

SENATE BILL REPORT

SHB 1877

AS OF MARCH 25, 1993

Brief Description: Providing for examination of nursing home care and charges.

SPONSORS: House Committee on Health Care (originally sponsored by Representatives Flemming, Eide, Mastin and Morris)

HOUSE COMMITTEE ON HEALTH CARE

SENATE COMMITTEE ON HEALTH & HUMAN SERVICES

Staff: Scott Plack (786-7409)

Hearing Dates: March 30, 1993

BACKGROUND:

The state's nursing home program provides residential health care to eligible persons who are no longer capable of independent living and require nursing services. Nursing home care is provided by 307 private facilities, containing approximately 31,000 residents.

All nursing homes licensed in the state of Washington that receive Medicaid or Medicare reimbursement are required to comply with both federal and state regulations. The 1990 Long-Term Care Commission identified that "nursing homes in Washington are subject to stringent regulations and frequent independent monitoring in accordance with federal medicaid standards." The commission report also noted that federal licensing regulations "place too much emphasis on administrative procedures and records and not enough time upon consumers' activities and well being." The commission recommended that the Department of Social and Health Services conduct a review of the current standards, record and procedures in nursing homes in an effort to increase the quality of care.

Physicians and licensed nurses currently play a leading role in directing the overall plan of care for nursing home patients and overseeing and maintaining the quality of nursing home care. They are also responsible for generating approximately 60 percent of the medical charges for these patients.

Currently, nursing homes are not required to provide itemized patient charges to the attending physician.

SUMMARY:

The DSHS Aging and Adult Services Administration is required, subject to funding, to review all departmental rules and state and federal laws to identify documentation requirements or protocols that are redundant and could be changed without negatively impacting residents. The review should include suggestions for efficiency modifications in data gathering, the need for multiple physician signatures on forms, and standardization of physician protocols for nonlife-threatening conditions. DSHS is required to conduct the review in coordination with nursing home care constituents and professional groups who work in this field. The report of findings and suggestions is required to be submitted to the Legislature by December 12, 1993.

All nursing home administrators are required to develop a written procedure for disclosing patient charges to attending physicians working in the nursing homes. These charges are to be provided in writing, itemized, and made available if requested by the patient's physician.

Appropriation: none

Revenue: none

Fiscal Note: requested