2 **EHB 2410** - S COMM AMD

services, respectively.

By Committee on Health & Long-Term Care

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- 5 Strike everything after the enacting clause and insert the 6 following:
- 7 "NEW SECTION. Sec. 1. A new section is added to chapter 18.20 RCW 8 to read as follows:
- 9 (1) Powers and duties regarding boarding homes, previously assigned 10 under this chapter to the department of health and to the secretary of health, are by this section transferred to the department of social and 11 12 health services and to the secretary of social and health services, 13 respectively. This section further provides that, regarding boarding homes, all references within the Revised Code of Washington to the 14 15 department of health and to the secretary of health mean the department 16 of social and health services and the secretary of social and health
- (2)(a) The department of health shall deliver to the department of 18 19 social and health services all reports, documents, surveys, books, 20 records, data, files, papers, and written material pertaining to boarding homes and the powers, functions, and duties transferred by 21 The department of health shall make available to the 22 this section. 23 department of social and health services all cabinets, furniture, office equipment, motor vehicles, and other tangible property employed 24 25 by the department of health in carrying out the powers, functions, and duties transferred by this section. The department of health shall 26 27 assign to the department of social and health services all funds, credits, and other assets that the department of health possesses in 28 connection with the power, functions, and duties transferred by this 29 30 section.
- 31 (b) On the effective date of this section, the department of health 32 shall transfer to the department of social and health services any 33 appropriations and license fees made to or possessed by the department 34 of health for carrying out the powers, functions, and duties 35 transferred by this section.

- 1 (c) When a question arises regarding the transfer of personnel, 2 funds, books, documents, records, papers, files, equipment, or other 3 tangible property used or held in the exercise of the powers, 4 functions, and duties transferred by this section, the director of 5 financial management shall determine the proper allocation and shall 6 certify that determination to the state agencies concerned.
- 7 (3) The department of social and health services shall continue and 8 shall act upon all rules and pending business before the department of 9 health pertaining to the powers, functions, and duties transferred by 10 this section.
- 11 (4) The transfer of powers, functions, duties, and personnel from 12 the department of health to the department of social and health 13 services, as mandated by this section, will not affect the validity of 14 any act performed by the department of health regarding boarding homes 15 before the effective date of this section.
- (5) If apportionments of budgeted funds are required because of the transfers mandated by this section, the director of financial management shall certify the apportionments to the agencies affected, the state auditor, and the state treasurer. Each of these shall make the necessary transfers and adjustments in funds, appropriation accounts, and equipment records in accordance with the certification.
- 22 (6) Nothing contained in this section alters any existing 23 collective bargaining unit or the provisions of any existing collective 24 bargaining agreement until the agreement expires or until the 25 bargaining unit is modified by action of the personnel board as 26 provided by law.
- 27 **Sec. 2.** RCW 18.20.020 and 1991 c 3 s 34 are each amended to read 28 as follows:
- 29 As used in this chapter:
- 30 (1) "Aged person" means a person of the age sixty-five years or 31 more, or a person of less than sixty-five years who by reason of 32 infirmity requires domiciliary care.
- 133 (2) "Boarding home" means any home or other institution, however 134 named, which is advertised, announced or maintained for the express or 135 implied purpose of providing board and domiciliary care to three or 136 more aged persons not related by blood or marriage to the operator. It 137 shall not include facilities certified as group training homes pursuant 138 to RCW 71A.22.040, nor any home, institution or section thereof which

- 1 is otherwise licensed and regulated under the provisions of state law
- 2 providing specifically for the licensing and regulation of such home,
- 3 institution or section thereof. Nor shall it include any independent
- 4 senior housing, independent living units in continuing care retirement
- 5 communities, or other similar living situations including those
- 6 subsidized by the department of housing and urban development.
- 7 (3) "Person" means any individual, firm, partnership, corporation,
- 8 company, association, or joint stock association, and the legal
- 9 successor thereof.
- 10 (4) "Secretary" means the secretary of social and health services.
- 11 (5) "Department" means the state department of <u>social and</u> health
- 12 <u>services</u>.
- 13 (6) "Authorized department" means any city, county, city-county
- 14 health department or health district authorized by the secretary ((of
- 15 health)) to carry out the provisions of this chapter.
- 16 **Sec. 3.** RCW 18.20.190 and 1995 1st sp.s. c 18 s 18 are each 17 amended to read as follows:
- 18 (1) The department of <u>social and</u> health <u>services</u> is authorized to
- 19 take one or more of the actions listed in subsection (2) of this
- 20 section in any case in which the department finds that a boarding home
- 21 provider has:
- 22 (a) Failed or refused to comply with the requirements of this
- 23 chapter or the rules adopted under this chapter;
- 24 (b) Operated a boarding home without a license or under a revoked
- 25 license;
- 26 (c) Knowingly, or with reason to know, made a false statement of
- 27 material fact on his or her application for license or any data
- 28 attached thereto, or in any matter under investigation by the
- 29 department; or
- 30 (d) Willfully prevented or interfered with any inspection or
- 31 investigation by the department.
- 32 (2) When authorized by subsection (1) of this section, the
- 33 department may take one or more of the following actions:
- 34 (a) Refuse to issue a license;
- 35 (b) Impose reasonable conditions on a license, such as correction
- 36 within a specified time, training, and limits on the type of clients
- 37 the provider may admit or serve;

