

**Testimony on HB 1065**  
**House Human Services Committee**  
**January 13, 2021**

Good morning Chairman Weisz and members of the House Human Services Committee. My name is Shelly Peterson, President of the North Dakota Long Term Care Association. I am here in support of HB 1065 and ask that you consider a friendly amendment to HB 1065. We represent 211 long term care facilities in North Dakota, including all 79 skilled nursing facilities.

As you have heard from the Department of Human Services, they are proposing HB 1065, which would remove from century code the current 90 % occupancy limitation. The limitation works by reducing your payment if your 12 month occupancy, as submitted in your June 30<sup>th</sup> cost report, is below 90%. The greater your fall below 90% the greater amount of lost reimbursement.

In the June 30, 2020 cost report the following data was reported:

- 1) 24 of 79 nursing facilities reported occupancy below 90%.
- 2) The average statewide occupancy on June 30, 2020 was 91.6%.
- 3) The total amount of lost reimbursement caused by the occupancy limitation was \$3,734.889.
- 4) The range of lost reimbursement per nursing facility was \$505 to \$1,419,608.

When the public health emergency was declared in March 2020, we began to see an impact on occupancy. Two factors were impacting a person's decision to be admitted to a nursing facility:

- 1) Fear of contacting Covid-19 because of the risk of living in a congregated setting.
- 2) Visitation restrictions.

These two factors are still present today.

Without getting distracted on the central theme of this hearing, I thought I would share with you a little about Covid-19 and long term care. In May 2020, we asked DHS to waive the 90% occupancy limitation. DHS said because it was in statute, it was a difficult request. The legislation before you will take the 90% occupancy limitation out of statute and allows DHS to establish a yearly limitation.

Based on our current experience and devastating occupancy drop, we are asking, through our amendment, that a ceiling be set so it can't rise above 90%. Today we have 62 of 79 nursing facilities under 90% occupied, that has never happened prior to the PHE.

To protect our population all facilities purposely left beds open, so they could cohort and create Covid units to segregate those with and without the virus. Anytime anyone leaves the facility for a medical appointment or other reasons, they must evaluate and quarantine up to 14 days within the facility upon their return. This has required the use of creating more private rooms to help protect infecting others.

As you can imagine, all these moves to protect our vulnerable population impacted occupancy. So, it was probably a blessing in disguise when we began having a large amount of open beds as we needed that space to create Covid units and quarantine zones. It is also difficult to socially distance with two people in a room. Before the PHE, we had around 55%

private rooms, thank goodness we did as this helped us protect our vulnerable population. See the attachments to best see the impact.

In conclusion, we ask for your support of HB 1065 and our amendment. The amendment is important for setting a ceiling that the occupancy limitation cannot go above. Setting it higher would financially devastate many financially frail facilities.

Thank you for your consideration of this amendment to HB 1065. I would be happy to answer any questions you may have.

