DepartmentofPlanningandBudget 2002FiscalImpactStatement

1.	BillNumber	SB161				
	HouseofOrigin	Introduced	Substitute	Engrossed		
	SecondHouse	☐ InCommittee	Substitute	Enrolled		
2.	Patron	on Byrne				
3.0	Committee	e EducationandHealth				
4.	Title	NursingFacilityStaffingStandards				

5.Summary/Purpose: Thisbillrequiresnursinghomestoestablishstaffingstandardsasa conditionoflicensure. The billwould require the Virginia Department of Health (VDH) to amend regulation storequire that nursinghome facilities maintain certain registered nurse/licensed practitioner nurse) staff to client ratios and certain certified nurse aidetoclient ratios. The bill also requires that nursing directors and nursing upervisors be registered nurses. Additionally, the bill requires that each facility employ a Director of Inservice Education based upon the number of beds in the facility.

6. Fiscalimpactestimatesarepreliminary

ExpenditureImpact:(seeSection8)

FiscalYear	Dollars	Positions	Fund
2002-03	\$94,438,042	-	GF
2002-03	\$97,269,456	-	NGF
2003-04	\$97,353,269	-	GF
2003-04	\$99,353,661	-	NGF

7. Budgetamendmentnecessary: Yes,item335.

8. Fiscalimplications:

VirginiaDepartmentofHealth

This legislationwouldrequirepromulgationofnursinghomeregulationsinfiscalyear 2003, involving stafftime associated with developing the needed regulatory language, as well as stafftime and resources associated with public meetings, constituent notific ation and media advertisement and printing costs (less than \$2,000). It is not anticipated that this new requirement would significantly impact the cost of conducting bien nial on -sitelicensing in spections.

DepartmentofMedicalAssistanceServices

 $The \ Department of Medical Assistance Services (DMAS) asserts that approximately, 66 percent of the clients in Virginia's nursing homes are Medicaid recipients. Therefore, if this billisim plemented, DMAS's incurred costs will be approximately 66 percent of the total cost to employ additional nursing directors, nursing supervisors, in service education directors, registered nurses (RN), licensed practitioner nurses (LPN), and certified nurse aids (CNA) as deemed necessary to fulfill the staffing requirements.$

Asacondition of licensure, this bill sets six standards that must be met by nursing homes. In responsetothefirststaffingstandard,DMASreportsthatthateachofthe265nursinghomes hasadirectorofnursingposition. Thus, there would be no cos tassociatedwithmeetingthis standard.DMASmaintainsthatthesecondstandard, whichentails nursing supervisors on dutyatalltimes(24 -hour/7daysaweek), wouldrequireeachnursinghometoemployfour nursingsupervisors.DMASassumesthateachnu rsinghomealreadyemploysatleasttwo nursing supervisors. Thus, each nursing home will need an additional two supervisors. Given the 265 active nursing homes, DMAS estimates that its portion of the cost associated with hiringadditionalnursingsuperv isorswouldbe \$17,721,987eachyear.DMASreportsthatthe thirdandfourthstaffingstandardswouldnothaveafiscalimpactsinceeachofthe 265 nursinghomesalreadyhasanassistantdirectorofnursingposition.DMASestimatesthe total costassoci atedwithhiringin -serviceeducationdirectors(standardsfiveandsix)is \$3,345,514annually. This total represents both part -timeandfull -timein -serviceeducation directors as defined by whether a facility has under or over 100 beds.

Thisbillals olaysoutstafftoclientratiorequirements. Employmentle veldata analyzed by DMAS indicates that current RN/LPN hours almost meet the RN/LPN ratio requirements outlined in this legislation. DMAS approximates an additional 184,910 RN/LPN hours are needed to fully meet the bill's requirements. The additional annual cost in curred by the nursing facilities based on FY2000 salary information would range from \$3,370,909 to \$5,101,667, depending on whether the RNs/LPN sare employees or agency personnel.

DMASestimatesthatanadditional18,270,043CNAhoursareneededtomeetthisbill's requirements. The total cost in curred by the nursing facilities associated with additional CNAs ranges from \$195,489,460 to \$284,099,169 based on whether the CNA is an employee CNA or an agency CNA. Medicaid would be responsible for approximately 66 percent of the total cost increase for the nursing facility.

DMASassumesathreepercentannualincreaseinthenursingstaffsalariesanda50/50split betweenemployee staffandagencystaff.DMASestimatestheaggregatedtotalcosts associatedwiththisbilltobeapproximately\$191.8millionin2003(\$94.4millionGF)and \$196.6millionin2004(\$97.3millionGF).

9. Specificagencyorpoliticalsubdivisionsaffecte d:

VirginiaDepartmentofHealth DepartmentofMedicalAssistanceServices

10. Technicalamendmentnecessary: No

11. Othercomments: None

Date: 01/31/02/kwm

Document: G:\2002FiscalYear \Legislation\SubmitEfis \Sb161.Doc

cc:SecretaryofHealthandHumanResources