SENATE BILL REPORT SB 6180

As Reported by Senate Committee On: Ways & Means, April 18, 2009

Title: An act relating to home care workers...

Brief Description: Relating to home care workers.

Sponsors: Senators Keiser, Tom and Prentice.

Brief History:

Committee Activity: Ways & Means: 4/18/09 [DPS, DNP].

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Substitute Senate Bill No. 6180 be substituted therefor, and the substitute bill do pass.

Signed by Senators Prentice, Chair; Fraser, Vice Chair, Capital Budget Chair; Tom, Vice Chair, Operating Budget; Fairley, Hobbs, Honeyford, Keiser, Kline, McDermott, Oemig, Pflug, Pridemore, Regala, Rockefeller and Schoesler.

Minority Report: Do not pass.

Signed by Senators Carrell and Parlette.

Staff: Megan Atkinson (786-7446)

Background: "Long-term care workers" refers to persons who provide personal care to elderly and individuals with disabilities. The personal care tasks are frequently referred to as "activities of daily living" and include activities such as eating, bathing, toileting, self-medicating, and dressing. Long-term care workers can be employed in a community based facility (for example, adult family homes and boarding homes), can be directly employed by the individual needing care, or can be contracted by a home care agency to provide care for an individual or several individuals. In many instances, long-term care workers are related to their client and sometimes reside together. Depending on the specific provider to client relationship, long-term care workers may also be referred to as individual providers and agency providers, or sometimes by the collective term home care worker or home care provider.

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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.

Publicly funded programs operated by the Department of Social and Health Services (DSHS) – Aging and Disability Services Administration (ADSA) authorize hours of personal care for clients based on an assessment of individual need. ADSA clients can receive authorization for personal care assistance through the Medicaid personal care (MPC) program and can also receive authorization for MPC as part of a Medicaid waiver program such as the Community Options Program Entry System or Basic Waivers. The average monthly cost per client for MPC varies between \$1,300 and \$1,400. Based on the March 2009 caseload forecast, the 2009-11 MPC caseload is expected to total nearly 60,000 clients.

Several sections of current law address the training, employment, collective bargaining, and working conditions for long-term care workers. In addition, Initiative 1029 (approved in the November 2008 general election) specified certain background check, training, and certification mandates for all long-term care workers. The major provisions of Initiative 1029 are:

- a state paid background check, including a fingerprint check against the Federal Bureau of Investigation (FBI) databases;
- the establishment of a home care aide certification program in the Department of Health (DOH);
- a tiered training program for all long-term care workers (varies between 15 and 150 hours);
- continuing education requirements for all long-term care workers (12 hours per vear); and
- a requirement that individual providers (those long-term care workers directly employed by the person receiving care) be compensated for the hours they spend in training.

Most of the provisions of Initiative 1029 go into effect January 1, 2010, although the requirement that DSHS make available 70 hours of optional, additional training (sometimes referred to as advanced topics training) goes into effect January 1, 2011.

Current law requires that DSHS make training available for long-term care workers and that individual providers receive their training through a dedicated training partnership and that the state contribution to that training partnership be made subject to a collective bargaining agreement.

Summary of Bill: The bill as referred to committee not considered.

Summary of Bill (Recommended Substitute): Amends the effective dates for most sections of Initiative 1029 to delay implementation by one year. Amends certain sections of Initiative 1029 and other statutes to make technical corrections that will permit DSHS and DOH to conduct background checks on long-term care workers, including a fingerprint check against FBI databases, and to share that information between the two departments. The effective date for optional, advanced topics training is July 1, 2011.

Appropriation: No

Fiscal Note: Not requested.

Committee/Commission/Task Force Created: No.

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

Staff Summary of Public Testimony: PRO: The changes to the background check language is a technical fix and is needed. The one-year delay is a reasonable delay to the initiative given the current fiscal pressures facing the state. There are concerns regarding the interaction between this bill and the 2009-11 budget.

Persons Testifying: PRO: Misha Werschkul, Service Employees International Union.

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