To amend titles XVIII and XIX of the Social Security Act to improve the transparency of information on skilled nursing facilities and nursing facilities and to clarify and improve the targeting of the enforcement of requirements with respect to such facilities.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 26, 2008

Mr. Stark (for himself and Ms. Schakowsky) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

A BILL

To amend titles XVIII and XIX of the Social Security Act to improve the transparency of information on skilled nursing facilities and nursing facilities and to clarify and improve the targeting of the enforcement of requirements with respect to such facilities.

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; TABLE OF CONTENTS.
4 (a) Short Title.—This Act may be cited as the
5 “Nursing Home Transparency and Quality of Care Im-
6 provement Act of 2008”.
(b) Table of Contents.—The table of contents of this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—IMPROVING TRANSPARENCY OF INFORMATION ON SKILLED NURSING FACILITIES AND NURSING FACILITIES

Sec. 101. Required disclosure of ownership and additional disclosable parties information.
Sec. 102. Accountability requirements.
Sec. 103. Nursing home compare Medicare website.
Sec. 104. Reporting of expenditures.
Sec. 105. Standardized complaint form.
Sec. 106. Ensuring staffing accountability.

TITLE II—TARGETING ENFORCEMENT

Sec. 201. Civil money penalties.
Sec. 203. GAO studies and reports on temporary management.
Sec. 204. Notification of facility closure.
Sec. 205. National demonstration projects on culture change and use of information technology in nursing homes.

TITLE III—IMPROVING STAFF TRAINING

Sec. 301. Dementia and abuse prevention training.
Sec. 302. Study and report on training required for certified nurse aides and supervisory staff.

TITLE I—IMPROVING TRANSPARENCY OF INFORMATION ON SKILLED NURSING FACILITIES AND NURSING FACILITIES

SEC. 101. REQUIRED DISCLOSURE OF OWNERSHIP AND ADDITIONAL DISCLOSABLE PARTIES INFORMATION.

(a) In General.—Section 1124 of the Social Security Act (42 U.S.C. 1320a–3) is amended by adding at the end the following new subsection:
“(c) Required Disclosure of Ownership and Additional Disclosable Parties Information.—

“(1) Disclosure.—

“(A) In general.—A facility shall have

the information described in paragraph (2)

available—

“(i) during the period beginning on

the date of enactment of this subsection

and ending on the date such information is

made available through the Online Survey,

Certification and Reporting (OSCAR) data

network (or any successor system) main-

tained by the Secretary, for submission to

the Secretary, the Inspector General of the

Department of Health and Human Serv-

ices, the State in which the facility is lo-

cated, and the State long-term care omb-

budsman in the case where the Secretary,

the Inspector General, the State, or the

State long-term care ombudsman requests

such information; and

“(ii) beginning on the effective date of

the final regulations promulgated under

paragraph (3)(A), for reporting such infor-
mation in accordance with such final regu-

lations.

Nothing in clause (i) shall be construed as au-

thorizing a facility to dispose of or delete infor-

mation described in such clause after the effec-

tive date of the final regulations promulgated

under paragraph (3)(A).

“(B) PUBLIC AVAILABILITY OF INFORMA-

TION.—During the period described in subpara-

graph (A)(i), a facility shall—

“(i) make the information described in

paragraph (2) available to the public upon

request; and

“(ii) post a notice of the availability of

such information in the lobby of the facil-

ity in a prominent manner.

“(2) INFORMATION DESCRIBED.—

“(A) IN GENERAL.—The following infor-

mation is described in this paragraph:

“(i) The information described in sub-

sections (a) and (b), subject to subpara-

graph (C).

“(ii) The identity of and information

on—
“(I) each member of the governing body of the facility, including the name, title, and period of service of each such member;

“(II) each person or entity who is an officer, director, member, partner, trustee, or managing employee of the facility, including the name, title, and period of service of each such person or entity; and

“(III) each person or entity who is an additional disclosable party of the facility.

“(iii) The organizational structure of each person and entity described in clauses (ii) and (iii) and a description of the relationship of each such person or entity to the facility and to one another.

“(B) Special rule where information is already reported or submitted.—To the extent that information reported by a facility to the Internal Revenue Service on Form 990, information submitted by a facility to the Securities and Exchange Commission, or information otherwise submitted to the Secretary or
any other Federal agency contains the information described in clauses (i), (ii), (iii), or (iv) of subparagraph (A), the facility may provide such Form or such information submitted to meet the requirements of paragraph (1).

“(C) SPECIAL RULE.—In applying subparagraph (A)(i)—

“(i) with respect to subsections (a) and (b), ‘ownership or control interest’ shall include direct or indirect interests through any number of intermediate entities; and

“(ii) subsection (a)(3)(A)(ii) shall include the owner of a whole or part interest in any mortgage, deed of trust, note, or other obligation secured, in whole or in part, by the entity or any of the property or assets thereof, if the interest is equal to or exceeds 5 percent of the total property or assets of the entirety.

“(3) REPORTING.—

“(A) IN GENERAL.—Not later than the date that is 2 years after the date of enactment of this subsection, the Secretary shall promulgate final regulations requiring, effective on the
date that is 90 days after the date on which
such final regulations are published in the Fed-
eral Register, a facility to report the informa-
tion described in paragraph (2) to the Secretary
in a standardized format, and such other regu-
lations as are necessary to carry out this sub-
section. Such final regulations shall ensure that
the facility certifies, as a condition of participa-
tion and payment under the program under
title XVIII or XIX, that the information re-
ported by the facility in accordance with such
final regulations is accurate and current.

“(B) GUIDANCE.—The Secretary shall pro-
vide guidance and technical assistance to States
on how to adopt the standardized format under
subparagraph (A).

“(4) NO EFFECT ON EXISTING REPORTING RE-
quirements.—Nothing in this subsection shall re-
duce, diminish, or alter any reporting requirement
for a facility that is in effect as of the date of enact-
ment of this subsection.

“(5) DEFINITIONS.—In this subsection:

“(A) ADDITIONAL DISCLOSABLE PARTY.—
The term ‘additional disclosable party’ means,
with respect to a facility, any person or entity who—

“(i) exercises operational, financial, or managerial control over the facility or a part thereof, or provides policies or procedures for any of the operations of the facility, or provides financial or cash management services to the facility;

“(ii) leases or subleases real property to the facility, or owns a whole or part interest equal to or exceeding 5 percent of the total value of such real property;

“(iii) lends funds or provides a financial guarantee to the facility in an amount which is equal to or exceeds $50,000;

“(iv) provides management or administrative services, management or clinical consulting services, or accounting or financial services to the facility;

“(v) provides therapy, pharmacy, or hospice services to residents of the facility;

or

“(vi) leases employees to or employs staff on behalf of the facility.
“(B) FACILITY.—The term ‘facility’ means a disclosing entity which is—

“(i) a skilled nursing facility (as defined in section 1819(a)); or

“(ii) a nursing facility (as defined in section 1919(a)).

“(C) MANAGING EMPLOYEE.—The term ‘managing employee’ means, with respect to a facility, an individual (including a general manager, business manager, administrator, director, or consultant) who directly or indirectly manages, advises, or supervises any element of the practices, finances, or operations of the facility.

“(D) ORGANIZATIONAL STRUCTURE.—The term ‘organizational structure’ means, in the case of—

“(i) a corporation, the officers, directors, and shareholders of the corporation who have an ownership interest in the corporation which is equal to or exceeds 5 percent;

“(ii) a limited liability company, the members and managers of the limited liability company (including, as applicable, what percentage each member and man-
ager has of the ownership interest in the limited liability company);

“(iii) a general partnership, the partners of the general partnership;

“(iv) a limited partnership, the general partners and any limited partners of the limited partnership who have an ownership interest in the limited partnership which is equal to or exceeds 10 percent;

“(v) a trust, the trustees of the trust;

“(vi) an individual, contact information for the individual; and

“(vii) any other person or entity, such information as the Secretary determines appropriate.”.

