Department of Public Health. . The bill establishes that every nursing home shall have a Human Rights Committee, which has the authority to receive and investigate any complaints affecting the rights of residents.

**SENATE . . . . . No. 492**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Bruce E. Tarr***

*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 protecting the rights of older adults and people with disabilities.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Bruce E. Tarr</i>	<i>First Essex and Middlesex</i>	
<i>Peter J. Durant</i>	<i>Worcester and Hampshire</i>	<i>3/17/2025</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>6/12/2025</i>

**SENATE . . . . . No. 492**

---

By Mr. Tarr, a petition (accompanied by bill, Senate, No. 492) of Bruce E. Tarr for legislation to protect the rights of older adults and people with disabilities in nursing homes. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act protecting the rights of older adults and people with disabilities.

*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 72 of chapter 111 of the General Laws, as appearing in the 2022  
2 Official Edition is hereby amended by inserting, at the end thereof, the following:-

3           Notwithstanding any other general or special law, the department shall promulgate  
4 regulations to promote the dignity of residents, both permanent and temporary, of nursing homes  
5 licensed by said department that are equivalent to the protection of rights of residents of facilities  
6 licensed by the department of mental health and the department of developmental disabilities that  
7 shall be effective not later than July 1, 2027.

8           SECTION 2. Chapter 70E of chapter 111 of the general laws, as appearing in the 2022  
9 Official Edition, is hereby amended by inserting after the sentence which reads: “Any person  
10 whose rights under this section are violated may bring, in addition to any other action allowed by  
11 law or regulation, a civil action under sections sixty B to sixty E, inclusive, of chapter two  
12 hundred and thirty-one,” the following additional paragraphs:-

13           Every nursing home shall establish a Human Rights Committee which shall have the  
14 authority to receive and investigate, or investigate on its own motion, any complaints affecting  
15 the rights of residents. The department shall promulgate regulations regarding the composition,  
16 terms, and duties of said committee, and shall provide annual training for human rights  
17 committee members in its six regions.

18           The Commissioner shall designate not less than two employees per region who shall be  
19 trained in enforcement and resolution of violations of the human rights of nursing home residents  
20 and staff. Said Human Rights Officers shall work with nursing home human rights committees  
21 to provide assistance and support in processing resident complaints.

22           SECTION 3. Chapter 70E of chapter 111 of the general laws, as appearing in the 2022  
23 Official Edition, is hereby amended by inserting at the end thereof, "Rights of Residents shall  
24 include the enumerated rights of nursing home residents, as appearing in the Omnibus Budget  
25 Reform Act of 1987, guaranteed to residents receiving Medicare or Medicaid, and which shall  
26 apply for all residents whether the resident receives Medicare or MassHealth benefits."

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 493

**TITLE** An Act to strengthen the long-term care workforce and capital trust fund

**SPONSORS** Senators Tarr and Eldridge

**SIMILAR MATTERS** H.761 (Rep. Cruz)

### **CURRENT LAW**

M.G.L. c. 10 § 35TTT , as most recently amended by chapter 197 of the acts of 2024

### **SUMMARY**

This bill seeks to amend the Long-Term Care Workforce and Capital Trust Fund by first designating any non-state employee members of the advisory committee as "special state employees". Secondly, the bill seeks to modify the capital loan eligibility for the fund in two ways 1) by limiting no-interest or forgivable capital loans to not-for-profit entities only, and 2) by allowing for funding of the construction of small, free-standing nursing homes that serve fewer than fourteen residents.

**SENATE . . . . . No. 493**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Bruce E. Tarr***

*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 to strengthen the long-term care workforce and capital trust fund.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Bruce E. Tarr</i>	<i>First Essex and Middlesex</i>	
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>7/14/2025</i>

**SENATE . . . . . No. 493**

---

By Mr. Tarr, a petition (accompanied by bill, Senate, No. 493) of Bruce E. Tarr for legislation to strengthen the long-term care workforce and capital trust fund. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act to strengthen the long-term care workforce and capital trust fund.

*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. Subsection (c ) of section 35TTT of chapter 10 of the general laws, as most  
2 recently amended by chapter 197 of the acts of 2024, is hereby further amended at the end  
3 thereof the following:-

4           “Members of said advisory committee, who are not state employees, shall be deemed  
5 “special state employees,” pursuant to the provisions of chapter 268a of the general laws as  
6 appearing in the 2020 Official Edition.”

7           SECTION 2. Said subsection (e) of said section 35TTT of chapter 10, as amended by  
8 chapter 197 of the acts of 2024, is hereby amended by inserting after the word, “facilities,” the  
9 following:- “provided, however, that eligibility for any such no interest or forgivable capital loan  
10 shall be limited to not-for-profit entities;" and by inserting in the same subsection, after the  
11 words “regional entities," the following: “ and (D) for the construction of free-standing small

- 12 house nursing homes serving less than fourteen residents, and operated in collaboration with
- 13 home and community-based supports and services.”

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 494

**TITLE** An Act relative to nursing home policies regarding notice of vacancy

**SPONSORS** Senator Velis

**CURRENT LAW**

M.G.L. c. 19D § 9

**SUMMARY**

This bill would prevent nursing homes from charging a full month's rent after a resident has passed away.

**SENATE . . . . . No. 494**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*John C. Velis*

*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 nursing home policies regarding notice of vacancy.

PETITION OF:

NAME:

*John C. Velis*

DISTRICT/ADDRESS:

*Hampden and Hampshire*

**SENATE . . . . . No. 494**

---

By Mr. Velis, a petition (accompanied by bill, Senate, No. 494) of John C. Velis for legislation relative to nursing home policies regarding notice of vacancy. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act relative to nursing home policies regarding notice of vacancy.

