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BILL ANALYSIS

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Senate Bill 1094 (as introduced 9-9-20)
Sponsor: Senator Peter J. Lucido
Committee: Health Policy and Human Services

Date Completed: 9-16-20

CONTENT

The bill would amend the Public Health Code to do the following:

- **Require the Department of Health and Human Services (DHHS), in consultation with the Department of Licensing and Regulatory Affairs (LARA), to conduct, by October 15, 2020, an evaluation of the operation, efficacy, clinical outcomes, and performance of each COVID-19 regional hub that was implemented and operating during the State's response to coronavirus in nursing homes and provide a detailed report on its evaluation to the Legislature.**
- **Require the DHHS, in consultation with LARA, to develop and submit to the Legislature, by October 15, 2020, a plan based on guidance issued by the Centers for Disease Control and Prevention (CDC) and incorporated recommendations from the Michigan Nursing Homes COVID-19 Preparedness Task Force describing a process by which the DHHS was able to implement dedicated facilities for only coronavirus-positive patients in each of the eight health care regions of the State.**
- **Require a plan to incorporate any enhancement that the DHHS considered appropriate to prevent the spread of coronavirus in nursing homes based on the evaluation conducted by the Department, if the plan used the regional hub design.**
- **Prohibit an individual from being admitted or retained for care in a nursing home if he or she tested positive for coronavirus unless the individual had since recovered from coronavirus or the nursing home demonstrated to the DHHS that it was able to provide a designated area within its facility for individuals who tested positive for coronavirus and had a program for providing the appropriate level of care for those individuals.**

The bill would require the DHHS, in consultation with LARA, to do both of the following:

- By October 15, 2020, conduct an evaluation of the operation, efficacy, clinical outcomes, and performance of each COVID-19 regional hub that was implemented and operating during the State's response to coronavirus in nursing homes and provide a detailed report on its evaluation to the Senate and House of Representatives standing committees on health policy.
- By October 15, 2020, develop and submit a plan to the Senate and House standing committees on health policy that was based on relevant guidance issued by the CDC and incorporated recommendations from the Michigan Nursing Homes COVID-19 Preparedness Task Force.

The plan would have described a process by which the DHHS was able to implement dedicated facilities available for use for only coronavirus-positive patients in each of the eight health care regions in the State to provide care to individuals who tested positive for coronavirus and were ineligible for admission at a hospital, nursing home, or adult foster care facility. If the plan used the regional hub design, it would have to incorporate any enhancement that the DHHS considered appropriate to prevent the spread of coronavirus in nursing homes based on the evaluation conducted by the Department.

"Coronavirus" would mean severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). "Health care region" would mean a health care region as described by the DHHS.

Under the Code, an individual may not be admitted or retained for care in a nursing home if he or she requires special medical or surgical treatment, or treatment for acute mental illness, developmental disability, communicable tuberculosis, or a communicable disease, unless the home is able to provide an area and a program for the care and the DHHS approved both the area and the program.

The bill specifies that, beginning November 1, 2020, an individual also could not be admitted or retained for care in a nursing home if he or she tested positive for coronavirus unless either of the following applied:

- The individual had since recovered from coronavirus.
- The nursing home demonstrated to the DHHS that it was able to provide a designated area within its facility for individuals who tested positive for coronavirus and had a program for retaining and providing the appropriate level of care necessary for individuals who tested positive for coronavirus.

The program would have to be consistent with adequate supply, staffing, and operational capacity of the nursing home at the time of an individual's diagnosis. The nursing home could not admit or retain an individual in its care unless the DHHS approved the nursing home's designated area and program.

MCL 333.21717 et al.

Legislative Analyst: Stephen Jackson

FISCAL IMPACT

The bill would require the DHHS to evaluate the COVID-19 regional hubs and to develop a plan to create a process to ensure that there are dedicated skilled nursing facilities for COVID-19 patients. These provisions would lead to minor administrative costs for the DHHS. The requirement that COVID-19 positive individuals not be placed in skilled nursing facilities until they had recovered or a designated area in the skilled nursing facility was available could delay some placements of those individuals in skilled nursing facilities.

The Department of Licensing and Regulatory Affairs also could incur minor costs related to the required evaluation and planning activity. However, these costs likely would be covered by existing appropriations.

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.