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House Bill 5689 (Substitute H-1 as passed by the House)

Sponsor: Representative Randy Richardville

House Committee: Senior Health, Security and Retirement

Senate Committee: Health Policy

Date Completed: 11-28-00

CONTENT

The bill would amend the Public Health Code to allow the Department of Consumer and Industry Services (DCIS) to require a health facility or agency, or a nursing home, to appoint a temporary advisor or manager approved by the DCIS, under circumstances specified in the bill; require the DCIS to report to the Legislature each year the number of advisors or managers appointed; and require a nursing home or a home for the aged to offer its residents an influenza vaccination each year.

Currently, the DCIS may order a health facility or agency that the DCIS finds is not operating in accordance with the requirements of its license to discontinue admissions, transfer selected patients out of the facility, reduce the facility's licensed capacity, or comply with specific requirements for licensure or certification. (A health facility or agency is an ambulance operation, clinical laboratory, county medical care facility, freestanding surgical outpatient facility, health maintenance organization, home for the aged, hospital, nursing home, hospice, or hospice residence.)

In regard to nursing homes, if the DCIS finds that a licensee is not in compliance with the Code, an administrative rule, or a Federal law or regulation governing nursing home certification, and that the noncompliance impairs the ability of the licensee to deliver an acceptable level of care and services, the Department may suspend the admission or readmission of patients to the nursing home, reduce the licensed capacity of the home, selectively transfer patients whose care needs are not being met by the home, initiate action to place the home in receivership, or issue a correction notice that describes the violation and specifies the corrective action to be taken within a specified period of time.

The bill provides that, under the circumstances described above for a health facility or agency, or a nursing home, as applicable, in addition to the current actions the Department may take, the DCIS could do either of the following:

- -- Require appointment, at the expense of the facility or agency, or nursing home, of a Department-approved temporary administrative advisor or clinical advisor, or both, with authority and duties specified by the DCIS, to assist the facility's, agency's, or nursing home's management and staff to achieve sustained compliance with required operating standards.
- -- Require appointment, at the expense of the facility, agency, or nursing home, of a Department-approved temporary manager with authority and duties specified by the DCIS, to oversee efforts to achieve sustained compliance with required operating standards or to oversee the orderly closure of the facility, agency, or nursing home.

(The DCIS also could take the current or proposed actions in the case of a nursing home closure for any reason.)

The bill would prohibit the DCIS from appointing a temporary administrative advisor, temporary clinical advisor, or temporary manager until after the Department had explored all the actions that it currently may take (except issuing a correction notice to a nursing home).

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The bill would require the DCIS to report annually to the House and Senate standing committees on senior issues on the number of times the DCIS appointed a temporary administrative advisor, temporary clinical advisor, and temporary manager. The report would have to include whether the health facility or agency closed or remained open. The Department could include the report with other reports made to fulfill legislative reporting requirements.

The bill would require a home for the aged or a nursing home to offer its residents, each year between November 15 and December 15, a vaccination for influenza; and for residents admitted after December 15 but before April 1 of the following year, to offer the vaccination at the time of admission. A resident could not be vaccinated if he or she or the resident's family presented to the home's administrator a written statement that the vaccination was contrary to the resident's religious or other beliefs, or was medically inappropriate. A home for the aged or nursing home would have to enter each influenza vaccination, or waiver, in a resident's permanent medical record.

MCL 333.20162 et al. Legislative Analyst: G. Towne

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

Fiscal Analyst: M. Tyszkiewicz

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.