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Testimony before the Human Services Committee - March 1, 2012 by

Dennis H Cleary RN, NHA,

H.B. No. 5280 (RAISED) AN ACT ADJUSTING NURSING HOME RATES FOR PHYSICAL PLANT IMPROVEMENTS; S.B. No. 233 (RAISED) AN ACT CONCERNING ADVANCE PAYMENTS TO NURSING FACILITIES FOR UNCOMPENSATED CARE; and S.B. No. 30 AN ACT IMPLEMENTING PROVISIONS OF THE BUDGET CONCERNING HUMAN SERVICES.

Good morning Senator Musto, Representative Tercyak, and to the members of the Human Services Committee. My name is Dennis H Cleary RN, NHA, a former member of this committee, and former ranking member of the Public Health Committee.

I come here today as a registered nurse with thirty five year of Long Term Care Experience to ask this committee to take a stand to improve the quality of care in Connecticut Nursing Homes.

H.B. No. 5280 (RAISED) AN ACT ADJUSTING NURSING HOME RATES FOR PHYSICAL PLANT IMPROVEMENTS.

First, I ask that the Human Services Committee take a strong position in support of a improving the quality of Connecticut nursing homes by supporting H.B. No. 5280 (RAISED) AN ACT ADJUSTING NURSING HOME RATES FOR PHYSICAL PLANT IMPROVEMENTS. The focus on nursing home quality improvement has particular importance given the anticipated strong demand for high quality nursing home care on the horizon as Connecticut's aging population rises dramatically in the years ahead. I hope that encouraging nursing homes to improve their quality can once again be part of our state's Medicaid reimbursement policy.

H.B .No. 233 (RAISED) AN ACT CONCERNING ADVANCE PAYMENTS TO NURSING FACILITIES FOR UNCOMPENSATED CARE.

This legislation will required advance Medicaid payments to nursing homes and is urgently needed to address the persistent and worsening problem of excessive delays in the long term care Medicaid eligibility determination process at the Connecticut Department of Social Services (DSS). Connecticut nursing homes and their residents are harmed by excessive delays in the eligibility determination process. As Medicaid applicants residing in nursing homes await final disposition of their requests for state help, Connecticut nursing homes are simultaneously providing uncompensated care for periods of time often exceeding federal standards for promptness of payment. Nursing homes commonly are owed in excess of $500,000 and higher.

Mr. Chairmen I come here today most importantly as a registered nurse with thirty five years of CT Long Term Care experience:

I ASK THAT SECTION 14 of S.B. No. 30 AN ACT IMPLEMENTING PROVISIONS OF THE BUDGET CONCERNING HUMAN SERVICES, BE AMMENDED IN PART TO AUTHORIZE MEDICATION TECHNICIATIONS IN CONNECTICUT NURSING HOMES.

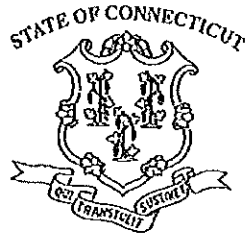
I have attached 2002 File number 333; substitute House Bill No. 5684 An Act Concerning Medication Technicians, for your reference, and hope it will be helpful as a starting point for discussions on an amendment to sec 30.

With the indulgence of the chairs I would like to highlight a few portions on that file.

As the Human Services Committee deliberates on Governor Malloy's midterm budget implementation legislation (S.B. No. 30, Sec. 14) to authorize unlicensed caregivers to administer medications in home and community based settings. I recommend that you also consider the longstanding request of nursing homes to employ medication technicians. Under this proposal a medication technician employed by a nursing home must be supervised by a licensed nurse. The provision also requires the Commissioner of Public Health to adopt regulations to implement these new requirements, including requirements for training medication technicians. We believe that authorizing Medication Technicians, in the closely supervised nursing home environment, is a cost-effective approach to safe administration medicines. This can be accomplished by revising Section 14 of the bill to include Medication Technicians in the nursing home setting.

I would also hope that this file can assist in drafting the level of detail I believe is needed should the community base services have unlicensed medication administration as well.

I would be happy to answer any questions you may have.



House of Representatives

General Assembly

File No. 333

February Session, 2002

Substitute House Bill No. 5684

House of Representatives, April 4, 2002

The Committee on Public Health reported through REP. EBERLE of the 15th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING MEDICATION TECHNICIANS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (*Effective October 1, 2002*) (a) A nursing home, as defined in subsection (c) of section 19a-490 of the general statutes, may employ one or more medication technicians who are certified in accordance with section 2 of this act. Such medication technician (1) shall be supervised by a licensed nurse, and (2) may administer oral and topical, nonprescription drugs and legend drugs, except for controlled substances, as defined in section 21a-240 of the general statutes. The nursing home shall provide for a one-to-one ratio of medication technicians to supervising licensed nurses.

(b) Medication technicians shall not be counted when calculating minimum required staffing levels and staff-to-resident ratios in nursing homes required by the Department of Public Health.

