HOUSE COMMITTEE ON HUMAN RESOURCES & EDUCATION SUBCOMMITTEE ON HUMAN RESOURCES

April 3, 1995 Hearing Room D 8:00 a.m. Tapes 25 - 28

MEMBERS PRESENT: Rep. Charles Star, Chair Rep. Sharon Wylie, Vice-Chair Rep. Bill Fisher Rep. Barbara Ross Rep. Dennis Luke, ex-officio

STAFF PRESENT: Tom Mann, Committee Administrator Shelley Jones, Committee Assistant

MEASURES HEARD:

HB 2027 Public Hearing & Work Session HB 2166 Public Hearing & Work Session HB 2102 Public Hearing & Work Session HB 2873 Public Hearing & Work Session

These minutes contain materials which paraphrase and/or summarize statements made during this session. Only text enclosed in quotation marks

report a speaker's exact words. For complete contents of the proceedings, please refer to the tapes.

TAPE , SIDE A

005 CHAIR STARR: Calls meeting to order at 8:08 a.m.

HB 2027 PUBLIC HEARING

010 ED PATTERSON, OREGON ASSOCIATION OF HOSPITALS: Reviews proposed LC-3
amendment with committee. (EXHIBIT A)
060 -Program is voluntary for hospitals.

110 ROSS: Reviews the fees outlined in the amendment with Mr. Patterson.

155 TOM JOHNSON, OREGON HEALTH DIVISION: Comments on the bill and the amendments. The program will be voluntary for the hospitals that oversee an X-ray program within their facilities.

215 LUKE: Questions what the \$3000 annual fee for nuclear inspection fees is spent on.

220 RAY PARIS, OREGON HEALTH DIVISION: Explains the cost of the annual inspection program for nuclear medicine.

285 -29 states are considered "agreement states" and those states provide nuclear medicine inspections under the regulations required by the US Nuclear Regulatory Commission. 340 -Reviews radioactive materials fees and the effect past legislative session actions have had on the agency. (EXHIBIT B)

370 ROSS: Are the proposed fees in any amendments before this committee.

372 JOHNSON: It is being addressed in the department budget before the Committee on Ways and Means.

420 LUKE: How many out of the 300 licensees went from \$500 to \$3000 fee that increased from the last session.

460 JOHNSON: Failure for the state to provide the service would mean that the US Nuclear Regulatory Commission would come in and provide the inspections at a much greater cost.

TAPE 26, SIDE A

040 JANE MYERS, OREGON DENTAL ASSOCIATION: Submits and reviews testimony in

opposition on HB 2027. (EXHIBIT C)

HB 2027 WORK SESSION

110 ROSS: It look like we have a pretty wide disagreement between the Oregon Health Division and the hospitals on how much this program of inspections will cost. The cost should covered the fees incurred for

running the program but should not subsidize additional programs within the

Division.

145 WYLIE: Agree with Rep. Ross and hopes the real cost for inspection is not going to produce higher cost for the smaller rural hospitals.

185 MANN: Explains that the draft bill does have a subsequent referral to the Committee on Ways and Means where the fiscal impacts will be discussed.

217 STARR: Refers bill back to staff to review the fee impacts and bring back to committee.

225 FISHER: Request a breakdown of proposed fees and the number of units. Also would like to see the cost difference between states that do inspections versus states that have the US Nuclear Regulatory Commission do the inspections.

 *** $\,$ Work Session re-opened and bill voted out later in this meeting, see Tape 26, Side B-200.

HB 2166 PUBLIC HEARING

245 MANN: Submits the LC-4 and LC-5 amendments. (EXHIBIT D)

250 ED PATTERSON, OREGON ASSOCIATION OF HOSPITALS: Explains the LC-4 amendments were drafted by a work group that included Rep. Fisher and Rep. Ross.

310 -The LC-4 amendments remove any reference to hospice programs. 338 -Section 2 of the LC-4 amendments exempt accredited home health programs

from licensing.

