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2003 HOUSE HUMAN SERVICES

HB 1164

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Date

2003 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. HB 1164

House Human Services Committee

☐ Conference Committee

Hearing Date January 15, 2003

Tape Number	Side A	Side B	Meter#
į į	X		17.7 - 58.8
1		×	0.0 - 7.4

Minutes:

Linda Wright. Director of the Aging Services Division, Dept. of Human Services appeared in support with written testimony and also submitted an amendment.

Questions of the committee if all the registered facilities were aware of what has been going on, if they are all aware of these 2 bills and if they were all in agreement, a time limit for approval and what that time limit is. If there were 2 fees, one with Dept. of Human Services and one with the Dept. of Health for food and fire safety, if these were license fees or registration fees and what the difference is.

Darlene Bartz with the Dept. of Health appeared to answer questions on the Basic Care Facilities and stated that they license them and try to get out to inspect them twice a year with no fee.

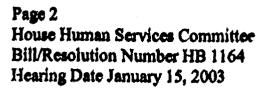
Rep. Porter had concerns with the powers and duties of the dept. and how they would enforce if nothing is set up (an inspection process). Also why we are charging a \$75.00 fee for just a piece of paper when they are not getting an inspection or any other services for a fee. It was noted that

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the Ombudsman are there to let the residents or tenants know what their rights are and responding to complaints and have a regular presence in the facility.

<u>David Skolsky</u> of the Dept. of Human Services appeared to answer questions of the committee as Linda had to leave.

Concerns of the committee on the \$2500.00 fee, the difference between inspections for basic care and for assisted living and why would you need a fee for assisted living and not basic care.

Committee requested a comparison of the different licenses and inspections for nursing homes, basic care and assisted living and the fees charged. (Received from Shelly Peterson)

Nancy Andrews, Administrator of Wheatland Terrace appeared in support with written testimony.

Rep. Pollert had questions on explanation of Home Health License and if for people not only within the facility but for people who go out to do home base care. (Answer was only within their facility)

Penni Weston. Administrator of Edgewood Vista in Bismarck appeared in support with written testimony.

Rep. Porter has a problem or concern with home care services rendered portion and why is there a conflict in policy.

Rep. Price wanted clarification on individual support services and if that is provided by Home Health or by whomever they select. (It was noted by Ms. Weston that they offer those services within their facility and also charge for those additional services, but they can move in and rent an apt. from them and select a home care agency to come in and provide those services) Her

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Page 3
House Human Services Committee
Bill/Resolution Number HB 1164
Hearing Date January 15, 2003

office works with them to a relect someone if needed. Also noting that all people in her facility are certified in nursing as we require that.

Question by the committee is - why should they be exempted when those are the very services that we're talking about in a nursing home.

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2003 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. HB 1164

House Human Services Committee

☐ Conference Committee

Hearing Date January 20, 2003

Tape Number	Side A	Side B	Meter#
2		x	21.8 - 34.0
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Committee Clerk Signature	Shau	n Kentraw	

Shelly Peterson of the ND Long Term Care Assoc. appeared and handed out a Comparison on the Assisted Living, Basic Care and Nursing Facilities and explained the amendments on Assisted Living. She suggested not to accept the amendments presented by Linda Wright. The Health Dept. and Human Services agreed to the language within the bill, at the hearing last week, the Health Dept. stated they hadn't received the amendment and were not supportive of the amendment and as the amendment reads it would require every assisted living facility to get a home health license. So do not accept the amendments as the two State entities regulating them are saying something different and need to get worked out with them.

Rep. Price noted that if the services were contracted with the facility, then the nurse practice act would apply.

Rep. Devlin moved the part of the amendment to make it clear that the DD facilities do not fall under the definition of assisted living facilities, second by Porter. 13 - 0 - 0

Rep. Devlin moved a DP as Amended, second by Rep. Pollert. 13 - 0 - 0, Rep. Pollert to carry.

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FISCAL NOTE Requested by Legislative Council 01/03/2003

Bill/Resolution No.:

HB 1164

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to

funding levels and annonviations anticinated under current law.

	2001-200	3 Biennium	2003-200	5 Blennium	2005-200	7 Biennium
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures						
Appropriations						

2002-2005 Blanchum 2004-2002 Blannium

County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision.

L	200	I-YOOD DIGHT	ilumi	200	3-2000 DIGIII	ILLERITY	200	J-2001 DIGITI	110111
	Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2. Narrative: Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.

The bill relates to the licensing of assisted living facilities. The Department is currently performing the functions and this bill will not have a fiscal impact.

- 3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:
 - A. Revenues: Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.
 - B. Expenditures: Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.
 - C. Appropriations: Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive budget. Indicate the relationship between the amounts shown for expenditures and appropriations.

