To: Commissioner Robert Goldstein and Members of the Public Health Council

From: James Lavery, Director, Bureau of Health Professions Licensure

Date: July 9, 2025

RE: New Regulation 105 CMR 775.000: *Certified Medication Aides in Long-Term Care Facilities*

I. Introduction

The purpose of this memorandum is to provide the Public Health Council (PHC) with information about a proposed new regulation, 105 CMR 775.000: *Certified Medication Aides in Long Term Care Facilities.*

This new regulation implements the requirements of M.G.L. c. 111, § 72W½, as inserted by section 16 of Chapter 197 of the Act of 2024, *an Act to Improve Quality and Oversight of Long-Term Care,* which authorizes the Department to establish a regulatory framework for the training, certification and oversight of a new category of health care worker. Certified medication aides (CMAs), as they will be known, will be authorized to work in long-term care facilities (LTCFs). With the passage of the law and regulation, LTCFs will now be able to upskill qualified certified nursing assistants (CNAs) and permit them to administer non-narcotic medications to residents under the supervision of a licensed nurse or physician.

The proposed regulation includes establishing requirements for eligibility, training, competency testing, supervision, certification, and discipline of certified medication aides. Safeguards required by the new law are all provided for in the regulation, including evaluations every six months by a licensed nurse or physician, continuous training requirements, requirements for recertification every two years, and conduct/disciplinary provisions.

This regulation will operate in association with 105 CMR 150.000: *Standards for long-term care facilities* and 105 CMR 153.000: *License procedure and suitability requirements for long-term care facilities*. Each of these regulations is currently being updated to establish facility eligibility, as well as supervision and reporting requirements for the deployment of certified medication aides in registered LTCFs.

Key Provisions

105 CMR 775.003 – Certification requirements

Outlines the process for certification, including completing an application, paying the certification fee, completing the established training program, passing an exam and receiving an approval to practice.

The Department also proposes allowing certification by reciprocity (without training or examination) of certified medication aide applicants who are, or have been, certified as a medication aide or technician in another domestic jurisdiction or Canada under laws that maintain certification standards that are substantially the same or exceed those required in Massachusetts.

Following consultation with key stakeholders and a review of approaches taken in other states, CNA certification has been included as a prerequisite to becoming a certified medication aide. This creates an established career trajectory and ensures that all certified medication aides have the range of care skills required to safely and appropriately administer medications.

105 CMR 775.004 – Renewal Requirements

Establishes the criteria for renewal of certification as a certified medication aide, including the documentation that must be provided and the details that must be shared with the Department.

105 CMR 775.005 – Practice Requirements for Certified Medication Aides

Sets forth standards of practice for certified mediation aides.

Establishes the supervision requirements LTCFs must implement to deploy certified medication aides.

M.G.L. c. 111, § 72W½ requires supervision, consisting of the evaluation of certified medication aides at least every six months by a licensed nurse or physician. Further details of supervision requirements are established in the applicable BHCSQ LTCF facilities regulation and in supporting guidance.

105 CMR 775.006 - Grounds for Discipline and Refusal to Certify or Renew a Certification

Provides grounds by which the Department may take disciplinary action against a certified medication aide's certification.

A ‘good moral character’ test is not required by legislation. Instead, a specific list of instances in which disciplinary action may be taken provides greater clarity and consistency.

105 CMR 775.007 – Discipline

Sets forth actions that may be taken on complaints and disciplinary procedures in compliance with M.G.L c. 30A.

105 CMR 775.008 - Severability

Establishes the circumstances in which one or more of the requirements in the regulation may be discontinued by the Department. This is a standard provision in all DPH regulations.

Stakeholder Engagement and Response:

Stakeholder organizations, including the Massachusetts Senior Care Association, LeadingAge Massachusetts, and Dignity Alliance Massachusetts have advocated for these reforms for several years.

Stakeholder organizations and long-term care providers are expected to support the certified medication aide position as an important career ladder program for health care workers. The new category will create a new intermediary position that would enable certified nurse aides (CNAs) to gain additional training, skills and responsibilities, facilitating career growth and earning potential.

In addition, certified medication aides will be viewed as welcome relief to overburdened registered nurses (RNs) and licensed practical nurses (LPNs), who are currently the only personnel allowed to administer medications in Massachusetts long-term care facilities.

Certified medication aides in long-term care facilities will be viewed as allowing for a more efficient use of licensed nursing staff, with an ultimate outcome of improving the overall quality and safety of resident care, as well as significantly increasing staff satisfaction. Certified medication aides will also allow nurses to spend more time on resident clinical assessments, treatments, and other necessary skilled nursing services.

All New England states except Massachusetts are using specially trained medication technicians in long-term care facilities. Certified medication aides may help address the growing workforce crisis impacting long-term care providers. The successful use of medication aides has been implemented in at least 35 other states.

Stakeholder organizations and providers continue to raise concern that the Commonwealth is severely underfunding nursing facility care. The statutory requirement for supervision by a nurse or physician to oversee the new medication aides may raise some concern with facilities, due to shortages in nursing supply. This may also raise concern within the nursing profession due to claims that it potentially places liability on RNs and LPNs.

Further details of supervision requirements will be set out in the applicable BHCSQ facilities regulations and supporting guidance. This will clearly distinguish these requirements from nursing delegation, a model not supported by this regulation.

Next Steps

The Department respectfully requests approval of this proposed regulation from the PHC for public comment.