(b) Public Availability of Information.—

(1) In general.—Not later than the date that is 1 year after the date on which the final regulations promulgated under section 1124(c)(3)(A) of the Social Security Act, as added by subsection (a), are published in the Federal Register, the Secretary shall make the information reported in accordance with such final regulations available to the public in a similar manner as information with respect to skilled nursing facilities and nursing facilities is
made available to the public through the Online Survey, Certification and Reporting (OSCAR) data network (or any successor system) maintained by the Secretary.

(2) DEFINITIONS.—In this subsection:

(A) NURSING FACILITY.—The term “nursing facility” has the meaning given such term in section 1919(a) of the Social Security Act (42 U.S.C. 1396r(a)).

(B) SECRETARY.—The term “Secretary” means the Secretary of Health and Human Services.

(C) SKILLED NURSING FACILITY.—The term “skilled nursing facility” has the meaning given such term in section 1819(a) of the Social Security Act (42 U.S.C. 1395i–3(a)).

(c) CONFORMING AMENDMENTS.—

(1) SKILLED NURSING FACILITIES.—Section 1819(d)(1) of the Social Security Act (42 U.S.C. 1395i–3(d)(1)) is amended by striking subparagraph (B) and redesignating subparagraph (C) as subparagraph (B).

(2) NURSING FACILITIES.—Section 1919(d)(1) of the Social Security Act (42 U.S.C. 1396r(d)(1))
is amended by striking subparagraph (B) and redesignating subparagraph (C) as subparagraph (B).

SEC. 102. ACCOUNTABILITY REQUIREMENTS.

(a) Effective Compliance and Ethics Programs.—

(1) Skilled Nursing Facilities.—Section 1819(d)(1) of the Social Security Act (42 U.S.C. 1395i–3(d)(1)) is amended by adding at the end the following new subparagraph:

“(D) Compliance and ethics programs.—

“(i) Requirement.—On or after the date that is 36 months after the date of enactment of this subparagraph, a skilled nursing facility shall, with respect to the entity that operates the facility (in this subparagraph referred to as the ‘operating organization’ or ‘organization’), have in operation a compliance and ethics program that is effective in preventing and detecting criminal, civil, and administrative violations under this Act and in promoting quality of care consistent with regulations developed under clause (ii).
“(ii) Development of regulations.—

“(I) In general.—Not later than the date that is 2 years after such date of enactment, the Secretary, in consultation with the Inspector General of the Department of Health and Human Services, shall promulgate regulations for an effective compliance and ethics program for operating organizations, which may include a model compliance program.

“(II) Design of regulations.—Such regulations with respect to specific elements or formality of a program may vary with the size of the organization, such that larger organizations should have a more formal program and include established written policies defining the standards and procedures to be followed by its employees. Such requirements may specifically apply to the corporate level management of multi-nursing home chains.
“(III) Evaluation.—Not later than 3 years after the date of promulgation of regulations under this clause, the Secretary shall complete an evaluation of the compliance and ethics programs required to be established under this subparagraph. Such evaluation shall determine if such programs led to changes in deficiency citations, changes in quality performance, or changes in other metrics of patient quality of care. The Secretary shall submit a report to Congress on such evaluation and shall include in such report such recommendations regarding changes in the requirements for such programs as the Secretary determines appropriate.

“(iii) Requirements for Compliance and Ethics Programs.—In this subparagraph, the term ‘compliance and ethics program’ means, with respect to a skilled nursing facility, a program of the operating organization that—
“(I) has been reasonably designed, implemented, and enforced so that it generally will be effective in preventing and detecting criminal, civil, and administrative violations under this Act and in promoting quality of care; and

“(II) includes at least the required components specified in clause (iv).

“(iv) REQUIRED COMPONENTS OF PROGRAM.—The required components of a compliance and ethics program of an organization are the following:

“(I) The organization must have established compliance standards and procedures to be followed by its employees and other agents that are reasonably capable of reducing the prospect of criminal, civil, and administrative violations under this Act.

“(II) Specific individuals within high-level personnel of the organization must have been assigned overall responsibility to oversee compliance
with such standards and procedures
and has sufficient resources and au-
thority to assure such compliance.

“(III) The organization must
have used due care not to delegate
substantial discretionary authority to
individuals whom the organization
knew, or should have known through
the exercise of due diligence, had a
propensity to engage in criminal, civil,
and administrative violations under
this Act.

“(IV) The organization must
have taken steps to communicate ef-
effectively its standards and procedures
to all employees and other agents,
such as by requiring participation in
training programs or by disseminating
publications that explain in a practical
manner what is required.

“(V) The organization must have
taken reasonable steps to achieve com-
pliance with its standards, such as by
utilizing monitoring and auditing sys-
tems reasonably designed to detect
criminal, civil, and administrative violations under this Act by its employees and other agents and by having in place and publicizing a reporting system whereby employees and other agents could report violations by others within the organization without fear of retribution.

“(VI) The standards must have been consistently enforced through appropriate disciplinary mechanisms, including, as appropriate, discipline of individuals responsible for the failure to detect an offense.

“(VII) After an offense has been detected, the organization must have taken all reasonable steps to respond appropriately to the offense and to prevent further similar offenses, including any necessary modification to its program to prevent and detect criminal, civil, and administrative violations under this Act.

“(VIII) The organization must periodically undertake reassessment of
its compliance program to identify
changes necessary to reflect changes
within the organization and its facili-
ties.”.

(2) NURSING FACILITIES.—Section 1919(d)(1)
of the Social Security Act (42 U.S.C. 1396r(d)(1))
is amended by adding at the end the following new
subparagraph:

“(D) COMPLIANCE AND ETHICS PRO-
GRAM.—

“(i) REQUIREMENT.—On or after the
date that is 36 months after the date of
enactment of this subparagraph, a nursing
facility shall, with respect to the entity
that operates the facility (in this subpara-
graph referred to as the ‘operating organi-
zation’ or ‘organization’), have in operation
a compliance and ethics program that is
effective in preventing and detecting crim-
inal, civil, and administrative violations
under this Act and in promoting quality of
care consistent with regulations developed
under clause (ii).

“(ii) DEVELOPMENT OF REGULA-
TIONS.—
“(I) IN GENERAL.—Not later than the date that is 2 years after such date of enactment, the Secretary, in consultation with the Inspector General of the Department of Health and Human Services, shall develop regulations for an effective compliance and ethics program for operating organizations, which may include a model compliance program.

“(II) DESIGN OF REGULATIONS.—Such regulations with respect to specific elements or formality of a program may vary with the size of the organization, such that larger organizations should have a more formal program and include established written policies defining the standards and procedures to be followed by its employees. Such requirements may specifically apply to the corporate level management of multi-nursing home chains.

“(III) EVALUATION.—Not later than 3 years after the date of promul-
the Secretary shall complete an evaluation of the compliance and ethics programs required to be established under this subparagraph. Such evaluation shall determine if such programs led to changes in deficiency citations, changes in quality performance, or changes in other metrics of patient quality of care. The Secretary shall submit a report to Congress on such evaluation and shall include in such report such recommendations regarding changes in the requirements for such programs as the Secretary determines appropriate.

“(iii) Requirements for compliance and ethics programs.—In this subparagraph, the term ‘compliance and ethics program’ means, with respect to a nursing facility, a program of the operating organization that—

“(I) has been reasonably designed, implemented, and enforced so that it generally will be effective in
preventing and detecting criminal, civil, and administrative violations under this Act and in promoting quality of care; and

“(II) includes at least the required components specified in clause (iv).