-LC-5 amendments are proposed by the home health agency and the Oregon Association of Hospitals has no problems with the amendments.
400 Currently there are 66 acute care hospitals in the state, only 13 are currently required to be inspected by the Oregon Health Division, the remaining are accredited by the Joint Commission on Accreditation of Healthcare Organizations and are inspected by that agency.
430 -Agrees that licensing fees should generate money to run the program within the Health Division,

and only cover the licensing program cost, not generate additional fee income.

TAPE 25, SIDE B

045 -Will not support carte blanche fees for the Oregon Health Division.

050 ELIZABETH FLORIO, OREGON ASSOCIATION FOR HOME CARE: Discusses the

amendments which sets the license fees in statute.

070 TOM JOHNSON, OREGON HEALTH DIVISION: The bill is to replace revenue from the impacts of Ballot Measure 5 and the loss of General Revenue funds.

LC-5

Reports that most hospital facilities make money and questions whether General Revenue funds should be used to subsidize these hospital facilities.

094 KATHLEEN SMAIL, OREGON HEALTH DIVISION: Submits and reviews proposed amendments to the LC-4 amendments. (EXHIBIT E) 180 -Would like to see that the hospital based home health agencies are subject to review and licensing the same as the free standing home health agencies. 225 -Proposing coordinating inspections performed by the division with

225 -Proposing coordinating inspections performed by the division with inspections performed by other federal, state and local agencies.

270 ROSS: Questions use of the words "the Health Division shall avoid unnecessary facility disruption by coordinating inspections".

320 JOHNSON: Comments on the difference between services provided in private homes versus facilities provided in home health agencies provided through a hospital.

350 $\,$ FISHER: Questions on the amount of money received from the General Fund.

360 JOHNSON: It is about \$400,000 in revenue per biennium.

420 ROSS: Questions on the inspection program budget within the Division.

430 $\,$ JOHNSON: Explains the loss of \$400,000 in General funds. The proposal is to replace some of $\,$ that lost revenue by establishing the fees.

TAPE 26, SIDE B

050 $\;$ LUKE: Where in the process is the Health Divisions budget in the Committee on Ways and $\;$ Means.

070 HERSH CRAWFORD, OFFICE OF MEDICAL ASSISTANCE PROGRAMS, DEPARTMENT OF HUMAN RESOURCES: Submits and reviews department fiscal. (EXHIBIT F) -The state has a policy to pay the reasonable cost to reimburse 121 hospitals for care provided to Medicaid clients. The figure shows an average of 17% of emergency room visits and services by Medicaid clients are non emergency and are inappropriate, at an annual cost of over \$5 million. -Hospitals that participate in the Medicare programs must provide care 160 regardless of the persons ability to pay. -The LC-4 amendments shifts that burden and places the entire burden on 174 the state.

HB 2166 WORK SESSION

MOTION: REP. FISHER: Moves to ADOPT the LC-4 amendments.

VOTE: Hearing no objections, the motion CARRIES.

 $$\ensuremath{\mathsf{MOTION}}\xspace$. MOTION: REP. ROSS: Moves to conceptually adopt the Health Division proposed amendment, 1st paragraph only.

VOTE: Hearing no objections, the motion CARRIES.

MOTION: REP. LUKE: Moves to ADOPT the LC-5 amendments.

VOTE: Hearing no objections, the motion CARRIES.

 $$\rm MOTION:\ REP.\ LUKE:\ Moves\ HB\ 2166\ as\ amended\ to\ the\ full\ committee\ with\ a\ subsequent\ referral\ to\ the\ Committee\ on\ Ways\ &\ Means\ with\ no\ recommendation$

as

to passage.

VOTE: In a roll call vote all members are present and vote AYE.

CHAIR: The motion CARRIES.

HB 2027 WORK SESSION:

- 200 CHAIR STARR: Re-opens the work session on HB 2027.
- 260 ED PATTERSON: Has concurred with the Health Division on HB 2027. The Division submits proposal. (EXHIBIT G)

320 MOTION: REP. LUKE: Moves to conceptually adopt Health Division amendments titled "Voluntary Hospital Privatized X-RAY Inspection Program Proposal" page 2.

VOTE: Hearing no objections, the motion CARRIES.

 $$\ensuremath{\mathsf{MOTION}}\xspace$ Rep. LUKE: Moves to conceptually adopt the three amendments proposed by Jane Myers, ODS.

