

## Department of Human Services 2009-11 Policy Option Package

**Division Name:** Public Health Division

**Program Name:** Health Care Licensure and Certification

**Policy Option Package Initiative:** We promote prevention, protection and public health

**Policy Option Package Title:** Hospice Agency Licensing & Regulatory Oversight

**Policy Option Package Number:** 326

**Related Legislation:** Amend ORS 443.850 to include licensing of hospice agencies by DHS  
Repeal ORS 443.850(5)

**Summary Statement:**

This package would provide regulatory oversight of Oregon hospice agencies by establishing a licensing program under the DHS Health Care Licensing and Certification program. In a 2007 letter, the Governor noted the concern of the Department of Justice that DHS regulatory authority had been inappropriately given to the Oregon Hospice Association.

**1. WHAT WOULD THIS POLICY OPTION PACKAGE (POP) DO AND HOW WOULD IT BE IMPLEMENTED?**

This package would provide regulatory oversight of hospice agencies in Oregon by implementation of a licensing program to supplement current oversight and funding under the Medicare Survey Grant that historically has been inadequate to ensure the provision of safe health care for this very vulnerable Oregon population. Health Care Licensure & Certification (HCLC) section within the Office of Community Health and Health Planning has historically performed the Medicare Certification survey for Hospice agencies in Oregon.

Staffing will increase and provide surveys of Hospice agencies at a once every three years frequency, up from the historical Medicare funded recertification survey rate of every six to 10 years. This should be a minimum survey frequency for any health care facility or health care agency providing services in Oregon.

**2. WHY DOES DHS PROPOSE THIS POP?**

To respond to a letter from the Governor dated June 19, 2007 in relation to a concern of the Department of Justice that DHS regulatory authority had been given to the Oregon Hospice Association.

**3. HOW DOES THIS FURTHER THE AGENCY'S MISSION OR GOALS?**

This package furthers the mission of DHS to insure that Oregonians are healthy and safe. Regulatory oversight helps ensure safe patient care by regulating health care agencies and providing follow-up reviews which assist health care agencies in meeting compliance standards.

**4. IS THIS POP TIED TO A DHS PERFORMANCE MEASURE? IF YES, IDENTIFY THE PERFORMANCE MEASURE. IF NO, HOW WILL DHS MEASURE THE SUCCESS OF THIS POP?**

No. The Office of Community Health and Health Planning is not reflected in DHS' performance measures. However, Health Care Licensure and Certification measures its performance by:

- The percentage of health care agencies surveyed per year;
- The percentage of serious complaints investigated within 2 working days;
- The percentage of complaints with onsite investigations within 45 days;
- The percentage of identified deficiencies corrected within 60 days; and
- The percentage of repeat deficiencies identified per year.

**5. DOES THIS POP REQUIRE A CHANGE(S) TO AN EXISTING STATUTE OR REQUIRE A NEW STATUTE? IF YES, IDENTIFY THE STATUTE AND THE LEGISLATIVE CONCEPT.**

Yes.

Amend ORS 443.850 to include licensing of hospice agencies by DHS. Repeal ORS 443.850(5).  
LC #10000/054

**6. WHAT ALTERNATIVES WERE CONSIDERED AND WHAT WERE THE REASONS FOR REJECTING THEM?**

Status quo: This option has been rejected given the position of the Governor and Department of Justice.

Contracting the review function: It is highly unlikely a private vendor can provide qualified RN surveyors. The surveyors must attend Medicare training prior to performing the basic or specialized certifications. Furthermore, this function has been recognized as a governmental responsibility.

**7. WHAT WOULD BE THE ADVERSE EFFECTS OF NOT FUNDING THIS POP?**

HCLC will continue to perform the minimal oversight funded by the Medicare Grant. Current funding and survey frequencies under the Medicare Certification Grant are inadequate. Historically these survey frequencies have varied from 6 to 10 years, which is inadequate.

**8. WHAT OTHER AGENCIES (STATE, TRIBAL AND/OR LOCAL GOVERNMENT) WOULD BE AFFECTED BY THIS POP? HOW WOULD THEY BE AFFECTED?**

None

**9. WHAT ASSUMPTIONS AFFECT THE PRICING OF THIS POP?**

**Implementation Date(s):** September 1, 2009

**End Date (if applicable):** \_\_\_\_\_

**a. Will there be new responsibilities for DHS? Specify which division(s) and describe their new responsibilities.**

- |  |   |
|--|---|
| <input type="checkbox"/> Administrative Services                 | <input type="checkbox"/> Addictions and Mental Health         |
| <input type="checkbox"/> Children, Adults and Families           | <input checked="" type="checkbox"/> Public Health             |
| <input type="checkbox"/> Division of Medical Assistance Programs | <input type="checkbox"/> Seniors and People With Disabilities |

**b. Will there be new administrative impacts sufficient to require additional funding? Specify which office(s) and describe how it will be affected.**

- |   |  |
|---|--|
| <input type="checkbox"/> Human Resources                  | <input type="checkbox"/> Payment Accuracy and Recovery |
| <input type="checkbox"/> Information Security/Privacy     | <input type="checkbox"/> Investigations and Training   |
| <input type="checkbox"/> Document Management              | <input type="checkbox"/> Facilities                    |
| <input type="checkbox"/> Audit and Consulting             | <input type="checkbox"/> Contracts and Procurement     |
| <input type="checkbox"/> Information Services (computers) | <input type="checkbox"/> Budget, Planning and Analysis |
| <input type="checkbox"/> Financial Services (accounting)  | <input type="checkbox"/> DHS Office of Communications  |

**c. Will there be changes to client caseloads or services provided to population groups? Specify how many in each relevant program.**

No

- d. Will it take new staff or will existing positions be modified? For each classification, list the number of positions and the number of months the positions will work in each biennium. Specify if the positions are permanent, limited duration or temporary.**

C6685 Client Care Surveyor, SR/28, PF, 1 position, 0.75 FTE, starts 10/1/09

- e. What are the start-up costs, such as new or significant modifications to computer systems, new materials, outreach and training?**

Notification of hospice providers.

- f. What are the ongoing costs?**

Routine personnel services and travel.

- g. What are the potential savings?**

None.

- h. Based on these answers, is there a fiscal impact?**

Yes

- i. What are the sources of funding and the funding split for each one? Include grant names and fund type, such as “Medicaid, General and Federal Funds.”**

General Fund