
Health Care & Wellness Committee

HB 1784

Brief Description: Concerning nursing home quality.

Sponsors: Representatives Tharinger, Cody, Van De Wege, Riccelli, Jinkins and Moeller.

Brief Summary of Bill

- Establishes staffing standards for nursing homes and penalties for noncompliance with those standards.
- Directs the Department of Social and Health Services to develop a payment methodology that uses outcome based measures as a component of nursing home rates.

Hearing Date: 2/6/15

Staff: Chris Blake (786-7392).

Background:

Nursing homes provide 24-hour nursing care, personal care, therapies, nutrition management, organized activities, social services, laundry services, and room and board to three or more residents. Such care may include the administration of medications, preparations of special diets, bedside nursing care, application of dressings and bandages, and carrying out treatment prescribed by licensed health care providers.

Nursing homes are licensed by the Department of Social and Health Services (Department). The Department, by regulation, has established staffing standards that each nursing home must meet. Each nursing home must have a sufficient number of qualified nursing personnel available on a 24-hour basis to provide nursing and related services to attain or maintain residents' highest practicable physical, mental, and psychosocial well-being. In general, nursing homes must have enough appropriately qualified staff available to provide care and services under both routine and emergency conditions.

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.

With respect to nurse staffing, nursing homes must have a registered nurse on duty to directly supervise resident care for at least 16 hours per day. The remaining eight hours may be covered by either a registered nurse or a licensed practical nurse.

Summary of Bill:

Nursing homes must have at least one registered nurse at the facility on duty at the nursing home on a 24-hour basis.

Nursing homes are required to meet identified staffing standards on an incremental basis over the course of a three-year period. The Department of Social and Health Services (Department) must adjust the staffing standards according to resident acuity.

- By January 1, 2017, each nursing home must have sufficient staff on duty to meet a ratio of 2.4 hours of staffing for each resident.
- By January 1, 2018 each nursing home must have sufficient staff on duty to meet a ratio of 3.3 hours of staffing for each resident.
- By January 1, 2019 each nursing home must have sufficient staff on duty to meet a ratio of 3.6 hours of staffing for each resident, with at least 1.1 hours provided by licensed staff.

If a nursing home does not meet the staffing standards, the Department may cite the nursing home for deficiencies and assess a penalty of up to \$10,000 for each month of noncompliance. If the nursing home was noncompliant with the staffing standards for over 20 percent of its shifts in a month, the Department may cite the nursing home for deficiencies, assess a penalty of up to \$15,000 for each month of noncompliance, and restrict the nursing home from admitting new residents. If the Department finds that any residents or employees had a negative outcome as the result of the failure to comply with staffing standards, the Department may assess a fine of an additional \$20,000 on the nursing home.

Nursing homes must submit monthly staffing reports to the Department. The Department must establish an automated system for collecting information, including payroll records. The Department must review cost report data for quality indicators in nursing homes with low staffing levels. The quality indicators must include the prevalence of falls, prevalence and severity of pressure ulcers, rates of antipsychotic use, rates of medication errors, incidence of decline in late loss of activities of daily living, direct care staff injuries, and staff turnover rates.

The Department must develop a payment methodology to incorporate outcome-based measures into nursing home rates. Up to 10 percent of the nursing home's rate must be based upon meeting quality indicators.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.