Namo:	Brenda M. Weisz	Agency:	Human Services
Phone Number:	328-2397	Date Prepared:	01/10/2003

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38207.0101 Title.0200

Adopted by the Human Services Committee January 21, 2003

1-22-03

AMENDMENTS TO HOUSE BILL NO. 1164 HR

Page 1, line 2, remove the comma

Page 1, line 3, remove the first comma

Page 1, line 5, after "and" insert "to"

HOUSE AMENDMENTS to HB 1164 1-22-03 Page 5, line 31, remove the first underscored period and after "23-16" insert "or 25-16"

HOUSE AMENDMENTS TO HE 1164 Page 6, line 1, after "services" insert an underscored period Renumber accordingly

Page No. 1

38207.0101

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Date: 1-20.03 Roll Call Vote #:

2003 HOUSE STANDING COMMITTEE ROLL CALL VOTES **BILL/RESOLUTION NO. HB 1164**

HUMAN	SEKV	ICES	Com	mittee
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Yes	No	Representatives	Yes	No
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	Yes, V V V V V V V V V V V V V V V V V V V	mmittee umber P as a Yes No V V No No No	Seconded By Representatives Rep. Sally Sandvig Rep. Bill Amerman Rep. Carol Nicmeier Rep. Louise Potter	mmittee The las (Ima, IaD) Seconded By Lap, Poller f Yes No Representatives Yes Rep. Sally Sandvig Rep. Bill American Rep. Carol Niemeier Rep. Louise Potter No D

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REPORT OF STANDING COMMITTEE (410) January 22, 2003 12:51 p.m.

Module No: HR-12-0908 Carrier: Pollert Insert LC: 38207.0101 Title: .0200

REPORT OF STANDING COMMITTEE

HB 1164: Human 4: Human Services Committee (Rep. Price, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS (13 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1164 was placed on the Sixth order on the calendar.

Page 1, line 2, remove the comma

Page 1, line 3, remove the first comma

Page 1, line 5, after "and" insert "to"

Page 5, line 31, remove the first underscored period and after "23-16" insert "or 25-16"

Page 6, line 1, after "services" insert an underscored period

Renumber accordingly

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Page No. 1

HR-12-0908

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2003 SENATE HUMAN SERVICES

HB 1164

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2003 SENATE STANDING COMMITTEE MINUTES BILL/RESOLUTION NO. HB 1164

Senate Human Services Committee

☐ Conference Committee

Hearing Date: March 4, 2003

Tape Number	Side A	Side B	Meter #
1	X		1362 - end
		X	0 - 720

Minutes:

SENATOR JUDY LEE opened the public hearing for SB 1164 relating to registration of assisted living facilities; and to provide a penalty.

LINDA WRIGHT, Director of the Aging Services Division of the Department of Human Services, testified and recommended changes. She stated the changes recommended make the fire/life safety and food establishment requirements for assisted living facilities consistent with the definition in HB 1164. Explained definitions of aging facilities. (Written testimony and Definitions of Common Aging Housing Options) (Meter # 1466 - 2125)

Discussion with committee questions and responses from Ms. Wright regarding change of language from licensure to registration, registration fee offsets administrative costs, examples of care, who wrote the bill, and about a section be repealed and new chapter created. (Meter # 2126 - 3302)

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Page 2 Senate Human Services Committee Bill/Resolution Number HB 1164 Hearing Date March 4, 2003

NANCY ANDREWS, Administrator of Wheatland Terrace and Manage of Tufte Manor, both assisted living facilities in Grand Forks, testified in favor of HB 1164. (Written testimony)

(Meter # 3000 - 3302)

PENNI WESTON, Administrator of Edgewood Vista in Bismarck, testified in favor. (Written testimony) Committee questions and responses from Ms. Weston regarding hospice services, menus of services available, and resident safety. (Meter # 3410 - 4116)

BRUCE DAVIDSON, Administrator for SMP Praireland Home Health Care Agency in Fargo and President of the North Dakota Association for Home Care, testified in opposition. Not for its intent, but rather for its vagueness in addressing patient rights, safety, and advocacy. (Written testimony) (Meter # 4235 - 4930)

Committee questions and responses from Mr. Davidson regarding assisted living facilities being medical model, Nurses Practice Act referred and who is not covered, RNs making judgment calls, home care in its entirety takes someone who understands the services, and whether nurses are capable of determining care. (Meter # 4931 - 5600)

NANCY ANDREWS, of Valley Memorial Homes in Grand Forks, testified in opposition.

Talked about inspections being unannounced. Caution that maybe a security blanket may not always be there. (Meter # 5620 - 5980)

DR. CONSTANCE KALANEK, Ex. Director of the Board of Nursing, responded to a question from SENATOR LEE regarding qualifications of nurses who might be working in home health care or in assisted living setting, what is required. She stated Nurse Practice Act does not speak specifically to certain specialty areas within nursing, but in general regulates the practice of nursing. The definition of nursing is very broad, so it would encompass the assisted living

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Page 3
Senate Human Services Committee
Bill/Resolution Number HB 1164
Hearing Date March 4, 2003

services, home health services, et cetera. ... Guide practice to law. ... (Tape 1, Side A, Meter # 6086 - end and Side B, Meter # 0 - 90)

KATHY KLEIN, representing Somerset Court - an assisted living facility in Minot, testified in a favorable position. (Written testimony and proposed amendments) (Meter # 178 - 360)

SENATOR LEE closed the public hearing at this time. (Meter # 385)

Committee discussion opened on HB 1164.

SENATOR LEE stated a gentleman from the Health Department said that they were happy with the results on the results of HB 1164 and they support the bill. SENATOR LEE also checked with both Health and Human Services Department representatives ... said that it would not be necessary to have the amendment. ... (Meter # 560 - 660)

SENATOR BROWN moved a DO PASS.

SENATOR ERBELE seconded the motion.

Roll call was held. 6 yeas 0 nays.