“(iv) REQUIRED COMPONENTS OF PROGRAM.—The required components of a compliance and ethics program of an organization are the following:

“(I) The organization must have established compliance standards and procedures to be followed by its employees and other agents that are reasonably capable of reducing the prospect of criminal, civil, and administrative violations under this Act.

“(II) Specific individuals within high-level personnel of the organization must have been assigned overall responsibility to oversee compliance with such standards and procedures and has sufficient resources and authority to assure such compliance.
“(III) The organization must have used due care not to delegate substantial discretionary authority to individuals whom the organization knew, or should have known through the exercise of due diligence, had a propensity to engage in criminal, civil, and administrative violations under this Act.

“(IV) The organization must have taken steps to communicate effectively its standards and procedures to all employees and other agents, such as by requiring participation in training programs or by disseminating publications that explain in a practical manner what is required.

“(V) The organization must have taken reasonable steps to achieve compliance with its standards, such as by utilizing monitoring and auditing systems reasonably designed to detect criminal, civil, and administrative violations under this Act by its employees and other agents and by having in
place and publicizing a reporting sys-


tem whereby employees and other
agents could report violations by oth-
ers within the organization without
fear of retribution.

“(VI) The standards must have
been consistently enforced through ap-
propriate disciplinary mechanisms, in-
cluding, as appropriate, discipline of
individuals responsible for the failure
to detect an offense.

“(VII) After an offense has been
detected, the organization must have
taken all reasonable steps to respond
appropriately to the offense and to
prevent further similar offenses, in-
cluding any necessary modification to
its program to prevent and detect
criminal, civil, and administrative vio-
lations under this Act.

“(VIII) The organization must
periodically undertake reassessment of
its compliance program to identify
changes necessary to reflect changes
within the organization and its facilities.”.

(b) **QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT (QAPI) DEMONSTRATION PROGRAM.—**

(1) **IN GENERAL.—** The Secretary of Health and Human Services (in this subsection referred to as the “Secretary”) shall establish a demonstration program (in this subsection referred to as the “program”) to be conducted over a 3-year period to test and evaluate models for quality assurance and performance improvement (QAPI) programs with respect to nursing facilities, including skilled nursing facilities.

(2) **FACILITIES TO BE INCLUDED.—** The program shall include at least 15, but not more than 30, nursing facilities, including a mix of facilities, such as special focus facilities and high and middle performing facilities, but shall have a focus on lower performing facilities. The nursing facilities included in the program shall reflect large and medium chains and stand alone homes.

(3) **ACTIVITIES.—** The program shall provide funding for quality assurance and performance improvement activities at nursing facilities, such as data analysis, root-cause analysis, and systemic im-
improvements. The results of such analysis shall be re-
ported to, and used by the governing body at such
facilities to make systemic improvements in quality
of care.

(4) Evaluation.—

(A) In general.—The Secretary, in con-
sultation with the Inspector General of the De-
partment of Health and Human Services, shall
conduct an evaluation of the program to deter-
mine if quality assurance and performance im-
provement activities led to changes in deficiency
citations, changes in quality performance, or
changes in other metrics of patient quality of
care. Not later than 1 year after completion of
the program, the Secretary shall submit to Con-
gress a report on such evaluation and shall in-
clude in such report recommendations on statu-
tory changes needed to modify and strengthen
quality assurance and performance improve-
ment programs in skilled nursing facilities and
nursing facilities.

(B) Best practices manual.—The Sec-
retary, in consultation with the Inspector Gen-
eral of the Department of Health and Human
Services, shall use the results of such evaluation
to create a resource manual for nursing facilities on best practices in quality assurance and performance improvement.

(C) PROPOSAL TO REVISE QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT PROGRAMS.—The Secretary, taking into account the results of such evaluation, shall include in the proposed rule published under section 1888(e) of the Social Security Act (42 U.S.C. 1395yy(e)(5)(A)) for the subsequent fiscal year to the extent otherwise authorized under section 1819(b)(1)(B) or 1819(d)(1)(D) of the Social Security Act or other regulatory authority, one or more proposals for skilled nursing facilities to modify and strengthen quality assurance and performance improvement programs in such facilities. At the time of publication of such proposed rule and to the extent otherwise authorized under section 1919(b)(1)(B) or 1919(d)(1)(D) of such Act or other regulatory authority, the Secretary shall promulgate as a proposed rule one or more proposals for nursing facilities to modify and strengthen quality assurance and performance improvement programs in such facilities.
(5) Authorization of Appropriations.—

There are authorized to be appropriated such sums as may be necessary to carry out this subsection.

(e) GAO Study on Nursing Facility Undercapitalization.—

(1) In General.—The Comptroller General of the United States shall conduct a study that examines the following:

(A) The extent to which corporations that own or operate large numbers of nursing facilities, taking into account ownership type (including private equity and control interests), are undercapitalizing such facilities.

(B) The effects of such undercapitalization on quality of care, including staffing and food costs, at such facilities.

(C) Options to address such undercapitalization, such as requirements relating to surety bonds, liability insurance, or minimum capitalization.

(2) Report.—Not later than 18 months after the date of the enactment of this Act, the Comptroller General shall submit to Congress a report on the study conducted under paragraph (1).
(3) Nursing Facility.—In this subsection, the term “nursing facility” includes a skilled nursing facility.

SEC. 103. NURSING HOME COMPARE MEDICARE WEBSITE.

(a) Skilled Nursing Facilities.—

(1) In general.—Section 1819 of the Social Security Act (42 U.S.C. 1395i–3) is amended—

(A) by redesignating subsection (i) as subsection (j); and

(B) by inserting after subsection (h) the following new subsection:

“(i) Nursing Home Compare Website.—

“(1) Inclusion of additional information.—

“(A) In general.—The Secretary shall ensure that the Department of Health and Human Services includes, as part of the information provided for comparison of nursing homes on the official Internet website of the Federal Government for Medicare beneficiaries (commonly referred to as the ‘Nursing Home Compare’ Medicare website) (or a successor website), the following information in a manner that is prominent, easily accessible, readily un-
derstandable to consumers of long-term care services, and searchable:

“(i) Information that is reported to the Secretary under section 1124(c)(3).

“(ii) Information on the ‘Special Focus Facility program’ (or a successor program) established by the Centers for Medicare & Medicaid Services, according to procedures established by the Secretary. Such procedures shall provide for the inclusion of information with respect to, and the names and locations of, those facilities that, since the previous quarter—

“(I) were newly enrolled in the program;

“(II) are enrolled in the program and have failed to significantly improve;

“(III) are enrolled in the program and have significantly improved;

“(IV) have graduated from the program; and

“(V) have closed voluntarily or no longer participate under this title.
“(iii) Staffing data for each facility
(including resident census data and data
on the hours of care provided per resident
per day) based on data submitted under
subsection (b)(8)(C), including information
on staffing turnover and tenure, in a for-
mat that is clearly understandable to con-
sumers of long-term care services and al-
 lows such consumers to compare dif-
ferences in staffing between facilities and
State and national averages for the facili-
ties. Such format shall include—

“(I) concise explanations of how
to interpret the data (such as a plain
English explanation of data reflecting
“nursing home staff hours per resi-
dent day”);

“(II) differences in types of staff
(such as training associated with dif-
ferent categories of staff);

“(III) the relationship between
nurse staffing levels and quality of
care; and
“(IV) an explanation that appropriate staffing levels vary based on patient case mix.

“(iv) Links to State internet websites where information about State survey and certification programs, Form 2567 inspection reports (or a successor form), and facility plans of corrections may be found, along with information to guide consumers in interpreting and understanding such reports.