*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 9 of Chapter 19D of the General Laws is hereby amended by  
2 inserting after subsection (b) the following subsection:-

3           (c) An assisted living residence shall not enforce a 30-day notice of vacancy policy in the  
4 event of the resident's death. The assisted living residence shall be entitled to rent and fees for  
5 not more than 10 days from the date of the resident's death. If there is personal property to  
6 remove that impedes the reuse of the room, the 10-day period shall not begin until after the  
7 family, estate, or responsible party has removed the deceased person's personal property. If the  
8 room is occupied by a new resident before the expiration of the 10-day period, rent and fees for  
9 the 10-day period shall be prorated from the date of such occupancy and returned to the family,  
10 estate, or other responsible party.

11           SECTION 2. This act shall take effect 60 days after its passage.

# Joint Committee on Aging and Independence

## Bill Summary

---

**BILL NUMBER** Senate, No. 496

**TITLE** An Act clarifying responsibility for policy and budgetary decision-making in nursing homes

**SPONSORS** Senators Velis and Eldridge

**SIMILAR MATTERS** H.794 (Rep. Turco)

### **CURRENT LAW**

M.G.L. c. 112 § 115 ; M.G.L. c. 111

### **SUMMARY**

The purpose of this act is to ensure that skilled nursing facilities shall operate with budgets sufficient to meet the staffing and care needs of their residents and to explicitly hold the nursing home administrator and medical director or owners responsible for any adverse events that impact the quality and care of residents. The concept of responsibility for the health and safety of nursing home residents is based on the opinion of the justices of the Massachusetts Supreme Judicial Court in the case of Commonwealth vs. David Clinton (the finding of responsibility in the matter of the Holyoke Soldiers Home tragedy) in which decisions of top management were found liable.

**SENATE . . . . . No. 496**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

*John C. Velis*

*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 clarifying responsibility for policy and budgetary decision-making in nursing homes.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>John C. Velis</i>	<i>Hampden and Hampshire</i>	
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>6/12/2025</i>

**SENATE . . . . . No. 496**

---

By Mr. Velis, a petition (accompanied by bill, Senate, No. 496) of John C. Velis for legislation to clarify accountability for policy and budgetary decision-making in nursing homes. Elder Affairs.

---

**The Commonwealth of Massachusetts**

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

An Act clarifying responsibility for policy and budgetary decision-making in nursing homes.

*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 115 of chapter 112 of the general laws as appearing in the 2022  
2 Official Edition is hereby amended by inserting after subsection (e) the following new  
3 subsection:-  
  
4           (f) Any person licensed as a nursing home administrator, or acting in the capacity of a  
5 nursing home administrator shall certify under the pains and penalties of perjury at the  
6 commencement of the fiscal year of the facility for which they are the administrator that the  
7 facility’s budget and staffing are sufficient to meet the regular and customary operational needs  
8 of the facility including, but not limited to meeting the care needs of all residents then residing in  
9 such facility. Said certification shall be counter-signed by the designated medical director for  
10 such facility in accordance with Center for Medicare and Medicaid Operations Manual 100.07,  
11 section 483 (i).

12 For purposes of this act, “care needs,” shall mean the sum total of the programs, services,  
13 staffing, dietary, recreational, rehabilitative, and medical equipment identified in the care plans  
14 of each resident including, but not limited to the apportioned cost of all aspects of housing and  
15 management for said residents.

16 SECTION 2. Said subsection 115, is hereby further amended by adding the following  
17 new subsection:-

18 (g) Whenever a nursing home administrator licensed pursuant to the laws and regulations  
19 of the Commonwealth and its agencies, fails to assent to the sufficiency of the facility budget,  
20 said licensee shall be suspended by the board of registration of nursing home administrators  
21 subject to such further disciplinary action as circumstances may require.

22 It shall not be an acceptable reason for failure to sign an affidavit of sufficiency of the  
23 budget of the facility for the nursing home administrator, or person acting in such capacity, to  
24 claim that corporate management of the facility had approved the budget without regard to the  
25 certification of sufficiency by the facility administrator. If, in the absence of an affidavit of  
26 sufficiency signed by the administrator and counter-signed by the medical director, the facility  
27 shall be prohibited from accepting any new residents until such affidavit is submitted to the  
28 satisfaction of the department of public health.

29 SECTION 3. Chapter 111 of the General Laws is hereby amended by inserting after  
30 section 72BB the following new section:-

31 Section 72CC. If, upon determination by the department of public health, it appears that  
32 the budget of any facility licensed pursuant to the provisions of chapter 111 of the general laws  
33 as appearing in the 2022 Official Edition, is insufficient to meet the care needs of the residents,

34 said department shall, after public hearing, may apply sanctions upon the facility up to, and  
35 including, revocation of the facility license or receivership. The department of public health is  
36 hereby authorized and directed to promulgate regulations to implement this provision.

37 SECTION 4. Said chapter 111, is hereby further amended, by inserting after section  
38 72CC the following new section:-

39 Section 72DD. Any adverse event or events that are found by said department to have  
40 adversely affected the health, safety or lives of residents, as the direct or indirect result of  
41 operating a facility with an insufficient budget, shall be considered the responsibility of the  
42 nursing home administrator and/or the medical director if there is a signed affidavit of budget  
43 sufficiency, or in the case of operation without a signed affidavit of sufficiency, to owners of the  
44 facility of record, may be held criminal and civil liable for such adverse event or events.

45 SECTION 5. The department of public health shall develop appropriate regulations to  
46 implement the provisions of this act not later than July 1, 2027.