Shelly Peterson, President  
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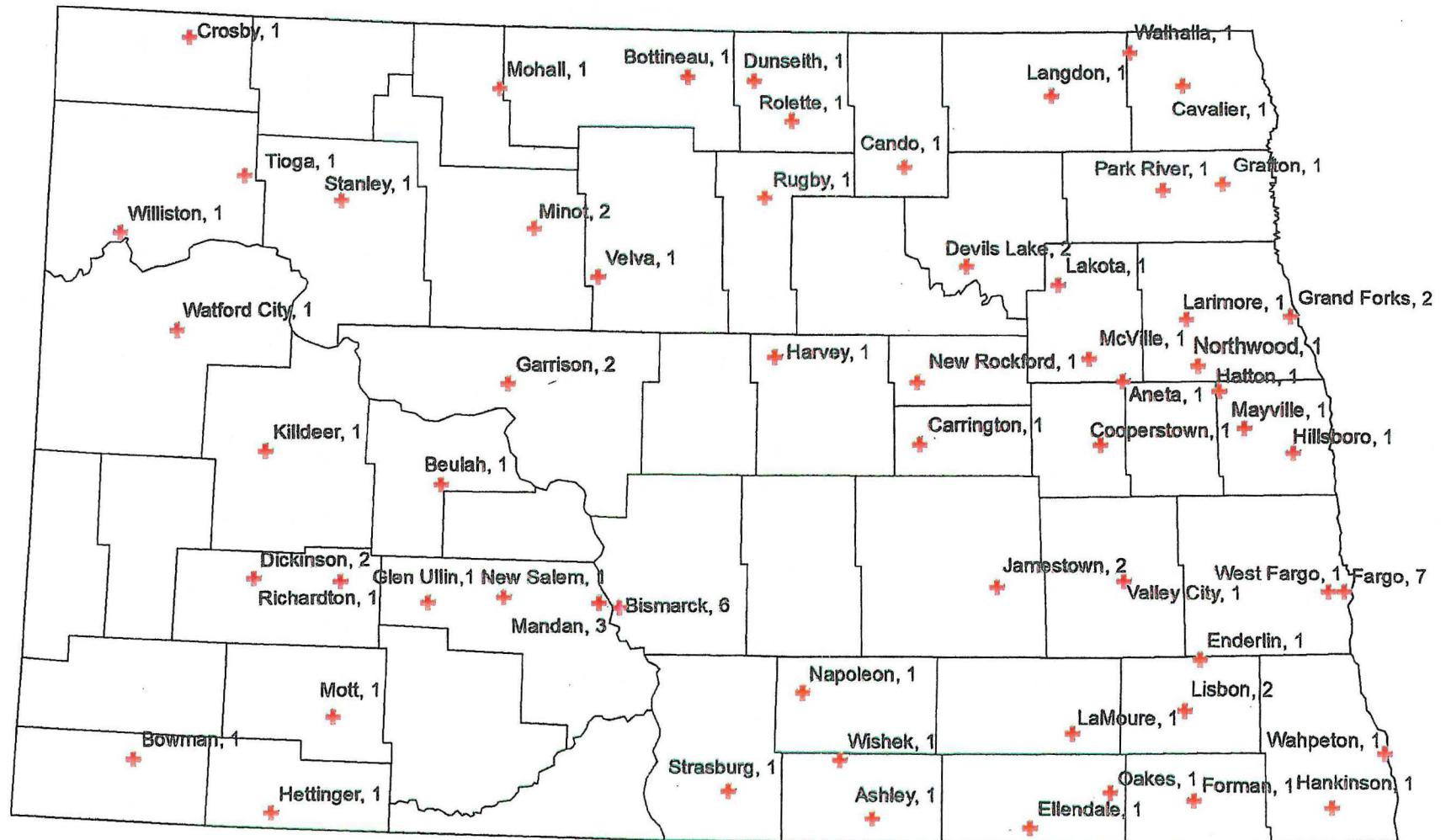
PROPOSED AMENDMENTS TO HOUSE BILL NO. 1065

Page 1, line 22, after "rate" insert "up to a maximum of ninety percent"

Renumber accordingly



# North Dakota Nursing Facilities



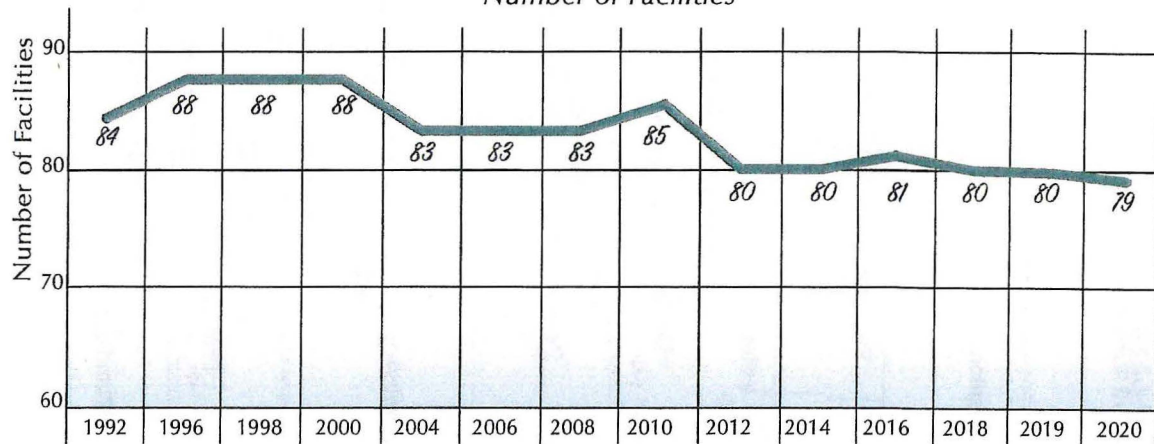
Center for Rural Health  
University of North Dakota  
School of Medicine & Health Sciences

+ City (Number of Nursing Facilities)