- 1 (c) Impose civil penalties of not more than one hundred dollars per 2 day per violation;
 - (d) Suspend, revoke, or refuse to renew a license; or

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service.

- 4 (e) Suspend admissions to the boarding home by imposing stop 5 placement.
- 6 (3) When the department orders stop placement, the facility shall
 7 not admit any new resident until the stop placement order is
 8 terminated. The department may approve readmission of a resident to
 9 the facility from a hospital or nursing home during the stop placement.
 10 The department shall terminate the stop placement when: (a) The
 11 violations necessitating the stop placement have been corrected; and
 12 (b) the provider exhibits the capacity to maintain adequate care and
- (4) Chapter 34.05 RCW applies to department actions under this section, except that orders of the department imposing license suspension, stop placement, or conditions for continuation of a license are effective immediately upon notice and shall continue pending any hearing.
- NEW SECTION. Sec. 4. A new section is added to chapter 18.20 RCW to read as follows:

The secretary may adopt rules and policies as necessary to entitle 21 22 the state to participate in federal funding programs and opportunities 23 and to facilitate state and federal cooperation in programs under the 24 department's jurisdiction. The secretary shall ensure that any 25 internal reorganization carried out under the terms of this chapter complies with prerequisites for the receipt of federal funding for the 26 various programs under the department's control. When interpreting any 27 department-related section or provision of law susceptible to more than 28 29 one interpretation, the secretary shall construe that section or provision in the manner most likely to comply with federal laws and 30 rules entitling the state to receive federal funds for the various 31 programs of the department. If any law or rule dealing with the 32 department is ruled to be in conflict with federal prerequisites to the 33 34 allocation of federal funding to the state, the department, or its agencies, the secretary shall declare that law or rule inoperative 35 36 solely to the extent of the conflict.

- NEW SECTION. Sec. 5. (1) The governor shall establish a joint 1 legislative and executive task force on long-term care, safety, 2 3 quality, and oversight. The joint task force shall consist of seven 4 members. The governor shall appoint three members that include: (a) 5 The secretary of the department of social and health services or his or her designee; (b) the secretary of the department of health or his or 6 7 her designee; and (c) the state long-term care ombudsman. 8 legislative members shall serve on the joint task force as ex officio 9 members and include: Two members of the senate appointed by the president of the senate, one of whom shall be a member of the majority 10 caucus and one whom shall be a member of the minority caucus; and two 11 members of the house of representatives appointed by the speaker of the 12 13 house of representatives, one of whom shall be a member of the majority caucus and one whom shall be a member of the minority caucus. Primary 14 15 staff assistance to the joint task force shall be provided by the 16 office of financial management with assistance, as directed by legislative members, by the health care committee of the house of 17 representatives office of program research and the senate health and 18 19 long-term care committee of senate committee services.
- (2) The joint task force shall elect a chair and vice-chair. The chair shall serve a one-year term as the chair of the joint task force. The following year, the previously elected vice-chair shall serve as the chair of the joint task force and a new vice-chair shall be elected by the members of the joint task force.
 - (3) The joint task force shall have the ability to create advisory committees and appoint individuals from a variety of disciplines and perspectives including but not limited to patient and resident advocates and representatives of provider organizations, to assist the joint task force with specific issues related to chapter . . ., Laws of 1998 (this act).
- 31 (4) The joint task force may hold meetings, including hearings, to receive public testimony, which shall be open to the public in 32 accordance with law. Records of the joint task force shall be subject 33 34 to public disclosure in accordance with law. Members shall not receive compensation, but may be reimbursed for travel expenses as authorized 35 36 under RCW 43.03.050 and 43.03.060. Advisory committee members, if 37 appointed, shall not receive compensation or reimbursement for travel 38 or expenses.
 - (5) The joint task force shall:

