
Health Care & Wellness Committee

SSB 5028

Brief Description: Raising licensure limits to allow assisted living facilities to serve a higher acuity resident population.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Bailey, Dammeier, Cleveland, Keiser and Warnick).

Brief Summary of Substitute Bill

- Authorizes assisted living facilities with a designation from the Department of Social and Health Services to provide continuing nursing services to residents who need the frequent presence and evaluation of a registered nurse.
- Requires assisted living facilities with a continuing nursing services designation to notify residents in need of such services that they may be eligible for coverage for the services under Medicare, Medicaid, or another coverage program.

Hearing Date: 3/20/15

Staff: Chris Blake (786-7392).

Background:

The Department of Social and Health Services (Department) licenses assisted living facilities which are community-based residences that provide housing and basic services to seven or more residents. Residents of assisted living facilities are people who live in the facility for reasons of age or disability and receive services provided by the facility. Assisted living facilities may not admit people who require nursing home or hospital level care or the frequent presence or evaluation of a registered nurse. Services provided to residents by assisted living facilities include housekeeping, meals, snacks, laundry, and activities. They may also provide domiciliary care including assistance with activities of daily living, health support services, and intermittent nursing services. Intermittent nursing services include: medication administration, administration of health care treatments, diabetic management, nonroutine ostomy care, tube feeding, and delegated nursing tasks.

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.

Nonresident individuals may also live in an assisted living facility and receive specified services, but they may not receive domiciliary care from the facility. Some of the services that nonresident individuals may receive upon request include emergency assistance, blood pressure checks, nursing assessment services to determine the need for a referral to an outside health care provider, medication assistance such as reminding, opening containers, prefilling insulin syringes, falls risk assessments, nutrition management and education services, dental services, and wellness programs.

Summary of Bill:

An assisted living facility may obtain a designation from the Department of Social and Health Services (Department) that allows it to provide continuing nursing services to residents who require the frequent presence and evaluation of a registered nurse. A designation is not required in cases in which the resident is receiving hospice care or has a short-term illness if the assisted living facility assures that there are enough adequately trained providers available to meet the resident's needs. The term "continuous nursing services" applies to residents that have been assessed with a condition or diagnosis that is expected to require the frequent presence and supervision of a registered nurse. The prohibition against assisted living facilities admitting people who require nursing home or hospital level care or the frequent presence or evaluation of a registered nurse is removed.

The Department must adopt rules related to the provision of continuing nursing services, including the process for designation, the extent to which continuing nursing services may be provided in assisted living facilities, staffing requirements, and physical plant requirements. To become designated, an assisted living facility must pass an initial inspection by the Department and subsequent inspections every 18 months. Applicants must pay a fee to the Department to defray the costs of the designation program.

Disclosure forms related to the scope of domiciliary care assistance provided to residents must include any limitations, additional services, or conditions related to the provision of continuing nursing services. If an assisted living facility with a designation to provide continuing nursing services observes changes in the overall functioning of residents receiving these services, it must respond to any physical, mental, or emotional changes that exceed the facility's capabilities.

If an assisted living facility with a designation to provide continuous nursing services has reason to believe that a resident needs continuous nursing services or rehabilitative therapy services, the facility must provide the resident and appropriate representatives of the resident with a notice. The notice must inform the client that he or she may be eligible to have the services covered by Medicare, Medicaid, veterans' benefits, long-term care insurance, or other benefit programs. The resident or appropriate representative must sign the notice. Residents may contract for nursing or rehabilitative services through an outside health care provider or from the assisted living facility. An assisted living facility that fails to give proper notice and subsequently charges the resident privately commits financial exploitation under vulnerable adult protection laws.

Assisted living facilities that receive a continuing nursing services designation may not use the designation or facility modifications related to the designation to permanently discharge any current Medicaid residents. In addition, for one year following the receipt of the initial

designation, an assisted living facility may not reduce the number of Medicaid residents that it retains below the highest number of Medicaid residents living there during the year prior to becoming designated.

Appropriation: None.

Fiscal Note: Available.

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