

HOUSE BILL REPORT

HB 2510

As Amended by the Senate

Title: An act relating to in-home services.

Brief Description: Modifying home health, home care, hospice, and in-home services.

Sponsors: Representatives Edmonds, D. Schmidt, Hurst and Kenney; by request of Department of Health.

Brief History:

Committee Activity:

Health Care: 1/25/00, 1/28/00 [DP].

Floor Activity:

Passed House: 2/3/00, 95-0.

Senate Amended.

Passed Senate: 3/1/00, 45-0.

Brief Summary of Bill

- Combines the three licensing categories of home health, hospice, and home care into a single license category called "in-home services."
- A new hospice license category is established called "hospice care center" to help the terminally ill in an in-home setting.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: Do pass. Signed by 12 members: Representatives Cody, Democratic Co-Chair; Parlette, Republican Co-Chair; Pflug, Republican Vice Chair; Schual-Berke, Democratic Vice Chair; Alexander; Campbell; Conway; Edmonds; Edwards; Mulliken; Pennington and Ruderman.

Staff: Antonio Sanchez (786-7383).

Background:

The Department of Health (DOH) was directed by the Legislature to prepare a report for the Health Care Committees of the Legislature concerning changes needed to the home health, hospice, and home care licensing law. The department established a working committee made up of industry representatives, the Department of Social and Health Services (DSHS), and the DOH to develop recommendations and a report. This committee investigated: enhancing home health, hospice, and home care licensing laws to provide better protection for the public; developing compliance strategies for persons providing in-home services; and analyzing the effects of repealing specific home health licence laws to achieve greater efficiency and effectiveness. The report was submitted by the DOH secretary to the Legislature in November 1999.

The DOH study of State Regulation of Home Health, Hospice, Home Care (Chapter 70.127 RCW) identified that home health, home care, and hospice agencies each must undergo a separate process to receive their licenses. The DOH manages three separate licensing functions for each of the three types of facilities. There are three separate chapters of regulations, and three separate systems for administering each set of regulations. Agencies with more than one license type must deal with the separate paperwork for each license type, and must also undergo separate surveys for each type of license. The study identified that the current system for licensing may be inefficient and recommended that there should be a single licensing type for all in-home agencies as well as clearer definitions of home health, hospice, and home care.

Summary of Bill:

The three license categories (home health, home care, and hospice) are combined into a single license category. The new license category is referred to as the "in-home services license." Agencies will continue to be called by the recognized industry names -- home health, hospice, home care -- their functions will not change.

New definitions are added and existing definitions are modified. A new category under the hospice license is created called "hospice care center." Hospice care centers will be allowed to provide hospice care for the terminally ill in a home-like setting.

Violations of the statute are clarified and the department is given new enforcement actions under the consumer protections act.

Clarification is made to the types of activities or businesses that are not considered in-home services.

Technical changes are made to remove unnecessary references, consolidate sections of the statute, and to provide clarification to definitions and terms.

EFFECT OF SENATE AMENDMENT(S): In home and Adult family home caregivers are required to have an orientation before beginning employment. All adult family home caregivers must be indirectly supervised until they get their basic training within 120 days of employment. Adult family home providers cannot admit anyone with dementia, mental illness, or developmental disabilities until they have had specialized training. If a resident under the care of an adult family home develops special needs, administrators or resident managers must complete specialized training within 120 days of diagnosis. All training curricula is considered part of public domain and can be shared. Any entity providing only one service is not required to get a license as an "in-home services agency" unless they want to.

Appropriation: None.

Fiscal Note: Available.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: This will make it easier and less expensive for agencies who now must make multiple applications if they provide more than one service. This will make government more efficient and reduce paperwork.

Testimony Against: None.

Testified: Gary Bennett, Department of Health; Wilma Wayson, Washington State Hospice Organization; Gail McGaffick, Home Care Association of Washington and Washington State Hospice Organization; and Bob First, American Association of Retired Persons.