

# SENATE BILL REPORT

## ESSB 5200

---

---

As Passed Senate, March 3, 2025

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

**Brief Description:** Concerning veterans' medical foster homes.

**Sponsors:** Senate Committee on Health & Long-Term Care (originally sponsored by Senators Wagoner, Christian and Fortunato).

**Brief History:**

**Committee Activity:** Health & Long-Term Care: 1/28/25, 2/13/25 [DPS].

**Floor Activity:** Passed Senate: 3/3/25, 49-0.

**Brief Summary of Engrossed First Substitute 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

**Majority Report:** That Substitute Senate Bill No. 5200 be substituted therefor, and the substitute bill do pass.

Signed by Senators Cleveland, Chair; Orwall, Vice Chair; Muzzall, Ranking Member; Bateman, Chapman, Christian, Harris, Holy, Riccelli, Robinson and Slatter.

**Staff:** Julie Tran (786-7283)

**Background:** Medical Foster Homes. Medical foster homes (MFHs) 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

---

*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.*

veteran may receive in the MFH includes: medication assistance, some nursing assistance, all the meals, and planned recreational and social activities.

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.

Adult Family Homes. An adult family home (AFH) is a residential home licensed to care for up to six nonrelated 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.

Long-Term Care Workers. A long-term care worker is any person who provides paid, hands-on personal care services for older persons or persons with disabilities. The term includes individual providers of home care services, direct care workers employed by home care agencies, providers of home care services to people with developmental disabilities, direct care workers in assisted living facilities and adult family homes, and respite care providers. The term excludes employees of several types of health care and residential care facilities, as well as care providers not paid by the state or by a private agency or facility licensed to provide personal care services.

Long-term care workers must become certified as home care aides by the Department of Health unless an exemption applies. To become certified, a long-term care worker must complete 75 hours of training, pass a certification examination, and pass state and federal background checks.

Background Checks. DSHS must screen long-term care workers through a background

check to learn if they have a history that would disqualify them from working with vulnerable adults or children. A background check can be a name and date of birth check, a fingerprint-based background check, or both. Some crimes that may be listed on a background check result are automatically disqualifying, while others may allow the person to work with vulnerable adults depending on the results of a character, competence, and suitability review conducted by the employer.

Abuse and Neglect of Vulnerable Adults. DSHS Adult Protective Services investigates reports of abuse, abandonment, neglect, exploitation, and self-neglect of vulnerable adults. Vulnerable adults include persons who:

- are 60 years of age or older and unable to care for themselves;
- are subject to a guardianship or conservatorship;
- have a developmental disability; or
- are admitted to a facility or are receiving certain types of care, including care through an individual provider.

**Summary of Engrossed First Substitute 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, and its caregivers are in compliance with applicable state laws including any required training, certification, and background checks.

MFH caregivers are considered to be long-term care workers.

MFHs are added to the list of facilities where the person admitted to one of those facilities is considered a vulnerable adult.

MFH caregivers are also considered to be providers who may not be employed in the care of and have unsupervised access to vulnerable adults if certain circumstances are met.

**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 on Original Bill:** *The committee recommended a different version of the bill than what was heard.* 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.