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SENATOR BROWN will be the carrier. (Meter # 720)

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Date

Date: 03-04-03
Roll Call Vote #: (1)

2003 SENATE STANDING COMMITTEE ROLL CALL VOTES BILL/RESOLUTION NO. //6 4

Motion Made By Sen. 1	Frow	Seconde	ed By <u>Sen.</u> (Proce	2
Senators	Yes	No	Senutors	Yes	N
Senator Judy Lee - Chairman					
Senator Richard Brown - V. Chair Senator Robert S. Erbele	-		· · · · · · · · · · · · · · · · · · ·		_
Senator Tom Fischer	1				
Senator April Fairfield	V				
Senator Michael Polovitz	1				_
				1.0	
					<u> </u>
Total (Yes)		No	0		
Absent Floor Assignment Sen.	13	rown			
If the vote is on an amendment, brief	ny indicat	e intent:			

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REPORT OF STANDING COMMITTEE (410) March 4, 2003 1:53 p.m.

Module No: SR-38-3862 Carrier: Brown Insert LC: Title:

REPORT OF STANDING COMMITTEE

HB 1164, as engrossed: Human Services Committee (Sen. J. Lee, Chairman) recommends DO PASS (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). Engrossed HB 1164 was placed on the Fourteenth order on the calendar.

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SR-38-3862

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2003 TESTIMONY

HB 1164

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Date

TESTIMONY HOUSE BILL 1164 HOUSE HUMAN SERVICES COMMITTEE CLARA SUE PRICE, CHAIRMAN JANUARY 15, 2003

Chairman Price and members of the House Human Services Committee, my name is Linda Wright. I am the Director of the Aging Services Division, Department of Human Services.

House Bill 1164 has been submitted at the request of the Department of Human Services, and on behalf of the Department, I am testifying in Support of the bill. The changes in North Dakota Century Code recommended in this bill are the result of the efforts of the Assisted Living work group, which was facilitated by myself.

The work group was composed of representatives of assisted living facilities, the State Department of Health, AARP, the State Insurance Commissioners Office, Centers for Independent Living, a consumer and the Department of Human Services, and consultation with the Home Care Association.

The changes recommended in the statute are as follows:

- Deleting the assisted living references from Chapter 50-24.5 "Aid to Aged, Blind, and Disabled Persons". The deletions are on pages 1 through 5, line 20 of House Bill 1164.
- Creating a new Chapter 50-32 specifically for assisted living (pages 5, line 21 through page 7 of the bill).
- Clarifying that a facility may provide or coordinate individualized support services (line 28, page 5).

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- Changing registration of assisted living facilities to licensure of assisted living facilities. Licensure would allow facilities to have greater access to reimbursement from long term care insurance policies.
- Clarifying health services that may be provided in an assisted living facility.

Attached to my testimony is an amendment to Section 50-32-05 (lines 7 through 11 on page 7). The Department is recommending approval of the amendment. House Bill 1164 was already filed when it became evident that the section of the bill regarding health services needed further clarification. The input of the Home Care Association was instrumental in helping to more clearly define this area.

The concept of assisted living remains the same. It is a social model, individuals living in apartment settings either totally independent or accessing support services based on individual needs.

There are currently 35 facilities registered with the Department of Human Services (see attached list). The changes recommended in this bill do not have a fiscal impact.

The Department of Human Services also supports House Bill 1160, introduced at the request of the State Department of Health. The changes recommended make the fire/life safety and food establishment requirements for assisted living facilities consistent with the definition in House Bill 1164. House Bill 1160 also deletes obsolete terms and adds assisted living to the Long-Term Care Ombudsman statute, Section 50-10.1-01.

I would be happy to answer any questions at this time.

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individualized support services, an entity may provide home care services to an individual residing in an assisted living facility owned or operated by that entity. For purposes of this section, home care services means services provided to maintain an individual's health such as medication administration, blood pressure monitoring, weight monitoring, overall health assessment and any other nonskilled service designed to maintain or promote health.

Also, an addition needs to be made to Section 4, #1, the definition of 'assisted living facility'. To the end of it, add, "or under N.D.C.C. 25-16". The DD licensing statute is NDCC 25-16. This amendment is necessary to make it clear that DD facilities do not fall under the definition of assisted living facilities.

