

MINUTES

LONG-TERM CARE SERVICES TASK FORCE

November 17, 2003
Room 423-S—Statehouse

Members Present

Representative Bob Bethell, Chairperson
Senator Larry Salmans, Vice Chairperson
Senator Janis Lee
Senator Henry Helgerson
Senator Susan Wagle
Representative Jim Morrison

Non-Legislative Members Present

Mark Baily
Evie Curtis
Janis DeBoer
Linda Lubensky
Charles Moore
Bob Smith
Ray Vernon
Margaret Zillinger

Members Absent

Senator Chris Steineger
Representative Patricia Barbieri-Lightner
Representative Nancy Kirk
Representative Judy Showalter
Dr. Carol Moore
Chuck Palmer
Sister Beth Stover

Staff

Audrey Dunkel, Kansas Legislative Research Department
Melissa Calderwood, Kansas Legislative Research Department
Lisa Montgomery, Revisor of Statutes Office
Mary Shaw, Committee Secretary

Conferees

Dawn Veh, Vice President of Health Services, Wesley Towers, Hutchinson, Kansas
Dr. Sarah Forbes-Thompson, RN PhD, University of Kansas Medical Center School of Nursing
Janis DeBoer, for Pamela Johnson-Betts, Secretary, Kansas Department on Aging

November 17 Morning Session

Representative Bob Bethell, Chairman, called the meeting to order at 9:10 a.m., and welcomed everyone to the meeting.

Chairman Bethell welcomed Dawn Veh, Vice President of Health Services, Wesley Towers, Hutchinson, Kansas, who provided testimony regarding proposed revision of the Kansas administrator-in-training (AIT) 480-hour practicum curriculum (Attachment 1). Ms. Vey explained that she is the facilitator for a team of administrators that have come together to look at revisions to the 480-hour practicum for the AIT's for adult care homes in the State of Kansas. She noted that the members of the team want to ensure that there is a curriculum that helps administrators be successful when they get their license and enter the field.

Ms. Vey listed in her written testimony the events that occurred to initiate the process of proposing revisions to the 480-hour practicum for the AIT's and the proposed revisions.

Representative Morrison mentioned that he and the Chairman were interested in assisting in the process of introducing legislation and asked Ms. Vey what is needed so it could be made into a bill form by the end of December, before the 2004 Legislative Session begins. In response to a question by Representative Morrison, Ms. Vey mentioned that most of what the training would do is help those coming into the field at this time and they were considering grandfathering the existing administrators. Representative Morrison requested clarification from Ms. Vey that the Legislature understands fully the difference between what the current requirements are and what is being proposed regarding the administrators. Representative Morrison requested that any information that is sent to him by Ms. Vey also be sent to Representative Bob Bethell, Chairman of the Long-Term Care Services Task Force, and the executive members of the House Committee on Health and Human Services and the Senate Committee on Public Health and Welfare.

Mr. Vernon expressed concern the quality of education necessary to ensure the quality of care, does not make it impossible for qualified and interested people to get into the field. } He also mentioned that barriers have been put up against reciprocity with other states because, if you have another person coming in from another state, they are still trying to require the 480-hour AIT program for someone that has been licensed for five or ten years in another state.

Chairman Bethell asked that the charge to look at this program has been given to Health Occupations Credentialing and no action has been taken. He asked Ms. Vey if her desire would be to move this responsibility to another agency or organization. Ms. Vey mentioned that they have not thought of that. Chairman Bethell mentioned that there are some alternatives such as the Board of Adult Care Home Administrators, CASE, or other organizations that could be the oversight organization. The Chairman explained that if the Task Force feels that it is important for culture change to be a vital component of the delivery of care at the end of life for individuals who are in the nursing facilities across the state, perhaps there is a need to focus upon someone who is really interested in creating that kind of environment and being the oversight organization. Or put into the legislation something that creates that atmosphere in the organization within the state that is doing that now.

Chairman Bethell welcomed Dr. Sarah Forbes-Thompson, RN PhD, University of Kansas Medical Center School of Nursing, who presented an overview of the Kansas Nursing Facility Project Evaluation for the Kansas Department on Aging (Attachment 2). Dr. Forbes-Thompson mentioned that they have completed year one and this report will be given to the Kansas Department on Aging today. It is her understanding that the Secretary of the Kansas Department on Aging is planning to release the report to the stakeholders that were convened to assist and provide input into the transition from the Kansas Department of Health and Environment to the Kansas Department on Aging.

