

SENATE BILL REPORT

E2SHB 2668

As Reported By Senate Committee On:
Health & Long-Term Care, February 28, 2008
Ways & Means, March 03, 2008

Title: An act relating to long-term care.

Brief Description: Concerning long-term care.

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

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

Committee Activity: Health & Long-Term Care: 2/27/08, 2/28/08 [DPA-WM].
Ways & Means: 3/3/08 [DPA].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass as amended and be referred to Committee on Ways & Means.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Carrell, Fairley, Kastama, Kohl-Welles, Marr and Parlette.

Staff: Rhoda Donkin (786-7465)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: Do pass as amended.

Signed by Senators Prentice, Chair; Fraser, Vice Chair, Capital Budget Chair; Pridemore, Vice Chair, Operating Budget; Zarelli, Ranking Minority Member; Brandland, Carrell, Fairley, Hatfield, Hobbs, Honeyford, Keiser, Kohl-Welles, Oemig, Parlette, Rasmussen, Regala, Roach, Rockefeller, Schoesler and Tom.

Staff: Chelsea Buchanan (786-7446)

Background: In 2005 legislation directed the Governor to establish a task force to develop recommendations for improving the delivery of long-term care services for current and future generations.

The task force held public meetings around the state, established three advisory groups, and hired an outside consultant to provide data on alternative private and public funding sources to pay for long-term care. Policy discussions that evolved from the process focused on

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supporting and expanding the most widespread source of long-term care – that of family and informal caregivers.

It was determined 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, it was determined 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 Bill (Recommended Amendments): 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 (AAA) will include information on changing demographics in AAA's service area and 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. Within funds appropriated, the DSHS is directed to administer grants to expand adult day services of up to \$50,000 each to community organizations that can provide equivalent matching funds or in-kind donations. New adult day programs must also provide services to Medicaid clients.

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

A dental access project is proposed for seniors and individuals with disabilities.

Registered nurses may delegate insulin injections to nursing assistants for diabetic individuals. Nursing assistants must receive specialized training to administer insulin by injection.

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

EFFECT OF CHANGES MADE BY WAYS & MEANS COMMITTEE (Recommended Amendments): Adds a grant program to expand adult day services, subject to funds being provided.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

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

Staff Summary of Public Testimony on Second Substitute Bill (Health & Long-Term Care): PRO: This is extremely important policy for the future of long-term care in this state. It focuses on home-based care, on promoting families and caregivers who don't get paid for the care they provide. It supports the natural networks that make up the vast majority of long-term care. If we do more of this, it will help keep people out of the long-term care system and allow people to age in place. We have to look to the future, and plan for an aging demographic.

Persons Testifying (Health & Long-Term Care): PRO: Sean Pickard, WA Dental Services Foundation; Gary Weeks, WA Health Care Assn.; Laurie Jenkins, Department of Health; Deb Murphy, WA Assn. Services and Housing for the Aging; Ingrid McDonald, American Association of Retired Persons; Dennis Mahar, WA Assn. Area Agencies on Aging; Jerry Reilly, Eldercare Alliance; Bill Moss, DSHS.

Staff Summary of Public Testimony (Ways & Means): None.

Persons Testifying (Ways & Means): No one.