VOTE: Hearing no objections, the motion CARRIES.

MOTION: REP. LUKE: Moves conceptual amendment that the nuclear medicine portion is to be phased in over a three year period, if accepted by the Committee on Ways & Means.

VOTE: Hearing no objections, the motion CARRIES.

MOTION: REP. LUKE: Moves HB 2027 as conceptually amended to the full committee with a DO PASS recommendation with a subsequent referral to the Committee on Ways & Means.

VOTE: In a roll call vote, all members are present and vote AYE.

CHAIR: The motion CARRIES.

HB 2102 PUBLIC HEARING

- 410 MANN: Explains bill and LC-1 amendment. (EXHIBIT H)
- 450 LUKE: Does the amendment take away any conflict with the Senate Bill.

HB 2102 WORK SESSION

MOTION: REP. ROSS: Moves to adopt the LC-1 amendments to HB 2102.

VOTE: Hearing no objections, the motion CARRIES.

MOTION: REP. ROSS: Moves HB 2101 as amended to the full committee with a DO PASS recommendation.

VOTE: In a roll call vote, all members are present and vote AYE.

TAPE 27, SIDE A

HB 2873 PUBLIC HEARING

040 MANN: Reviews the LC-1 and LC-2 amendments with committee. (EXHIBIT I) Submits copy of Older Americans Act of 1965. (EXHIBIT J)

070 $\,$ DR. WAYNE NELSON, LONG TERM CARE OMBUDSMAN: Testifies in opposition to placing the Office of the State Ombudsman with the Governor's Commission on

Senior Services. 090 -Reviews the Older Americans Act of 1965 and the federal laws governing the ombudsman program requirements.

150 LUKE: Responds to speakers comments.

160 $\,$ NELSON: Continues testimony on HB 2873, commenting on the ombudsman program.

210 MEREDITH COTE, DIRECTOR OF THE OMBUDSMAN PROGRAMS: Would like to look into establishing a grievance process similar to the one used by the Department of Human Resources, and will look into the process.

230 LUKE: Criticizes the Office of the Ombudsman for their lack of response

to complaints from nursing home providers and the high number of complaints

he receives.

240 COTE: Explains how complaints are handled and reports process. Starts

with a field officer reviewing the complaint, and her office is committed to resolving complaints received.

280 -Historically if providers have not receive satisfaction, they have gone

directly to the Governor's office.

290 LUKE: Under the law, is there a process to grieve the State Ombudsman's

decision.

310 COTE: The process starts with the field officer and then it goes to the

-Historically, the Governor's office staff person who handles citizens complaints has intervened in the past to review complaints received. 370 -Explains the makeup of the Long Term Care Advisory Commission which oversees the State Ombudsman. 423 -Reviews and comments on the draft amendments.

TAPE 28, SIDE A

State Ombudsman.

050 $\,$ FISHER: Asked what kind of training does an ombudsman volunteer receive.

055 NELSON: Explains the six day training for the volunteers, followed up by quarterly training sessions. Volunteer must take a 100 questions test for certification.

090 \quad COTE: Comments on care-giving and volunteers acting outside of their scope as ombudsman.

115 FISHER: Has received many complaints on ombudsman. Submitted comments to committee

members dated March 9, 1995. (EXHIBIT K)

160MARCELLE ROBINSON, LONG TERM CARE ADVISORY COMMISSION: Submitsandreviews testimony in opposition to HB 2873. (EXHIBIT L)-Working closely with advocacy programs, provider groups and the250-Working closely with advocacy programs, provider groups and thelegislature.

 $260\,$ WYLIE: How does the current commission review how the ombudsman's are performing.

330 ROBINSON: Comments on the different role as a caregiver and as an advocate.

-Possibly a hearings officer, but does not belong in the Governor's office.

420 LUKE: Comments that what the committee is seeking, is some type of appeal system for people who have complaints of the State Ombudsman's office, not here to condemn the office or the volunteers.