“(v) The standardized complaint form developed under subsection (f)(8), including explanatory material on what complaint forms are, how they are used, and how to file a complaint with the State survey and certification program and the State long-term care ombudsman program.

“(vi) The number of adjudicated instances of criminal violations by a nursing facility or crimes committed by an employee of a nursing facility—

“(I) that were committed inside of the facility; and
“(II) with respect to such instances of violations or crimes committed outside of the facility, that were the violations or crimes of elder abuse, neglect, and exploitation, criminal sexual abuse of an elder, or other violations or crimes that resulted in the serious bodily injury of an elder.

“(B) DEADLINE FOR PROVISION OF INFORMATION.—

“(i) IN GENERAL.—Except as provided in clause (ii), the Secretary shall ensure that the information described in subparagraph (A) is included on such website (or a successor website) not later than 1 year after the date of enactment of this subsection.

“(ii) EXCEPTIONS.—

“(I) OWNERSHIP AND AFFILIATED PARTIES AND ACCOUNTABILITY REQUIREMENTS INFORMATION.—The Secretary shall ensure that the information described in subparagraph (A)(i) is included on such website (or a successor website) not later than the
date on which the requirements under section 1124(e)(3) are implemented.

“(II) STAFFING DATA.—The Secretary shall ensure that the information described in subparagraph (A)(iii) is included on such website (or a successor website) not later than the date on which the requirement under subsection (b)(8)(C) is implemented.

“(2) REVIEW AND MODIFICATION OF WEBSITE.—

“(A) IN GENERAL.—The Secretary shall establish a process—

“(i) to review the accuracy, clarity of presentation, timeliness, and comprehensiveness of information reported on such website as of the day before the date of enactment of this subsection; and

“(ii) not later than 1 year after the date of enactment of this subsection, to modify or revamp such website in accordance with the review conducted under clause (i).
“(B) Consultation.—In conducting the review under subparagraph (A)(i), the Secretary shall consult with—

“(i) State long-term care ombudsman programs;
“(ii) consumer advocacy groups;
“(iii) provider stakeholder groups;
“(iv) skilled nursing facility employees and their representatives; and
“(v) any other representatives of programs or groups the Secretary determines appropriate.”.

(2) Timeliness of submission of survey and certification information.—

(A) In general.—Section 1819(g)(5) of the Social Security Act (42 U.S.C. 1395i–3(g)(5)) is amended by adding at the end the following new subparagraph:

“(E) Submission of survey and certification information to the Secretary.—In order to improve the timeliness of information made available to the public under subparagraph (A) and provided on the Nursing Home Compare Medicare website under subsection (i), each State shall submit information
respecting any survey or certification made respecting a skilled nursing facility (including any enforcement actions taken by the State) to the Secretary not later than the date on which the State sends such information to the facility. Any necessary subsequent corrections to prior information submitted by the State shall be submitted to the Secretary in a timely fashion. The Secretary shall use the information submitted under the preceding sentence to update the information provided on the Nursing Home Compare Medicare website as expeditiously as practicable, but not less frequently than quarterly.”

(B) EFFECTIVE DATE.—The amendment made by this paragraph shall take effect 1 year after the date of enactment of this Act.

(3) SPECIAL FOCUS FACILITY PROGRAM.—Section 1819(f) of such Act is amended by adding at the end the following new paragraph:

“(8) SPECIAL FOCUS FACILITY PROGRAM.—

“(A) IN GENERAL.—The Secretary shall conduct a special focus facility program for enforcement of requirements for skilled nursing facilities that the Secretary has identified as
having substantially failed to meet applicable
requirements of this Act.

“(B) Periodic Surveys.—Under such
program the Secretary shall conduct surveys of
each facility in the program not less often than
once very 6 months.”.

(b) Nursing Facilities.—

(1) In General.—Section 1919 of the Social
Security Act (42 U.S.C. 1396r) is amended—

(A) by redesignating subsection (i) as sub-
section (j); and

(B) by inserting after subsection (h) the
following new subsection:

“(i) Nursing Home Compare Website.—

“(1) Inclusion of Additional Information.—

“(A) In General.—The Secretary shall
ensure that the Department of Health and
Human Services includes, as part of the infor-
mination provided for comparison of nursing
homes on the official Internet website of the
Federal Government for Medicare beneficiaries
(commonly referred to as the ‘Nursing Home
Compare’ Medicare website) (or a successor
website), the following information in a manner
that is prominent, easily accessible, readily un-
derstandable to consumers of long-term care
services, and searchable:

“(i) Information that is reported to
the Secretary under section 1124(c)(3).

“(ii) Information on the ‘Special
Focus Facility program’ (or a successor
program) established by the Centers for
Medicare & Medicaid Services, according to
procedures established by the Secretary.
Such procedures shall provide for the in-
clusion of information with respect to, and
the names and locations of, those facilities
that, since the previous quarter—

“(I) were newly enrolled in the
program;

“(II) are enrolled in the program
and have failed to significantly im-
prove;

“(III) are enrolled in the pro-
gram and have significantly improved;

“(IV) have graduated from the
program; and

“(V) have closed voluntarily or or
no longer participate under this title.
“(iii) Staffing data for each facility (including resident census data and data on the hours of care provided per resident per day) based on data submitted under subsection (b)(8)(C), including information on staffing turnover and tenure, in a format that is clearly understandable to consumers of long-term care services and allows such consumers to compare differences in staffing between facilities and State and national averages for the facilities. Such format shall include—

“(I) concise explanations of how to interpret the data (such as a plain English explanation of data reflecting “nursing home staff hours per resident day”);

“(II) differences in types of staff (such as training associated with different categories of staff);

“(III) the relationship between nurse staffing levels and quality of care; and
“(IV) an explanation that appropriate staffing levels vary based on patient case mix.

“(iv) Links to State internet websites where information about State survey and certification programs, Form 2567 inspection reports (or a successor form), and facility plans of corrections may be found, along with information to guide consumers in interpreting and understanding such reports.

“(v) The standardized complaint form developed under subsection (f)(8), including explanatory material on what complaint forms are, how they are used, and how to file a complaint with the State survey and certification program and the State long-term care ombudsman program.

“(vi) The number of adjudicated instances of criminal violations by a nursing facility or crimes committed by an employee of a nursing facility—

“(I) that were committed inside of the facility; and
“(II) with respect to such instances of violations or crimes committed outside of the facility, that were the violations or crimes of elder abuse, neglect, and exploitation, criminal sexual abuse of an elder, or other violations or crimes that resulted in the serious bodily injury of an elder.

“(B) Deadline for provision of information.—

“(i) In general.—Except as provided in clause (ii), the Secretary shall ensure that the information described in subparagraph (A) is included on such website (or a successor website) not later than 1 year after the date of enactment of this subsection.

“(ii) Exceptions.—

“(I) Ownership and affiliated parties and accountability requirements information.—The Secretary shall ensure that the information described in subparagraph (A)(i) is included on such website (or a successor website) not later than the
date on which the requirements under section 1124(e)(3) are implemented.

“(II) STAFFING DATA.—The Secretary shall ensure that the information described in subparagraph (A)(iii) is included on such website (or a successor website) not later than the date on which the requirement under subsection (b)(8)(C) is implemented.

“(2) REVIEW AND MODIFICATION OF WEBSITE.—

“(A) IN GENERAL.—The Secretary shall establish a process—

“(i) to review the accuracy, clarity of presentation, timeliness, and comprehensiveness of information reported on such website as of the day before the date of enactment of this subsection; and

“(ii) not later than 1 year after the date of enactment of this subsection, to modify or revamp such website in accordance with the review conducted under clause (i).
“(B) CONSULTATION.—In conducting the review under subparagraph (A)(i), the Secretary shall consult with—

“(i) State long-term care ombudsman programs;

“(ii) consumer advocacy groups;

“(iii) provider stakeholder groups;

“(iv) skilled nursing facility employees and their representatives; and

“(v) any other representatives of programs or groups the Secretary determines appropriate.”.