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DATE	NAME OF ST.		APPROVED	DECICIDATION	בטס סכסיטי
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12/03/02	rolla	\$75.00	yes	002	18
12/19/02	Edgewood Vista - Bismarck	\$75.00	yes	8	01/01/03-12/31/03
11/21/02	The Kensington - Williston	\$75.00	yes	003	01/01/03-12/31/03
12/09/02	The Horizo. Good Shepherd Home in Watford City	\$75.00	yes	900	01/01:03-12/31/03
12/06/02	Eveigreen - Dickinson	\$75.00		400	
72/21/20	Waterford on West Century - Bismarck	\$75.00	yes	900	01/01/03 - 12/31/03
12/09/02	Wheatland Terrace - Grand Forks	\$75.00	yes	200	Γ
12/10/02	Furte Manor - Grand Forks	\$75.00	yes	800	01/01/03-12/31/03
11/2/102	Betharry Homes Towers I & II - Fargo	\$75.00	yes	600	01/01/03-12/31/03
12/2/02	Kiverview Place - Fargo	\$75.00		010	
12/06/02	Edgewood Vista - Step II, Inc Minot	\$75.00	yes	015	01/01/03-12/31/03
12/00/02	Brentmoor of Minot	\$75.00	yes	011	01/01/03-12/31/03
12/10/02	Waterford at Harwood Groves - Fargo	\$75.00	yes	912	01/01/03-12/31/03
12/05/02	Proneer House Assisted Living, Inc Fargo	\$75.00	yes	014	01/01/03-12/31/03
14/40/02	Asniey Medical Center	\$75.00	yes	013	01/01/03-12/31/03
70/81/11	EIM Crest Assisted Living - New Salem	\$75.00	XeX	018	
70/4077	Prairie Rose Place - Linton	\$75.00	yes	017	01/01/03-12/31/03
40.40.00	Accessible space Apartments - Minot closed			024	
20/91/21	The Dewey Apartments - Jamestown	\$75.00	yes	023	01/01/03-12/31/03
12/19/02	Heritage House - New Rockford	\$75.00	yes	216	01/01/03-12/31/03
12/23/02	bismarck Primrose	\$75.00	yes	020	01/01/03-12/31/03
19,000	Heartland Courts - The Lake Region Lutheran Home, Inc Devils Lake	\$75.00) (8)	021	01/01/03-12/31/03
12/00/02	Western Horizons - Hettinger	\$75.00	yes	019	01/01/03-12/31/03
12/23/1/02	Bapust Home of Kenmare	\$75.00		022	
14.22/02	Valley View Manor - Velva	\$75.00		025	
12/17/102	Lake County Manor - Devils Lake	\$75.00	yes	920	01:01/03-12/31/03
14724/02	Evergreen Aparments - Ellendale	\$75.00		031	
11/21/02	Sometier and sun Center South - Mayville	\$75.00		720	
42/00/02	Parinersel Court - Mirror			870	
12/03/02	billugeview Estates - valley City	\$75.00	yes	035	01/01/02-12/31/03
11/19/02	Larimore 5000 Samanian Apartments	\$75.00	yes	620	01/01/03-12/31/03
10/20/07	Deveny Anne Inc Lisbon	\$75.00		030	
20/00/02	Posterior Regiment and Nursing Home - Hatton	\$75.00	yes	033	01/01/03-12/31/03
12/03/02	rainwood Fiace Lodge - Grand Forks	\$75.00	yes	034	01/01/03-12/31/03

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Testimony on HB 1164 House Human Services Committee January 15, 2003

Chairman Price and members of House Human Services, thank you for the opportunity to testify on HB 1164. My name is Nancy Andrews. I am the administrator of Wheatland Terrace and am responsible for the overall management of Tufte Manor; both assisted living facilities in Grand Forks.

I am testifying today on behalf of the North Dakota Long Term Care Association (NDLTCA) and the assisted living members we represent.

As shared with you in my previous testimony I was a member of the DHS workgroup that created the basis for the bill before you. The purpose of the workgroup was to:

1. Define assisted living

2. Determine a process to license assisted living, which would replace licensing as a boarding house and the registration process

3. Determine a way to exempt assisted living facilities from the requirement to obtain a home health license if they were providing home health services only to individuals within their facilities

Numerous meetings were held to get to the point that we felt we had accomplished the above, and I would like to take this opportunity to thank both Departments for their patience and perseverance throughout the entire process. The workgroup played a vital role in developing a system whereby those we serve will be able to benefit from this proactive approach. The workgroup made great strides working relentless hours, and I thank them for this.

While HB 1164 provides clear direction in the operation of an assisted living facility it also allows flexibility which will only benefit our residents. I would like to call your attention to the handout attached to my testimony. This document identifies the features in both assisted living and basic care. While there seems to be minimal differences between the two levels of care, this document also clarifies them.

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Operator's Signature

The licensing of assisted living will create a more streamline approach for operation. Prior to this proposal a facility was required to register as an assisted living facility, license as a boarding house, and to possibly license as a home health agency. Over time it seemed that the process was becoming very convoluted. It was always the workgroup's goal to develop a system that would allow efficiency and effectiveness in order to keep the costs to a minimum.

By having an assisted living facility license we are anticipating there may be increased usage of long-term care benefits if a person has assisted living coverage, as the insurance industry seems to identify with a license better than registration. Allowing the exemption of a home health license is also very positive, because assisted living facilities do not have the need for such intense RN coverage, thereby, it enables cost efficiency.

Overall, we feel that HB 1164 will allow assisted living facilities to operate in a manner that provides flexibility and choice while providing care and services in a safe and secure environment. We feel very positive that we are moving in a direction that will be best for those we serve – the elderly within the state.

Thank you for the opportunity to provide testimony on HB 1164. I would be happy to answer any questions you may have.

Nancy Andrews, Administrator 4000 24th Ave S Grand Forks, ND 58201 (701) 787-7566

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Highlights of Proposals From Assisted Living Workgroup Regarding Chapter 50-32 - Assisted Living Facilities

The assisted living workgroup proposes a chapter specifically for assisted living communities. This chapter would include but is not limited to:

- 1. An assisted living definition that is somewhat consistent with federal definitions.
- 2. The authority for the Department of Human Services to license, establish a method to receive and investigate complaints and establish rules governing the licensure of facilities.
- 3. Exempt facilities that offer home health services from requirement to obtain home health license if the entity provides home health services only to individuals residing in an assisted living facility owned and operated by that entity.