Dr. Forbes-Thompson mentioned some general findings:

- an excessive amount of data was analyzed and is still being processed to determine what is really important in the study;
- there are differences and some inconsistencies in the survey process that they were able to uncover;
- many of the inconsistencies are not of a substantive nature;
- they have some suggestions regarding additional training for surveyors;
- some of the findings point to problems that are at the federal level in the guidelines with the Centers for Medicare and Medicaid Services (CMS) in making the guidelines more specific for surveyors. This is already being addressed by CMS; and
- a question that came out of the study is what is a quality nursing facility and how do you measure quality.

Vice Chairman Salmans asked Dr. Forbes-Thompson if she anticipates from the survey any statutory requirements to be changed and introduced this coming legislative session, and if they do, the recommendations would be needed as early as possible by December 2003. Dr. Forbes-Thompson did not feel there would be any this year. She noted that by the end of year two, with the data they will have, they will have a longitudinal analysis of a variety of factors. Dr. Forbes-Thompson felt that at that point she hopes to have more clearer economic indicators, insurance premiums, profit margins or lack thereof in facilities in the relationship to resident care, and this year they do not have that information.

Senator Salmans requested more detailed information regarding the reasons why administrators are not renewing their licenses, leaving the field, and the reasons for the high turnover rate.

Janis DeBoer, Deputy Secretary, Kansas Department on Aging, presented an overview of the transfer itself of the survey and certification process from the Kansas Department of Health and Environment (KDHE) to the Kansas Department on Aging (KDOA). Ms. DeBoer explained that Secretary Johnson-Betts sends her regrets that she was unable to attend the meeting. (No written testimony was submitted.)

Ms. DeBoer explained some the major hurdles that KDOA encountered. One was the information system which KDHE uses which is an AS 400 and the question became technical in nature with how does KDOA gain access to the AS 400 and move staff from one building to another. Ms. DeBoer mentioned that they believe that KDOA has gained access to the AS 400 this month.

In addition, Ms. DeBoer explained that there were issues in regard to the software and at this time it seems to be working overall as far as the information technology is concerned.

The second hurdle was whether or not the KDOA building at 503 S. Kansas could accommodate the staff and the filing system. At this time, Ms. DeBoer mentioned that KDOA is content that the building can accommodate the people, the filing system, and the inventory. She noted that there is a fairly extensive filing system to support the survey process which, from KDOA's perspective, appears to be incredibly efficient. Ms. DeBoer explained that just last week KDOA received information in writing from an engineering firm that there is a particular area in the building at 503 S. Kansas that was enforced to support a mainframe system. With the resources available, it appears that the building where KDOA is located will be able to support the weight of that filing system. Ms. DeBoer mentioned that the physical move of the staff will happen within the next couple of months.

Ms. DeBoer explained that Secretary Johnson-Betts is implementing a survey that KDOA will use to generate into their staff to get an idea of how the transfer is working for them and obtain some direct feedback from their staff. She mentioned that KDOA believes that the residents that reside in adult care homes do not know, nor do they need to know, that there is a transfer at an administrative level. In response to a question by Chairman Bethell, Ms. DeBoer responded that the objective of residents not knowing of the change in administration is to reduce conflict because change can be difficult.

Chairman Bethell called the Committee's attention to discussion of the draft of the Long-Term Care Services Task Force Report. The decisions were made by consensus of the Committee. Mr. Smith provided some suggested additions to the Task Force Report which the Committee decided will be incorporated into the Task Force Report (Attachment 3). Ms. DeBoer suggested thinking about implementing an outcome approach such as in the State of Iowa which has a system that is truly an outcome based incentive program. Chairman Bethell mentioned that in his opinion an outcome based system would be good and could look at that type of system and move to something other than what is currently in place.