Sec. 2. (NEW) (*Effective October 1, 2002*) (a) The Department of Public

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14 Health shall certify medication technicians in accordance with this
15 section. In order to be eligible for certification as a medication
16 technician, a person shall (1) be a registered nurse's aide pursuant to
17 chapter 378a of the general statutes, in good standing, (2) have a
18 minimum of twenty-four months of experience as a registered nurse's
19 aide in a nursing home, (3) be recommended by said nursing home's
20 director of nursing services, and (4) meet the requirements established
21 in regulations adopted pursuant to subsection (b) of this section. A
22 person seeking such certification shall apply to the department on such
23 form as the Commissioner of Public Health prescribes. The
24 certification shall be valid for two years.

25 (b) The Commissioner of Public Health shall adopt regulations, in
26 accordance with chapter 54 of the general statutes, for purposes of this
27 section. Such regulations shall include, but not be limited to, the
28 following certification requirements (1) Seventy-five hours of
29 classroom education, which shall include a minimum of forty-five
30 hours of pharmacology training at an institution of higher education
31 accredited by the Department of Higher Education or regionally
32 accredited; (2) practical experience of eighty clinical hours; and (3) a
33 passing score on a certification examination that has both written and
34 practical components and is prescribed by the department. Such
35 regulations shall also require a minimum of nine hours of in-service
36 education, annually, specific to medications, potential side effects,
37 proper documentation and scope of practice.

38 (c) Any licensed nurse supervising a certified medication technician
39 may rely on such certification as an assurance that the medication
40 technician is competent.

This act shall take effect as follows:	
Section 1	*October 1, 2002*
Sec. 2	*October 1, 2002*

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Statement of Legislative Commissioners:
The bill was reorganized and rewritten for accuracy and consistency with the general statutes format for certification and licensing provisions.

PH *Joint Favorable Subst.*

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The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Fund-Type	Agency Affected	FY 03 $	FY 04 $
General Fund - Cost	Department of Public Health	176,852	185,951
General Fund - Savings	Department of Social Services	Potential	Potential

Municipal Impact: None

Explanation

The Department of Public Health will incur an FY 03 cost of $176,852 to establish a certification program for medication technicians. Included in this sum is $148,962 to reflect the full-year salaries of 1 Nurse Consultant and 1 Office Assistant, and the three-quarter year salary of 1 Administrative Hearing Attorney. Also included is $27,890 in associated other expenses and equipment. In FY 04 the annualized program cost would increase to $185,951. (DPH expenses would be supplemented by fringe benefits costs of $62,996 in FY 03 and $70,181 in FY 04 which are budgeted under miscellaneous accounts administered by the Comptroller.) No funding has been included within sHB 5019 (the Revised FY 03 Appropriations Act, as favorably reported by the Appropriations Committee) to implement this program.

This cost estimate assumes that ten percent of the total number of currently registered nurse's aides, or 3,800 individuals, will seek certification as medication technicians in the first year of implementation.

No revenue is anticipated to be generated as the bill does not

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establish a certification fee for a medication technician. It is also assumed that applicants will pay any applicable testing fee directly to a private examination service and not to the state.

As nursing homes may utilize medication technicians rather than higher-cost licensed nurses to perform certain duties, these homes may realize savings from this bill. To the extent that these savings are passed on to the state through future Medicaid reimbursement rates, the state may also realize a savings. The extent of these savings cannot be determined as it is unknown how many homes will utilize medication technicians in lieu of licensed nurses.

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OLR Bill Analysis
sHB 5684

AN ACT CONCERNING MEDICATION TECHNICIANS

SUMMARY:
This bill allows nursing homes to employ Department of Public Health (DPH) certified medication technicians to administer oral and topical prescription and nonprescription drugs, except controlled substances. The medication technician must be supervised by a licensed nurse. The bill specifies that the ratio of medication technicians to licensed nurses (registered nurses and licensed practical nurses) in a nursing home must be one-to-one. Medication technicians must not be counted when determining a nursing home's required minimum staffing levels and staff-to-resident ratios.

The Department of Public Health (DPH) must certify medication technicians, based on training, experience, and examination requirements. It must adopt regulations establishing certification requirements for medication technicians employed by nursing homes. An applicant must be a registered nurse's aide in good standing, with at least 24 months experience in a nursing home and recommended for training as a medication technician by the nursing home's director of nursing services.

Finally, the bill provides that a licensed nurse supervising a certified medication technician may rely on that certification (and recertification) as assurance of a competent technician.

EFFECTIVE DATE: October 1, 2002

CERTIFICATION REQUIREMENTS

The certification regulations must require (1) 75 hours of classroom education, including at least 45 hours of pharmacology training at an institution of higher education accredited by the Department of Higher Education, or regionally accredited; (2) practical experience of 80 clinical hours; and (3) passage of a final examination prescribed by DPH, including both written and practical parts. The regulations must also require at least nine hours annually of in-service education

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specifically addressing medications, potential side effects, proper documentation, and scope of practice.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute
Yea 13 Nay 11

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