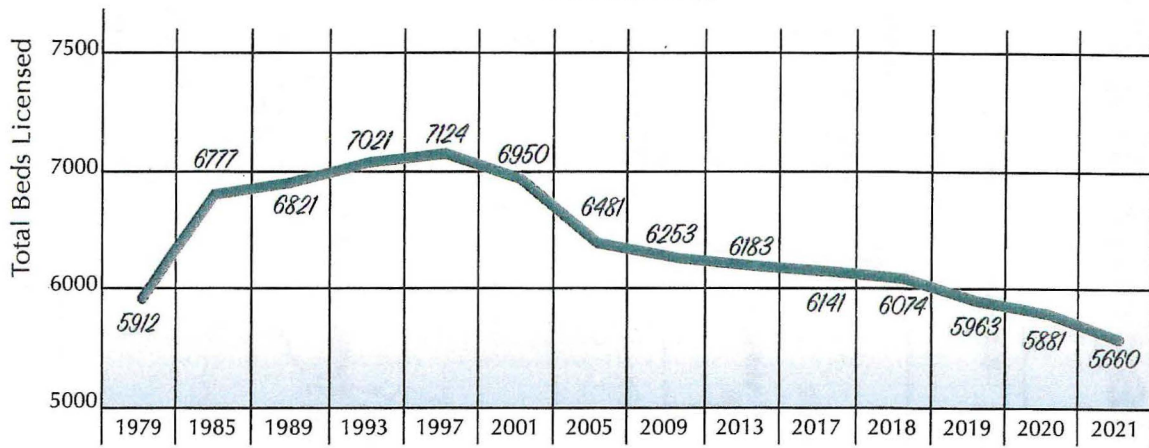
Source: ESRI, North Dakota Long Term Care Association  
Created by the North Dakota Healthcare Workforce Group  
on 3/28/2018

# Nursing Facilities

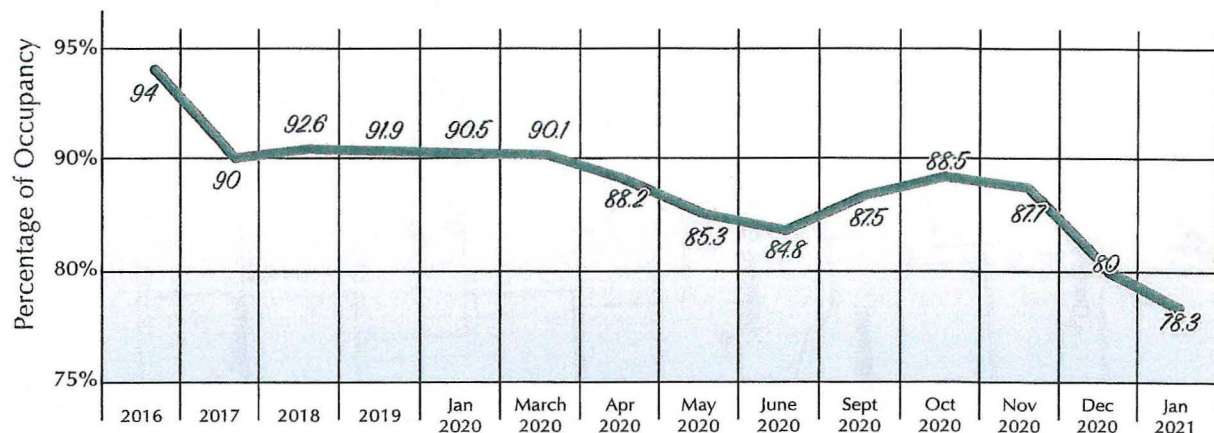
Number of Facilities



Licensed Beds



Occupancy



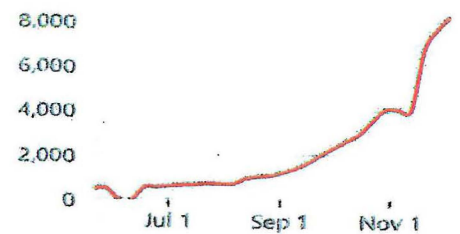
January - June 2020 Based on NDLTCA Survey  
 September 2020 Based on HC Standard Report on September 10, 2020  
 October 2020 Based on HC Standard Report on October 2, 2020  
 November 2020 Based on HC Standard Report on November 2, 2020  
 December 2020 Based on HC Standard Report on November 30, 2020  
 January 2020 Based on HC Standard Report on January 11, 2021



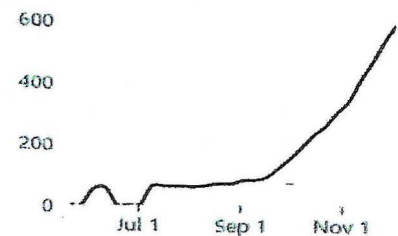
# ND LTC Cases and Deaths through 12/8/20

