Unofficial Copy J3 1999 Regular Session (9lr2540)

ENROLLED BILL

-- Finance/Environmental Matters --

Introduced by Senator Conway Senators Conway and Collins

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this _____ day of _____ at _____ o'clock, ____M.

President.

CHAPTER____

1 AN ACT concerning

2	Nursing Facilities - Licensure Requirements - Staffing	
3	Nursing Facilities - Maryland Medical Assistance Program - Reserved Beds	
4	- Task Force on Quality of Care in Nursing Facilities - Nursing Home	
5	Comparative Evaluation System	
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6 FOR the purpose of requiring nursing facilities to meet certain staffing requirements

7 to qualify for licensure; requiring nursing facilities to employ certain individuals

8 for certain positions; specifying certain duties that certain individuals may not

9 perform; specifying the staffing to resident ratio requirements for nursing

10 facilities; requiring nursing facilities to post certain information in certain areas

11 of the facility on a certain form developed by the Department of Health and

12 Mental Hygiene; providing for certain penalties; providing for the application of

13 this Act; requiring the Department to conduct a certain study and to report to

14 the General Assembly by a certain date; authorizing the Department to adopt

15 certain regulations; defining a certain term; and generally relating to staffing

16 requirements for nursing facilities providing that certain payments to nursing

17 <u>facilities for reserving beds for Maryland Medical Assistance Program recipients</u>

- 1 may not include payment for certain nursing services; repealing the
- 2 requirement that certain payments to nursing facilities for reserving beds for
- 3 Program recipients may not be less than a certain amount; requiring that
- 4 <u>savings resulting from certain provisions of this Act be used for a certain</u>
- 5 purpose; establishing a Task Force on Quality of Care in Nursing Facilities;
- 6 specifying the membership of the Task Force; specifying the duties of the Task
- 7 Force; requiring the Task Force to make certain recommendations and to take
- 8 into account and examine certain issues; requiring the Secretary of the
- 9 Department of Aging to chair the Task Force; requiring the Department of Aging
- 10 to provide staff support for the Task Force; requiring the Task Force to submit a
- 11 <u>certain report on or before a certain date; providing for the termination of the</u>
- 12 Task Force; providing for the termination of certain provisions of this Act;
- 13 <u>requiring the Health Care Access and Cost Commission, in consultation with the</u>
- 14 Department of Health and Mental Hygiene and the Department of Aging, to
- 15 *develop a system to comparatively evaluate nursing facility quality of care and*
- 16 *performance on an objective basis and to annually publish certain summary*
- 17 *findings; establishing the purpose of the comparative evaluation system;*
- 18 *requiring the Commission to consider a certain factor in developing the system;*
- 19 <u>requiring the system to solicit certain information under certain circumstances;</u>
- 20 *authorizing the Commission to adopt certain regulations; requiring a certain*
- 21 <u>report on or before a certain date;</u> and generally relating to the reservation of
- 22 <u>beds for Program recipients and quality of care in nursing facilities.</u>

23 BY repealing and reenacting, with amendments,

- 24 Article Health General
- 25 Section 19-319(a)
- 26 Annotated Code of Maryland
- 27 (1996 Replacement Volume and 1998 Supplement)
- 28 BY adding to
- 29 Article Health General
- 30 Section 19 319.3
- 31 Annotated Code of Maryland
- 32 (1996 Replacement Volume and 1998 Supplement)
- 33 BY repealing and reenacting, with amendments,
- 34 <u>Article Health General</u>
- 35 <u>Section 15-117</u>
- 36 Annotated Code of Maryland
- 37 (1994 Replacement Volume and 1998 Supplement)
- 38 BY repealing and reenacting, with amendments,
- 39 <u>Article Health General</u>
- 40 <u>Section 19-1501</u>
- 41 <u>Annotated Code of Maryland</u>
- 42 (1996 Replacement Volume and 1998 Supplement)

1 BY adding to

- 2 Article Health General
- 3 Section 19-1508(d)
- 4 Annotated Code of Maryland
- 5 (1996 Replacement Volume and 1998 Supplement)

6 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 7 MARYLAND, That the Laws of Maryland read as follows:

8

Article - Health - General

9 19 319.

