105тн CONGRESS 1st Session **S. 1122**

To establish a national registry of abusive and criminal patient care workers and to require criminal background checks of patient care workers.

IN THE SENATE OF THE UNITED STATES

JULY 31, 1997

Mr. KOHL (for himself, Mr. GRASSLEY, and Mr. REID) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

- To establish a national registry of abusive and criminal patient care workers and to require criminal background checks of patient care workers.
 - 1 Be it enacted by the Senate and House of Representa-
 - 2 tives of the United States of America in Congress assembled,

3 SECTION 1. SHORT TITLE.

4 This Act may be cited as the "Patient Abuse Preven-5 tion Act".

6 SEC. 2. ESTABLISHMENT OF NATIONAL REGISTRY OF ABU7 SIVE WORKERS.

8 (a) IN GENERAL.—The Secretary shall establish,
9 under the health care fraud and abuse data collection pro10 gram established under section 1128E of the Social Secu-

rity Act (42 U.S.C. 1320a-7e), a registry to be known
 as the "National Registry of Abusive Workers" (hereafter
 referred to in this section as the "Registry") to collect and
 maintain data on covered health care workers (as defined
 in subsection (e)) who have been the subject of reports
 of patient abuse.

7 (b) SUBMISSION OF INFORMATION BY STATE REG-8 ISTRIES.—Each State registry under sections 1819(e)(2)9 and 1919(e)(2) of the Social Security Act (42 U.S.C. 10 1395i-3(e)(2) and 1396r(e)(2)) shall submit to the Registry any existing or newly acquired information contained 11 12 in the State registry concerning covered health care work-13 ers who have been the subject of confirmed findings of patient abuse. 14

15 (c) SUBMISSION OF INFORMATION BY STATE.—Each State shall report to the Registry any existing or newly 16 17 acquired information concerning the identity of any covered health care worker who has been found to have com-18 19 mitted an abusive act involving a patient, including the 20identity of any such worker who has been convicted of a 21 Federal or State crime described as in section 22 1128(a)(2)(A) of the Social Security Act (42 U.S.C. 23 1320a-7(a)(2)(A)). The State shall provide such workers 24 with a right to issue a statement concerning the submis-25 sion of information to the Registry under this subsection.

Any information disclosed concerning a finding of an abu sive act shall also include disclosure of any statement sub mitted by a worker in the registry relating to the finding
 or a clear and accurate summary of such a statement.

5 (d) SUBMISSION OF INFORMATION BY FACILITIES.— Each covered health care facility shall report to the State 6 7 concerning a covered health care worker who has been 8 found to have engaged in an act of patient abuse. The 9 State shall, in accordance with the procedures described 10 in part 483 of title 42, Code of Federal Regulations (as in effect on July 1, 1995), conduct an investigation with 11 12 respect to a report under this subsection to determine the 13 validity of such a report.

14 (e) BACKGROUND CHECK.—

15 (1) REQUIREMENTS.—

16 (A) IN GENERAL.—Each covered health
17 care facility (as defined in subsection (f)), prior
18 to employing a covered health care worker,
19 shall—

(i) in the case of a covered health care
worker who has not otherwise undergone a
criminal background check as part of the
licensing requirements of a State, as determined under regulations promulgated by
the Secretary, provide for the conduct by

1	the State of a criminal background check
2	(through an existing State database (if
3	any) and through the Integrated Auto-
4	mated Fingerprint Identification System)
5	concerning such worker, and provide the
6	worker with prior written notice of the re-
7	quirement for such a background check;
8	(ii) obtain from a covered health care
9	worker prior to employment a written cer-
10	tification that such worker does not have a
11	criminal record, and that a finding of
12	abuse has not been made relating to such
13	worker, that would preclude such worker
14	from carrying out duties that require di-
15	rect patient care; and
16	(iii) in the case of all such workers,
17	contact the State health care worker reg-
18	istries established under sections
19	1819(e)(2) and $1919(e)(2)$ which shall also
20	contact the Registry for information con-
21	cerning the worker.
22	(B) Imposition of fees.—A State may
23	assess a covered health care facility a fee for
24	the conduct of a criminal background check
25	under subparagraph (A)(i) in an amount that