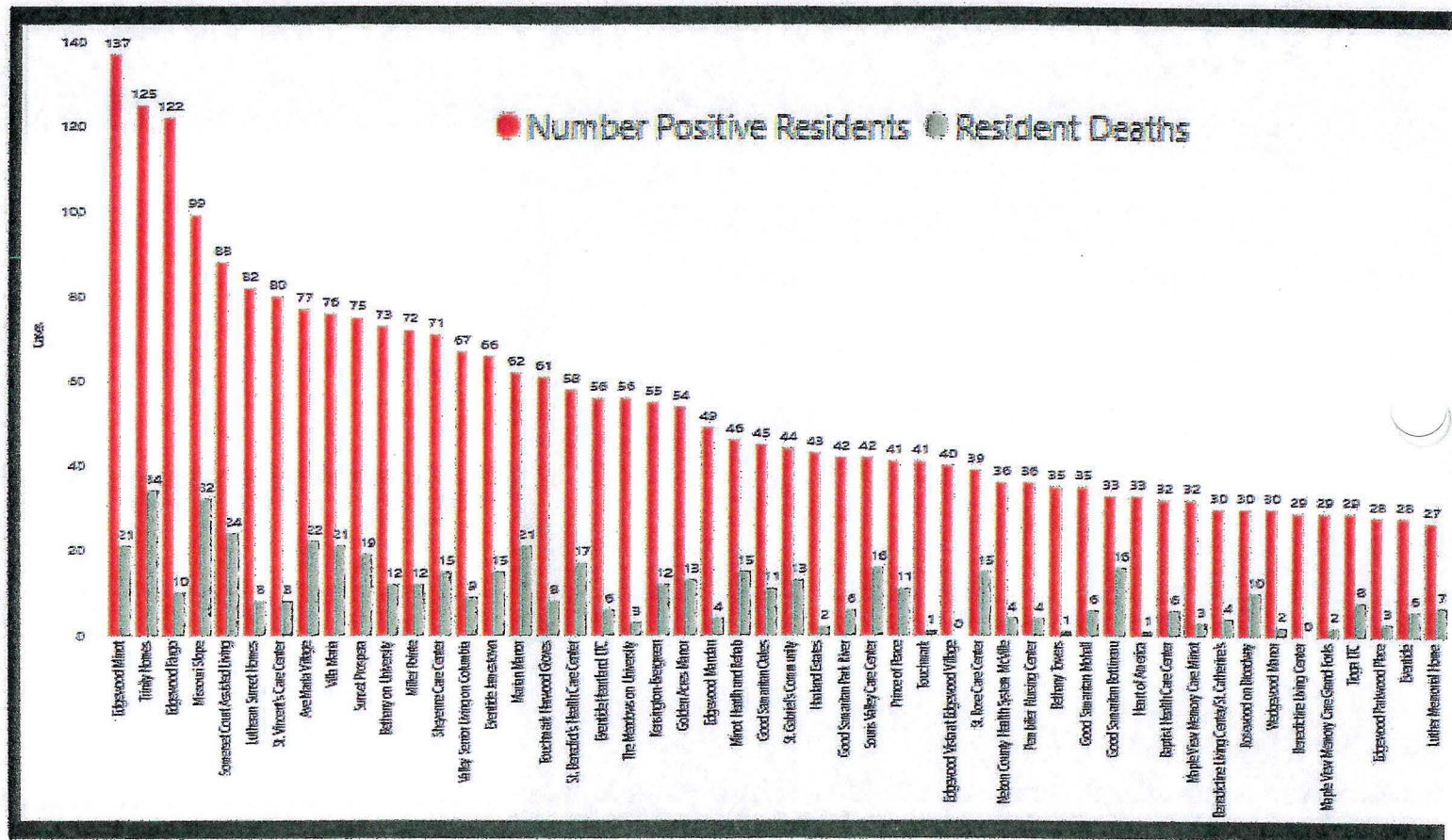
Cases and Deaths	Number (%)
Total Cases in ND	83,324
Total Cases in LTC (%)	8,471 (10%)
Staff	4,692
Residents	3,779
Total Deaths in ND	1,022
Total Deaths in LTC	613 (60%)