10 (a) (1) To qualify for a license, an applicant and the hospital or related 11 institution to be operated shall meet the requirements of this section.

12 (2) IN ADDITION TO THE REQUIREMENTS OF THIS SECTION, TO QUALIFY
13 FOR A LICENSE, A NURSING FACILITY SHALL MEET THE REQUIREMENTS OF § 19 319.3
14 OF THIS SUBTITLE.

15 19 319.3.

16 (A) IN THIS SECTION, "LICENSED PERSONNEL" MEANS:

17(1)A REGISTERED NURSE WHO IS LICENSED TO PRACTICE IN THE18STATE; OR

19 (2) A PRACTICAL NURSE WHO IS LICENSED TO PRACTICE IN THE STATE.

20 (B) A NURSING FACILITY SHALL EMPLOY STAFF SUFFICIENT IN NUMBER AND
21 QUALIFICATIONS TO MEET THE SCHEDULED AND UNSCHEDULED NURSING CARE
22 NEEDS OF THE RESIDENTS.

23 (C) TO ENSURE COMPLIANCE WITH SUBSECTION (B) OF THIS SECTION, A
24 NURSING FACILITY SHALL:

25 (1) ESTABLISH AND EMPLOY REGISTERED NURSES WHO ARE LICENSED
26 TO PRACTICE IN THE STATE FOR THE FOLLOWING POSITIONS:

27 (I) A FULL-TIME DIRECTOR OF NURSING;

28	(II)	FOR NURSING FACILITIES WITH 100 BEDS OR MORE, A
29	FULL-TIME ASSISTANT E	VIRECTOR OF NURSING;

30(III)NURSING SUPERVISORS ON DUTY AT ALL TIMES, 24 HOURS A31DAY, 7 DAYS A WEEK; AND

32 (IV) A FULL TIME DIRECTOR TO SUPERVISE THE IN SERVICE 33 EDUCATION PROGRAM REQUIRED UNDER § 19 319.1 OF THIS SUBTITLE;

4		SENATE BILL 740
1 2	(2) FEWER THAN:	MAINTAIN A RATIO OF LICENSED PERSONNEL TO RESIDENTS OF NO
3 4	MORNING SHIFT;	(I) ONE LICENSED PERSONNEL TO 15 RESIDENTS DURING THE
5 6	AFTERNOON SHIFT	(II) ONE LICENSED PERSONNEL TO 25 RESIDENTS DURING THE F; AND
7 8	NIGHT SHIFT; AND	(III) ONE LICENSED PERSONNEL TO 35 RESIDENTS DURING THE
9 1((3)) RESIDENTS OF NO	MAINTAIN A RATIO OF CERTIFIED NURSING ASSISTANTS TO FEWER THAN:
1 12	1 2 DURING THE MOR	(I) ONE CERTIFIED NURSING ASSISTANT TO FIVE RESIDENTS NING SHIFT;
13 14		(II) ONE CERTIFIED NURSING ASSISTANT TO 10 RESIDENTS ERNOON SHIFT; AND
1: 10	5 5 DURING THE NIGI	(III) ONE CERTIFIED NURSING ASSISTANT TO 15 RESIDENTS IT SHIFT.
		LICENSED PERSONNEL AND CERTIFIED NURSING ASSISTANTS MAY OD PREPARATION, HOUSEKEEPING, LAUNDRY, OR MAINTENANCE
	- ()	AN INDIVIDUAL EMPLOYED TO PROVIDE FOOD PREPARATION, AUNDRY, OR MAINTENANCE SERVICES MAY NOT PROVIDE ORESIDENTS.
	4 FACILITY A NOTION	A NURSING FACILITY SHALL DISPLAY ON EACH FLOOR OF THE CE THAT EXPLAINS THE CURRENT RATIO OF LICENSED PERSONNEL ID CERTIFIED NURSING ASSISTANTS TO RESIDENTS.
20	6 (2)	THE NOTICE SHALL BE:
		(I) POSTED IN A LOCATION THAT IS VISIBLE AND ACCESSIBLE TO LY MEMBERS OF THE RESIDENTS, CAREGIVERS, AND POTENTIAL
30)	(II) ON A FORM PROVIDED BY THE DEPARTMENT.
	2 STAFFING REQUIR	AFFING REQUIREMENTS UNDER THIS SECTION ARE MINIMUM REMENTS AND SHALL NOT BE CONSTRUED TO LIMIT THE ABILITY FACILITY TO EMPLOY ADDITIONAL STAFF.
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34 (G) THE SECRETARY MAY ADOPT REGULATIONS NECESSARY TO CARRY OUT 35 THE PROVISIONS OF THIS SECTION.