does not exceed the actual cost of the conduct

2	of the background check. Such a facility may
3	recover from the covered health care worker in-
4	volved a fee in an amount equal to not more
5	than 50 percent of the amount of the fee as-
6	sessed by the State for the criminal background
7	check.
8	(C) Effective date.—The requirement
9	in subparagraph (A)(i) shall become applicable
10	on January 1, 1999, or on such earlier date as
11	the Director of the Federal Bureau of Inves-
12	tigation determines that the Integrated Auto-
13	mated Fingerprint Identification System has
14	become operational.
15	(2) PROBATIONARY EMPLOYMENT.—Each cov-
16	ered health care facility shall provide a probationary
17	period of employment for a covered health care
18	worker pending the completion of the background
19	checks required under paragraph (1)(A). Such facil-
20	ity shall maintain direct supervision of the covered
21	health care worker during the worker's probationary
22	period of employment.
23	(3) PENALTY.—
24	(A) IN GENERAL.—A covered health care

facility that violates paragraph (1) or (2) shall

1	be subject to a civil penalty in an amount not
2	to exceed—
3	(i) for the first such violation, \$2,000;
4	and
5	(ii) for the second and each subse-
6	quent violation within any 5-year period,
7	\$5,000.
8	(B) KNOWING RETENTION OF WORKER
9	In addition to any civil penalty under subpara-
10	graph (A), a covered health care facility that—
11	(i) knowingly continues to employ a
12	covered health care worker in violation of
13	paragraph (1) or (2) in a position involving
14	direct patient care; or
15	(ii) knowingly fails to report a covered
16	health care worker who has been deter-
17	mined to have committed patient abuse;
18	shall be subject to a civil penalty in an amount
19	not to exceed \$5,000 for the first such viola-
20	tion, and $$10,000$ for the second and each sub-
21	sequent violation within any 5-year period.
22	(f) DEFINITIONS.—In this section:
23	(1) COVERED HEALTH CARE FACILITY.—The
24	term "covered health care facility" means—

(A) with respect to application under the medicare program under title XVIII of the Social Security Act (42 U.S.C. 1395 et seq.), a provider of services, as defined in section 1861(u) of such Act (other than a fund for purposes of sections 1814(g) and 1835(e));

7 (B) with respect to application under the 8 medicaid program under title XIX of the Social 9 Security Act (42 U.S.C. 1396 et seq.), any 10 nursing facility, home health agency, commu-11 nity-based residential facility, adult day care 12 center, adult family home, assisted living facil-13 ity, hospice program, hospital, treatment facil-14 ity, personal care worker agency, supportive 15 home care worker agency, board and care facil-16 ity, or any other entity that receives assistance 17 or benefits under the medicaid program under 18 that title;

19 (C) a facility of the National Institutes of20 Health;

(D) a facility of the Indian Health Service;
(E) a health center under section 330 of
the Public Health Service Act (42 U.S.C.
24 254b); and

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(F) a hospital or other patient care facility owned or operated under the authority of the Department of Veterans Affairs or the Department of Defense.

5 (2) COVERED HEALTH CARE WORKER.—The term "covered health care worker" means any indi-6 7 vidual that has direct contact with a patient of a 8 covered health care facility under an employment or 9 other contract, or under a volunteer agreement, with 10 such facility. Such term includes individuals who are 11 licensed or certified by the State to provide such 12 services, and non-licensed individuals providing such 13 services as defined by the Secretary including nurse 14 assistants, nurses aides, home health aides, and per-15 sonal care workers and attendants.

PATIENT ABUSE.—The term 16 (3)"patient 17 abuse" means any incidence of abuse, neglect, mis-18 treatment, or misappropriation of property of a pa-19 tient of a covered health care facility. The terms "abuse", "neglect", "mistreatment", and "misappro-20 21 priation of property" shall have the meanings given 22 such terms in part 483 of title 42, Code of Federal 23 Regulations.

24 (4) SECRETARY.—The term "Secretary" means
25 the Secretary of Health and Human Services.

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(g) CONSULTATION.—In carrying out this section the
 Secretary shall consult with the Director of the Federal
 Bureau of Investigation.

4 (h) REGULATIONS.—Not later than 6 months after 5 the date of enactment of this Act, the Secretary shall pro-6 mulgate regulations to carry out this section. With respect 7 to subsections (b) and (c), the regulations shall call for 8 the submission of information to the Registry not later 9 than 30 days after the date of a conviction or on which 10 a finding is made.