**Cases**



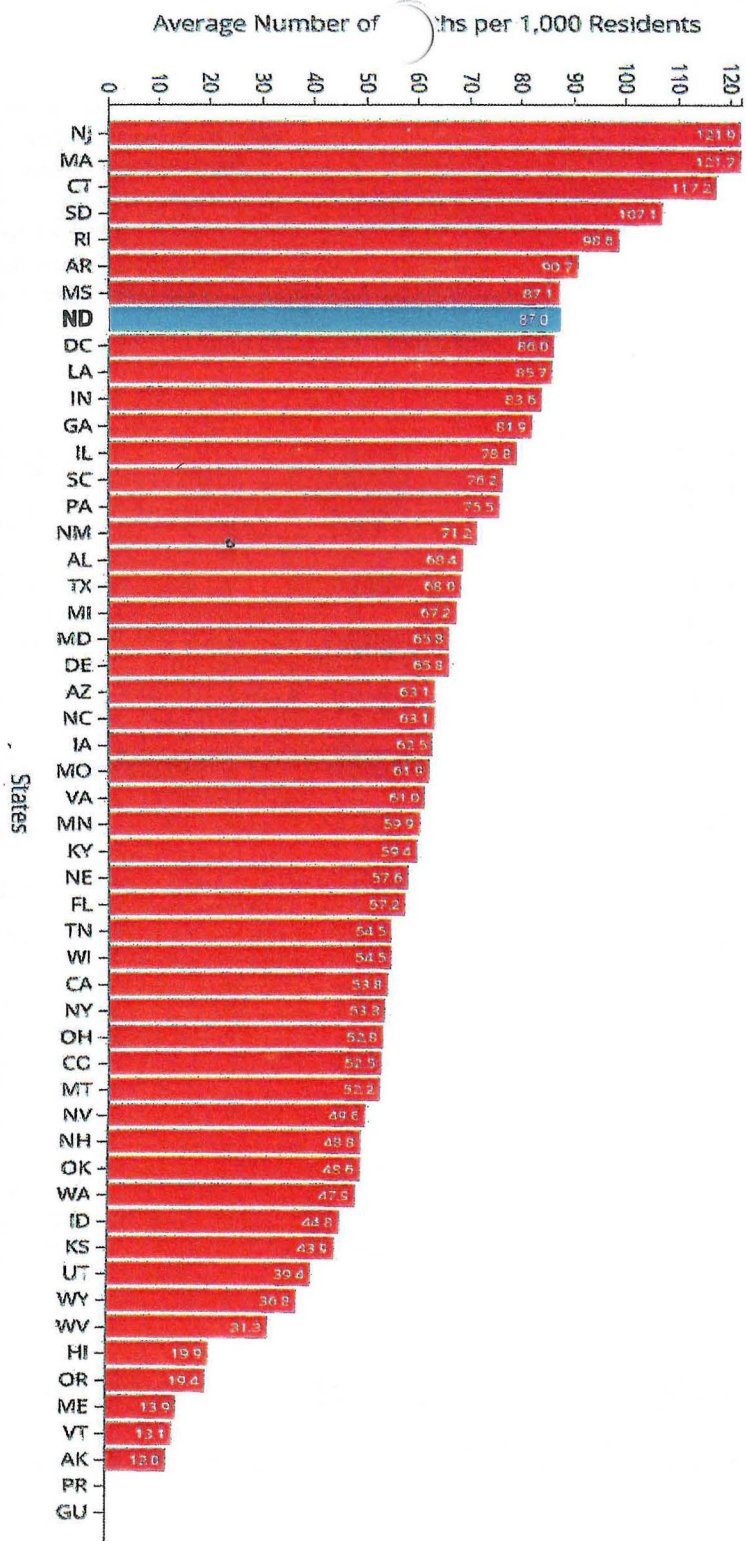
**Deaths**







# Resident Average Deaths per 1,000 Residents – Through Week of 11/22/20



# North Dakota Long Term Care Association

## Assisted Living, Basic Care, Nursing Facility Death Data

	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
January	192	247	224	241
February	195	203	174	219
March	197	191	183	242
April	185	179	217	230
May	183	176	200	201
June	184	158	180	160
July	150	147	164	158
August	169	140	186	152
September	168	172	203	215
October	219	200	195	306
November	191	188	205	n/a
December	<u>193</u>	<u>211</u>	<u>201</u>	<u>n/a</u>
	2226	2212	2332	2124 YearToDate

**Please Note:**

1. 2017, 2018, 2019 Death Data from Vital Records/DOH.
2. 2020 Data based on survey of assisted living, basic care and nursing facilities.
3. 20 assisted living, 13 basic care and 1 nursing facility did not report 2020 deaths.
4. The data for 2020 is preliminary and not complete. Data for 2020 will not be final until reported by Vital Records in July 2021
5. This data only includes residents who died in long term care facilities. It does not include residents that died in a hospital.  
A large number of COVID deaths to long term care residents occur in a hospital.
6. In 2020 there are approximately 700 fewer residents in long term care than in 2019.
7. Cause of death is not tracked in this survey, in 2020 this data reflects all deaths not just COVID-19.



updated 11-30-2020