

Governor Baker announces \$130 million for Massachusetts nursing facilities

The Baker-Polito Administration today announced a second round of funding up to \$130 million for nursing facilities to support COVID-19 response efforts over the next two months, as well as increased funding of \$44 million for residential congregate care service providers. This funding will support staffing costs, infection control and personal protective equipment (PPE). In addition to increased financial support, the administration has implemented required testing for staff and residents of nursing facilities.

Additional Support Services: The Commonwealth will offer support for temporary staffing assistance for all nursing homes in need. This includes clinical response teams of 120 nurses and CNAs deployed in teams of 10 during emergency situations, crisis management support and deployment of the Massachusetts National Guard. These efforts will be supported by a centralized infection control performance improvement center established by the Massachusetts Senior Care Association.

Increased Financial Support for Nursing Facilities: The administration is releasing a second round of funding for two months for nursing homes that meet specific requirements and accountability measures. The funding is dependent on required COVID-19 testing of all staff and residents, regular infection control audits, appropriate allocation of funding and the public release of facility performance and funding use.

Further details about this second round of funding available for nursing facilities include:

Required Testing: Facilities must test all staff and

residents, and report results to the state. Facilities are also encouraged to identify and pursue testing avenues with area hospitals, EMS or other providers. The state's mobile testing program is available for those facilities unable to set up testing.

In-person Clinical Audits: All nursing facilities will be regularly audited in-person for infection control and accountability, and each will receive a baseline audit during the first two weeks of May. These clinical audits will be conducted using a 28-point Infection Control Checklist, based on DPH, CDC and industry guidance. This checklist includes infection control, PPE supply and usage, staffing, clinical care, and communication requirements.

Facilities will be scored into three ratings: in adherence (green), in adherence but warrants inspection (yellow) and not in adherence (red).

Funding Accountability: Funding release is dependent on accountability measures, including audit ratings and appropriate funding allocation. Facilities must use this funding for staffing, infection control, PPE and other supports that directly benefit staff, including hotels for staff retention and infection control.

Staffing Supports: The Commonwealth will provide temporary staffing assistance to all nursing homes during the COVID-19 public health crisis, including clinical rapid response teams to provide urgent, short-term staffing for facilities in need, crisis management experts, and the deployment of the Massachusetts National Guard to aid with logistical, environmental and other supports. The state will also contract with staffing agencies to support facilities that are otherwise unable to access staffing agencies.

Infection Control Performance Improvement Center: The Massachusetts Senior Care Association and Hebrew Senior Life,

in coordination with other industry providers, will lead an infection control performance improvement center to ensure accountability and provide assistance to facilities that are struggling with infection control capability. The performance improvement center will provide infection control protocols and trainings and PPE supply chain and management support, as well as identify, triage and provide infection control specialist support and intervention.

Public Reporting: All performance measures and funding use will be publicly reported using a mandatory reporting template, and the Commonwealth will provide consolidated information in the testing completion status by facility, COVID-19 case counts and mortality of staff and residents, and audit results. These reports will be due shortly after June 30, and the Commonwealth will then compile and deliver a public report.

Increased Support for Residential Congregate Care Service Providers: The administration is providing a second phase of increased funding – \$44 million – across purchase of service residential congregate care service providers during the COVID-19 outbreak. This funding builds on the \$95 million in increased funding announced on March 30, bringing the total funding for these providers to \$139 million, and will support increased staffing costs, infection control and PPE.

To mitigate many residential congregate care service providers' expenses related to the COVID-19 surge, Executive Office of Health and Human Services (EOHHS) agencies will increase the monthly reimbursement for May and June services for an additional 15%, in addition to the previously announced 10% increase. Further support to address provider needs during the surge include mobile COVID-19 testing expansion and coordination with MEMA to provide PPE to providers.

EOHHS agencies work with 238 residential service providers throughout the Commonwealth to ensure the health and well-

being of over 20,500 individuals reflecting diverse populations, including children, youth and families, and individuals with physical, cognitive, emotional, behavioral health, intellectual and developmental disabilities and survivors of domestic and sexual violence.