5		SENATE BILL 740
1 2		IF A NURSING FACILITY FAILS TO MEET THE REQUIREMENTS OF THIS HE SECRETARY MAY IMPOSE THE FOLLOWING PENALTIES:
3		(1) DELICENSURE OF THE NURSING FACILITY;
4		(2) \$500 PER DAY FOR EACH DAY THE VIOLATION CONTINUES; OR
5		(3) BOTH.
6	SECTIO	N 2. AND BE IT FURTHER ENACTED, That:
7	(a)	The Department of Health and Mental Hygiene shall:
10	-	(1) Conduct a study to determine whether the staffing ratios and vided in this Act are sufficient to meet the needs of residents in nursing luding determining appropriate levels of staffing based on resident
12 13	levels of staf	(2) Recommend, if necessary, a methodology for determining appropriate fing.
		In conducting the study, the Department shall consider recommendations tracilitics, licensed health care providers, advocacy groups, and other tries.
	shall submit	On or before January 2001 and every 5 years thereafter, the Department its findings and recommendations to the General Assembly, in with § 2-1246 of the State Government Article.
20	<u>15-117.</u>	
21	<u>(a)</u>	In this section, "leave of absence" includes:
22		(1) <u>A visit with friends or relatives; and</u>
23 24	rehabilitative	(2) <u>A leave to participate in a State approved therapeutic or</u> e program.
27	absent tempo	(1) To ensure that a bed is reserved for a Program recipient who is prarily from a nursing facility, the Program shall include the following rursing facilities that have made a provider agreement with the
31	hospitalization that the Prog	(2) If the Program recipient is absent from a nursing facility due to on for an acute condition, the facility shall receive payment for each day ram recipient is hospitalized and a bed is reserved and made available n of that Program recipient.
	the facility s	(3) If a Program recipient is on leave of absence from a nursing facility, hall receive payment for each day that the Program recipient is absent reserved and made available for the return of that Program recipient

35 and a bed is reserved and made available for the return of that Program recipient.

6	SENATE BILL 740
1 2	(c) (1) Payments under subsection (b)(2) of this section may not be made for more than 15 days for any single hospital stay.
3 4	(2) (i) Payments under subsection (b)(3) of this section may not be made for more than 18 days in any calendar year.
7	(ii) Notwithstanding any rule or regulation, a leave of absence is not subject to any requirement that it may not exceed a particular number of days a visit, except that the leave of absence may not exceed a total of 18 days during any [12-month period] CALENDAR YEAR.
11	(d) (1) Payments required under this section shall be made according to the per diem payment procedures that the Department sets [and may not be less than the per diem payments made to the nursing facility for days when the Program recipient is present in the facility].
	(2) PAYMENTS REQUIRED UNDER THIS SECTION MAY NOT INCLUDE PAYMENT FOR NURSING SERVICES FOR BEDS RESERVED FOR PROGRAM RECIPIENTS ON A LEAVE OF ABSENCE.
	(e) <u>A nursing facility may not make additional charges against a Program</u> recipient because the Program recipient is absent temporarily from the nursing facility.
19 20	SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:
21	<u>Article - Health - General</u>
22	<u>19-1501.</u>
23	(a) In this subtitle the following words have the meanings indicated.
24 25	(b) "Commission" means the Maryland Health Care Access and Cost Commission.
	(c) <u>"Comprehensive standard health benefit plan" means the comprehensive</u> standard health benefit plan adopted in accordance with § 15-1207 of the Insurance Article.
29	(d) (1) "Health care provider" means:
32	(i) <u>A person who is licensed, certified, or otherwise authorized</u> under the Health Occupations Article to provide health care in the ordinary course of business or practice of a profession or in an approved education or training program; or
	(ii) <u>A facility where health care is provided to patients or recipients,</u> including a facility as defined in § 10-101(e) of this article, a hospital as defined in § 19-301(f) of this article, a related institution as defined in § 19-301(n) of this article,

