

**REVENUE: No revenue impact**

**FISCAL: Fiscal statement issued**

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<b>Action:</b>	Without Recommendation as to Passage, But with Amendments, Be Printed Engrossed, and Be Referred to the Committee on Ways and Means by prior reference
<b>Vote:</b>	3 - 2 - 0
<b>Yeas:</b>	Monnes Anderson, Verger, Morrisette
<b>Nays:</b>	Kruse, Telfer
<b>Exc.:</b>	0
<b>Prepared By:</b>	Jennifer Kellar, Administrator
<b>Meeting Dates:</b>	2/4, 3/16, 4/27

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**WHAT THE MEASURE DOES:** Provides requirements on ambulatory surgical centers and providers. Modifies license fees and authorizes alternative procedures for on-site inspections for specific health care facilities and home health agencies. Requires Department of Human Services to establish procedures for filing complaints against home health agencies and in-home care agencies that will ensure the confidentiality of the complainant. Allows the Department to charge hospitals for complaint investigations and surveys and establishes parameters for those charges. Establishes repercussions for retaliation against an employee for notifying authorities of inappropriate care or other violations. Gives the Department authority to report information to health professional regulatory boards, even if the information would otherwise be considered confidential. Requires home health agency to follow a treatment plan established and reviewed by a physician or nurse practitioner. Allows Department to assess civil penalties of \$1,000 per day of non-compliance or \$10,000 for each 30-day period of non-compliance, on individuals, health care facilities, home health agencies and in-home care agencies. Allows the Department to have discretion to reduce fees through the administrative rule process and provides the Department with rulemaking authority for referral agencies and caregiver registries. Increases hospital fees effective 2011 and requires hospitals to pay a home health licensing fee. Distinguishes between permitting a hospital to operate at more than one location and authorizing a satellite to operate under a hospital's license.

**ISSUES DISCUSSED:**

- On-sight surveys of all licensed health care facilities and agencies at a minimum of every three years, with schedule based on the recognized industry standard set by the Joint Commission for the Accreditation of Health Care Organizations
- Provide new definition for Ambulatory Surgical Centers (ASCs), bringing under Health Care Licensing and Certification (HCLC) regulatory oversight all facilities that are providing surgeries normally performed in an ASC
- Agencies that provide around-the-clock nursing care in the home and infusion providers that assist individuals in their home with the administration of ongoing intravenous treatment would be under HCLC oversight
- Fee increases for HCLC services
- Decrease of permanent staff positions from 16 to 11 in last 15 years while workload has increased
- Department working with stakeholders to reach consensus on proposed amendment language
- Possible amendment on definition of "caregiver registry"

**EFFECT OF COMMITTEE AMENDMENT:** Deletes provision outlining procedures that can be performed in an ambulatory surgical center. Adds ASC classifications and associated fees for each classification. Allows Department of Human Services to have discretion to reduce fees through the administrative rule process. Distinguishes between permitting a hospital to operate at more than one location and authorizing a satellite to operate under a hospital's license. Allows Department to charge hospitals for complaint investigations and surveys and establishes parameters for those charges. Increases hospital fees effective 2011. Modifies provision to give the Department authority to report information to health professional regulatory boards, even if the information would otherwise be considered confidential.

Specifies that infusion providers and medical staffing agencies will not be regulated by the Department, as they are currently licensed by the Board of Pharmacy. Requires hospitals to pay a home health licensing fee. Provides the Department with rulemaking authority for referral agencies and caregiver registries.

**BACKGROUND:** There is currently no licensing or Medicare oversight of infusion companies and health care staffing agencies that provide care, or requirements that a provider must furnish disclosure and consent information that would assist consumers in their decision-making. In the past decade, agency fees have remained unchanged and Medicare funding has decreased. Additionally, the Department of Human Services receives no General Fund money for the program.

From 1974 to 2007, surveys increased for 80 to 352 inspections. In 2007, investigations of patient and family complaints rose from 35 to 130. Since 2001, facilities licensed and certified by the Health Care Licensure and Certification (HCLC) program increased from 367 to 536. Agency staff perform all health facility inspections in the state, provide follow-up surveys of facilities with deficiencies, and respond to complaints from patients and families.