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SECOND SUBSTITUTE SENATE BILL 6222

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State of Washington

60th Legislature

2008 Regular Session

By Senate Ways & Means (originally sponsored by Senators Keiser, Kohl-Welles, and Franklin)

READ FIRST TIME 02/08/08.

1 AN ACT Relating to long-term care; amending RCW 74.41.040,  
2 18.20.350, 74.41.050, and 74.38.040; adding a new section to chapter  
3 43.70 RCW; adding a new section to chapter 74.39A RCW; adding a new  
4 section to chapter 74.09 RCW; and creating new sections.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. **Sec. 1.** The legislature finds that Washingtonians  
7 sixty-five years of age and older will nearly double in the next twenty  
8 years, from eleven percent of our population today to almost twenty  
9 percent of our population in 2025. Younger people with disabilities  
10 will also require supportive long-term care services. Nationally,  
11 young people with a disability account for thirty seven percent of the  
12 total number of people who need long-term care.

13 The legislature further finds that to address this increasing need,  
14 the long-term care system should support autonomy and self-  
15 determination, and support the role of informal caregivers and  
16 families. It should promote personal planning and savings combined  
17 with public support, when needed. It should also include culturally  
18 appropriate, high quality information, services, and supports delivered  
19 in a cost-effective and efficient manner.

1           The legislature further finds that the long-term care system should  
2 utilize evidence-based practices for the prevention and management of  
3 chronic disease to improve the general health of Washingtonians over  
4 their lifetime and reduce health care and long-term care costs related  
5 to ineffective chronic care management.

6           **Sec. 2.** RCW 74.41.040 and 1987 c 409 s 3 are each amended to read  
7 as follows:

8           The department shall administer this chapter and shall establish  
9 such rules and standards as the department deems necessary in carrying  
10 out this chapter. The department shall not require the development of  
11 (~~plans of care or~~) discharge plans by nursing homes, boarding homes,  
12 or adult family homes providing respite care service under this  
13 chapter.

14           The department shall develop standards for the respite program in  
15 conjunction with the selected area agencies on aging. The program  
16 standards shall serve as the basis for soliciting bids, entering into  
17 subcontracts, and developing sliding fee scales to be used in  
18 determining the ability of eligible participants to participate in  
19 paying for respite care.

20           **Sec. 3.** RCW 18.20.350 and 2004 c 142 s 7 are each amended to read  
21 as follows:

22           (1) The boarding home licensee shall conduct a preadmission  
23 assessment for each resident applicant. The preadmission assessment  
24 shall include the following information, unless unavailable despite the  
25 best efforts of the licensee:

- 26           (a) Medical history;
- 27           (b) Necessary and contraindicated medications;
- 28           (c) A licensed medical or health professional's diagnosis, unless  
29 the individual objects for religious reasons;
- 30           (d) Significant known behaviors or symptoms that may cause concern  
31 or require special care;
- 32           (e) Mental illness diagnosis, except where protected by  
33 confidentiality laws;
- 34           (f) Level of personal care needs;
- 35           (g) Activities and service preferences; and

1 (h) Preferences regarding other issues important to the resident  
2 applicant, such as food and daily routine.

3 (2) The boarding home licensee shall complete the preadmission  
4 assessment before admission unless there is an emergency. If there is  
5 an emergency admission, the preadmission assessment shall be completed  
6 within five days of the date of admission. For purposes of this  
7 section, "emergency" includes, but is not limited to: Evening,  
8 weekend, or Friday afternoon admissions if the resident applicant would  
9 otherwise need to remain in an unsafe setting or be without adequate  
10 and safe housing.

11 (3) The boarding home licensee shall complete an initial resident  
12 service plan upon move-in to identify the resident's immediate needs  
13 and to provide direction to staff and caregivers relating to the  
14 resident's immediate needs. The initial resident service plan shall  
15 include as much information as can be obtained, under subsection (1) of  
16 this section.

17 (4) When a facility provides respite care, before or at the time of  
18 admission, the facility must obtain sufficient information to meet the  
19 individual's anticipated needs. At a minimum, such information must  
20 include:

21 (a) The name, address, and telephone number of the individual's  
22 attending physician, and alternate physician if any;

23 (b) Medical and social history, which may be obtained from a  
24 respite care assessment and service plan performed by a case manager  
25 designated by an area agency on aging under contract with the  
26 department, and mental and physical assessment data: and,

27 (c) Physician's orders for diet, medication and routine care  
28 consistent with the individual's status on admission.

29 (d) Ensure the individuals have assessments performed, where  
30 needed, and where the assessment of the individual reveals symptoms of  
31 tuberculosis, follow required tuberculosis testing requirements; and

32 (e) With the participation of the individual and, where  
33 appropriate, their representative, develop a plan of care to maintain  
34 or improve their health and functional status during their stay in the  
35 facility.