Throughout there activities, the workgroup sought to establish law that would allow assisted living facilities to be governed by the marketplace and to remain a social model. During this process it became evident that there was a fine, yet distinct, line between assisted living and basic care. Those differences follow:

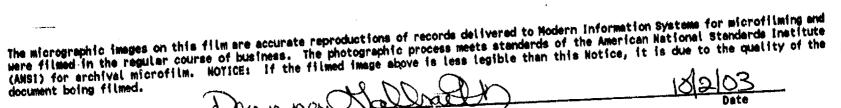
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Compai	rison Between Basic Care	
Features	Assisted Living	Basic Care
Definition	"Assisted Living Facility" means a building or structure containing a series of living units operated as one entity to provide services for five or more individuals who are not related by blood, marriage, or guardianship to the owner or manager of the entity and which is kept, used, maintained, advertised, or held out to the public as a place that provides or coordinates individualized support services to accommodate the individual's needs and abilities to maintain as much independence as possible. An assisted living facility does not include a facility that is a congregate housing facility, licensed as a basic care facility, or licensed under chapter. 23-16.	Basic Care Facility" means a
Rates	Choose and pay for only those services needed or desired	administration. All inclusive rate for residents regardless of services used
Governance	Governed by contract law	Governed by state regulation
Licensure	Department of Human Services and Department of Health	Department of Health
Public Assistance	Limited for services only (SPED and only for lower income) none for rent	Basic Care Assistance for low income elderly and disabled
Space Accommodations Complaint	Generally one or two bedroom apartment or efficiency Ombudsman	Generally semi-private room with shared bath Ombudsman
Investigations Rights of Residents	No "special" bill of rights – same rights as US citizens	Bill of Rights in North Dakota Century Code
Special Care Units for Dementia	Not available	Available
Average Rate	\$50 to \$150 per day depending on services and space	\$50.85 per day
Ownership	1/3 For Profit 2/3 Non-Profit	1/3 For Profit 2/3 Non-Profit
Statewide Availability	35 Registered in North Dakota	43 Licensed in North Dakota





Operator's Signature



3406 Dominion Street • Bismarck, ND 58503 • (701) 258-7489 • Fax (701) 258-7491

TESTIMONY ON HB 1164

Chairman Price and members of the House Human Services Committee. My name is Penni Weston and I am the Administrator of Edgewood Vista in Bismarck. Our facility has 58 assisted living apartments, 28 licensed basic care beds and a 14 bed Alzheimer's unit which is now licensed as basic care. Edgewood Vista has been fortunate to have one of our residents serve on the Assisted Living Task Force.

I am here to offer testimony in support of HB 1164. I currently have 23 residents at my facility who are receiving benefits under their long term care insurance policies. I have an additional 3 residents who have filed claims and we are awaiting a coverage decision. 13 of these residents live in assisted living, 4 in basic care and 4 in our basic care Alzheimer's unit. While the legislation last session to require "regis" ation" of assisted living facilities, did cause some insurance companies to favorably consider this level of care in North Dakota, there remains a small number who have refused to budge on this issue. Even when the facility meets all of the requirements identified in the policy, this one word continues to be problematic.

The current legislation before you requires the Department of Human Services to issue a "license" for assisted living. I believe that with this license, along with the license from the Department of Health, it will be easier to make a case to those few insurance companies who continue to require licensure.

I have had the opportunity to work with the Insurance Commissioners office in conjunction with family members in assisting residents in filing long term care insurance claims. We can be proud of the work that the employees in this state agency perform on behalf of the citizens of North Dakota. I still have 4 residents in my facility who I believe will meet the benefit triggers in their policies but have been caught in the "licensing" dilemma. I urge you to pass HB 1164 and I look forward to being able to assist them in filing new claims once the law changes.

Thank you for the opportunity to testify and I will answer any questions of the committee members.

Assisted Living/Basic Care/Alzheimer's

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Regarding License			Nursing Facility	57 per nursing facility bed	This fee has been in place and	it has never increased. In 2003,	the Health Department	proposed an increase in their	budget to OMB. Governor	Hoeven rejected the proposed	fee increase.	Unannounced health inspection	at least annually. Can occur at	any hour, any day Tife safety	inspection annually. Different	staff from the Health	Department conduct the health	vs life safety inspection.	Generally inspections do not	occur at the same time.			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	reactal lunds and	State general funds	24 /hr/day on-site nursing	Decriptor of their cont	individualized assessment and	care plan
g and Nursing Facility I	nequil ement, inspection Process and Fees	Type of Service	Basic Care	None	In 2001 the Health Department	proposed a per bed fee of \$45,	this was defeated. In 2003, the	Health Department proposed a	per bed fee in their budget to	OMB - Governor Hoeven	rejected the proposed fee.	Life safety inspection at least	once every two years.	Inspection occurs at reasonable	hours. Beginning 2002, health	inspection will occur once	every two years. Prior to 2002,	inspection only occurred upon	the receipt of a complaint. All	health surveys are unannounced	and can occur at any time/day.		State general funde	Solicial Initial	24 hr (do: 62 - 162 - 3	24 III Juay On-Sile and awake	Facility responsible for recident	health and safety. Assessment	and plan of services required.
Comparison of Basic Care, Assisted Living and Nursing Facility Regarding License	wedan ement, inspec		Assisted Living	Two annual fees, each \$75.	One paid to Heaith Department	and one paid to Department of	Human Services					Safety and Sanitation	inspection at least once every	two years Inspection occurs at	reasonable hours. Inspection	conducted by Health	Department Staff.	Human Services will issue their	license without an inspection.	Approval is based upon a	completed application and	meeting the definition of assisted living	State general funds	& Older American's Act	No Staffing Requirement	mann grand	Texant responsible to contract	individualized services	
Comparison of Ba				Licensure fee paid by provider								mspection process											Funding to Support Inspection /	Survey Process	Staffing		Services	, () () () () () () () () () (

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PROPOSED AMENDMENTS TO HOUSE BILL NO. 1164

Page 5, line 31, after "chapter" remove ","

Renumber accordingly

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Testimony before the Senate Human Services Committee March 4,2003 10:00 am

Chairman Lee and members of the Senate Human Services Committee, thank you for the opportunity to testify on House Bill 1164. My name is Kathy Klein and I represent Somerset Court, an assisted living facility in Minot.