(2) TIMELINESS OF SUBMISSION OF SURVEY AND CERTIFICATION INFORMATION.—

(A) IN GENERAL.—Section 1919(g)(5) of the Social Security Act (42 U.S.C. 1396r(g)(5)) is amended by adding at the end the following new subparagraph:

“(E) SUBMISSION OF SURVEY AND CERTIFICATION INFORMATION TO THE SECRETARY.—In order to improve the timeliness of information made available to the public under subparagraph (A) and provided on the Nursing Home Compare Medicare website under subsection (i), each State shall submit information
respecting any survey or certification made res-  
specting a nursing facility (including any en-  
forcement actions taken by the State) to the  
Secretary not later than the date on which the  
State sends such information to the facility.  
Any necessary subsequent corrections to prior  
information submitted by the State shall be  
submitted to the Secretary in a timely fashion.  
The Secretary shall use the information sub-  
mitted under the preceding sentence to update  
the information provided on the Nursing Home  
Compare Medicare website as expeditiously as  
practicable, but not less frequently than quar-  
terly.”.

(B) EFFECTIVE DATE.—The amendment  
made by this paragraph shall take effect 1 year  
after the date of enactment of this Act.

(3) SPECIAL FOCUS FACILITY PROGRAM.—Sec-  
tion 1919(f) of such Act is amended by adding at  
the end the following new paragraph:

“(8) SPECIAL FOCUS FACILITY PROGRAM.—  
“(A) IN GENERAL.—The Secretary shall  
conduct a special focus facility program for en-  
forcement of requirements for nursing facilities  
that the Secretary has identified as having sub-
stantially failed to meet applicable requirements of this Act.

“(B) Periodic surveys.—Under such program the Secretary shall conduct surveys of each facility in the program not less often than once very 6 months.”.

(c) Availability of Reports on Surveys, Certifications, and Substantiated Complaint Investigations.—

(1) Skilled nursing facilities.—Section 1819(d)(1) of the Social Security Act (42 U.S.C. 1395i–3(d)(1)), as amended by section 102, is amended by adding at the end the following new subparagraph:

“(G) Availability of survey, certification, and substantiated complaint investigation reports.—A skilled nursing facility must—

“(i) have reports with respect to any surveys, certifications, and substantiated complaint investigations made respecting the facility during the 3 preceding years available for any individual to review upon request, along with the plan of corrective action; and
“(ii) post notice of the availability of such reports in areas of the facility that are prominent and accessible to the public.

The facility shall not make available under clause (i) identifying information about complainants or residents.”.

(2) Nursing Facilities.—Section 1919(d)(1) of the Social Security Act (42 U.S.C. 1396r(d)(1)), as amended by section 102, is amended by adding at the end the following new subparagraph:

“(G) Availability of Survey, Certification, and Substantiated Complaint Investigation Reports.—A nursing facility must—

“(i) have reports with respect to any surveys, certifications, and substantiated complaint investigations made respecting the facility during the 3 preceding years available for any individual to review upon request, along with the plan of corrective action; and

“(ii) post notice of the availability of such reports in areas of the facility that are prominent and accessible to the public.
The facility shall not make available under clause (i) identifying information about complainants or residents.”.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall take effect 1 year after the date of enactment of this Act.

(d) GUIDANCE TO STATES ON FORM 2567 STATE INSPECTION REPORTS AND SUBSTANTIATED COMPLAINT INVESTIGATION REPORTS.—

(1) GUIDANCE.—The Secretary shall provide guidance to States on how States can establish electronic links to Form 2567 State inspection reports (or a successor form), substantiated complaint investigation reports, and a facility’s plan of correction or other response to such Form 2567 State inspection reports (or a successor form) on the Internet website of the State that provides information on skilled nursing facilities and nursing facilities in a manner that does not disclose identifying information about complainants or residents.

(2) REQUIREMENT.—As a condition of a contract with a State under section 1864(d) of the Social Security Act, effective not later than 2 years after the date of the enactment of this Act, the Secretary of Health and Human Services shall require
that a State have, on the State’s Internet website referred to in paragraph (1), the electronic links referred to in such paragraph.

(3) DEFINITIONS.—In this subsection:

(A) NURSING FACILITY.—The term “nursing facility” has the meaning given such term in section 1919(a) of the Social Security Act (42 U.S.C. 1396r(a)).

(B) SECRETARY.—The term “Secretary” means the Secretary of Health and Human Services.

(C) SKILLED NURSING FACILITY.—The term “skilled nursing facility” has the meaning given such term in section 1819(a) of the Social Security Act (42 U.S.C. 1395i–3(a)).

SEC. 104. REPORTING OF EXPENDITURES.

Section 1888 of the Social Security Act (42 U.S.C. 1395yy) is amended by adding at the end the following new subsection:

“(f) REPORTING OF DIRECT CARE EXPENDITURES.—

“(1) IN GENERAL.—For cost reports submitted under this title for cost reporting periods beginning on or after the date that is 2 years after the date of enactment of this subsection, skilled nursing fa-
cilities shall separately report expenditures for wages and benefits for direct care staff (breaking out (at a minimum) registered nurses, licensed professional nurses, certified nurse assistants, and other medical and therapy staff).

“(2) MODIFICATION OF FORM.—The Secretary, in consultation with private sector accountants experienced with medicare and medicaid nursing facility home cost reports, shall redesign such reports to meet the requirement of paragraph (1) not later than 1 year after the date of the enactment of this subsection.

“(3) CATEGORIZATION BY FUNCTIONAL ACCOUNTS.—Not later than 30 months after the date of the enactment of this subsection, the Secretary, working in consultation with the Medicare Payment Advisory Commission, the Inspector General of the Department of Health and Human Services, and other expert parties the Secretary determines appropriate, shall take the expenditures listed on cost reports, as modified under paragraph (1), submitted by skilled nursing facilities and categorize such expenditures, regardless of any source of payment for such expenditures, for each skilled nursing facility
into the following functional accounts on an annual basis:

“(A) Spending on direct care services (including nursing, therapy, and medical services).

“(B) Spending on indirect care (including housekeeping and dietary services).

“(C) Capital assets (including building and land costs).

“(D) Administrative services costs.

“(4) AVAILABILITY OF INFORMATION SUBMITTED.—The Secretary shall establish procedures to make information on expenditures submitted under this subsection readily available to interested parties upon request, subject to such requirements as the Secretary may specify under the procedures established under this paragraph.”.

SEC. 105. STANDARDIZED COMPLAINT FORM.

(a) SKILLED NURSING FACILITIES.—

(1) DEVELOPMENT BY THE SECRETARY.—Section 1819(f) of the Social Security Act (42 U.S.C. 1395i–3(f)) is amended by adding at the end the following new paragraph:

“(8) STANDARDIZED COMPLAINT FORM.—The Secretary shall develop a standardized complaint form for use in filing, in good faith, a complaint
with a State survey and certification agency and a State long-term care ombudsman program with respect to a skilled nursing facility.”.

(2) STATE REQUIREMENTS.—Section 1819(e) of the Social Security Act (42 U.S.C. 1395i–3(e)) is amended by adding at the end the following new paragraph:

“(6) COMPLAINT PROCESS AND WHISTLE-BLOWER PROTECTION.—

“(A) COMPLAINT FORMS.—The State must make the standardized complaint form developed under subsection (f)(8) available upon request to—

“(i) a resident of a skilled nursing facility;

“(ii) any person acting on the resident’s behalf; and

“(iii) any person who works at a skilled nursing facility or is a representative of such a worker.