36 **Sec. 4.** RCW 74.41.050 and 2000 c 207 s 4 are each amended to read  
37 as follows:

1       The department shall develop an evidence-based tailored caregiver  
2 assessment and referral tool and contract with area agencies on aging  
3 or other appropriate agencies to conduct family caregiver long-term  
4 care information and support services to the extent of available  
5 funding. The responsibilities of the agencies shall include but not be  
6 limited to: (1) Administering a program of family caregiver long-term  
7 care information and support services; ~~((and))~~ (2) negotiating rates of  
8 payment, administering sliding-fee scales to enable eligible  
9 participants to participate in paying for respite care, and arranging  
10 for respite care information, training, and other support services; (3)  
11 within funds appropriated for this specific purpose, providing the  
12 option of a one-time voucher benefit per caregiver screened to meet the  
13 needs critical to health or safety of either the adult care recipient  
14 or the caregiver. In evaluating the need for respite services,  
15 consideration shall be given to the mental and physical ability of the  
16 caregiver to perform necessary caregiver functions.

17       **Sec. 5.** RCW 74.38.040 and 1983 c 290 s 14 are each amended to read  
18 as follows:

19       The community based services for low-income eligible persons  
20 provided by the department or the respective area agencies may include:

21       (1) Access services designed to provide identification of eligible  
22 persons, assessment of individual needs, reference to the appropriate  
23 service, and follow-up service where required. These services shall  
24 include information and referral, outreach, transportation and  
25 counseling. Within funds appropriated for this specific purpose, they  
26 shall also include long-term care planning and options counseling,  
27 information and crisis intervention, and streamlined assistance to  
28 access a wide array of public and private community-based services.  
29 These access services shall be available to eligible people of all ages  
30 who are in need of them, with the exception of transportation.  
31 Services would be available to individuals, concerned families or  
32 friends, or professionals working with issues related to aging,  
33 disabilities, and caregivers;

34       (2) Day care offered on a regular, recurrent basis. General  
35 nursing, rehabilitation, personal care, nutritional services, social  
36 casework, mental health as provided pursuant to chapter 71.24 RCW

1 and/or limited transportation services may be made available within  
2 this program;

3 (3) In-home care for persons, including basic health care;  
4 performance of various household tasks and other necessary chores, or,  
5 a combination of these services;

6 (4) Counseling on death for the terminally ill and care and  
7 attendance at the time of death; except, that this is not to include  
8 reimbursement for the use of life-sustaining mechanisms;

9 (5) Health services which will identify health needs and which are  
10 designed to avoid institutionalization; assist in securing admission to  
11 medical institutions or other health related facilities when required;  
12 and, assist in obtaining health services from public or private  
13 agencies or providers of health services. These services shall include  
14 health screening and evaluation, in-home services, health education,  
15 and such health appliances which will further the independence and  
16 well-being of the person;

17 (6) The provision of low cost, nutritionally sound meals in central  
18 locations or in the person's home in the instance of incapacity. Also,  
19 supportive services may be provided in nutritional education, shopping  
20 assistance, diet counseling and other services to sustain the  
21 nutritional well-being of these persons;

22 (7) The provisions of services to maintain a person's home in a  
23 state of adequate repair, insofar as is possible, for their safety and  
24 comfort. These services shall be limited, but may include housing  
25 counseling, minor repair and maintenance, and moving assistance when  
26 such repair will not attain standards of health and safety, as  
27 determined by the department;

28 (8) Civil legal services, as limited by RCW 2.50.100, for  
29 counseling and representation in the areas of housing, consumer  
30 protection, public entitlements, property, and related fields of law;

31 (9) Long-term care ombudsman programs for residents of all long-  
32 term care facilities.

33 NEW SECTION. **Sec. 6.** A new section is added to chapter 43.70 RCW  
34 to read as follows:

35 Within funds appropriated for this purpose, the department shall  
36 develop a statewide fall prevention program. The program shall include  
37 networking community services, identifying service gaps, making

1 affordable senior-based, evaluated exercise programs more available,  
2 providing consumer education to older adults, their adult children, and  
3 the community at large, and conducting professional education on fall  
4 risk identification and reduction.

5 NEW SECTION. **Sec. 7.** A new section is added to chapter 74.39A RCW  
6 to read as follows:

7 Within funds appropriated for this purpose, the department shall  
8 provide additional support for residents in community settings who  
9 exhibit challenging behaviors that put them at risk for institutional  
10 placement. The residents must be receiving services under the  
11 community options program entry system waiver under section 1905(c) of  
12 the federal social security act and must have been evaluated under the  
13 individual comprehensive assessment reporting and evaluation process.

14 NEW SECTION. **Sec. 8.** A new section is added to chapter 74.09 RCW  
15 to read as follows:

16 Within funds appropriated for this purpose, the department shall  
17 establish two dental access projects to serve seniors and other adults  
18 who have problems accessing basic and specialty dental care because of  
19 a physical or mental disability. The projects shall provide:

20 (1) Enhanced reimbursement rates for certified dentists for  
21 specific procedures;

22 (2) Reimbursement for trained medical providers for preventive oral  
23 health services;

24 (3) Training, development, and implementation through a partnership  
25 with the University of Washington school of dentistry;

26 (4) Local program coordination including outreach and case  
27 management; and

28 (5) An evaluation that measures the change in utilization rates and  
29 cost savings.

30 NEW SECTION. **Sec. 9.** If specific funding for the purposes of this  
31 act, referencing this act by bill or chapter number, is not provided by  
32 June 30, 2008, in the omnibus appropriations act, this act is null and  
33 void.

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