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- 1 (a) Review all long-term care quality and safety standards for all 2 long-term care facilities and services developed, revised, and enforced 3 by the department of social and health services;
- 4 (b) In cooperation with aging and adult services, the division of developmental disabilities, and the division of mental health and the department of health, develop recommendations to simplify, strengthen, reduce, or eliminate rules, procedures, and burdensome paperwork that prove to be barriers to providing the highest standard of client safety, effective quality of care, effective client protections, and effective coordination of direct services;
 - (c) Review the need for reorganization and reform of long-term care administration and service delivery, including administration and services provided for the aged, for those with mental health needs, and for the developmentally disabled, and recommend the establishment of a single long-term care department or a division of long-term care within the department of social and health services;

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- 17 (d) Suggest cost-effective methods for reallocating funds to unmet 18 needs in direct services;
- 19 (e) List all nonmeans tested programs and activities funded by the federal older Americans act and state-funded senior citizens act or 20 other such state-funded programs, and recommend methods for integrating 21 22 services into existing long-term care programs for the functionally disabled; 23
 - (f) Suggest methods to establish a single point of entry for service eligibility and delivery for all functionally disabled persons;
 - (g) Evaluate the need for long-term care training and review all long-term care training and education programs conducted by the department of social and health services, and suggest modifications to enhance client safety, to create greater access to training through the use of innovative technology, to reduce training costs, to improve coordination of training between the appropriate divisions and departments and, to enhance the overall uniformity of the long-term care training system;
- (h) Evaluate the current system used by the department of social and health services for placement of functionally disabled clients, including aging, mentally ill, and developmentally disabled persons, into long-term care settings and services and assess the capacity of each long-term care service or setting to appropriately meet the health

- and safety needs of functionally disabled clients or residents referred to each service or setting;
- 3 (i) Evaluate the need for uniform client assessments for 4 determining functional long-term care needs of all persons who receive 5 state-funded, long-term care services;

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- (j) Evaluate the success of the transfer of boarding home responsibilities outlined in chapter . . ., Laws of 1998 (this act) and recommend if any further administrative changes should be made; and
- 9 (k) Evaluate the need to establish a dementia and Alzheimer's certification requirement for long-term care facilities who choose to provide care to persons who have been diagnosed with Alzheimer's or a related dementia. The evaluation shall also identify the level of disability a resident or client must have before the resident or client is considered for care in a certified long-term care Alzheimer's facility.
- 16 (6) The joint task force shall report its initial findings and 17 recommendations to the governor and appropriate committees of the 18 legislature by January 1, 1999. The joint task force shall report its 19 final findings and recommendations to the governor and appropriate 20 committees of the legislature by December 12, 1999.
- 21 **Sec. 6.** RCW 18.20.160 and 1985 c 297 s 2 are each amended to read 22 as follows:
- 23 (1) No person operating a boarding home licensed under this chapter 24 shall admit to or retain in the boarding home any aged person requiring 25 nursing or medical care of a type provided by institutions licensed under chapters 18.51, 70.41 or 71.12 RCW, except that when registered 26 27 nurses are available, and upon a doctor's order that a supervised medication service is needed, it may be provided. 28 Supervised 29 medication services, as defined by the department, may include an approved program of self-medication or self-directed medication. Such 30 medication service shall be provided only to boarders who otherwise 31 meet all requirements for residency in a boarding home. 32
- (2)(a) Notwithstanding any provision contained in this section, in no case shall a resident be bedbound, as a result of illness or disease, for any continuous period of time exceeding one hundred twenty hours, unless the resident's attending physician has seen the resident and assessed the resident's medical condition, prescribed a plan of

- 1 care, and determined that a continued stay in the boarding home is 2 appropriate.
- 3 (b) Residents who continue to be bedbound for more than nine 4 consecutive days shall be seen by their attending physician at least 5 every thirty days, counting from the date of the initial bedbound-6 related physician visit, for as long as the resident continues to be 7 bedbound.
- 8 (c) The physician and the boarding home shall document each visit
 9 and the physician shall, at each visit, prescribe a plan of care and
 10 redetermine the appropriateness of the resident's continued stay in the
 11 boarding home.
- 12 (3) For the purposes of this section, an illness or disease does
 13 not include any illness or disease for which the resident has elected
 14 to receive hospice care and chooses to remain in the boarding home.
 15 When the resident elects to receive hospice care, an outside licensed
 16 agency is responsible for performing timely and appropriate visits and
 17 for developing a plan of care.
- 18 **Sec. 7.** RCW 70.128.060 and 1995 c 260 s 4 are each amended to read 19 as follows:
- (1) An application for license shall be made to the department upon forms provided by it and shall contain such information as the department reasonably requires.

