MASSACHUSETTS AGO REACHES $600,000 IN NURSING HOME NEGLECT SETTLEMENTS

Settlements with Vantage at Hampden and Royal Cape Cod Nursing and Rehabilitation Resolve Allegations Involving Two Resident Deaths

BOSTON – The Massachusetts Attorney General's Office has reached two settlements totaling $600,000 with nursing homes in Hampden and Buzzards Bay to resolve allegations that failures to provide appropriate care led to the deaths of two residents. The settlements are among the first to apply increased penalties under a new Massachusetts law that strengthened accountability for nursing home neglect.

The first settlement with Vantage at Hampden (Vantage) resolves allegations that the facility employed uncertified nurse aides in training (UNATs) to perform tasks for which they were unqualified, leading to the death of a resident. The second settlement with Royal Cape Cod Nursing and Rehabilitation (Royal) resolves allegations that staff members failed to properly administer an 85-year-old patient's blood thinner medication leading to a stroke and ultimately, his death.

Under the settlements, Vantage and Royal will each pay $300,000, which includes the new penalties allowed under Massachusetts law chapter 111, § 72K. The penalties will be distributed between the Long-Term Care Facility Quality Improvement Fund, administered by the Department of Public Health (DPH), and the Long-Term Care Workforce and Capital Fund, administered by the Executive Office of Health and Human Services (EOHHS).

The Attorney General's Office (AGO) began investigating the facilities based on referrals received from the DPH.

Vantage at Hampden Nursing Home Settlement

In its investigation into Vantage, the AGO found that a UNAT was caring for a patient without supervision, despite lacking the proper credentials to do so, during which time the patient suffered a fall. After the fall, the AGO alleges Vantage staff never informed the patient's physician or representative about the accident and that the patient's health declined quickly after, ultimately leading to her death. The AGO further alleges that Vantage employed 16 UNATs for more than four months after they commenced employment and should have received an appropriate certification, in violation of regulatory requirements.

Royal Cape Cod Nursing Rehabilitation Settlement

In its investigation into Royal, the AGO alleges that, during a patient's admission to Royal, staff failed to transcribe the patient's blood thinner prescription. Staff allegedly failed to identify and correct the error, which resulted in the patient not receiving his blood thinner

prescription for thirteen days and passing away from an acute stroke. The AGO alleged that Royal was chronically understaffed.

The increased maximum penalties reflected in these settlements are the result of the AGO's legislative advocacy to create stronger penalties for nursing facilities in cases of abuse and neglect. In early 2023, AG Campbell worked with Senator Jason Lewis and Representative Ruth Balser to file legislation to strengthen the civil enforcement tools used by the AGO to address abuse and neglect of elderly and disabled patients. In 2024, the legislature passed the bill, strengthening the AGO's enforcement tools and increasing penalties for elder abuse and neglect.

The Royal matter was handled by Assistant Attorney General Matthew Hancock, Senior Trial Counsel Elisha Willis, Nurse Investigator Barbara Edwards, and Investigator Caitlin Albert of the AGO's Medicaid Fraud Division. The Vantage matter was handled by Assistant Attorney General Mary-Ellen Kennedy, Senior Healthcare Fraud Investigator Erica Schlain, and Nurse Investigator Barbara Edwards of the AGO's Medicaid Fraud Division. DPH provided valuable assistance with both investigations.

The AGO's Medicaid Fraud Division is a Medicaid Fraud Control Unit, annually certified by the U.S. Department of Health and Human Services to investigate and prosecute health care providers who defraud the state's Medicaid program, MassHealth. The Medicaid Fraud Division also has jurisdiction to investigate and prosecute complaints of abuse, neglect and financial exploitation of residents in long-term care facilities and of Medicaid patients in any health care setting. Individuals may file a MassHealth fraud complaint or report cases of abuse or neglect of Medicaid patients or long-term care residents by visiting the AGO's website.

The Massachusetts Medicaid Fraud Division receives 75 percent of its funding from the U.S. Department of Health and Human Services under a grant award totaling $7,107,548 for federal fiscal year 2027. The remaining 25 percent, totaling $2,369,182 for FY 2027, is funded by the Commonwealth of Massachusetts.

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