

**SENATE . . . . . No. 2348**

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**The Commonwealth of Massachusetts**

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**In the Year Two Thousand Fourteen**  
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SENATE, Thursday, July 31, 2014

The committee on Ways and Means, to whom was referred the Senate relative to home health and hospice aides (Senate, No. 2076),- reports, recommending that the same ought to pass with an amendment substituting a new draft with the same title (Senate, No. 2348).

For the committee,  
Stephen M. Brewer

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## The Commonwealth of Massachusetts

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In the Year Two Thousand Fourteen  
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An Act relative to home health and hospice aides.

*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 9 of chapter 94C of the General Laws, as appearing in the 2012  
2 Official Edition, is hereby amended by inserting after the figure “112,” in line 10, the following  
3 words:- a home health aide as limited by section 80B of said chapter 112.

4           SECTION 2. Section 80B of chapter 112 of the General Laws, as so appearing, is hereby  
5 amended by inserting after the tenth paragraph the following 5 paragraphs:-

6           Registered nurses may delegate the administration of or assistance with the  
7 administration of medications in the home to a home health aide, as defined under section 72F of  
8 chapter 111 of the General Laws; provided, that the home health aide has completed training on  
9 medication administration and meets minimum requirements according to regulations  
10 promulgated by the board in conjunction with the department of public health and that the  
11 administration or assistance with administration is performed under the supervision of a  
12 registered nurse.

13           The delegation of medication administration to a home health aid permitted under this  
14 section shall be limited to medications which are oral, ophthalmic, otic, topical, intranasal,  
15 transdermal, suppository, prefilled auto-injectables designed for self-administration, or products  
16 which are administered by inhalation. The delegation of intramuscular, subcutaneous,  
17 intradermal, intraosseous or intravenous administration of medication shall not be permitted.

18           The board, in conjunction with the department of public health, shall promulgate  
19 regulations pertaining to documentation protocols, minimum requirements and training on  
20 medication administration. These regulations shall specify that delegation of administration of  
21 medication does not alter the responsibility of the home health agency or hospice to teach and the  
22 patient or family to participate in learning the self-administration of medications, whenever  
23 appropriate.

24           Home health agencies shall provide training on medication administration to home health  
25 aides and nurses and establish protocols on documenting that a home health aide or nurse has  
26 completed training according to the nurse delegation model and the board's regulations, which  
27 shall be drafted by the board in conjunction with the department of public health. Said  
28 regulations shall specify that the registered nurse delegator and the home health aide are  
29 accountable for their own actions in the medication delegation process, that the nurse delegator  
30 shall take appropriate steps to verify the training of the home health aide, that the delegation  
31 shall apply only to the home health aide to whom it was given and shall not be further delegated  
32 or transferred, that no registered nurse shall be required to delegate medication administration if  
33 the registered nurse determines it is inappropriate to do so and that the nurse delegator may  
34 revoke the delegation based on documented professional judgment.

35           A nurse licensed under this chapter who delegates medication administration in  
36 accordance with the regulations shall not be subject to disciplinary action by the board for the  
37 performance of a person to whom medication administration was delegated.

38           SECTION 3. There shall be a special task force convened to conduct a comprehensive  
39 study of home health agencies. The task force shall consist of: the commissioner of public health  
40 or designee and the secretary of elder affairs or designee, who shall serve as co-chairs; 2  
41 members of the house of representatives, 1 of whom shall be appointed by the house minority  
42 leader; 2 members of the senate, 1 of whom shall be appointed by the senate minority leader; and  
43 1 representative of the Home Care Alliance of Massachusetts. The study shall make  
44 recommendations regarding licensure and other means to ensure that patients receive high  
45 quality care in the commonwealth. The study shall identify the current number of home health  
46 care agencies operating in the commonwealth and the number of home health care agencies in  
47 the commonwealth certified by the Center for Medicare and Medicaid Services.

48           The final study and recommendations, including any recommended standards for  
49 licensing, drafts of recommended legislation and the projected costs of implementing such  
50 recommendations, shall be reported to the house and senate committees on ways and means, the  
51 joint committee on elder affairs, the joint committee on health care financing, the joint  
52 committee on public health and the health planning council, established by section 16T of  
53 chapter 6A, not later than January 30, 2015.