“(B) COMPLAINT RESOLUTION PROCESS.—The State must establish a complaint resolution process in order to ensure that a resident is not retaliated against if the resident has complained, in good faith, about the quality of care
or other issues relating to the skilled nursing facility, that the legal representative of a resident of a skilled nursing facility or other responsible party is not denied access to such resident or otherwise retaliated against if such representative or party has complained, in good faith, about the quality of care provided by the facility or other issues relating to the facility, and that a person who works at a skilled nursing facility is not retaliated against if the worker has complained, in good faith, about quality of care or services or an issue relating to the quality of care or services provided at the facility, whether the resident, legal representative, other responsible party, or worker used the form developed under subsection (f)(8) or some other method for submitting the complaint. Such complaint resolution process shall include—

“(i) procedures to assure accurate tracking of complaints received, including notification to the complainant that a complaint has been received;
“(ii) procedures to determine the likely severity of a complaint and for the investigation of the complaint;

“(iii) deadlines for responding to a compliant and procedures in order to enable the complainant to track the status of the complaint and investigation; and

“(iv) procedures to ensure that the identity of the complainant will be kept confidential.

“(C) WHISTLEBLOWER PROTECTION.—

“(i) PROHIBITION AGAINST RETALIATION.—No person who works at a skilled nursing facility may be penalized, discriminated, or retaliated, against with respect to any aspect of employment, including discharge, promotion, compensation, terms, conditions, or privileges of employment, or have a contract for services terminated, because the person (or anyone acting at the person’s request) complained, in good faith, about the quality of care or services provided by a nursing facility or about other issues relating to quality of care or services, whether using the form developed

•HR 7128 IH
under subsection (f)(8) or some other method for submitting the complaint.

“(ii) Retaliatory reporting.—A skilled nursing facility may not file a complaint or a report against a person who works (or has worked) at the facility with the appropriate State professional disciplinary agency because the person (or anyone acting at the person’s request) filed, in good faith, a complaint described in clause (i).

“(iii) Commencement of action.—Any person who believes the person has been penalized, discriminated, or retaliated against, or had a contract for services terminated in violation of clause (i) or against whom a complaint has been filed in violation of clause (ii) may bring an action at law or equity in the appropriate district court of the United States, which shall have jurisdiction over such action without regard to the amount in controversy or the citizenship of the parties, and which shall have jurisdiction to grant complete relief, including, but not limited to, injunctive re-
lief (such as reinstatement), compensatory
damages (which may include reimburse-
ment of lost wages, compensation, and
benefits), costs of litigation (including rea-
sonable attorney and expert witness fees),
exemplary damages where appropriate, and
such other relief as the court deems just
and proper.

“(iv) Rights not waivable.—The
rights protected by this paragraph may not
be diminished by contract or other agree-
ment, and nothing in this paragraph shall
be construed to diminish any greater or
additional protection provided by Federal
or State law or by contract or other agree-
ment.

“(v) Rule of construction.—
Nothing in this section shall be construed
as preventing a resident of a skilled nurs-
ing facility, a person acting on the resi-
dent’s behalf, or a person who works at a
skilled nursing facility from submitting a
complaint in a manner or format other
than by using the standardized complaint
form developed under subsection (f)(8) (including submitting a complaint orally).

“(vi) Requirement to post notice of employee rights.—Each skilled nursing facility shall post conspicuously in an appropriate location a sign (in a form specified by the Secretary) specifying the rights of persons under this paragraph and including a statement that an employee may file a complaint with the Secretary against the a skilled nursing facility that violates the provisions of this paragraph and information with respect to the manner of filing such a complaint.

“(D) Good faith defined.—For purposes of this paragraph, an individual shall be deemed to be acting in good faith with respect to the filing of a complaint if the individual reasonably believes—

“(i) the information reported or disclosed in the complaint is true; and

“(ii) a violation of this title has occurred or may occur in relation to such information.”.

(b) Nursing Facilities.—
(1) Development by the Secretary.—Section 1919(f) of the Social Security Act (42 U.S.C. 1395i–3(f)) is amended by adding at the end the following new paragraph:

“(10) Standardized complaint form.—The Secretary shall develop a standardized complaint form for use in filing, in good faith, a complaint with a State survey and certification agency and a State long-term care ombudsman program with respect to a nursing facility.”.

(2) State Requirements.—Section 1919(e) of the Social Security Act (42 U.S.C. 1395i–3(e)) is amended by adding at the end the following new paragraph:

“(8) Complaint process and whistleblower protection.—

“(A) Complaint forms.—The State must make the standardized complaint form developed under subsection (f)(10) available upon request to—

“(i) a resident of a nursing facility;

“(ii) any person acting on the resident’s behalf; and
“(iii) any person who works at a nursing facility or a representative of such a worker.

“(B) COMPLAINT RESOLUTION PROCESS.—The State must establish a complaint resolution process in order to ensure that a resident is not retaliated against if the resident has complained, in good faith, about the quality of care or other issues relating to the nursing facility, that the legal representative of a resident of a nursing facility or other responsible party is not denied access to such resident or otherwise retaliated against if such representative or party has complained, in good faith, about the quality of care provided by the facility or other issues relating to the facility, and that a person who works at a nursing facility is not retaliated against if the worker has complained, in good faith, about quality of care or services or an issue relating to the quality of care or services provided at the facility, whether the resident, legal representative, other responsible party, or worker used the form developed under subsection (f)(10) or some other method for sub-
mitting the complaint. Such complaint resolution process shall include—

“(i) procedures to assure accurate tracking of complaints received, including notification to the complainant that a complaint has been received;

“(ii) procedures to determine the likely severity of a complaint and for the investigation of the complaint;

“(iii) deadlines for responding to a compliant and procedures in order to enable the complainant to track the status of the complaint and investigation; and

“(iv) procedures to ensure that the identity of the complainant will be kept confidential.

“(C) WHISTLEBLOWER PROTECTION.—

“(i) PROHIBITION AGAINST RETALIATION.—No person who works at a skilled nursing facility may be penalized, discriminated, or retaliated, against with respect to any aspect of employment, including discharge, promotion, compensation, terms, conditions, or privileges of employment, or have a contract for services terminated, be-
cause the person (or anyone acting at the
person’s request) complained, in good
faith, about the quality of care or services
provided by a nursing facility or about
other issues relating to quality of care or
services, whether using the form developed
under subsection (f)(10) or some other
method for submitting the complaint.

“(ii) Retaliatory reporting.—A
nursing facility may not file a complaint or
a report against a person who works (or
has worked) at the facility with the appro-
priate State professional disciplinary agen-
cy because the person (or anyone acting at
the person’s request) filed, in good faith, a
complaint described in clause (i).

“(iii) Commencement of action.—
Any person has been penalized, discrimi-
nated, or retaliated against, or had a con-
tract for services terminated in violation of
clause (i) or against whom a complaint has
been filed in violation of clause (ii) may
bring an action at law or equity in the ap-
propriate district court of the United
States, which shall have jurisdiction over
such action without regard to the amount
in controversy or the citizenship of the par-
ties, and which shall have jurisdiction to
grant complete relief, including, but not
limited to, injunctive relief (such as rein-
statement), compensatory damages (which
may include reimbursement of lost wages,
compensation, and benefits), costs of litiga-
tion (including reasonable attorney and ex-
pert witness fees), exemplary damages
where appropriate, and such other relief as
the court deems just and proper.

“(iv) Rights not waivable.—The
rights protected by this paragraph may not
be diminished by contract or other agree-
ment, and nothing in this paragraph shall
be construed to diminish any greater or
additional protection provided by Federal
or State law or by contract or other agree-
ment.

