

Rest Home Task Force

Meeting Minutes
February 28, 2025
10:30 am - 12:00 pm

Date of meeting: Friday, February 28, 2025

Start time: 10:30 am

End time: 12:00 pm

Location: Virtual Meeting (Zoom)

Member Attendance & Votes		Present	Vote 1*	Vote 2*
1	Kiame Mahaniah – Executive Office of Health and Human Services (<i>chair</i>)	X	X	X
2	Judy Bernice – Bureau of Health Care Safety and Quality, DPH	X	X	X
3	Dayva Briand – Office of Long-Term Services and Supports (OLTSS), MassHealth (<i>attending for Pavel Terpelets</i>)	X	X	X
4	Scune Carrington – Private practitioner, BennuCare	X	X	X
5	Kim Clougherty – Department of Mental Health (DMH)	X	X	X
6	Emily Cooper – Executive Office of Aging & Independence (EOAI)	X	X	X
7	Tracey Cravedi – Hale House	X	X	X
8	Moses Dixon – Senior Connection	-	-	-
9	Pamela Edwards – Massachusetts Senior Action Council	X	X	X
10	Patricia Jehlen – Massachusetts Senate, Joint Committee on Elder Affairs	X	X	X
11	Mathew Muratore – Former MA House of Representatives	X	A	X
12	Megan Nicholls – Department of Transitional Assistance (DTA)	X	X	X
13	Ron Pawelski – Massachusetts Association of Residential Care Homes (MARCH)	X	X	X
14	Thomas Skehill – Massachusetts Senate (<i>designee of Senator O'Connor</i>)	X	X	X
15	Thomas Stanley – MA House of Representatives, Joint Committee on Elder Affairs	X	X	X

* (X) Voted in favor; (O) Opposed; (A) Abstained from vote; (-) Absent from meeting or during vote

Proceedings

Undersecretary Mahaniah called the meeting to order at 10:30 am. He welcomed members and informed them that the Task Force meeting is subject to the Open Meeting Law and that any votes taken during the meeting would be conducted via roll-call vote.

Former Representative Mathew Muratore introduced himself as Minority Leader Jones's appointee to the Task Force.

Vote 1 to approve the 2/7/2025 meeting minutes: Undersecretary Mahaniah requested a motion to approve the minutes from the Task Force's previous meeting on 2/7/2025. Ms. Cravedi introduced the motion, which was seconded by Ms. Carrington and approved by roll-call vote (see detailed record of votes above).

Eliza Lake, Director of Health Policy and Strategic Initiatives at EOHHS, provided an overview of the Long-Term Care (LTC) Ombudsperson Program, the DPH Bi-annual Surveys, and DPH's LTC Complaints Unit, which collectively ensure the quality of care at rest home facilities across the Commonwealth.

Undersecretary Mahaniah introduced Micha Shalev, owner and operator of Dodge Park in Worcester. Mr. Shalev shared a presentation focused on the financial challenges his facility faces, emphasizing the discrepancy between the reimbursement that his rest home receives and its actual operating costs. In his remarks, he noted that many costs, such as property taxes, are not included in his facilities' cost reports. For additional details, refer to the Mr. Shalev's presentation on the Task Force's [Meeting Materials webpage](#).

In response to a member's question, Dayva Briand from the Office of Long-Term Services and Supports (OLTSS) explained that the only difference between the cost reporting mechanism for rest homes (RCC-Q) and that for nursing facilities (DCC-Q), was that rest homes are permitted to include the salaries for administrators, executive directors, and responsible parties (RPs) as direct care staff, unlike in nursing facilities.

Undersecretary Mahaniah reintroduced Dayva Briand to walk members through a set of draft proposals that her team compiled based on the Task Force's deliberations. The proposals were divided into three categories or long-term strategies to support rest homes:

1. Update regulatory requirements to ensure standard expectations of care and distribution of funding across rest homes;
2. Enhance financial reporting requirements to increase transparency and best identify impacts of costs on rest homes; and
3. Increase data collection to improve access to data related to quality of care, patient demographics and geographic trends in occupancy.

Under those categories, various proposals were listed. For additional details, refer to the Proposed Recommendations presentation on the Task Force's [Meeting Materials webpage](#).

In response to the presentation, members shared the following comments, broken down by category:

- 1. Update regulatory requirements to ensure standard expectations of care and distribution of funding across rest homes**
 - a. Reporting – there is a need for an independent cost audit (Pawelski)
 - b. Reporting – the feasibility of collapsing reporting to avoid some of the same information being submitted in different formats to different entities, CHIA and DPH (Jehlen)
 - i. Dayva Briand elaborated on financial reporting, clarifying that yearly cost reports are audited by CHIA, which requires significant time to process rest home cost data, while the RCC-Q reports are submitted twice a year to EOHHS and reflect much more up-to-date information.

- c. Capital rates and proposed waiver – as capital rates can differ across facilities, feasibility of creating a separate capital fund in addition to the capital fund created for nursing facilities. (Jehlen)
- d. Many of these recommendations assume that federal funding conditions do not change, which many anticipate (Edwards)
- e. Agrees with Micha's proposal for add-ons for RNs instead of RPs (Cravedi)
- f. Authorize the \$10 million in capital funding that the Legislature already included in the Economic Development bill (Pawelski)
- g. Perhaps review what other states have done related to federal financial participation (FFP) for rest homes. (Pawelski)

2. Enhance financial reporting requirements to increase transparency and best identify impacts of costs on rest homes

- a. While the proposal to drop the RCC-Q threshold to 75% and prorating the costs related to executive directors not providing direct care was welcomed, including administrative costs at any level would negatively impact rest homes. (Pawelski)
- b. Suggest removing the titles of staff in the RCC-Q and instead including the descriptions of the staff that do certain activities that would fall under direct care (Nicholls)
- c. Suggest linking capital funding to DTA occupancy rate (Jehlen)
- d. Suggest exploring linking capital funds to DPH ratings of physical condition of facilities (Emily Cooper)

In response to a member's question, Ron Pawelski explained that the SC-I forms are "status change forms" that track status changes when residents are discharged or moved to different settings.

3. Increase data collection to improve access to data related to quality of care, patient demographics and geographic trends in occupancy.

- a. No member comments.

Included in the chat from Rep. Muratore was a request for the group to discuss the relationship between DTA budgetary projections and the actual cost reports and the rate setting.

In closing, Undersecretary Mahaniah encouraged members to share written feedback on the proposed recommendations by Friday, March 7. He explained that Task Force staff would compile members' written feedback and share both a draft report and recommendations with the Task Force at the group's final meeting scheduled for March 14.

Vote 2 to adjourn the meeting: Undersecretary Mahaniah requested a motion to adjourn the meeting. Rep. Muratore introduced the motion, which was seconded by Rep. Stanely and approved by roll-call vote (see detailed record of votes above).

The meeting was adjourned at 11:55 am.

Meeting Materials

- 1. Draft 2/7/2025 meeting minutes
- 2. Micha Shalev presentation
- 3. Proposed Recommendations presentation