As part of the workgroup assembled to address the issue of licensing for assisted living facilities, I cannot stress enough how important it was to have input, viewpoints, and feedback from all the entities involved in this industry. Our many hours of discussion and research resulted in the bill you see before you today.

There are, however, two items that were an integral part of HB 1109-the predecessor for HB 1164, that were missed in HB 1164.

1. The Human Services Department sends out renewals for the license; and

2. The department shall involve the facilities in the rulemaking process.

The workgroup spent many hours addressing the issues and all involved came away with a better understanding of this rapidly evolving industry. This workgroup must be a part of the rulemaking process on an ongoing basis to provide insight into ways this industry is growing and changing from the perspective of those out there in day to day operations of assisted living. Unless this is done, the perspective of the providers will be lost.

The license renewal sent out by the department, was a convenience I appreciated and I'm sure many others did as well. We would like to see that continue.

We urge the committee to consider our amendments and incorporate them into HB 1164.

I have distributed the proposed amendments and a copy of my testimony for your convenience. I would be happy to answer any questions you may have. Thank you for your time this morning.

> Presented by: Kathy Klein **Director, Somerset Court** 1900 28th St SW Minot, ND 58701 (701) 838-4500 somerset@minot.com

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Proposed amendment to HB 1164 March 4, 2003

Page 7, lines 5-10

4. The department shall include the facilities in the rulemaking process.

Renumber accordingly.

Respectfully submitted by:
Kathy Klein
Director, Somerset Court
1900 28th St SW
Minot, ND 58701
(701) 838-4500
somerset@srt.com

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Querator's signature

Proposed amendment to HB 1164 March 4, 2003

Page 6, line 25 An assisted living facility shall apply annually to the department for a license.

Replace with: An assisted living facility shall apply initially to the department for a license. The department shall send renewal notices to all previously licensed facilities, annually.

Renumber accordingly.

Respectfully submitted by:
Kathy Klein
Director, Somerset Court
1900 28th St SW
Minot, ND 58701
(701) 838-4500
somerset@srt.com

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Operator's Bignature



Testimony on HB 1164
Senate Human Services Committee
Tuesday, March 4, 2003

Chairperson Lee and members of the Senate Human Services Committee:

My name is Bruce Davidson, I am the administrator for SMP Prairieland Home Health Care Agency in Fargo and President of the North Dakota Association for Home Care (NDAHC). While NDAHC is on record supporting licensure of Assisted Living Facilities, we are at the same time concerned with HB 1164 and have taken a position to oppose this bill not for its intent; but rather for its vagueness in addressing patient rights, safety, and advocacy.

Throughout the past biennium, an Assisted Living Work Group was established to address the issue of licensure for AL facilities. Along the way, NDAHC was invited to a meeting where we were asked about our position for advancing AL licensure. At that time we indicated we did not have any problems with the proposed concept and added that we did not see the need for licensing AL facilities as Home Health Care agencies nor the creation of a sub-license of the current Home Care license — a feeling all groups seemed to share — as we understood AL facilities did not want to move from a social model to medical model for their facilities.

Box 2175 ● Bismarck, ND 58502-2175 ● Phone: 701-224-1815 ● Fax: 224-9824 E-mail: ndahc@aptnd.com ● http://www.aptnd.com/ndahc

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When we saw a first draft of the legislation prior to the beginning of the Legislative Session, questions were raised about Section 50-32-05 and the definition of "health services." We then met with representatives of the Dept. of Human Services to address our concerns. An amendment was prepared by the Dept. of HS that more clearly defined the services to be provided by assisted living facilities, however the amendment itself raised concerns with the interest groups in that it would have required a Home Health Care license for the AL facilities. The amendment did not become part of HB 1164, instead it was suggested that listing specific services could be part of the rule making process.

Specifically addressing services and patient safety should be part of this legislation. We believe the medical care in an Assisted Living facility falls into an arena of regulation and supervision. The licensure laws governing AL facilities should be demanding as patient care cannot be compromised. Attempting to figure the rules as you go is not in the best interest of patient care.

As we reviewed this bill, it became apparent oversight of medical care would be provided by a voluntary Ombudsman of the Dept. of Human Services which lacks the resources for supervision. Should a medical model of care have voluntary oversight? Currently in ND there is at least one Assisted Living facility that has a Home Health Care license for the provision of medical services to its tenants. This Home Care license requires demanding regulation including mandatory unannounced surveys by the Dept. of Health. Suddenly, with the passage of HB 1164 in its current form, this very same AL facility could provide

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its tenants with the same medical services with limited oversight and regulation. We do not believe this is in the best interests of the patient receiving medical care.

Home Health Care is significantly regulated, as it should be with the patient's best interest in mind. Home Care services include wound care, IV infusion, glucose monitoring, personal care, medication administration, colostomy and ileostomy, tube care, suctioning, dressing changes, vaccinations and intra-muscular injections, among others....all within this necessarily regulated environment. HB 1164 allows for the provision of these same services without specifically addressing such regulation and oversight and continuity of care.

