



# House of Representatives

General Assembly

**File No. 296**

February Session, 2014

Substitute House Bill No. 5322

*House of Representatives, April 2, 2014*

The Committee on Human Services reported through REP. ABERCROMBIE of the 83rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

## **AN ACT CONCERNING NURSING HOME FACILITY MINIMUM STAFFING LEVELS.**

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

1 Section 1. (NEW) (*Effective October 1, 2014*) (a) As used in this  
2 section, (1) "nursing home facility" means a chronic or convalescent  
3 nursing home, and (2) "nursing staff" means nurses licensed pursuant  
4 to chapter 378 of the general statutes and nurse's aides.

5 (b) On and after October 1, 2014, each nursing home facility shall  
6 have sufficient nursing staff to maintain a daily minimum ratio of not  
7 less than two and three-tenths nursing staff hours per resident.

8 (c) If any nursing home facility experiences increased costs or  
9 expenditures complying with the provisions of this section, the  
10 Department of Social Services shall adjust such facility's Medicaid rates  
11 and provide payment for any such costs or expenditures within a  
12 reasonable period of time and retroactive to the effective date of this

13 section.

14 (d) The Commissioner of Public Health shall adopt or amend  
15 regulations, in accordance with the provisions of chapter 54 of the  
16 general statutes, to implement the provisions of this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2014	New section

**Statement of Legislative Commissioners:**

In section 1(b), the phrase "daily minimum nursing staff hours to resident ratio of not less than two and three-tenths nursing staff hours per resident" was changed to "daily minimum ratio of not less than two and three-tenths nursing staff hours per resident" for clarity. In section 1(c), the phrase "Medicaid rates" was changed to "such facility's Medicaid rates" for clarity.

**HS**      *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

---

**OFA Fiscal Note**

**State Impact:**

<b>Agency Affected</b>	<b>Fund-Effect</b>	<b>FY 15 \$</b>	<b>FY 16 \$</b>
Social Services, Dept.	GF - Cost	Potential	Potential

**Municipal Impact:** None

**Explanation**

The bill could result in a cost associated with increasing nursing home facility staffing ratios. Based on 2012 nursing home data, all facilities currently meet an overall daily ratio of not less than 2.3 staff hours per resident, as required by the bill. Should ratios change, the Department of Social Services (DSS) is required to adjust the rate of any nursing home facility experiencing increased costs to comply with the bill's provisions.

**The Out Years**

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

**OLR Bill Analysis****sHB 5322*****AN ACT CONCERNING NURSING HOME FACILITY MINIMUM STAFFING LEVELS.*****SUMMARY:**

This bill establishes a statutory daily minimum ratio of total nursing staff (licensed nurses and nurse's aides) to residents for chronic and convalescent nursing homes (CCNHs). Currently, under Department of Public Health (DPH) regulations, CCNHs must meet minimum ratios of (1) 1.40 total nursing staff hours per patient from 7 a.m. to 9 p.m. and (2) 0.5 total nursing staff hours per patient from 9 p.m. to 7 a.m. The regulations also set separate requirements for the ratio of licensed nursing staff hours per patient for those time periods (Conn. Agencies Reg., § 19-13-D8t(m)).

The bill increases the overall required daily ratio from 1.9 hours to 2.3 hours per patient, but because it does not break the ratio down by shifts or differentiate between licensed and total nursing staff, it appears that a CCNH could (1) decrease its ratio either during the day or night shift (e.g. a home may decrease the daytime staff ratio to 1.2 hours per patient and increase the nighttime ratio to 1.1 hours per patient) and (2) decrease the number of licensed nurses working per shift, and still comply with the bill's requirements.

Under the bill, if a CCNH's costs or expenses increase as a result of complying with the bill's staffing ratio, the Department of Social Services must adjust Medicaid rates and pay the CCNH for the increased costs or expenses within a reasonable time, retroactively to October 1, 2014.

The bill also requires the DPH commissioner to adopt new or amend its existing regulations to implement the bill's provisions.

EFFECTIVE DATE: October 1, 2014

**COMMITTEE ACTION**

Human Services Committee

Joint Favorable Substitute

Yea 18 Nay 0 (03/18/2014)