

SENATE BILL REPORT

SB 6225

As Reported By Senate Committee On:
Health & Long-Term Care, February 4, 2004

Title: An act relating to boarding homes.

Brief Description: Concerning boarding home domiciliary services.

Sponsors: Senators Deccio, Keiser, Parlette, Winsley and Rasmussen.

Brief History:

Committee Activity: Health & Long-Term Care: 1/20/04, 2/4/04 [DPS].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6225 be substituted therefor, and the substitute bill do pass.

Signed by Senators Deccio, Chair; Winsley, Vice Chair; Brandland, Franklin, Keiser, Parlette and Thibaudeau.

Staff: Rhoda Donkin (786-7198)

Background: Boarding homes are facilities that provide long-term care services and housing to thousands of individuals in this state. This is defined in statute as "domiciliary care." Roughly 70 percent of the residents of boarding homes pay for their care with private means, the rest through state-funded programs. Boarding homes are regulated by the Department of Social and Health Services (DSHS).

Boarding homes use disclosure forms to describe the services and care they provide. Disclosure is part of the requirements of having a boarding home license. Recently, DSHS began allowing boarding homes to admit people with greater medical and health care needs. The department also increased the care and services requirements that all licensed boarding homes must provide.

Besides the individuals who seek care and services in a boarding home, there are others who do not wish to receive any services, but want to live independently.

There is concern in the boarding home community that current state requirements of licensed boarding homes are too rigorous, and not flexible enough to provide for the wide range of individuals who wish to live in them.

Summary of Substitute Bill: The current statutory definition of "domiciliary care" is expanded to specify levels of care including activities of daily living, health support services, and intermittent nursing services. Boarding homes may choose to provide different levels of care, or not to provide more than basic services. This level of services must be fully disclosed to residents. Boarding homes must notify residents 30 days before changing services.

A boarding home licensee may permit a family member to administer medications or treatment assistance to residents. Conditions for family assistance are described.

The pre-admission review process is condensed into eight areas of assessment, and provisions are added allowing greater opportunity for emergency admissions.

DSHS must report to the Legislature by December 12, 2005 on the payment system for licensed boarding homes.

Language provides for the immediate discharge of any resident who needs 24 hours of continuous skilled nursing care or supervision, excluding persons who are receiving hospice care, or has a short-term illness.

Substitute Bill Compared to Original Bill: Original language permitted an unlicensed person, other than a family member, to provide medications and treatments in a boarding home.

A disclosure form for all the services provided at a boarding home was included. Boarding homes holding beds temporarily for residents may seek 85 percent of the combined private and Medicaid rate from a third party.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill contains several effective dates. Please refer to the bill.

Testimony For: This legislation is necessary to allow boarding homes more flexibility to provide services safely and effectively. Current regulations require boarding homes do everything if they want to provide, for example, activities of daily living. It is not always possible to staff for high levels of care, and the industry needs the flexibility to offer lower levels of care without being out of compliance with boarding home licensure.

Testimony Against: If boarding homes are allowed to provide the lowest levels of care, too many residents will have to move from home to home because their needs will grow beyond what the boarding home can provide. This will result in more people ending up in nursing homes.

Testified: PRO: Brendan Williams, WHCA; Dave Foltz, Legacy House; Lauri St. Ours, NORALFA; Beth Johnson; CON: Penny Black, DSHS; Hilke Faber, Residents Council of Washington; Kary Hyre, Long-Term Care Ombudsman; Ruth Shearer, Residents Council of Washington.

Signed In/Did Not Testify: Jeff Crollard, Long-Term Care Ombudsman (con); Ginger Marshall, Faerland Terrace (pro).