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## **HOUSE JOINT RESOLUTION NO. 156**

House Amendments in [] — February 17, 1998

Directing the Joint Commission on Health Care to continue its Long-Term Care Subcommittee and to continue its study of long-term care financing, licensure and other issues.

Patrons—Hall, Baker, DeBoer, Diamonstein, Melvin and Morgan; Senators: Bolling, Gartlan, Lambert, Martin, Schrock, Walker and Woods

## Referred to Committee on Rules

WHEREAS, the population of the Commonwealth is rapidly aging; and

WHEREAS, Virginians 85 years of age and older are the fastest-growing segment of the state's population; and

WHEREAS, the demand for long-term care services is expected to increase rapidly; and

WHEREAS, the Medicaid program finances approximately 70 percent of the nursing home care provided in the Commonwealth; and

WHEREAS, long-term care expenditures by state government exceeded \$500 million in fiscal year 1996; and

WHEREAS, the Joint Commission on Health Care's Long-Term Care Subcommittee has begun a study of long-term care and aging issues; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Commission on Health Care be directed to continue its Long-Term Care Subcommittee and its study of long-term care financing, licensure and other issues.

In its deliberations, the Subcommittee shall focus on (i) long-term care licensure and improvements in existing agencies; (ii) the feasibility of and necessity for a separate Department of Health Care Quality; (iii) the advantages and disadvantages of "deemed status" where accreditation is accepted in lieu of state licensure or federal certification; (iv) long-term care financing strategies, including long-term care insurance, blending Medicaid and Medicare for dually-eligible individuals, and creative use of Medicaid waivers; (v) strategies for increasing the number of graduates of Virginia medical schools who specialize in geriatric medicine; and (vi) other issues as may seem appropriate.

All agencies of the Commonwealth shall provide assistance to the Joint Commission on Health Care and its staff, upon request.

The Joint Commission on Health Care shall submit its findings and recommendations to the Governor and the 1999 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

An estimated \$65,000 is allocated for the cost of staff support for the [completion of the] study to be funded by a separate appropriation from the General Assembly.

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