

HOUSE BILL No. 4451

March 13, 2001, Introduced by Reps. Lockwood, Pestka, McConico, Bovin, Minore, Phillips, Sheltroun, Neumann, Jacobs, Quarles, Julian, Woodward, Williams, Thomas, Clark, Bogardus, Gielegem, Plakas, Kolb, Lipsey, Spade, Frank, O'Neil, Rich Brown, Whitmer, Adamini, Schermesser, Gilbert, Waters, Woronchak, Mans, Toy, Kuipers, Voorhees, Richardville, Van Woerkom, Kooiman, Schauer, Dennis, Jansen, Bishop, Birkholz and Lemmons and referred to the Committee on Senior Health, Security and Retirement.

A bill to amend 1978 PA 368, entitled
"Public health code,"
(MCL 333.1101 to 333.25211) by adding section 21769.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 SEC. 21769. (1) AS USED IN THIS SECTION, "COMMISSION" MEANS
2 THE NURSING HOME QUALITY OF LIFE REVIEW COMMISSION.

3 (2) THE NURSING HOME QUALITY OF LIFE REVIEW COMMISSION IS
4 CREATED WITHIN THE DEPARTMENT OF COMMUNITY HEALTH.

5 (3) THE COMMISSION SHALL CONSIST OF THE FOLLOWING 9 MEMBERS,
6 APPOINTED BY THE GOVERNOR:

7 (A) ONE MEMBER FROM THE DEPARTMENT OF COMMUNITY HEALTH,
8 KNOWLEDGEABLE IN FEDERAL GUIDELINES FOR NURSING HOMES AS ISSUED
9 BY THE FEDERAL HEALTH CARE FINANCING AUTHORITY.

1 (B) ONE MEMBER FROM THE DEPARTMENT OF CONSUMER AND INDUSTRY
2 SERVICES, REPRESENTING THOSE INDIVIDUALS CONDUCTING SURVEYS OF
3 NURSING HOMES UNDER SECTION 20155.

4 (C) ONE MEMBER WHO IS A PHYSICIAN SPECIALIZING IN THE PRAC-
5 TICE OF GERIATRIC MEDICINE, REPRESENTING THE MEDICAL COMMUNITY.

6 (D) TWO MEMBERS REPRESENTING NURSING HOME REFORM OR NURSING
7 HOME PATIENT ADVOCACY GROUPS, OR BOTH.

8 (E) TWO MEMBERS REPRESENTING NURSING HOMES.

9 (F) ONE NURSING HOME RESIDENT.

10 (G) ONE FAMILY MEMBER OF A NURSING HOME RESIDENT.

11 (4) THE MEMBERS FIRST APPOINTED TO THE COMMISSION SHALL BE
12 APPOINTED WITHIN 120 DAYS AFTER THE EFFECTIVE DATE OF THIS
13 SECTION.

14 (5) MEMBERS OF THE COMMISSION SHALL SERVE FOR TERMS OF 4
15 YEARS OR UNTIL A SUCCESSOR IS APPOINTED, WHICHEVER IS LATER,
16 EXCEPT THAT OF THE MEMBERS FIRST APPOINTED 2 SHALL SERVE FOR 1
17 YEAR, 3 SHALL SERVE FOR 2 YEARS, AND 4 SHALL SERVE FOR 3 YEARS.

18 (6) IF A VACANCY OCCURS ON THE COMMISSION, THE GOVERNOR
19 SHALL MAKE AN APPOINTMENT FOR THE UNEXPIRED TERM IN THE SAME
20 MANNER AND FROM THE SAME CATEGORY AS THE ORIGINAL APPOINTMENT.

21 (7) THE GOVERNOR MAY REMOVE A MEMBER OF THE COMMISSION FOR
22 INCOMPETENCY, DERELICTION OF DUTY, MALFEASANCE, MISFEASANCE, OR
23 NONFEASANCE IN OFFICE, OR ANY OTHER GOOD CAUSE.

24 (8) THE FIRST MEETING OF THE COMMISSION SHALL BE CALLED BY
25 THE DIRECTOR OF THE DEPARTMENT OF COMMUNITY HEALTH. AT THE FIRST
26 MEETING, AND ANNUALLY THEREAFTER, THE COMMISSION SHALL ELECT FROM
27 AMONG ITS MEMBERS A CHAIRPERSON AND OTHER OFFICERS AS IT

1 CONSIDERS NECESSARY OR APPROPRIATE. AFTER THE FIRST MEETING, THE
2 COMMISSION SHALL MEET AT LEAST QUARTERLY, OR MORE FREQUENTLY AT
3 THE CALL OF THE CHAIRPERSON, OR IF REQUESTED BY 5 OR MORE
4 MEMBERS.

5 (9) A MAJORITY OF THE MEMBERS OF THE COMMISSION CONSTITUTE A
6 QUORUM FOR THE TRANSACTION OF BUSINESS AT A MEETING OF THE
7 COMMISSION. A MAJORITY OF THE MEMBERS PRESENT AND SERVING IS
8 REQUIRED FOR OFFICIAL ACTION OF THE COMMISSION.

9 (10) THE BUSINESS THAT THE COMMISSION MAY PERFORM SHALL BE
10 CONDUCTED AT A PUBLIC MEETING OF THE COMMISSION HELD IN COMPLI-
11 ANCE WITH THE OPEN MEETINGS ACT, 1976 PA 267, MCL 15.261 TO
12 15.275.