Our continuing review of HB 1164 has raised additional concerns as well.

- 1. How will the AL facilities verify that services are provided adequately?
- 2. If this is a medical model for care, should the licensing entity be the Dept. of Health?
- 3. Who in the AL facility will determine the level of skilled care?
- 4. Will tenants/patients be charged privately for services they are entitled to under Medicare or Medicaid?
- 5. What type of training is required for AL staff for "hands-on" care?
- 6. How will Registered Nurses provide supervision in the AL environment?
- 7. Would the AL staff be supervised by the RN or the facility administrator?
- What qualifications or credentials would the administrator possess? 8.

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document being filmed.

- Who is responsible for medication administration training? 9.
- Is there a difference between Assisted Living and Basic Care? 10,

Madame Chair and members of the Senate Human Services Committee, NDAHC is not opposed to the concept of HB 1164, we are however concerned that in its current form it does not adequately address patient care in a medical model setting and respectively urge your strong consideration of our concerns when deliberating this legislation.

Thank you for the opportunity to testify before you this morning. I will do my best to answer any questions the committee may have.

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TESTIMONY ON HB 1164

3406 Dominion Street • Bismarck, ND 58503 • (701) 258-7489 • Fax (701) 258-7491

Chairperson Lee and members of the Senate Human Services Committee, my name is Penni Weston I am the Administrator of Edgewood Vista in Bismarck which is has 58 assisted living apartments, 28 basic care beds and a 14 bed Alzheimer's unit.

I appear before you today to ask for your support of HB 1164. Edgewood Vista had the privilege of one of our residents, Harold Michaelson, serving on the work group established by the Department of Human Services.

This bill creates a new chapter specifically to address Assisted Living in North Dakota. Assisted living is a social model where residents reside in their own apartment and have the option of choosing which services and providers of those services they may want.

During the 2001 session, legislation was passed providing for registration of assisted living with the hope that this would eliminate the barrier for claimants trying to access benefits under their LTC insurance policies. While several companies did accept the registration in lieu of licensure, several did not. Currently there are only a couple of companies that I have worked with that will not accept registration of assisted living for payment of benefits. At Edgewood Vista I currently have 26 residents receiving benefits under their LTC insurance policies. Fifteen of these are in assisted living and 11 of them are in a licensed basic care bed.

The residents receiving benefits would also meet the requirements for skilled nursing home coverage but have chosen to reside in a home like, community based setting. The cost at our facility for these residents averages less than \$80.00 a day as opposed to what they might be paying in a nursing home.

I urge you to vote yes on HB 1164 so that the final barrier for residents who meet the requirements of their LTC insurance policies may access benefits. These citizens planned responsibly for a means in which to pay for the care they would need and your support for them would be appreciated.

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Testimony on H5 1164 Senate Human Services Committee March 4, 2003

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Overall, we feel that HB 1164 will allow assisted living facilities to operate in a manner that provides flexibility and choice while providing care and services in a safe and secure environment. We feel very positive that we are moving in a direction that will be best for those we serve — the elderly within the state.

Thank you for the opportunity to provide testimony on HB 1164. I would be happy to answer any questions you may have.

Nancy Andrews, Administrator, Wheatland Terrace 4000 24th Ave S Grand Forks, ND 58201 (701) 787-7566

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Comparison Between Ast de Living and Basic Care

Regimes	Assisted I tribus	
Definition	"Assisted Living Facility" means a building or structure containing a series of living units operated as one entity to provide services for five or more individuals who are not related by blood, marriage, or guardianship to the owner or manager of the entity and which is kept, used, maintained, advertised, or held out to the public as a place that provides or coordinates individualized support services to accommodate the individual's needs and abilities to maintain as much independence as possible. An assisted living facility does not include a facility that is a congregate housing facility, licensed as a basic care facility, or licensed under chapter. 23-16.	"Basic Care Facility" means a facility licensed by the department under North Dakota Century Code chapter 23-09.3 whose focus is to provide room and board and health, social, and personal care to assist the residents to attain or maintain their highest level of functioning, consistent with the resident assessment and care plan, to five or more residents not related by blood or maniage to the owner or manager. These services shall be provided on a twenty-four-hour basis within the facility, either directly or through contract, and shall include assistance with activities of daily living and instrumental activities of daily living provision of leisure, recreational, and therapeutic activities; and supervision of nutritional needs and medication administration
Rates	Choose and pay for only those services needed or desired	All inclusive rate for residents regardless of services used
Governance	Governed by contract law	Governed by state regulation
Licensure	Department of Human Services and Department of Health	Department of Health
Public Assistance	Limited for services only (SPED and only for lower income) none for rent	Basic Care Assistance for low income elderly and disabled
Space Accommodations	Generally one or two bedroom apartment or efficiency	Generally semi-private room with shared bath
Complaint Investigations	Ombudsman	Ombudsman
Rights of Residents	No "special" bill of rights - same rights as US citizens	Bill of Rights in North Dakota Century Code
Special Care Units for Dementia	Not available	Available
Average Rate	\$50 to \$150 per day depending on services and space	\$50.85 per day
Ownership	1/3 For Profit 2/3 Non-Profit	1/3 For Profit 2/3 Non-Profit
Statewide Availability	35 Registered in North Dakota	43 Licensed in North Dakota

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TESTIMONY HOUSE BILL 1184 SENATE HUMAN SERVICES COMMITTEE JUDY LEE, CHAIRMAN MARCH 4, 2003

Chairman Lee and members of the Senate Human Services Committee, my name is Linda Wright. I am the Director of the Aging Services Division, Department of Human Services.