TAPE 27, SIDE B

050 JEAN WILLIAMS, LONG TERM CARE OMBUDSMAN: Testifies in opposition to HB 2873. 090 -Some times ombudsman face extreme hostility. -At the moment we are a successful program with national recognition.

115 -At the moment we are a successful program with national recognition, changes would be detrimental to the ombudsman programs.

125 HAROLD KING, NW OREGON LABOR RETIREES COUNCIL: Submits and reviews testimony in opposition to HB 2873. (EXHIBIT M)

FRANK ARMSTRONG, GOVERNOR'S COMMISSION ON SENIOR SERVICES: 170 Submits and reviews testimony with committee. Suggest any review or grievance process be $$\test{placed}$$ with the Long Term Care Advisory Commission. (EXHIBIT N)

215 -Some of the problems have been mis-communications between providers and

ombudsman.

235 JIM SMITH, TRANSIT RETIREES OREGON STATE COUNCIL: Testifies in to HB 2873 and placing the position in the Governor's office. opposition

NATE DAVIS, GRAY PANTHERS, SALEM: Testifies in opposition to HB 2873. originally involved in hiring the state ombudsman. Cautions the 297 Was committee to not politicize this position.

360 MARY LOU BOICE, OMBUDSMAN: Testifies in opposition to HB 2873. Was also involved in the hiring of the state ombudsman.

MAY DASCH, MARY'S PEAK CHAPTER, ALZHEIMER'S ASSOCIATION: Testifies 417 in opposition of HB 2873. The office of the Long Term Ombudsman will be severely hampered.

TAPE 28. SIDE B

040 ROSS: Ask the speaker what should happen when a ombudsman volunteer inappropriately. Who should the complaints be handled by. does act

087 GROVER SIMMONS, INDEPENDENT ADULT CARE PROVIDERS ASSOCIATION: Testifies what providers are concerned about, continued uncooperative conduct, or mis-conduct of ombudsman. -Reviews some examples of complaints from across the state. 130

-There needs to be a system of relief for complaints. -Reviews Older American Act of 1965, and addresses concerns previously 153 brought up.

Written testimony submitted by the following: (EXHIBIT O) -Susan Smith -Anne McKenrick -Rozene Sherrow, C. Anita Doll -H. Max Daley -Jim Doll -Peggy Workman -Harvey Roth -Katherine M. Pedersen -Sara Franzwa -Jean Mitchell -Christine Boydston -June St. Clair -Helen Riddell

HB 2873 WORK SESSION

ROSS: Comments that it seems that some mechaniSMfor complaints needs to be established. The Long Term Care Advisory Commission might be the most appropriate place to handle complaints since they hire and oversee the

State Ombudsman.

220~ WYLIE: Can see the need for an appeal process, but also an impartial organizational % 220~ development study needs to be done to review the organization. Would like to see a long term plan for adult long term care issues.

290 STARR: If we move this bill, would like to make sure it does not impact the role of the

ombudsman. Would like to work on this and bring back to committee.

337 CHAIR STARR: Adjourns meeting at 12:10 p.m.

Submitted by,

Reviewed by,

Shelley Jones, Committee Assistant

Tom Mann Committee Administrator

EXHIBIT LOG:

- HB 2027, LC-3 amendments- Patterson- 3 pages Δ-
- B-HB 2027, Testimony- Paris- 4 pages C-
- HB 2027, Testimony- Myers- 3 pages HB 2166, LC-4, LC-5- Staff- 4 pages HB 2166, Amendments- Smail- 1 page D-
- E-

F-	HB 2166,	Testimony- Crawford- 1 page
G-	HB 2027,	Amendments- Smail- 3 pages
Н-	HB 2102,	LC-1 amendments- Staff- 1 page
I -	HB 2873,	LC-1, LC-2 amendments- Staff- 4 pages
J-	HB 2873,	Older Americans Act- Staff- 4 pages
K-	HB 2873,	Testimony- Fisher- 6 pages
L-	HB 2873,	Testimony- Robinson- 6 pages
M-	HB 2873,	Testimony- King- 2 pages
N-	HB 2873,	Testimony- Armstrong- 1 page
0-	HB 2873,	Testimony- Staff- 14 pages