ONE HUNDRED FIFTH LEGISLATURE - FIRST SESSION - 2017 COMMITTEE STATEMENT LB439

Hearing Date: Thursday March 16, 2017

Committee On: Health and Human Services

Introducer: Wishart

One Liner: Change licensure and regulation provisions for assisted-living facilities

Roll Call Vote - Final Committee Action:

Advanced to General File with amendment(s)

Vote Results:

Aye: 7 Senators Crawford, Erdman, Howard, Kolterman, Linehan, Riepe,

Williams

Nay: Absent:

Present Not Voting:

Verbal Testimony:

Proponents:Representing:Senator Anna WishartIntroducerMark IntermillAARPRosalee YeaworthSelf

Julie Sebastian New Cassel Retirement Center; LeadingAge NE

Teresa Anderson S

Carol Ernst Nebraska Health Care Association; Nebraska Assisted

Living Association

Melissa Florell Nebraska Nurses Association

Roger Meyer Self

Opponents: Representing:

Neutral: Representing:

Summary of purpose and/or changes:

LB439 updates the Assisted-Living Facility Act by making changes to the licensure of assisted-living facilities and changes definitions. Provides clarification to distinguish care between assisted-living facilities and nursing facilities.

SECTION BY SECTION:

Section (1): Amends Section 71-406 to change definition of "assisted-living facility."

Section (2): Amends Section 71-5803.05 to change definition of "assisted-living facility."

Section (3): Amends Section 71-5902 to add the promotion of goals of individualized decision making and personal autonomy to the purpose of the Assisted-Living Facility Act.

Section (4): Amends Section 71-5903 to change definition of "administrator", "activities of daily living", "assisted-living"

facility", "authorized representative" and "complex nursing interventions". Adds definition of "assisted-living services" and "part-time or intermittent basis". Changes definition of "health maintenance activities" to "noncomplex interventions". Strikes "stable or predictable".

Section (5): Amends Section 71-5904 to provide licensing requirement. Strikes admission eligibility.

Section (6): Amends Section 71-5905 to prove admission requirements. Mandates complex nursing intervention or noncomplex interventions provided by an assisted-living facility be performed in accordance to state law. Strike health maintenance activity requirements pursuant to the Nurse Practice Act. Adds criteria for admission and contrived residence to be included in written information to applicant, and whether assisted-living facility provides part-time or intermittent complex nursing interventions. Mandates the facility enter into a resident services agreement with each resident.

Section (7): Amends Section 71-5906 to allow assisted-living facilities to provide complex nursing interventions on a part-time or intermittent basis if facility provides complex nursing interventions a registered nurse must be available to consult on delivery of intervention and evaluate outcomes. Strikes outdated language.

Section (8): Amends Section 71-6725 to update section numbers for definition of assisted-living facility.

Section (9): Amends Section 71-9402 of the Assisting Caregiver Transition Act to update section numbers for definition of assisted-living facility.

Section (10): Repeals Sections 71-406, 71-5803.05, 71-5902, 71-5903, 71-5904, 71-5906, 71-5905, 71-6725 and 71-9402.

Explanation of amendments:

AM 1013 is a white copy amendment.

Section (4): Add language of what does not qualify as an "assisted-living facility". Adds resident assessment for admission and confined stay to definition of "assisted-living services". Strikes part-time or intermittent basis for "complex nursing intervention" definition. Reduces hours from twenty-eight hours to ten and for a duration less than 3 weeks for definition of "part-time or intermittent basis".

Section (5): Strikes language regarding operating without a license for assisted-living.

Section (6): Strikes nurse assessment for admission, retention or discharge regarding complex nurse intervention or noncomplex intervention.

Section (7): Strikes registered nurse requirement for complex nursing intervention.

Merv Riepe, Chairperson