

SENATE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Ms. Chandler

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 passage of the accompanying bill:

An Act relative to adult day health services.

PETITION OF:

NAME:

Ms. Chandler

DISTRICT/ADDRESS:

First Worcester

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. S01114 OF 2007-2008.]

The Commonwealth of Massachusetts

In the Year Two Thousand and Nine

AN ACT RELATIVE TO ADULT DAY HEALTH SERVICES.

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 7 of Chapter 118G is hereby amended by inserting, in
2 the first sentence after the words "health care services" the
3 following:-

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5 for the purposes of this clause adult day health providers shall be
6 considered institutional providers;

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8 SECTION 2. Chapter 118G is hereby amended by inserting a new section
9 17A as follows:-

10

11 Section 17A. In establishing rates for adult day health providers, the
12 executive office shall establish separate rates for the Basic and
13 Complex levels of service. The Basic level of service rate shall be
14 paid for any program participant who meets the requirements of 130 CMR
15 404.407 or requires skilled services that must be provided in a
16 structured setting because of the intensity, duration, or frequency of
17 need for these services. Skilled services are services ordered by a
18 physician with the professional disciplines of nursing, physical and
19 occupational, or speech therapy. A recipient must require these services
20 to achieve maximum use of his physical or mental capabilities, to
21 prevent his physical or mental deterioration, or to maintain his optimal
22 level of functioning. Skilled services include, but are not limited to,
23 the professional health-care management of the following:

24

25 (a) Impairments in the cardiovascular, respiratory, endocrine,
26 musculoskeletal, neurological, gastrointestinal, or genitor-urinary
27 systems, which require a plan of skilled care with documentation of
28 assessment, intervention, teaching, and evaluation of clinical outcomes;

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31 (b) Orthotic or prosthetic devices that necessitate professional
32 assessment, teaching, and intervention; the presence of an orthotic or
33 prosthetic device does not, in itself, determine the need for skilled
34 care; however, other related medical conditions or specific medical
35 complications may necessitate skilled care, and must be documented in
36 the recipient's medical record;

37

38 (c) Treatment or prevention of actual or potential deterioration in
39 skin, cardiac, or respiratory status that requires professional
40 assessment, teaching, intervention and evaluation;

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42 (d) Administration of prescribed topical, oral,
43 and injectable medications;

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45 (e) Specialized treatments, such as oxygen therapy and respiratory
46 therapy, or

47

48 (f) Impairments in mobility that require assessment, teaching, and
49 evaluation in the use of a cane, walker, or other prescribed durable
50 medical equipment.

51

52 Sensory loss or impairment is not, in itself, an indication that the
53 recipient requires care in an adult day health setting. In determining
54 the appropriate site and level of care for a recipient, sensory
55 impairment must be considered with all other factors that affect the
56 amount, duration, and scope of services necessary.

57

58 Mental-state or cognitive impairment is not, in itself, an indication
59 that the recipient requires care in an adult day health setting, nor
60 does it indicate the need for a specific level of care. A recipient who
61 exhibits mental-state or cognitive impairment such as confusion,
62 disorientation to time, place or person, memory loss, or defective
63 judgment - such as an impairment in the ability to judge personal safety
64 and function in a non-supervised setting or impairment in the ability to
65 perceive or communicate health changes - may require care in an adult
66 day health setting. In determining the appropriate care for a recipient,
67 mental-state or cognitive impairment must be considered with all other
68 factors that affect the amount, duration, and scope of services
69 necessary.

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71 Any participant who meets the eligibility criteria for nursing home
72 placement pursuant to 130 CMR 456.409, and has been diagnosed with
73 dementia shall be eligible for participation in the complex level of
74 care.
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