## 2003 SESSION

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1	SENATE JOINT RESOLUTION NO. 325
2	Offered January 8, 2003
3	Prefiled January 7, 2003
4	Requesting the Joint Commission on Health Care to study the problems affecting the provision of
5	long-term care services to Virginia citizens. Report.
6	Patrons—Martin; Delegate: Rapp
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8	Referred to Committee on Rules
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10	WHEREAS, the demand for nursing facility services will increase dramatically in the future with 60
11	percent of those who turn 75 needing long-term care sometime in their life; and
12	WHEREAS, 46 percent of those who enter a nursing facility will deplete their life savings in 3
13 14	months or less and will need assistance from the Commonwealth; and
14 15	WHEREAS, Virginia Medicaid currently pays only about 85 percent of the allowable costs incurred to provide care for a nursing facility patient; and
15 16	WHEREAS, in 2001, nursing facilities in Virginia lost more than \$80 million in caring for Medicaid
17	patients and this loss has been partially passed to the private pay patient who, in order to meet this
18	shortfall, would have to pay an extra \$42 per day or \$15,000 per year, which amounts to a hidden tax
19	on those persons already bearing the financial responsibility for their care; and
20	WHEREAS, nursing facility reimbursement, as a percentage of the Medicaid budget, has declined
21	steadily over the past 15 years and is below the rates paid in 3 surrounding states; and
22	WHEREAS, the 2002 General Assembly imposed a \$25 million cut in Medicaid payment rates to
23 24	nursing facilities; and WHEREAS, to remain licensed, nursing facilities must meet national survey and certification
25	standards enforced by the Center for Medicare and Medicaid Services; and
26	WHEREAS, nursing salaries and professional liability costs continue to increase at rates much higher
27	than general inflation; now, therefore, be it
28	RESOLVED by the Senate, the House of Delegates concurring, That the Joint Commission on Health
29	Care be requested to study the problems affecting the provision of long-term care services to Virginia
30	citizens.
31 32	In conducting its study, the Joint Commission on Health Care, through the work of its standing Long Term Care Subcommittee, shall, among other issues considered pertinent to the study, examine the scope
32 33	of the problems affecting the provision of long-term care services and (i) suggest incentives for the
34	purchase of long-term care insurance, (ii) develop strategies to reduce the incidence of lawsuits and
35	resulting settlements against long-term care facilities that ultimately are borne by the state, (iii) develop
36	strategies to increase the supply of nurse caregivers, and (iv) provide adequate Medicaid reimbursement.
37	All agencies of the Commonwealth shall provide assistance to the Joint Commission on Health Care
38	for this study, upon request.
39 40	The Joint Commission on Health Care shall be limited to 4 meetings for this study during the 2003 interim, and the direct costs of this study shall not exceed \$16,000 without approval as set out in this
40	resolution.
42	The Joint Commission on Health Care shall complete its meetings by November 30, 2003, and the
43	Chairman shall submit to the Division of Legislative Automated Systems an executive summary of its
44	findings and recommendations no later than the first day of the 2004 Regular Session of the General
45	Assembly. The executive summary shall state whether the Joint Commission on Health Care intends to
46	submit to the Governor and the General Assembly a report of its findings and recommendations (for
47 48	publication as a document). The executive summary and report shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents
40 49	and reports and shall be posted on the General Assembly's website.
50	Implementation of this resolution is subject to subsequent approval and certification by the Joint
51	Rules Committee. The Committee may approve or disapprove expenditures for this study, extend or
52	delay the period for the conduct of the study, or authorize additional meetings during the 2003 interim.

INTRODUCED