

Division of Health Service Regulation
Nursing Home Licensure & Certification and Construction Sections
Fiscal Impact Analysis

Agency:

North Carolina Medical Care Commission

Agency Contacts:

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Impact:

State government impact: None

Local government impact: None

Federal government impact: None

Substantial economic impact: None

Statutory Authority: G.S. 131E-104

Introductory Note:

The following list includes nursing home rules that were identified as requiring amendment or repeal in the stakeholder's meeting of May 5, 2011. One additional rule (.2210) was added. Table 1 provides a summary of the proposed rule change as well as any fiscal impact on state, local or federal government, or private sector entities and any substantial economic impact.

Table 1. Description of the Proposed Rule Changes & Economic Impact

| | Title of Rule Change | Statutory Citation | Summary of the Rule Change | Impact on State/Local/Federal Government and/or Private Sector or Substantial Economic Impact |
|---|--|---------------------------|--|--|
| 1 | Temporary Change in Bed Capacity, .2105 | G.S. 131E-104 | The current language is outdated and need to update to current reflection of a Continuing Care Retirement Community. | None |
| 2 | Denial, Amendment, or Revocation of License, .2106 | G.S. 131E-104 | The term “factual allegations” needs modification. | None |
| 3 | Suspension of Admission, .2107 | G.S. 131E-104 | The term “factual allegations” needs modification. | None |
| 4 | Admissions, .2202 | G.S. 131E-104 | The current wording “a summary of the hospital stay” is challenging for the nursing homes. The rule needs to be broader to allow the nursing homes to obtain whatever documentation necessary to establish a plan of care. | None |

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|---|---|---|--|--|
| 5 | Patients not to be Admitted, .2203 | G.S. 131E-104 | The word “training” had questionable meaning and different interpretations. | None |
| 6 | Reporting and Investigating Abuse, Neglect or Misappropriation, .2210 | G.S. 131E-104; 131E-131; 131E-255; 131E-256 | Reporting requirement of 24 hours needed clarification as is interpreted differently, some 24 hours, some 1 working day. | None |
| 7 | Patient Assessment and Care Planning, .2301 | G.S. 131E-104 | Change “care plan” to “plan of care to strengthen the requirement for comprehensiveness of plan and to deemphasize a particular form and format. | None |

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|---|------------------------------------|---------------------------|---|---|
| 8 | Nurse Staffing Requirements, .2303 | G.S. 131E-104 | More calls come into the office about this rule than any other. Stakeholder group decided best to change the rule to mirror the federal requirement. And staff involved in assessments should be counted. | <p>None</p> <p>Our certified nursing homes (97% of our homes) already are required to provide as many staff as it takes to meet the needs of all the residents. This is what we are changing the state rule to; so there is no financial impact to our certified homes.</p> <p>This rule will not cause certified homes to increase, decrease, or change the distribution of staff.</p> <p>As far as licensed only homes, they are already staffing well and we do not receive complaints about their staffing so there is no fiscal impact to our licensed only homes.</p> |
| 9 | Medication Administration, .2306 | G.S. 131E-104 | Clarify or delete automatic stop orders or change to facility policy. | None |

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|----|---|---------------------------|--|--|
| 10 | Drug Procurement, .2604 | G.S. 131E-104; 131E-117 | Clarify “possess a stock of prescription legend drugs.” Clarify regarding patient drugs and the flow of the rule. | None |
| 11 | Specialized Rehabilitative and Habilitative Services, .3001 | G.S. 131E-104 | Repeal. These types of units do not exist in NC nursing homes. Any resident needing therapy services needs to be provided services. | None |
| 12 | Quality of Specialized Rehabilitative Service, .3002 | G.S. 131E-104 | Repeal. These types of units do not exist in NC nursing homes. Any resident needing therapy services needs to be provided services. | None |
| 13 | HIV Designated Unit Policies and Procedures, .3011 | G.S. 131E-104 | Repeal. These types of units do not exist in NC nursing homes. Any resident with HIV should receive services necessary. We do not need special segregated units for these residents. Infection control practices should always be applied with interacting with all residents. | None |

| | Title of Rule Change | Statutory Citation | Summary of the Rule Change | Impact on State/Local/Federal Government and/or Private Sector or Substantial Economic Impact |
|----|---|---------------------------|--|--|
| 14 | Physician Services in an HIV Designated Unit, .3012 | G.S. 131E-104 | Repeal. Any nursing home resident can be referred to a specialist. No need to separate out HIV residents. | None |
| 15 | Special Nursing Requirements for an HIV Designated Unit, .3013 | G.S. 131E-104 | Repeal. Designated HIV units do not exist in NC. Residents with a diagnosis of HIV are served in the general population of the nursing home. | None |
| 16 | Specialized Staff Education for HIV Designated Units, .3014 | G.S. 131E-104 | Repeal. All staff should be educated on infection control for all residents and infection control rules should cover. | None |
| 17 | Use of Investigational Drugs for HIV Designated Units, .3015 | G.S. 131E-104 | Repeal. Designated HIV units do not exist in NC. Any medication a resident receives is covered under medication administration rules. | None |
| 18 | Additional Social Work Requirements for HIV Designated Units, .3016 | G.S. 131E-104 | Repeal. Designated HIV units do not exist in NC. The Social worker for the nursing home is expected to meet all residents' needs. | None |

| | Title of Rule Change | Statutory Citation | Summary of the Rule Change | Impact on State/Local/Federal Government and/or Private Sector or Substantial Economic Impact |
|----|--|---------------------------|--|--|
| 19 | Physician Requirements for Inpatient Rehabilitation Facilities or Units, .3021 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. Physician services are expected to be provided for all residents. | None |
| 20 | Admission Criteria for Inpatient Rehabilitation Facilities or Units, .3022 | G.S. 131E-104 | Repeal. These types of designated units no longer exist in NC. | None |
| 21 | Comprehensive Inpatient Rehabilitation Evaluation, .3023 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. All residents have comprehensive assessments. | None |
| 22 | Comprehensive Inpatient Rehabilitation Interdisciplinary Treat/Plan, .3024 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. A plan of care is developed by the interdisciplinary team for all residents. | None |
| 23 | Discharge Criteria for Inpatient Rehabilitation Facilities or Units, .3025 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. Any resident is provided a safe and orderly discharge. | None |

| | Title of Rule Change | Statutory Citation | Summary of the Rule Change | Impact on State/Local/Federal Government and/or Private Sector or Substantial Economic Impact |
|----|---|---------------------------|--|--|
| 24 | Comprehensive Rehabilitation Personnel Administration, .3026 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. | None |
| 25 | Comprehensive Inpatient Rehabilitation Program Staffing Requirements, .3027 | G.S. 131E-104 | Repeal. All nursing homes are required to provide enough staff to meet the needs of all residents. | None |
| 26 | Staff Training for Inpatient Rehabilitation Facilities or Unit, .3028 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. Staff are trained to take care of all the resident population needs. | None |
| 27 | Equipment Reqs/Comprehensive Inpatient Rehabilitation Programs, .3029 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. | None |
| 28 | Physical Facility Reqs/Inpatient Rehabilitation Facilities or Unit. .3030 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. | None |

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|----|---|---------------------------|---|--|
| 29 | Deemed Status for Inpatient Rehabilitation Facilities or Units, .3033 | G.S. 131E-104 | Repeal. These types of units no longer exist in NC. The rule is obsolete. | None |