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- (2) The department shall issue a license to an adult family home if the department finds that the applicant and the home are in compliance with this chapter and the rules adopted under this chapter, unless (a) the applicant has prior violations of this chapter relating to the adult family home subject to the application or any other adult family home, or of any other law regulating residential care facilities within the past five years that resulted in revocation or nonrenewal of a license; or (b) the applicant has a history of significant noncompliance with federal, state, or local laws, rules, or regulations relating to the provision of care or services to vulnerable adults or to children.
 - (3) The license fee shall be submitted with the application.
- 35 (4) The department shall serve upon the applicant a copy of the 36 decision granting or denying an application for a license. An 37 applicant shall have the right to contest denial of his or her 38 application for a license as provided in chapter 34.05 RCW by

1 requesting a hearing in writing within twenty-eight days after receipt 2 of the notice of denial.

- 3 (5) The department shall not issue a license to a provider if the 4 department finds that the provider or any partner, officer, director, 5 managerial employee, or owner of five percent or more if the provider 6 has a history of significant noncompliance with federal or state 7 regulations, rules, or laws in providing care or services to vulnerable 8 adults or to children.
- 9 (6)(a) The department shall license an adult family home for the 10 maximum level of care that the adult family home may provide. However, in no case shall the adult family home admit or retain residents who 11 are bedbound, as a result of illness or disease, for any continuous 12 period of time exceeding one hundred twenty hours, unless the 13 resident's attending physician has seen the resident to assess their 14 medical condition, prescribed a plan of care, and determined that a 15 16 continued stay in the adult family home is appropriate.
- (b) Residents who continue to be bedbound for more than nine consecutive days shall be seen by their attending physician at least every thirty days, counting from the date of the initial bedbound-related physician visit, for as long as the resident continues to be bedbound.
- 22 (c) The physician and adult family home shall document each visit
 23 and the physician shall, at each visit, prescribe a plan of care and
 24 redetermine the continued appropriateness of the resident remaining in
 25 the adult family home.
- 26 <u>(d)</u> The department shall <u>further</u> define, in rule, license levels 27 based upon the education, training, and caregiving experience of the 28 licensed provider or staff.
- (e) For the purposes of this section, an illness or disease does
 not include any illness or disease for which the resident has elected
 to receive hospice care and chooses to remain in the adult family home.
 When the resident elects to receive hospice care, an outside licensed
 agency is responsible for performing timely and appropriate visits and
 for developing a plan of care.
- 35 (7) The department shall establish, by rule, standards used to 36 license nonresident providers and multiple facility operators.

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38 39 (8) The department shall establish, by rule, for multiple facility operators educational standards substantially equivalent to recognized national certification standards for residential care administrators.

- 1 (9) The license fee shall be set at fifty dollars per year for each
- 2 home. A fifty dollar processing fee shall also be charged each home
- 3 when the home is initially licensed.
- 4 <u>NEW SECTION.</u> **Sec. 8.** The sum of fifty thousand dollars, or as
- 5 much thereof as may be necessary, is appropriated for the fiscal year
- 6 ending June 30, 1999, from the general fund to the office of financial
- 7 management solely for the purposes of implementing section 5 of this
- 8 act.
- 9 <u>NEW SECTION.</u> **Sec. 9.** This act is necessary for the immediate
- 10 preservation of the public peace, health, or safety, or support of the
- 11 state government and its existing public institutions, and takes effect
- 12 immediately.
- 13 <u>NEW SECTION.</u> **Sec. 10.** (1) Sections 1 through 4 of this act expire
- 14 July 1, 2000, unless reauthorized by the legislature.
- 15 (2) Section 5 of this act expires December 12, 1999.
- 16 <u>NEW SECTION.</u> **Sec. 11.** If any provision of this act or its
- 17 application to any person or circumstance is held invalid, the
- 18 remainder of the act or the application of the provision to other
- 19 persons or circumstances is not affected."
- 20 **EHB 2410** S COMM AMD
- 21 By Committee on Health & Long-Term Care

- On page 1, line 1 of the title, after "homes;" strike the remainder
- 24 of the title and insert "amending RCW 18.20.020, 18.20.190, 18.20.160,
- 25 and 70.128.060; adding new sections to chapter 18.20 RCW; creating a
- 26 new section; making an appropriation; providing a contingent expiration
- 27 date; providing an expiration date; and declaring an emergency."

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