

HOUSE BILL REPORT

HB 2492

As Reported By House Committee On:
Health Care

Title: An act relating to discharge planning for individuals requiring long-term care services.

Brief Description: Providing adequate discharge planning for individuals requiring long-term care services.

Sponsors: Representatives Dyer, O'Brien, Skinner, Scott, Cooper, Gombosky, Kenney, Cody, Conway, Eickmeyer, Romero, Appelwick, Radcliff, Cooke, Tokuda, Dunshee, Kastama, Anderson, Buck, Mason, Sullivan, Gardner and Backlund.

Brief History:

Committee Activity:

Health Care: 2/3/98 [DP].

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: Do pass. Signed by 11 members: Representatives Dyer, Chairman; Backlund, Vice Chairman; Skinner, Vice Chairman; Cody, Ranking Minority Member; Murray, Assistant Ranking Minority Member; Anderson; Conway; Parlette; Sherstad; Wood and Zellinsky.

Staff: Antonio Sanchez (786-7383).

Background: Long-term care discharge planning for state pay residents of nursing homes is required in statute. Discharge planning is intended to protect nursing home patients from the financial incentives inherent in keeping residents in a more expensive higher level of care and make clients aware of care options that are in their best interest. The Department of Social and Health Services (DSHS) contracts with Area Agencies on Aging (AAAs) to provide case management services throughout the state.

One thousand nine hundred and ninety-four clients have been discharged from nursing facilities by case managers since July 1997. Of that total, 43.1 percent returned home. Of the persons discharged to home, 39.8 percent were discharged without services. The long-term care case load has steadily increased over the past five years and departmental projections indicate further increases. Recently, the contractors for case management

services have expressed a need for additional funding to increase the number of case managers.

The Aging and Adult Services Administration budget includes a request for \$6.2 million total funds (\$3.1 million General Fund-State) to add case managers to reflect higher than budgeted caseloads for in-home care and to decrease the case manager ratio from 107 in-home cases per manager to 100 in-home cases per manager.

Summary of Bill: The ratio of the caseload per case manager is reduced from its current level of 109 clients to one case manager to a maximum average ratio of 75 clients to one case manager.

Appropriation: An appropriation of \$6.75 million from the state general fund is established for the biennium ending in 1999 to provide for the case manager ratios outlined in the act

Fiscal Note: Requested on January 28, 1998.

Effective Date: The bill takes effect on July 1, 1998.

Testimony For: The large and growing caseload is impacting the ability of case managers to do an adequate job.

Testimony Against: Area Agencies on Aging should not be given this responsibility. They are not authorized to do this by federal law and they do not have the expertise.

Testified: Frank Winslow, Alzheimer Society of Washington (con); Kathy Leitch, Department of Social and Health Services (pro); and Dennis Mahar, Area Agency on Aging (pro).