“(v) Rule of construction.—
Nothing in this section shall be construed
as preventing a resident of a nursing facil-
ity, a person acting on the resident’s be-
half, or a person who works at a nursing
facility from submitting a complaint in a manner or format other than by using the standardized complaint form developed under subsection (f)(10) (including submitting a complaint orally).

“(vi) REQUIREMENT TO POST NOTICE OF EMPLOYEE RIGHTS.—Each nursing facility shall post conspicuously in an appropriate location a sign (in a form specified by the Secretary) specifying the rights of persons under this paragraph and including a statement that an employee may file a complaint with the Secretary against the a skilled nursing facility that violates the provisions of this paragraph and information with respect to the manner of filing such a complaint.

“(D) GOOD FAITH DEFINED.—For purposes of this paragraph, an individual shall be deemed to be acting in good faith with respect to the filing of a complaint if the individual reasonably believes—

“(i) the information reported or disclosed in the complaint is true; and
“(ii) a violation of this title has occurred or may occur in relation to such information.”.

(c) Effective Date.—The amendments made by this section shall take effect 1 year after the date of enactment of this Act.

SEC. 106. ENSURING STAFFING ACCOUNTABILITY.

(a) Skilled Nursing Facilities.—Section 1819(b)(8) of the Social Security Act (42 U.S.C. 1395i–3(b)(8)) is amended by adding at the end the following new subparagraph:

“(C) Submission of staffing information based on payroll data in a uniform format.—Beginning not later than 2 years after the date of the enactment of this subparagraph, and after consulting with State long-term care ombudsman programs, consumer advocacy groups, provider stakeholder groups, employees and their representatives, and other parties the Secretary deems appropriate, the Secretary shall require a skilled nursing facility to electronically submit to the Secretary direct care staffing information (including information with respect to agency and contract staff) based on payroll and other verifiable and auditable
data in a uniform format (according to specifications established by the Secretary in consultation with such programs, groups, and parties). Such specifications shall require that the information submitted under the preceding sentence—

“(i) specify the category of work a certified employee performs (such as whether the employee is a registered nurse, licensed practical nurse, licensed vocational nurse, certified nursing assistant, therapist, or other medical personnel);

“(ii) include resident census data and information on resident case mix;

“(iii) include a regular reporting schedule; and

“(iv) include information on employee turnover and tenure and on the hours of care provided by each category of certified employees referenced in clause (i) per resident per day.

Nothing in this subparagraph shall be construed as preventing the Secretary from requiring submission of such information with respect to specific categories, such as nursing staff, be-
fore other categories of certified employees. Informa-
tion under this subparagraph with respect to agency and contract staff shall be kept sepa-
rate from information on employee staffing.”

(b) NURSING FACILITIES.—Section 1919(b)(8) of the Social Security Act (42 U.S.C. 1396r(b)(8)) is amended by adding at the end the following new subparagraph:

“(C) Submission of staffing information based on payroll data in a uniform format.—Beginning not later than 2 years after the date of the enactment of this subparagraph, and after consulting with State long-term care ombudsman programs, consumer advocacy groups, provider stakeholder groups, employees and their representatives, and other parties the Secretary deems appropriate, the Secretary shall require a nursing facility to electronically submit to the Secretary direct care staffing information (including information with respect to agency and contract staff) based on payroll and other verifiable and auditable data in a uniform format (according to specifications established by the Secretary in consultation with such programs, groups, and parties). Such
specifications shall require that the information submitted under the preceding sentence—

“(i) specify the category of work a certified employee performs (such as whether the employee is a registered nurse, licensed practical nurse, licensed vocational nurse, certified nursing assistant, therapist, or other medical personnel);

“(ii) include resident census data and information on resident case mix;

“(iii) include a regular reporting schedule; and

“(iv) include information on employee turnover and tenure and on the hours of care provided by each category of certified employees referenced in clause (i) per resident per day.

Nothing in this subparagraph shall be construed as preventing the Secretary from requiring submission of such information with respect to specific categories, such as nursing staff, before other categories of certified employees. Information under this subparagraph with respect to agency and contract staff shall be kept separate from information on employee staffing.”
TITLE II—TARGETING
ENFORCEMENT

SEC. 201. CIVIL MONEY PENALTIES.

(a) SKILLED NURSING FACILITIES.—

(1) IN GENERAL.—Section 1819(h)(2)(B)(ii) of the Social Security Act (42 U.S.C. 1395i–3(h)(2)(B)(ii)) is amended to read as follows:

“(ii) Authority with respect to civil money penalties.—

“(I) Amount.—Subject to subclause (IV), the Secretary may impose a civil money penalty in the applicable per instance or per day amount (as defined in subclause (II) and (III)) for each day or each instance, respectively, of noncompliance (as determined appropriate by the Secretary).

“(II) Applicable per instance amount.—In this clause, the term ‘applicable per instance amount’ means—

“(aa) in the case where the deficiency is found to be a direct proximate cause of death of a
resident of the facility, an
amount not to exceed $100,000;

“(bb) in each case of a defi-
ciency where the facility is cited
for actual harm or immediate
jeopardy, an amount not less
than $3,050 and not more than
$25,000; and

“(ce) in each case of any
other deficiency, an amount not
less than $250 and not to exceed
$3,050.

“(III) APPLICABLE PER DAY
AMOUNT.—In this clause, the term
‘applicable per day amount’ means—

“(aa) in each case of a defi-
ciency where the facility is cited
for actual harm or immediate
jeopardy, an amount not less
than $3,050 and not more than
$25,000; and

“(bb) in each case of any
other deficiency, an amount not
less than $250 and not to exceed
$3,050.
“(IV) Reduction of civil money penalties in certain circumstances.—Subject to subclauses (V) and (VI), in the case where a facility self-reports and promptly corrects a deficiency for which a penalty was imposed under this clause not later than 10 calendar days after the date of such imposition, the Secretary may reduce the amount of the penalty imposed.

“(V) Prohibitions on reduction for certain deficiencies.—

“(aa) Repeat deficiencies.—The Secretary may not reduce the amount of a penalty under subclause (IV) if the Secretary had reduced a penalty imposed on the facility in the preceding year under such subclause with respect to a repeat deficiency.

“(bb) Certain other deficiencies.—The Secretary may not reduce the amount of a pen-
alty under subclause (IV) if the penalty is imposed for a deficiency described in subclause (II)(bb) or (III)(aa) and the actual harm is found to result in a pattern of harm or widespread harm that immediately jeopardizes the health or safety of a resident or residents of the facility, or if the penalty is imposed for a deficiency described in subclause (II)(aa).

“(VI) LIMITATION ON AGGREGATE REDUCTIONS.—The aggregate reduction in a penalty under subclause (IV) may not exceed 35 percent on the basis of self-reporting, on the basis of a waiver of an appeal (as provided for under regulations under section 488.436 of title 42, Code of Federal Regulations), or on the basis of both.

“(VII) COLLECTION OF CIVIL MONEY PENALTIES.—In the case of a civil money penalty imposed under
this clause for a deficiency described
in item (aa) or (bb) of subclause (II)
or subclause (III)(aa), the Sec-
retary—

“(aa) subject to item (bb),
shall provide the opportunity for
the facility to participate in an
informal dispute resolution proc-
есс prior to the collection of such
penalty;

“(bb) may provide for the
collection of such civil money
penalty and the placement of
such amounts collected in an es-
crow account on the earlier of the
date on which the informal dis-
pute resolution process under
item (aa) is completed or the
date that is 90 days after the
date of the imposition of the pen-
alty;

“(cc) may provide that such
amounts collected are kept in
such account pending the resolu-
tion of any appeals;
“(dd) in the case where the facility successfully appeals the penalty, shall provide for the return of such amounts collected (plus interest) to the facility; and

“(ee) in the case where all such appeals are unsuccessful, may provide that some portion of such amounts collected may be used to support activities of the State long term care ombudsman or that benefit residents, including assistance to support and protect residents who reside in a facility that closes (voluntarily or involuntarily) or is decertified (including offsetting costs of relocating residents to home and community-based settings or another facility), and projects that support resident and family councils and other consumer involvement in assuring quality care in facilities.
“(VIII) Procedure.—The provisions of section 1128A (other than subsections (a) and (b) and except to the extent that such provisions require a hearing prior to the imposition of a civil money penalty in the case described in subclause (VII)) shall apply to a civil money penalty under this clause in the same manner as such provisions apply to a penalty or proceeding under section 1128A(a).

