

Transitions from Acute Care to Post-Acute Care (TACPAC) Task Force

Meeting Minutes
April 16, 2025
10:30 am - 12:00 pm

Date of meeting: Wednesday, April 16, 2025
Start time: 10:30 am
End time: 12:00 pm
Location: Virtual Meeting (Zoom)

Member Votes		Present	Vote 1*	Vote 2*
1	Joanne Marqusee – Executive Office of Health and Human Services (EOHHS) (<i>Chair</i>)	X	X	X
2	Carminda Andrade – Department of Mental Health (DMH)	X	X	X
3	Donna Buckley – Barnstable County Sheriff's Office	X	X	X
4	Leslie Darcy – Office of Long-Term Services and Supports (OLTSS), MassHealth	X	X	X
5	Adam Delmolino – Mass. Health & Hospital Association (MHA)	X	X	X
6	Shauna Dube – UMass Memorial Medical Center	X	X	X
7	Jeff Fisher – Department of Correction (DOC)	X	X	X
8	Tara Gregorio – Mass. Senior Care Association (MSCA)	X	X	X
9	Jake Krilovich – Home Care Alliance of Massachusetts	-	-	-
10	Liz Leahy – Mass. Association of Health Plans (MAHP)	X	X	X
11	Tracy Lee – Beth Israel Deaconess Medical Center	X	X	X
12	Mary McClintock – South Shore Hospital	X	X	-
13	Andrew Musgrave – Office of the Attorney General	X	X	X
14	Evelyn Patsos – Probate and Family Court Department, Trial Court	-	-	-
15	Richard Raymond – Armstrong Ambulance	X	-	-
16	Clarence Richardson – Mass. Chapter of the National Academy of Elder Law Attorneys (MassNAELA)	X	X	X
17	Deborah Vona – Blue Cross Blue Shield of Mass.	-	-	-

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

Proceedings

Assistant Secretary Marqusee called the meeting to order at 10:30 am. She 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.

Vote 1 to approve the 3/19/2025 meeting minutes: Assistant Secretary Marqusee requested a motion to approve the minutes from the Task Force's previous meeting on 3/19/2025. Mr. Delmolino introduced the motion, which was seconded by Mr. Richardson and approved by roll-call vote (see detailed record of votes above).

Task Force member Leslie Darcy, Chief of the Office of Long-Term Services and Supports (OLTSS) presented an overview of MassHealth Limited coverage, focusing on the feasibility and financial impact of expanding MassHealth Limited coverage to include post-acute and long-term care services. In her presentation, Chief Darcy explained that more than half of MassHealth members (1.2 million residents) are currently enrolled in MassHealth Standard, which provides coverage for physician services, post-acute care, and long-term care services, noting that roughly 270,000 residents are currently enrolled in MassHealth Limited, which provides emergency health services to people who have an immigration status that keeps them from getting more services. She explained that expanding Standard benefits (physician services, post-acute care, and long-term care services) to the 270,000 MassHealth members would have an annualized gross cost of \$2.54 billion. She highlighted that the state would not expect to receive matching federal funds for these services, so the additional costs would fall to EOHHS/MassHealth. For additional details on the presentation, see the Task Force's [Meeting Materials webpage](#).

Mr. Delmolino explained that hospitals are currently facing challenges with patients enrolled in MassHealth Limited who have been in an accident or emergency situation, who may end up spending years in hospitals, as few post-acute care settings such as nursing homes are willing to risk admitting them as residents given that post-acute care services are not covered by MassHealth Limited and they may not be reimbursed for these patients' care.

In response to members' comments, Chief Darcy highlighted the state-funded family assistance program, which provides a six-month benefit for this population. She added that her team would take steps to increase the awareness of those benefits.

Marylouise Gamache, EOHHS Ombudsperson and Director of the Discharge Support (DS) program, provided an overview of the DS program. She noted that the DS program was developed in 2021 to help hospitals manage complex discharges, particularly when patients face homelessness or lack access to appropriate post-hospital resources. She stressed that the program serves as a last-resort support system after hospital staff have exhausted internal options, coordinating with state agencies and tapping into external resources like MassHealth and DMH. The DS program addresses challenges such as housing instability, justice-involved individuals, long-term care applications, and multi-agency coordination, which often delay appropriate patient placements. She highlighted specific case studies, which illustrate the prolonged hospital stays due to issues like guardianship disputes, refusal of placement options, or lack of housing. She stressed the importance of early discharge planning, interagency collaboration, and improving hospital staff knowledge of community and state resources to optimize patient outcomes. For additional details on the presentation, see the Task Force's [Meeting Materials webpage](#).

Task Force member Carminda Andrade, Nursing Facility Transition Nurse Manager at DMH, presented on DMH's efforts to support individuals with medically and behaviorally complex needs, especially through expanded eligibility and services under the Preadmission Screening and Resident Review (PASRR) program. She noted that DMH established the Nursing Facility Transition Team in 2023, bringing together nurse

specialists and case managers to facilitate community transitions for eligible individuals in nursing facilities. She explained that two Enhanced Medical Group Living Environments (EMGLE) were created to provide integrated medical and behavioral support within community settings for individuals that do not qualify for higher levels of care. She explained that community nursing approach includes intensive consultation, medication program oversight, and interagency collaboration to enable effective discharge and transition planning. Despite these efforts, the presentation highlights ongoing challenges in discharging individuals from nursing facilities to post-acute care due to complex care needs and systemic barriers. For additional details on the presentation, see the Task Force's [Meeting Materials webpage](#).

In closing, Assistant Secretary Marqusee noted that the Task Force's next meeting on 4/30 would focus on a review of enhanced hospital case management practices and reimbursement for wraparound services, and community-based services and supports and opportunities to expand coverage and reimbursement for services delivered by mobile integrated health programs.

Vote 2 to adjourn the meeting: Assistant Secretary Marqusee requested a motion to adjourn the meeting. Mr. Richardson introduced the motion, which was seconded by Mr. Delmolino and approved by roll-call vote (see detailed record of votes above).

The meeting was adjourned at 12:00 pm.

Meeting Materials

1. Draft 3/19/2025 meeting minutes
2. MassHealth Limited presentation
3. EOHHS Discharge Support presentation
4. DMH Interagency Collaboration and Coordination for Complex Cases presentation