Dear Chairwoman Comerford and Chairwoman Decker,

The Home Care Alliance of Massachusetts and its membership appreciate the opportunity to submit testimony in support of H.2332, An Act Relative to Home Health and Hospice Aides, which is sponsored by Representative Kay Khan. As in past testimony on this issue, we ask that this committee advance this legislation favorably.

The Home Care Alliance is a non-profit trade association representing nearly 160 home health and home care providers across the state that provide both skilled services reimbursed through government and commercial payers as well as supportive services paid by individuals and families privately. These agencies collectively provide a range of available offerings, including skilled nursing and therapies, behavioral health, homemaking, remote patient monitoring and pediatric nursing – all delivered in the patient’s home with a mission to keep them independent and away from costlier facility-based care.

Among the strengths of home health agencies is medication reconciliation and management. Skilled clinicians confirm that patients understand new prescriptions in terms of dosages and overall regimen, but also ensure that no older medications are in the home that would conflict with newly prescribed drugs or otherwise undermine treatment. The legislation before the committee would utilize and strengthen this competency.

H.2332 would amend existing State Law and establish authority for the Board of Registered Nurses (BORN) to develop a delegation of medication administration model for home health aides, hospice aides and certified nursing assistants (CNA). The legislation limits what medications are eligible for delegation, and explicitly excludes controlled substances. The legislation also instructs the Department of Public Health to work with the Board of Registration in Nursing to establish regulation outlining documentation and training protocols. This would include training of home health aides on medication administration. It also includes training for nurses on the duties and appropriateness for delegating medication administration.

According to the bill language, regulations “shall specify that delegation of administration of medication does not alter the responsibility of the home health agency or hospice to teach and the patient or family to participate in learning the self-administration of medications, whenever appropriate.” In addition, delegation would only be an option after nurse verifies that the home health aide has completed training on medication administration and submitted all necessary documentation.

The Home Care Alliance would like to emphasize that H.1939 would allow agencies to participate in a nurse delegation model; however, that is by no means a mandate. The legislation specifically protects
nurses and aides from disciplinary action by their employer for refusing to participate in medication delegation.

As you can see, this legislation is structured to empower the nurse as the delegator with a clear model for each nurse to adhere when encountering the choice of whether delegation should take place. The registered nurse may delegate components of care, but does not delegate the nursing process itself. There are assessment, evaluation, and planning responsibilities that require nursing skill and input and we are not seeking to replace those with this legislation.

As the legislature well knows, direct-care staffing shortages are prominent across all provider types. The shortage in home health has been magnified during the COVID-19 pandemic and by an increasingly aging population that wish to remain at home. As home health agencies struggle to compete for nurses in facility settings, this legislation would enable agencies to utilize their nurses as efficiently as possible. In turn, quality of care and safety will increase by allowing nurses to delegate the most basic medication administration tasks to a trained and supervised aide while freeing up that nurse to tend to a patient with needs that demand the nurse’s skill and expertise.

At a time when this legislature is considering comprehensive health care reform, ARPA funding opportunities and COVID-19 recovery, this legislation lends an opportunity for the Commonwealth to advance the skills of nurses and paraprofessional aides. Not only would this decrease MassHealth spending and improve home health agency efficiency, but it would help reduce overall healthcare costs and provide opportunities for paraprofessional workers to broaden their skills.

Thank you again for the opportunity to testify and for your consideration of our comments.

Thank you.

Pat Kelleher
Executive Director
Home Care Alliance of MA