11 SEC. 3. EXCLUSION OF CERTAIN INDIVIDUALS FROM PAR12 TICIPATION IN PROGRAMS.

(a) MANDATORY LIFETIME EXCLUSION.—Section
14 1128(a) of the Social Security Act (42 U.S.C. 1320a–
15 7(a)) is amended by adding at the end the following:

16 "(5) CRIMINAL CONVICTION.—Any individual or
17 entity that has been—

"(A) convicted, under Federal or State
law, of a criminal offense involving a crime
against bodily security, including homicide, battery, endangerment of safety, sexual assault,
child or elder abuse, and spousal abuse; or
"(B) found to have—
"(i) knowingly continued to employ an

25 individual described in subparagraph (A)

1	in a position involving direct patient care;
2	Oľ
3	"(ii) knowingly failed to report an in-
4	dividual who has been determined to have
5	committed a crime described in subpara-
6	graph (A).".
7	(b) Permissive Exclusion.—
8	(1) IN GENERAL.—Section 1128(b) of the So-
9	cial Security Act (42 U.S.C. 1320a–7(b)) is amend-
10	ed—
11	(A) in subsection (b), by adding at the end
12	the following:
13	"(16) FINDING RELATING TO PATIENT
14	ABUSE.—Any individual or entity that—
15	"(A) is or has been the subject of a spe-
16	cific documented finding of patient abuse by a
17	State (as determined under procedures utilized
18	by a State under section $1819(e)(2)$ or
19	1919(e)(2)); or
20	"(B) has been found to have—
21	"(i) knowingly continued to employ an
22	individual described in subparagraph (A)
23	in a position involving direct patient care;
24	or

"(ii) knowingly failed to report an in-1 2 dividual who has been determined to have 3 committed patient abuse as described in 4 subparagraph (A)."; and (B) in subsection (c)(3), by adding at the 5 6 end the following: 7 "(G) In the case of an exclusion of an individ-8 ual or entity under subsection (b)(16), the period of 9 exclusion shall be determined in accordance with 10 regulations promulgated by the Secretary based on 11 the severity of the conduct that is the subject of the 12 exclusion.". 13 (2) REGULATIONS.—Not later than 6 months 14 after the date of enactment of this Act, the Sec-15 retary of Health and Human Services shall promul-16 gate regulations to establish periods of exclusion for 17 purposes of section 1128(c)(3)(G) of the Social Se-18 curity Act. 19 (c) EXCLUSIONS APPLY TO ANY ENTITY ELIGIBLE FOR FEDERAL REIMBURSEMENT.—Section 1128 of the 20 21 Social Security Act (42 U.S.C. 1320a–7) is amended by

22 adding at the end the following:

23 "(j) APPLICABILITY OF CERTAIN EXCLUSIONS.—The
24 exclusion (or direction to exclude) an individual or entity
25 under subsections (a)(2) and (b)(16) shall provide that

such individual or entity is excluded from working for or
 on behalf of any entity that is eligible for reimbursement
 under a Federal health care program, as defined in section
 1128B(f).".

5 SEC. 4. PREVENTION AND TRAINING DEMONSTRATION 6 PROJECT.

7 (a) ESTABLISHMENT.—The Secretary of Health and
8 Human Services shall establish a demonstration program
9 to provide grants to develop information on best practices
10 in patient abuse prevention training (including behavior
11 training and interventions) for managers and staff of hos12 pital and health care facilities.

(b) ELIGIBILITY.—To be eligible to receive a grant
under subsection (a), an entity shall be a public or private
nonprofit entity and prepare and submit to the Secretary
of Health and Human Services an application at such
time, in such manner, and containing such information as
the Secretary may require.

19 (c) USE OF FUNDS.—Amounts received under a20 grant under this section shall be used to—

(1) examine ways to improve collaboration between State health care survey and provider certification agencies, long-term care ombudsman programs, the long-term care industry, and local community members;

(2) examine patient care issues relating to regu latory oversight, community involvement, and facility
 staffing and management with a focus on staff
 training, staff stress management and staff super vision;

6 (3) examine the use of patient abuse prevention 7 training programs by long-term care entities, includ-8 ing the training program developed by the National 9 Association of Attorneys General, and the extent to 10 which such programs are used; and

(4) identify and disseminate best practices forpreventing and reducing patient abuse.

(d) AUTHORIZATION OF APPROPRIATIONS.—There is
authorized to be appropriated such sums as may be necessary to carry out this section.