




Commonwealth of Massachusetts
Executive Office of Health and Human Services
Division of Medical Assistance

600 Washington Street
Boston, MA 02111
www.mass.gov/dma

MASSHEALTH
TRANSMITTAL LETTER ADH-17
April 2003

TO: Adult Day Health Providers Participating in MassHealth
FROM: Douglas S. Brown, Acting Commissioner 
RE: *Adult Day Health Manual* (Revision to Program Regulation)

The Division is correcting the regulation at 130 CMR 404.412(C)(20), which was revised in Transmittal Letter ADH-15. The manual citation in that section should read "130 CMR 404.412(C)(19)."

These regulations are effective November 1, 2002.

NEW MATERIAL

(The pages listed here contain new or revised language.)

Adult Day Health Manual

Pages 4-17 and 4-18

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Adult Day Health Manual

Pages 4-17 and 4-18 — transmitted by Transmittal Letter ADH-15

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(3) The notice must also state that the ADH program will work promptly and diligently to arrange for the relocation of members to MassHealth-participating providers or, if appropriate, to alternative community service providers.

(4) When it has been determined where a member is to be transferred, the ADH program must give the member written notice including the name of the new program to which the member will be transferred.

(C) Notification to the Division.

(1) An adult day health program electing to withdraw from MassHealth must give written notice of its intention to withdraw to the Division, unless such withdrawal results from a situation beyond the control of the provider such as fire or an act of God. In the instance of alleged emergency withdrawal, the burden of proof will be on the provider. The provider must send the withdrawal notice by certified or registered mail (return receipt requested) to the Division's Adult Day Health Unit and must be received by the Division no less than 90 days before the effective date of withdrawal.

(2) Upon notification from the Division, the program must forward a list of all members currently enrolled in the program. The program must notify the Division in writing as members are placed in other programs, including the name of the new program and the members' start date in the new program.

404.412: Adult Day Health Program Physical Plant Requirements

(A) Providers must meet physical plant requirements as outlined in 130 CMR 404.412. However, those providers who were providers prior to November 1, 2002, and who continue to meet the physical plant requirements at the time of approval are not required to meet the requirements in 130 CMR 404.412(B) and (C).

(B) A program must be located in a site that is:

- (1) on ground level (exceptions will be made on a case-by-case basis, as determined by the Division in collaboration with local authorities) with at least two means of egress;
- (2) free of architectural barriers;
- (3) designed to meet the needs of disabled persons; and
- (4) in compliance with local health, fire, and safety codes.

(C) Adult day health space must be utilized only for the provision of adult day health services. The Division may waive this requirement at its discretion. The program site must be designed with adequate space for the provision of all adult day health services. Each site must include:

- (1) a dining area;
- (2) a clean and sanitary food-preparation area equipped with a refrigerator, a sink, and adequate counter and storage space;
- (3) a project area equipped with adequate table and seating space;
- (4) a group-activity area;
- (5) a private, enclosed space with four walls connected to the ceiling and the floor, free from disruption, for individual nursing services or counseling;
- (6) a rest area with four walls connected to the ceiling and floor with at least one bed, cot, or recliner for every 20 members based on capacity;
- (7) at least one comfortable resting chair for every six members per day based on capacity;

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- (8) storage space for program and operating supplies and equipment;
- (9) adequate outdoor space for members to safely arrive at and depart from the program site;
- (10) a locked storage area not accessible to members for the storage of toxic substances used either in activities or cleaning;
- (11) a secure environment for members who wander;
- (12) a conspicuously posted evacuation plan in each room;
- (13) equipment and furniture that is safe, clean, and appropriate;
- (14) when space for outdoor activities is available, it must be safe, accessible to the ADH program indoors, and accessible to individuals with disabilities;
- (15) if smoking is permitted, a designated smoking area away from the main activity area that is adequately ventilated and properly supervised;
- (16) its own separate space for all services and programming when located in a facility housing other services;
- (17) a private area for ADL needs including bathing, grooming, dressing, and incontinent care;
- (18) adequate toilet facilities that:
 - (a) are located as near to the activity area as possible; and
 - (b) are equipped with grab bars or side rails;
- (19) if the daily certified capacity of the program is 25 members or fewer, there must be at least two toilets, including at least one toilet facility designed or adapted to provide access and maneuverability for disabled individuals or individuals in wheelchairs; and
- (20) for sites whose certified capacity exceeds 25, additional toilet facilities in proportion to the requirements of 130 CMR 404.412(C)(19).

(D) Before opening a site, relocating to a new site, or renovating a current site, the program must submit to the Division:

- (1) a current local occupancy permit;
- (2) a current local fire department inspection certification; and
- (3) a current local board of health inspection certification. If the town or city where the adult day health center is requesting to provide services does not require a board of health inspection, the provider must submit supporting documentation.

(E) The program must submit to the Division, within seven days of receipt, any waiver, variance, or other changes received by the program from local, state, federal, or other sources.

(F) The program must have on site a minimum of the following health-care equipment:

- (1) an emergency first-aid kit that is visible and accessible to staff;
- (2) a stethoscope;
- (3) a scale;
- (4) a blood-pressure apparatus;
- (5) foot basins;
- (6) thermometers;
- (7) a locked storage space for drugs separate from member activity areas;
- (8) refrigeration for drugs that is separate from food; and
- (9) at least three blankets designated for first aid and medical crisis use only.