

## Nursing Facility Recovery and Sustainability Proposal

As Massachusetts nursing facilities remain vigilant in our efforts to protect our vulnerable residents and dedicated staff against the unpredictable COVID-19 virus, facilities across the state are faced with an immediate and urgent workforce crisis of 6,000 unfilled direct care positions. Due to what many have described as the worst staffing crisis in history, the vast majority of our staff are working overtime to ensure adequate care coverage and more than half of nursing facilities are intermittently denying new resident admissions and hospital referrals resulting in disruptions in access to care.

More than half of the Commonwealth's nursing facilities were operating on negative budgets prior to the COVID-19 pandemic and the financial conditions continue to deteriorate with 100 facilities projected to be at risk of closure in the next 12 months. Nursing facilities are entirely dependent on Medicaid funding to make investments in our workforce and quality resident care, as over two-thirds of residents have their care paid for by MassHealth, which underfunds nursing facility care by nearly \$200 million annually. Therefore, adequate government funding for nursing facility care has never been more necessary to ensure access to quality resident care and to invest in our dedicated workforce.

With 22,000 nursing facility residents relying on MassHealth to pay for their care, there is a particular imperative for the Commonwealth and provider community to continue to work together to address these mounting challenges. We therefore urge the Legislature to continue to support nursing facility residents, their families and caregivers by allocating a portion of the FY 2021 surplus funding and the American Rescue Plan Act (ARPA) funds for **Massachusetts Senior Care Association's Nursing Facility Recovery and Sustainability Proposal**. These funds would (1) provide one-time \$98 million Recovery Supplemental Medicaid payment (with a net state cost of \$43 million after federal Medicaid matching revenue), which will allow nursing facilities to maintain vital investments in our direct care workforce, hire additional staff and purchase necessary PPE and (2) provide \$461 million which would enable the Commonwealth and nursing facilities over the next several years to make vital investments in three fundamental areas: workforce, quality resident care and experience and modernizing the infrastructure of nursing facilities.

## Mass Senior Care Association's Nursing Facility Recovery and Sustainability Proposal

• One-Time COVID-19 Recovery Funding Using SFY2021 Surplus: one-time supplemental increase from October 2021 through September 2022 of \$15 per day for each MassHealth nursing facility resident to invest in our direct care workforce, hire critically needed new staff, fund infection control expenses, including critical PPE and isolation rooms. *Cost: A total one-time investment of \$98 million with a net state investment of \$43 million.* 

## Draft Language for One-Time COVID-19 Recovery Funding

4000-0641 provided further that for the purpose of setting MassHealth nursing facility rates effective October 1, 2021, the executive office of health and human services shall provide a \$15 per day supplemental payment to licensed nursing facilities for, but not limited to, supporting infection control standards, including staff wages, temporary labor costs, hiring new staff, procuring personal protective equipment, and costs associated with establishing single occupancy isolation rooms.... \$98,000,000 (At least 56.2% reimbursed by the Federal government – Net Cost to the State: \$43,000,000)

American Rescue Plan Act (ARPA) One-Time Funding Through 3 Dedicated Funds. The total one-time investment of \$461 million would enable the Commonwealth and nursing facilities over the next several years to make vital investments in three fundamental areas:

- Nursing Facility Workforce Fund proposes \$285.5 million to fund several initiatives to address the critical workforce shortages and promote recruitment and retention of our diverse workforce, including:
  - \$112.5 million for Heroes Thank You Bonus (\$2,500 bonus x 45,000 staff)
  - \$131 million to offset the costs of an International Nurse Placement Program (2,000 Nursing Facility Nurses)
  - \$30 million in Frontline Staff Support Grants (offset childcare, eldercare, and transportation costs)
  - \$8 million to fund CNA Training Scholarship (\$2,000 for 4,000 individuals)
  - \$2 million to establish a Nursing Student Clinical Placement Program in Nursing Facilities
  - \$2 million to fund an Administrator Leadership Training Program
- Nursing Facility Quality Care and Resident Experience Fund proposes \$25.5 million to fund staff education and training to better ensure the quality of life and quality of care provided to nursing facility residents, including:
  - \$21.5 million Dedicated Staff Trained and Specializing in Infection Prevention
  - \$1 million Statewide Dignity at the End-of-Life "What Matters to Me" Program
  - \$3 million Annual Resident Satisfaction and Experience Survey
- **Nursing Facility Infrastructure Fund** proposes \$150 million to modernize nursing facilities to enhance care delivery and resident privacy by creating more homelike settings of care.
  - Develop specialized care units, for infectious disease isolation, dementia special care, ALS and MS, geriatric psychiatry, traumatic brain injury, in-house dialysis treatment centers, and behavioral health and substance use disorder programs;
  - Offset the cost of urgently needed capital improvements including HVAC and air filtration system upgrades to help prevent the spread of airborne illnesses, roof and other infrastructure replacement and repair projects, alternative energy conversion projects, elevator renovations to comply with new government requirements; and
  - Fund innovative projects which would allow:
    - Conversion of an entire or portion of the nursing facility to an alternative service including affordable independent housing and assisted living residences;
    - 2) Conversion of multibed rooms to single occupancy to enhance privacy and dignity; and
    - 3) Establishment of a voluntary nursing facility reconfiguration program, which would include financial incentives to reduce capacity, to balance supply and demand in certain areas of the Commonwealth.

## Thank you for your consideration.

For additional information, please contact Tara Gregorio at 617.799.9238 or tgregorio@maseniorcare.org

