

HOUSE BILL REPORT

E2SHB 2668

As Passed House:
February 15, 2008

Title: An act relating to long-term care.

Brief Description: Expanding programs for persons needing long-term care.

Sponsors: By House Committee on Appropriations (originally sponsored by Representatives Morrell, Green, Cody, Hunt, McCoy, Wallace, Pedersen, Campbell, McIntire, Conway, Simpson, Kenney and Darneille).

Brief History:

Committee Activity:

Health Care & Wellness: 1/23/08, 1/30/08 [DPS];

Appropriations: 2/8/08, 2/11/08 [DP2S(w/o sub HCW)].

Floor Activity:

Passed House: 2/15/08, 94-0.

Brief Summary of Engrossed Second Substitute Bill

- Expands services to seniors needing assistance with long-term care to include family caregiver support and respite, aging and disability resource centers, a falls prevention program, and behavior support and training.
- Authorizes the Department of Social and Health Services to conduct vulnerable adult fatality reviews.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 9 members: Representatives Cody, Chair; Morrell, Vice Chair; Hinkle, Ranking Minority Member; Barlow, Green, Moeller, Pedersen, Schual-Berke and Seaquist.

Minority Report: Do not pass. Signed by 2 members: Representatives Alexander, Assistant Ranking Minority Member; Condotta.

Staff: Dave Knutson (786-7146).

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

HOUSE COMMITTEE ON APPROPRIATIONS

Majority Report: The second substitute bill be substituted therefor and the second substitute bill do pass and do not pass the substitute bill by Committee on Health Care & Wellness. Signed by 32 members: Representatives Sommers, Chair; Dunshee, Vice Chair; Alexander, Ranking Minority Member; Bailey, Assistant Ranking Minority Member; Haler, Assistant Ranking Minority Member; Anderson, Chandler, Cody, Conway, Darneille, Ericks, Fromhold, Grant, Green, Haigh, Hinkle, Hunt, Kagi, Kenney, Kessler, Kretz, Linville, McIntire, Morrell, Pettigrew, Priest, Ross, Schmick, Schual-Berke, Seaquist, Sullivan and Walsh.

Staff: Carma Matti (786-7140).

Background:

The Long-Term Care Task Force (Task Force) was created in 2005 in legislation at the request of Governor Gregoire. The Task Force met for two and a half years, and held its last meeting in July 2007. The Task Force received testimony related to the fact that most long-term care services are provided by family members and informal caregivers.

One of the themes that emerged in Task Force meetings was that informal caregivers – family, friends, and neighbors who make up the vast majority of care providers – need more access to information, community services, respite, equipment, counseling, training, and other forms of support to continue to care for loved ones in their homes and neighborhoods for as long as possible. Further, information was presented to the Task Force that better use of preventive health care strategies and improved management of chronic care would promote and sustain informal caregiving around the state.

Summary of Engrossed Second Substitute Bill:

Caregivers who provide critical health and safety support to long-term care recipients may receive a one-time voucher benefit which may be used for respite or other services. The Department of Social and Health Services (DSHS) will develop a caregiver assessment and referral tool to determine eligibility for this benefit and other services. Statewide services provided by DSHS and the area agencies on aging will include long-term care planning, counseling, crisis intervention, and streamlined access to community based services. Area Agencies on Aging will include information on changing demographics in their service area in their annual plans.

Adult family homes are not required to develop plans of care or discharge for respite care services. When providing respite care, boarding homes will obtain sufficient information to meet the individual's needs.

The Department of Health is directed to develop a statewide Senior Falls Prevention Program (Program). The Program will include affordable senior focused exercise programs, community education, and assessments on falls risk identification and reduction.

The DSHS is directed to provide additional support to residents in community settings who exhibit challenging behaviors that put them at risk for institutional placement.

The DSHS is authorized to conduct vulnerable adult fatality reviews under certain conditions.

The bill contains null and void clauses for each section with a fiscal impact.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill is passed. However, section 4, relating to caregiver support and respite, section 5, relating to expansion of aging and disability resource centers, section 6, relating to falls prevention program, and section 7, relating to challenging behavior support and training, are null and void unless funded in the budget.

Staff Summary of Public Testimony: (Health Care & Wellness)

(In support) This legislation will help vulnerable adults and their caregivers. The elderly and disabled will be able to continue living in their own homes with additional supportive services. Reducing injuries from falls and providing seniors with better access to dental care are important initiatives.

(Opposed) None.

Staff Summary of Public Testimony: (Appropriations)

(In support) This bill was developed with strong collaboration. It is pro oral health, which prevents medical complications that cause chronic health care issues later. Washington Dental Services is ready to invest \$160,000 to support this program which leverages the state budget. The dental program has a strong evaluation component. Pass this bill and fully fund it. This bill represents modest investments that will help trend down future demand for more expensive services. It helps families find a way to take care of themselves and their aging loved ones. It holds down future costs.

(Opposed) None.

Persons Testifying: (Health Care & Wellness) Representative Morrell, prime sponsor; Tara Lee, Washington Dental Service Foundation; Dennis Mahar, Elder Care Alliance and Washington Association of Area Aging Agencies; Elaine Armantrout, Physical Therapy Association of Washington; Laurie Jinkins, Department of Health; Carolyn Edmonds, Washington State Long-Term Care Ombudsman; Gary Weeks, Washington State Health Care Association; and Sally York, Pierce County Fall Prevention Coalition and Northwest Orthopedic Institute.

Persons Testifying: (Appropriations) Christina Hulet, Office of the Governor; and Lonnie Johns-Brown, Washington State Society of Clinical Social Workers.

Persons Signed In To Testify But Not Testifying: (Health Care & Wellness) None.

Persons Signed In To Testify But Not Testifying: (Appropriations) None.