

SENATE BILL REPORT

SB 5200

As of January 28, 2025

Title: An act relating to veterans' medical foster homes.

Brief Description: Concerning veterans' medical foster homes.

Sponsors: Senators Wagoner, Christian and Fortunato.

Brief History:

Committee Activity: Health & Long-Term Care: 1/28/25.

Brief Summary of Bill

- Provides an exemption from the state's Adult Family Home licensure requirements for a Medical Foster Home that meets certain requirements.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Julie Tran (786-7283)

Background: Adult Family Homes. An Adult Family Home (AFH) is a residential home licensed to care for up to six non-related residents. AFHs provide personal care, specialty care, necessary supervision, laundry, and room and board. The Department of Social and Health Services (DSHS) licenses and regulates AFHs. There are currently over 5000 licensed AFHs in the state of Washington.

Medical Foster Homes. Medical Foster Homes (MFH) are private homes in which a trained caregiver provides services to a few individuals. Some, but not all, residents are veterans. They are private residences where the caregiver and relief caregivers provide care and supervision 24 hours a day, seven days a week. This caregiver can help the veteran carry out activities of daily living, such as bathing and getting dressed. Other services that a veteran may receive in the MFH includes: medication assistance, some nursing assistance, all the meals, and planned recreational and social activities.

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

To be eligible for a MFH: an individual must be enrolled in Home Based Primary Care and a home needs to be available. An individual must pay for their MFH stay using their insurance or their own private funds. The charge for a Medical Foster Home is based on the individual's income and the level of care needed.

The federal Department of Veterans Affairs (VA) ensures that the caregiver is well trained to provide VA planned care. While living in a MFH, Veterans receive Home Based Primary Care.

Home Based Primary Care is health care services provided to veterans in their home. The program is for veterans who need team based in-home support for ongoing diseases and illnesses that affect their health and daily activities. Veterans usually have difficulty making and keeping clinic visits because of the severity of their illness and are often homebound, but that is not required. This program is also for veterans who are isolated, or their caregiver is experiencing burden.

Currently, there are 159 VA locations offering the MFH program across 47 states and territories. MFH has served an estimated 7300 veterans since the program's inception. There are approximately 478 approved MFHs.

Summary of Bill: An exemption from the state's AFH licensure requirements is provided for a MFH that is under the oversight and annually reviewed by the VA in which care is provided exclusively to three or fewer veterans.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

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

Staff Summary of Public Testimony: PRO: This bill would help alleviate the growing demand for long-term care beds while addressing the needs of aging and disabled veterans including those experiencing homelessness This is another tool in the box to make sure that veterans get appropriate care in their later years. This state MFH program would be for veterans only and would be a program managed by the federal government and the VA. There are currently some rules in place for group homes that are in conflict and this bill removes some of those barriers. There is a universal desire to provide the best care and to ensure that there are robust standards.

OTHER: The current bill as written is implementable but in reviewing federal regulations, the regulation standards are lower for these homes than other long-term care settings in the

state. A couple of examples include the education and training standards as well as the disqualifying crimes that would prevent a potential MFH provider from operating is more limited than the current state's list of disqualifying crimes. It is also a concern that without state oversight, there are scenarios where neither Adult Protective Services or DSHS' Residential Care Services has jurisdiction over an adult living in this setting who is experiencing abuse and neglect.

Persons Testifying: PRO: Senator Keith Wagoner, Prime Sponsor; Charles Wharton, Veterans Legislative Coalition; Wanda Tapp-Kratzer.

OTHER: Bea Rector, Dept. of Social and Health Services.

Persons Signed In To Testify But Not Testifying: No one.