House Bill 1164 has been submitted at the request of the Department of Human Services, and on behalf of the Department, I am testifying in support of the bill. The changes in North Dakota Century Code recommended in this bill are the result of the efforts of the Assisted Living work group, which was facilitated by me.

The work group was composed of representatives of assisted living facilities, the State Department of Health, AARP, the State Insurance Commissioners Office, Centers for Independent Living, a consumer and the Department of Human Services, and consultation with the Home Care Association.

The changes recommended in the statute are as follows:

- Deleting the assisted living references from Chapter 50-24.5 "Aid to Aged, Blind, and Disabled Persons". The deletions are on pages 1 through 5, of House Bill 1164.
- Creating a new Chapter 50-32 specifically for assisted living (pages 5, line 24 through page 7 of the bill).
- Clarifying that a facility may provide or coordinate individualized support services (line 29, page 5).

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- Changing registration of assisted living facilities to licensure of assisted living facilities. Licensure would allow facilities to have greater access to reimbursement from long term care insurance policies.
- Clarifying health services that may be provided in an assisted living facility (page 7, lines 11 through 15).

The concept of assisted living remains the same. It is a social model, individuals living in apartment settings either totally independent or accessing support services based on individual needs.

There are currently 33 facilities registered with the Department of Human Services (see attached list). The changes recommended in this bill do not have a fiscal impact.

The Department of Human Services also supports House Bill 1160, introduced at the request of the State Department of Health. The changes recommended make the fire/life safety and food establishment requirements for assisted living facilities consistent with the definition in House Bill 1164. House Bill 1160 also deletes obsolete terms and adds assisted living to the Long-Term Care Ombudsman statute, Section 50-10.1-01.

I would be happy to answer any questions at this time.

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195/03

Definitions of Common Aging Housing Options
Prepared by: Melissa Hauer, Director, Legal Advisory Unit
N.D. Dept. of Human Services
March 25, 2002

Adult Foster Care

Current ND statutory definition: the provision of food, shelter, security and safety, guidance, and comfort on a 24-hour per day basis, in the home of a caregiver, to a person age 18 or older, who is unable, neglects or refuses to provide for the person's own care. Family foster home for adults means an occupied private residence in which foster care for adults is regularly provided by the owner or lessee thereof, to four or fewer adults who are related by blood or marriage to the owner or lessee, for hire or compensation. N.D.C.C. § 50-11-00.1(3),(5).

Assisted Living Facility

- 1. Current ND statutory definition: any building or structure containing a series of living units operated as one business entity to provide services for five or more individuals who are aged or disabled adults and who are not related by blood or marriage to the owner or manager of the entity and which kept, used, maintained, advertised, or held out to the public as a place that makes available individualized support services to accommodate an individual's needs and abilities to maintain as much independence as possible. It does not include a facility that is licensed as a basic care facility or a congregate housing facility. iN.D.C.C. § 50-24.5-01(3).
- 2. An environment where a person lives in an apartment-like setting and arranges for services necessary to accommodate that person's needs and abilities in order to maintain as much independence as possible.*

Congregate Care

Current N.D. statutory definition: housing shared by two or more individuals not related to each other which is not provided in an institution. N.D.C.C. § 50-24.5-01(5).

* The definitions marked with an asterisk were prepared by the ND Legislative Council for the Budget Committee on Long Term Care. Revised 1997.

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Basic Care

- 1. Current ND statutory definition: a residence, not licensed under chapter 23-16 by the department of health, that provides room and board to five or more individuals who are not related by blood or marriage to the owner or manager of the residence and who, because of impaired capacity for independent living, require health, social, or personal care services, but do not require regular 24 hour medical or nursing services and:
 - a. Makes response staff available at all times to meet the 24-hour per day scheduled and unscheduled needs of the individual; or
 - b. Is kept, used, maintained, advertised, or held out to the public as an Alzheimer's, dementia, or special memory care facility. N.D.C.C. § 23-09.3-01(1).
- 2. An institutionalized setting that provides room and board to individuals who, because of impaired capacity for independent living, require health, social, or personal care services but do not require regular 24-hour medical or nursing services.*

Skilled Nursing Facility (Long-Term Care)

- 1. An institutionalized setting that provides room and board and 24-hour care under the supervision of a licensed health care practitioner.*
- 2. Federal statutory definition. The following is the statutory definition at §§1819(a) and 1919(a) of the Social Security Act (the Act) for an SNF:

"Skilled nursing facility" is defined as an institution (or a distinct part of an institution) which is primarily engaged in providing skilled nursing care and related services for residents who require medical or nursing care, or rehabilitation services for the rehabilitation of injured, disabled, or sick persons, and is not primarily for the care and treatment of mental diseases; has in effect a transfer agreement (meeting the requirements of §1861(1) with one or more hospitals having agreements in effect under §1866; and meets the requirements for a SNF described in subsections (b), (c), and (d) of this section.

- 3. Provision of services to persons of any age who are afflicted with chronic health impairments.
- 4. Facility licensed by the state that provides 24-hour nursing care, room and board, and activities for convalescent residents and those with chronic and/or long-term care illnesses. Regular medical supervision and rehabilitation therapy are mandated to be available.
- * The definitions marked with an asterisk were prepared by the ND Legislative Council for the Budget Committee on Long Term Care. Revised 1997.

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