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Long-Term Care Issues Committee Presents Five Resolutions for the NC Senior Tar Heel Legislature

August 23, 2022 – Raleigh, NC

This article is the second of six features describing the current focus of the NC Senior Tar Heel Legislature leading up to the 2023 legislative session of the NC General Assembly.

The Resolutions Standing Committee of the NC Senior Tar Heel Legislature (NCSTHL) received 67 proposals during July 2022 from its member body of 84 delegates and 51 alternates. Fourteen of the 67 proposals were assigned to the Long-Term Care (LTC) Issues Committee, chaired by Bill Lamb (Wake), which was tasked to narrow the proposals from 14 to the top three to five for this legislative cycle's slate of resolutions.

After two weeks of deliberation, the LTC Issues Committee has chosen five resolutions to put before the NCSTHL body for vote. The ideas ranged from ensuring counseling and family visit access to extending long-term care insurance to older adults, but these are the five that made the final cut.

The top-ranking resolution is for the state to increase the number of long-term care ombudsmen to meet the federal standard of one ombudsman per 2,000 long term care beds. There are currently 33 full-time ombudsmen covering 88,500 LTC beds; therefore, NC needs 11 additional FTE positions at an expense of \$1.5 million to meet best practices standards and the increased demands of their roles. To learn more about the critical work of the long-term care ombudsmen, visit the NCDHHS website's Division of Aging and Adult Services (DAAS) section at <https://www.ncdhhs.gov/divisions/aging-and-adult-services>.

The second resolution is to increase the monthly Personal Needs Allowance (PNA) provided to Medicaid residents in nursing homes from \$30 to \$70. The amount of \$30 was established in 1987 and has not been increased since. It is used for items not provided by the facility, such as clothing, shoes, slippers, hearing aids, glasses, books, magazines, soap, shampoo, toothpaste, hair styling, gifts, and snacks. In its last session, the NC General Assembly increased the PNA for assisted living residents from \$46 to \$70. Residents in nursing homes should be granted the same increase.

The third resolution is to make permanent the rate increases for Medicaid and State/County Special Assistance (SA) implemented during COVID19 and implement initiatives to improve benefits and supports and salaries for direct care workers in long term care facilities. A study released last fall reported that only 1% of nursing homes and 4% of assisted living facilities indicated that they were fully staffed. As a result, 2/3 of nursing homes and 1/3 of assisted living are limiting new admissions, which results in increased challenges for family caregivers struggling to care for their loved ones at home who would be better accommodated in a facility. Most direct care workers have annual salaries less than \$30,000, which qualifies them for low-income services. The temporary rate increase for Medicaid and State/County Special Assistance implemented during COVID-19 enabled long term care facilities and assisted living providers to increase wages and benefits to staff, which served to sustain quality of care for residents.

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The fourth resolution recommends legislation to streamline recruitment, training, and retention of the health care direct care workforce including: increasing wages, providing financial assistance for training, making childcare available for direct care workers, and requiring training materials and exams to be available in both English and Spanish.

The fifth resolution recommends legislation which establishes either mandatory standardized HPPD (hours per patient daily) or minimum staff-to-patient ratios for direct patient care, including enforcement standards and consequences to ensure quality care in nursing homes in the state of North Carolina, regardless of whether they are a for-profit or private non-profit organization. This proposal was first submitted by the NCSTHL to the NC General Assembly in 2014 and has yet to gain traction for support. It has been resubmitted to the NCGA for the past four years, but faces resistance from corporate owners of facilities. The federal Nursing Home Reform Act (NHRA), as part of the Omnibus Budget Reconciliation Act (OBRA) of 1987, requires minimum staffing levels for registered nurses (RNs) and licensed practical nurses (LPNs), and a minimum educational training for nurse's aides (CNAs), but fails to establish a specific requirement for minimum caregiver/resident ratio or a minimum standard for the number of hours per patient day that a resident should be receiving.

As far back as 1999, the NCSTHL has requested legislation to fund and protect residents in LTC settings, with varying degrees of success. In October, the voting of the NCSTHL body will decide which of these five resolutions will be chosen as legislative recommendations for the NC General Assembly's consideration. The Long-Term Care Issues Committee has completed its work and demonstrated the nonpartisan model that focuses on the issues for the betterment of the lives of North Carolina's older adults.

About the NCSTHL: The North Carolina Senior Tar Heel Legislature was created as a nonpartisan, unicameral body by the North Carolina General Assembly with the passage of Senate Bill 479 in July of 1993. Its purpose is to identify the most pressing issues facing older adults across the state and propose new legislation that will improve their quality of life to the NC General Assembly. The NCSTHL is comprised of delegates and alternates representing each of North Carolina's 100 counties, supported by the area agencies on aging serving the state's sixteen service areas.

For more information about NCSTHL, visit www.ncseniortarheellegislature.org.

To contact your local NCSTHL member, send an email request to media contact Allison Brown at katbrown1029@gmail.com, stating the originating county. Or visit the North Carolina Association of Area Agencies on Aging (NC4A) to locate the correct region and county, at <https://www.nc4a.org/membership>, and request NCSTHL member contact information from the local Area Agency on Aging.

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