

SENATE BILL REPORT

SB 6222

As Reported By Senate Committee On:
Health & Long-Term Care, January 23, 2008
Ways & Means, February 07, 2008

Title: An act relating to long-term care.

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

Sponsors: Senators Keiser and Kohl-Welles.

Brief History:

Committee Activity: Health & Long-Term Care: 1/14/08, 1/23/08 [DPS-WM].
Ways & Means: 2/05/08, 2/07/08 [DP2S].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6222 be substituted therefor, and the substitute bill do pass 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: That Second Substitute Senate Bill No. 6222 be substituted therefor, and the second substitute bill do pass.

Signed by Senators Prentice, Chair; Fraser, Vice Chair, Capital Budget Chair; Pridemore, Vice Chair, Operating Budget; Zarelli, Ranking Minority Member; Brandland, Carrell, Fairley, Hatfield, Hewitt, 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 Second Substitute): 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.

Boarding homes are not required to develop discharge plans for respite care services. Boarding homes may do a short preadmission assessment for residents entering for respite care.

The Department of Health is directed to develop a statewide senior fall prevention program. The program will include affordable senior focused exercise programs, community education, and assessments on falls risk identification and reduction.

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

A dental access project is proposed for seniors and adults with disabilities. The program will provide enhanced reimbursement rates for certified dentists who provide specific procedures and for medical providers who provide preventive oral health services. Coordination with the University of Washington and outreach with the community is identified.

All items above are subject to funding appropriated for that specific purpose. Also, if specific funding is not provided for the bill, referencing it by bill or chapter number in the omnibus appropriations act by the end of June 2008, (2008 supplemental operating budget), the bill is null and void.

EFFECT OF CHANGES MADE BY WAYS & MEANS COMMITTEE (Recommended Second Substitute): States that the requirement for area agencies on aging to offer respite vouchers and expanded access to information is subject to funding appropriated for that specific purpose.

EFFECT OF CHANGES MADE BY HEALTH & LONG-TERM CARE COMMITTEE (Recommended First Substitute): Clarifications were made that information services are available to people of all ages. Boarding homes are not required to do full assessments on respite clients. The dental project will include adults with disabilities.

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 Original Bill (Health & Long-Term Care): PRO: These expansions in key programs for the elderly will improve access to current services that help people live independently. Informal care givers need more respite options and more information. Expanding dental services to the elderly is critical because many people over age 65 have no dental insurance and dental disease is closely tied to chronic illness. Efforts to educate and prevent injuries from senior falls will reduce suffering and lower hospital costs. These provisions were the result of a lot of discussion about developing services for people who want to continue to age in their homes and not enter the long-term care system.

OTHER: The bill should not eliminate assessments done on short term respite care clients in boarding homes and adult family homes. These facilities should be fully aware of the needs of anyone who is admitted, even if it's only for a few days. The dental pilot should be open to anyone with a disability who can't access dental services.

Persons Testifying (Health & Long-Term Care): PRO: Elaine Armantrout, physical therapist; Gary Weeks, Washington Health Care Association; Dennis Mahar, Area Agencies on Aging; Taura Lee, Diane Oakes, Washington Dental Service Foundation; Bruce Reeves, Senior Citizens Lobby; Deb Murphy, Bonnie Blachly, Washington Association Housing and Services for the Aging; Laurie Jenkins, Washington State Department of Health.

OTHER: Nancy James, Leslie Emerick, Home Care Association Washington; Elizabeth Phelan, M.D., University of Washington, Geriatric Medicine; Louise Ryan, Long-Term Care Ombudsman Program.

Staff Summary of Public Testimony on First Substitute Bill (Ways & Means): PRO: This bill will allow people to remain in their homes and in less costly long-term care settings. Lack of dental care for seniors can be a matter of life and death because of its interaction with chronic conditions such as heart disease and diabetes. The dental portion of the bill will pull in private funding and the expertise of the University of Washington Dental School, and it has an evaluation component. Informal and unpaid caregivers need additional supports. Increased training for adult family homes will improve the quality of life for residents.

Persons Testifying (Ways & Means): PRO: Senator Karen Keiser, prime sponsor; Gary Weeks, Washington Health Care Association; Tara Lee, Washington Dental Service; Dennis Mahar, Washington Association of Area Agencies on Aging; Hope Concepcion-Reffet, Alzheimer's Association and Adult Family Home provider.