	a health maintenance organization as defined in § 19-701(e) of this article, an outpatient clinic, and a medical laboratory.			
5	(2) <u>"Health care provider" includes the agents and employees of a facility</u> who are licensed or otherwise authorized to provide health care, the officers and directors of a facility, and the agents and employees of a health care provider who are licensed or otherwise authorized to provide health care.			
7 8	<u>(e)</u> services and		care practitioner" means any person that provides health care ed under the Health Occupations Article.	
9 10	<u>(f)</u> rendered by		care service" means any health or medical care procedure or service care practitioner that:	
11 12	<u>dysfunction</u>	<u>(1)</u> ; or	Provides testing, diagnosis, or treatment of human disease or	
13 14	goods for th	<u>(2)</u> se treatm	Dispenses drugs, medical devices, medical appliances, or medical ent of human disease or dysfunction.	
15 16	<u>(G)</u> <u>TITLE.</u>	<u>"NURS</u>	ING FACILITY" HAS THE MEANING STATED IN <u>§</u> 19-1401 OF THIS	
17 18	[(g)] practitioner	<u>(H)</u> s in whic	(1) "Office facility" means the office of one or more health care h health care services are provided to individuals.	
19		<u>(2)</u>	"Office facility" includes a facility that provides:	
20			(i) <u>Ambulatory surgery;</u>	
21			(ii) Radiological or diagnostic imagery; or	
22			(iii) Laboratory services.	
23 24	by a hospita	<u>(3)</u> Il and reg	<u>"Office facility" does not include any office, facility, or service operated</u> gulated under Subtitle 2 of this title.	
25	<u>[(h)]</u>	<u>(I)</u>	"Payor" means:	
			<u>A health insurer or nonprofit health service plan that holds a</u> ty and provides health insurance policies or contracts in the State his article or the Insurance Article;	
29 30	<u>authority in</u>	<u>(2)</u> the State	<u>A health maintenance organization that holds a certificate of</u> ; or	
31 32	<u>Article.</u>	<u>(3)</u>	A third party administrator as defined in § 15-111 of the Insurance	

2 3	<u>(D)</u> <u>HEALTH AN</u>	(1) <u>THE COMMISSION, IN CONSULTATION WITH THE DEPARTMENT OF</u> ID MENTAL HYGIENE AND THE DEPARTMENT OF AGING, SHALL:
		(I) ON OR BEFORE JULY 1, 2001, DEVELOP AND IMPLEMENT A COMPARATIVELY EVALUATE THE QUALITY OF CARE AND PERFORMANCE G FACILITIES ON AN OBJECTIVE BASIS; AND
7 8	<u>EVALUATIC</u>	(II) <u>ANNUALLY PUBLISH THE SUMMARY FINDINGS OF THE</u> DN.
11 12 13	PROVIDED PERFORM COMPARA	(2) (1) <u>THE PURPOSE OF THE COMPARATIVE EVALUATION SYSTEM</u> <u>IED UNDER THIS SECTION IS TO IMPROVE THE QUALITY OF CARE</u> <u>OBY NURSING FACILITIES BY ESTABLISHING A COMMON SET OF</u> <u>ANCE MEASURES AND DISSEMINATING THE FINDINGS OF THE</u> <u>TIVE EVALUATION TO NURSING FACILITIES, CONSUMERS, AND OTHER</u> <u>CD PARTIES.</u>
15 16	<u>COMMISSI</u>	(II) IN DEVELOPING THE COMPARATIVE EVALUATION SYSTEM, THE ON SHALL CONSIDER THE HEALTH STATUS OF THE POPULATION SERVED.
17 18	<u>INFORMAT</u>	(3) <u>THE SYSTEM, AS APPROPRIATE, SHALL SOLICIT PERFORMANCE</u> ION FROM CONSUMERS AND THEIR FAMILIES.
19 20	<u>COMPARA</u>	(4) <u>THE COMMISSION MAY ADOPT REGULATIONS TO ESTABLISH THE</u> TIVE EVALUATION SYSTEM PROVIDED UNDER THIS SECTION.
23	2001, the Co Government	N 3. AND BE IT FURTHER ENACTED, That, on or before January 1, commission shall report to the Governor and, subject to § 2-1246 of the State Article, to the General Assembly on the nursing facility comparative system required by Section 2 of this Act.
27 28	that result fr services to I nursing hom	ON 2. 4. AND BE IT FURTHER ENACTED, That General Fund savings om Section 1 of this Act shall be used to increase the <i>payments for</i> Program recipients under the nursing services cost center of the Medicaid he reimbursement formula, in accordance with the study conducted Chapter 724 of the Acts of 1998.
30	<u>SECTIO</u>	ON 3. 5. AND BE IT FURTHER ENACTED, That:
31	<u>(a)</u>	There is a Task Force on Quality of Care in Nursing Facilities.
32	<u>(b)</u>	The Task Force shall consist of the following members:
33 34	President of	(1) two members of the Senate Finance Committee, appointed by the the Senate;
35 36	Committee,	(2) two members of the Senate Economic and Environmental Affairs appointed by the President of the Senate;