13 (11) A WRITING PREPARED, OWNED, USED, IN THE POSSESSION OF,
14 OR RETAINED BY THE COMMISSION IN THE PERFORMANCE OF AN OFFICIAL
15 FUNCTION IS SUBJECT TO THE FREEDOM OF INFORMATION ACT, 1976 PA
16 442, MCL 15.231 TO 15.246, EXCEPT THAT CONFIDENTIAL MEDICAL,
17 SOCIAL, PERSONAL, OR FINANCIAL INFORMATION IDENTIFYING A PATIENT
18 IS NOT AVAILABLE FOR PUBLIC INSPECTION IN A MANNER THAT IDENTI-
19 FIES THE PATIENT.

20 (12) MEMBERS OF THE COMMISSION SHALL SERVE WITHOUT
21 COMPENSATION. HOWEVER, MEMBERS OF THE COMMISSION MAY BE REIM-
22 BURSED FOR THEIR ACTUAL AND NECESSARY EXPENSES INCURRED IN THE
23 PERFORMANCE OF THEIR OFFICIAL DUTIES AS MEMBERS OF THE
24 COMMISSION.

25 (13) WITH THE ASSISTANCE OF THE DEPARTMENT OF COMMUNITY
26 HEALTH, THE COMMISSION SHALL DO ALL OF THE FOLLOWING:

1 (A) REQUEST AND REVIEW ALL REPORTS RESULTING FROM SURVEYS OF
2 NURSING HOMES CONDUCTED UNDER SECTION 20155.

3 (B) ESTABLISH A SATISFACTION SURVEY TO BE DISTRIBUTED TO ALL
4 NURSING HOME RESIDENTS DESIGNED TO ELICIT FEEDBACK FROM NURSING
5 HOME RESIDENTS REGARDING STAFF PERFORMANCE AND NURSING HOME
6 CONDITIONS.

7 (C) FOR THE PURPOSES OF SUBDIVISION (A), ESTABLISH REVIEW
8 CRITERIA UTILIZING THE GUIDELINES SPECIFIED BY THE FEDERAL HEALTH
9 CARE FINANCING AUTHORITY.

10 (D) CONDUCT QUARTERLY MEETINGS WITH THE DEPARTMENT'S SURVEY
11 TEAMS TO DISCUSS ALL OF THE FOLLOWING:

12 (i) FREQUENTLY CITED VIOLATIONS.

13 (ii) NURSING HOMES THAT ARE CITED FOR VIOLATIONS SIGNIFI-
14 CANTLY MORE OFTEN THAN OTHER NURSING HOMES.

15 (iii) POSSIBLE REMEDIES TO THE DISCUSSION ITEMS DESCRIBED IN
16 SUBPARAGRAPHS (i) AND (ii).

17 (E) PRESENT AN INITIAL WRITTEN REPORT TO THE DEPARTMENT OF
18 COMMUNITY HEALTH, DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES,
19 THE GOVERNOR, THE LEGISLATURE, AND THE ATTORNEY GENERAL WITHIN 1
20 YEAR AFTER THE INITIAL APPOINTMENT OF THE NURSING HOME QUALITY OF
21 LIFE REVIEW COMMISSION MEMBERS. THIS REPORT SHALL INCLUDE ALL OF
22 THE FOLLOWING INFORMATION:

23 (i) FINDINGS DETAILING PROBLEMS, ABUSES, EFFICIENCIES, AND
24 SUCCESSES AS RELATED TO THE SURVEY PROCESS CONDUCTED UNDER SEC-
25 TION 20155.

26 (ii) A FINANCIAL AUDIT AND RECOMMENDATIONS FOR FUNDING OF
27 THE SURVEY PROCESS CONDUCTED UNDER SECTION 20155.

1 (iii) AN EXAMINATION OF THIS STATE'S COMPLIANCE WITH THE
2 FEDERAL HEALTH CARE FINANCING AUTHORITY GUIDELINES FOR NURSING
3 HOME SURVEYS DETAILING SUCCESSES AND FAILURES WITH COMPLIANCE
4 WITH THE GUIDELINES.

5 (F) AFTER THE INITIAL WRITTEN REPORT UNDER SUBDIVISION (D),
6 PROVIDE AN ANNUAL WRITTEN REPORT OF THE COMMISSION'S ACTIVITIES,
7 FINDINGS, AND RECOMMENDATIONS TO THE DEPARTMENT OF COMMUNITY
8 HEALTH, THE DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES, THE
9 GOVERNOR, THE LEGISLATURE, AND THE ATTORNEY GENERAL.

10 (G) REVIEW THE REPORTS DESCRIBED IN SUBDIVISION (A) BIANNU-
11 ALLY FOR CHANGES REFLECTING THE LATEST DEVELOPMENTS IN GERIATRIC
12 SOCIAL AND MEDICAL PRACTICE.

13 (14) THE COMMISSION MAY APPOINT ADVISORY COMMITTEES AS CON-
14 sidered necessary by the commission. MEMBERS OF AN ADVISORY COM-
15 MITTEE APPOINTED UNDER THIS SUBSECTION ARE NOT COMPENSATED FOR
16 THEIR SERVICE, BUT MAY BE REIMBURSED FOR ACTUAL AND NECESSARY
17 EXPENSES INCURRED IN THE PERFORMANCE OF THEIR DUTIES.

18 (15) THE DEPARTMENT OF COMMUNITY HEALTH SHALL PROVIDE OFFICE
19 SPACE, SUPPLIES, CLERICAL ASSISTANCE, ADMINISTRATIVE ASSISTANCE,
20 AND OTHER STAFF AS NECESSARY FOR THE COMMISSION IN THE PER-
21 FORMANCE OF ITS DUTIES.