The following topics were adopted by consensus of the Task Force to be included in the Task Force Report:

- Encourage the Kansas Department on Aging to continue to look for alternative funding mechanisms to accomplish training. Add more clarification regarding changing from case management to care management. Ms. Lubensky explained that case management is bound by the programs and care management looks at whatever mental illness a person might have and looks holistically at a person's needs.
- Regarding the section on the Civil Monetary Penalty (CMP) funds, page 13, paragraph 1, line 7 of the draft remove the word "waiver" and following the letter received by the State Medicaid Director from the Centers for Medicare and Medicaid Services (CMS) which makes clear that states can use the CMP funds for many purposes. Ms. Zillinger mentioned that she will get a copy of the letter for the Committee report.
- Under the section regarding Direct Support Workers and Workforce Shortages, page 8, the Department of Social and Rehabilitation Services (SRS) will re-apply for the Center for Medicare and Medicaid Services grant. The Task Force realizes that this is only a short term solution, at best, to a long-term problem. The Task Force encourages SRS to look at the sustainability of grants.

- Request that the House Committee on Insurance and the Senate Committee on Financial Institutions and Insurance look at developing a health insurance plan for health care workers and initiate legislation.
- Technical corrections in the Committee report were authorized:
 - Page 9, line 3 from the bottom, delete the word “influence”.
 - Under Vaccinations, page 2, lines 1-2, delete the word “mandated”. Line 4, delete “not ever had” and insert “never”. Delete the “a” before the words “in between”. In the last sentence of the paragraph, delete “or \$30 for pneumonia” and insert “and for pneumonia \$30”.
 - Page 5, update information regarding task force members.
 - Page 7, in the paragraph that begins with the word “Conferees”, line 2, insert a comma following the word “society”.
 - Page 10, regarding the President’s Task Force on, delete the words “Health Care Reform” and insert “Medicaid Reform”.
 - Page 12, line 2, delete semicolon after the word “illegal” and begin a new sentence with the word “No”.
 - Page 12, line 6, list the complete name of the program, Wichita Medical Services Bureau, regarding the testimony presented by Rosa Molina in the October meeting.
- Note the continued need that the public be made aware of the services available to them.
- Encourage a working relationship together with the local area agencies on aging to provide referrals with providers to meet the needs of the consumer.
- Request the House Committee on Health and Human Services introduce legislation to update the Administrator-in-Training Program (AIT) and in the legislation give the charge to Health Occupational Credentialing to do the update.
- Recommend the 2004 Legislative Session look at the issues of cost, formulary and counterfeiting of pharmaceuticals due to information received by the Task Force regarding these issues.
- Reaffirm the six broad goals that were drafted by the task force in year one and list the merits of year four.

The meeting recessed at 12:15 p.m. for lunch.

Afternoon Session

The meeting reconvened at 1:45 p.m.

The Task Force continued discussion regarding the Task Force Report. The following topics (continued) were adopted by consensus of the Task Force to be included in the Task Force Report:

- □ List specific exemptions in the Task Force Report regarding Long-Term Care Insurance when a person goes on Medicaid, such as a residence.
- □ Encourage nursing organizations to include long term care training in their educational curriculum to improve long term care.
- □ Encourage addressing that life for seniors is more difficult for them now than several years ago. The state finances are strapped and if things improve, should be funded first. It is the understanding that it is a state fiscal problem and an economic problem across the country.
- □ Reference the Geriatric Education Research and Training Institute (GERTI) program in Johnson County and encourage statewide programs such as this would be a good reason to use any funds available and bring in specifics.
- □ Reaffirm that some of the issues in the early goals have been implemented in the long-term goals.
- □ Regarding the Administrator-in-Training issue, make the preceptor issue and a training site open to all long-term care types of organizations.

Staff will mail out a copy of the draft of the Task Force Report along with an e-mail by Monday, November 24, 2003, with enough time given for responses from the Task Force.

Updates were given by the Kansas Department on Aging and the Kansas Department of Social and Rehabilitation Services regarding the six broad long-term goals from the first year of the Task Force.

Representative Morrison moved, with a second by Senator Lee, to approve the minutes of the October 23-24, 2003, meeting as presented. Motion carried.

The meeting adjourned at 2:40 p.m.

Prepared by Mary Shaw
Edited by Audrey Dunkel

Approved by Committee on:

July 26, 2004
(date)