1 19-1508.

9			SENATE BILL 740
1 2		(3) the Spea	four members of the House Environmental Matters Committee, ker of the House;
3		<u>(4)</u>	the Secretary of the Department of Aging;
4 5	the Secretary	<u>(5)</u> 's designe	the Secretary of the Department of Health and Mental Hygiene, or ee; and
6 7	Secretary of A	<u>(6)</u> Aging.	three representatives of area agencies on aging, appointed by the
8	<u>(c)</u>	The Sec	retary of Aging shall chair the Task Force.
9 10	(d) facilities, inc		k Force shall study the quality of care in Maryland nursing
11		<u>(1)</u>	current quality of care standards for nursing facilities;
12		<u>(2)</u>	current staffing patterns and staffing standards;
13 14		<u>(3)</u> o quality	current policies and procedures for inspecting nursing facilities and of care complaints;
15 16		<u>(4)</u> ome com	the findings of a March 1999 U.S. General Accounting Office report plaints to the Special Committee on Aging of the U.S. Congress;
17 18	those in othe	<u>(5)</u> er states;	a comparison of the Maryland standards, policies, and procedures to
19		<u>(6)</u>	the labor pool available to fill nursing jobs; and
20 21	nursing facil	<u>(7)</u> ities.	State funding mechanisms for nursing facilities and regulation of
22	<u>(e)</u>	The Tas	k Force shall recommend:
23 24			changes to current standards, policies, and procedures necessary to in nursing facilities;
25 26	staffing and	<u>(2)</u> standard	if necessary, a methodology for determining appropriate levels of s; and
27		<u>(3)</u>	if necessary, changes to funding mechanisms.
	Governor an	d, subjec	k Force shall report its findings and recommendations to the t to § 2-1246 of the State Government Article, to the General re December 1, 1999.
		Hygiene	partment of Aging, with assistance from the Department of Health and the Department of Legislative Services, shall provide staff Force.

- 1 SECTION 4. 6. AND BE IT FURTHER ENACTED, That Section 3 5 of this Act
- 2 shall take effect June 1, 1999. It shall remain effective for a period of 1 year and, at
- 3 the end of May 31, 2000, with no further action required by the General Assembly,
- 4 Section 3.5 of this Act shall be abrogated and of no further force and effect.

5 <u>SECTION 3. 5. AND BE IT FURTHER ENACTED, That, subject to Section 4 of</u> 6 <u>this Act, this Act shall take effect October July 1, 1999.</u>

7 SECTION 7. AND BE IT FURTHER ENACTED, That Sections 1 and 4 of this

8 Act shall take effect July 1, 1999. Sections 1 and 4 of this Act shall remain effective for

- 9 <u>a period of 3 years and, at the end of June 30, 2002, with no further action required by</u> 10 the General Assembly, Sections 1 and 4 of this Act shall be abrogated and of no further
- 11 force and effect.

12 <u>SECTION 8. AND BE IT FURTHER ENACTED</u>, That, except as provided in

13 Sections 6 and 7 of this Act, this Act shall take effect October 1, 1999.