“(IX) Indexing Amounts.—For years beginning after 2010, each of the amounts specified in subclauses (II) and (III) shall be subject to periodic increase in accordance with the provisions of section 5 of the Federal Civil Penalties Inflation Adjustment Act of 1990 (Public Law 101–410; 28 U.S.C. 2461 note).”.

(2) Conforming Amendment.—The second sentence of section 1819(h)(5) of the Social Security Act (42 U.S.C. 1395i–3(h)(5)) is amended by inserting “(ii)(V),” after “(i),”.

(b) Nursing Facilities.—
(1) Penalties imposed by the state.—

(A) In general.—Section 1919(h)(2) of the Social Security Act (42 U.S.C. 1396r(h)(2)) is amended—

(i) in subparagraph (A)(ii), by striking the first sentence and inserting the following: "A civil money penalty in accordance with subparagraph (G)."; and

(ii) by adding at the end the following new subparagraph:

"(G) Civil money penalties.—

"(i) In general.—Subject to clause (iii), the State may impose a civil money penalty under subparagraph (A)(ii) in the applicable per instance or per day amount (as defined in clause (ii) and (iii)) for each day or each instance, respectively, of non-compliance (as determined appropriate by the State).

"(ii) Applicable per instance amount.—In this subparagraph, the term ‘applicable per instance amount’ means—

"(I) in the case where the deficiency is found to be a direct proximate cause of death of a resident of
the facility, an amount not to exceed $100,000;

“(II) in each case of a deficiency where the facility is cited for actual harm or immediate jeopardy, an amount not less than $3,050 and not more than $25,000; and

“(III) in each case of any other deficiency, an amount not less than $250 and not to exceed $3,050.

“(iii) Applicable per day amount.—In this subparagraph, the term ‘applicable per day amount’ means—

“(I) in each case of a deficiency where the facility is cited for actual harm or immediate jeopardy, an amount not less than $3,050 and not more than $25,000; and

“(II) in each case of any other deficiency, an amount not less than $250 and not to exceed $3,050.

“(iv) Reduction of civil money penalties in certain circumstances.—Subject to clauses (v) and (vi), in the case where a facility self-re-
ports and promptly corrects a deficiency for which a penalty was imposed under subparagraph (A)(ii) not later than 10 calendar days after the date of such imposition, the State may reduce the amount of the penalty imposed.

“(v) Prohibition on reduction for certain deficiencies.—

“(I) Repeat deficiencies.—

The State may not reduce the amount of a penalty under clause (iv) if the State had reduced a penalty imposed on the facility in the preceding year under such clause with respect to a repeat deficiency.

“(II) Certain other deficiencies.—The State may not reduce the amount of a penalty under clause (iv) if the penalty is imposed for a deficiency described in clause (ii)(II) or (iii)(I) and the actual harm is found to result in a pattern of harm or widespread harm that immediately jeopardizes the health or safety of a resident or residents of the facility, or if
the penalty is imposed for a deficiency described in clause (ii)(I).

“(vi) LIMITATION ON AGGREGATE REDUCTIONS.—The aggregate reduction in a penalty under clause (iv) may not exceed 35 percent on the basis of self-reporting, on the basis of a waiver of an appeal (as provided for under regulations under section 488.436 of title 42, Code of Federal Regulations), or on the basis of both.

“(vii) COLLECTION OF CIVIL MONEY PENALTIES.—In the case of a civil money penalty imposed under subparagraph (A)(ii) for a deficiency described in subclause (I) or (II) of clause (ii) or clause (iii)(I), the State—

“(I) subject to subclause (II), shall provide the opportunity for the facility to participate in an informal dispute resolution process prior to the collection of such penalty;

“(II) may provide for the collection of such civil money penalty and the placement of such amounts collected in an escrow account on the
earlier of the date on which the informal dispute resolution process under subclause (I) is completed or the date that is 90 days after the date of the imposition of the penalty;

“(III) may provide that such amounts collected are kept in such account pending the resolution of any appeals;

“(IV) in the case where the facility successfully appeals the penalty, shall provide for the return of such amounts collected (plus interest) to the facility; and

“(V) in the case where all such appeals are unsuccessful, may provide that such funds collected shall be used for the purposes described in the second sentence of subparagraph (A)(ii).

“(viii) INDEXING AMOUNTS.—For years beginning after 2010, each of the amounts specified in clauses (ii) and (iii) shall be subject to periodic increase in accordance with the provisions of section 5 of the Federal Civil Penalties Inflation Ad-

(B) CONFORMING AMENDMENT.—The second sentence of section 1919(h)(2)(A)(ii) is amended by inserting “, and some portion of such funds may be used to support activities of the State long-term care ombudsman that benefit residents, including assistance to support and protect residents who reside in a facility that closes (voluntarily or involuntarily) or is decertified (including offsetting costs of relocating residents to home and community-based settings or another facility), and projects that support resident and family councils and other consumer involvement in assuring quality care in facilities” before the period at the end.

(2) PENALTIES IMPOSED BY THE SECRETARY.—

(A) IN GENERAL.—Section 1919(h)(3)(C)(ii) of the Social Security Act (42 U.S.C. 1396r(h)(3)(C)) is amended to read as follows:

“(ii) AUTHORITY WITH RESPECT TO CIVIL MONEY PENALTIES.—
“(I) IN GENERAL.—Subject to subclause (III), the Secretary may impose a civil money penalty in the applicable per instance or per day amount (as defined in subclause (II) and (III)) for each day or each instance, respectively, of noncompliance (as determined appropriate by the Secretary).

“(II) APPLICABLE PER INSTANCE AMOUNT.—In this clause, the term ‘applicable per instance amount’ means—

“(aa) in the case where the deficiency is found to be a direct proximate cause of death of a resident of the facility, an amount not to exceed $100,000;

“(bb) in each case of a deficiency where the facility is cited for actual harm or immediate jeopardy, an amount not less than $3,050 and not more than $25,000; and
“(cc) in each case of any other deficiency, an amount not less than $250 and not to exceed $3,050.

“(III) Applicable per day amount.—In this subparagraph, the term ‘applicable per day amount’ means—

“(aa) in each case of a deficiency where the facility is cited for actual harm or immediate jeopardy, an amount not less than $3,050 and not more than $25,000; and

“(bb) in each case of any other deficiency, an amount not less than $250 and not to exceed $3,050.

“(IV) Reduction of civil money penalties in certain circumstances.—Subject to subclauses (V) and (VI), in the case where a facility self-reports and promptly corrects a deficiency for which a penalty was imposed under this clause not
later than 10 calendar days after the
date of such imposition, the State
may reduce the amount of the penalty
imposed.

“(V) PROHIBITION ON REDUC-
TION FOR CERTAIN DEFICIENCIES.—

“(aa) REPEAT DEFICIENCIES.—The Secretary may
not reduce the amount of a pen-
alty under subclause (IV) if the
Secretary had reduced a penalty
imposed on the facility in the
preceding year under such sub-
clause with respect to a repeat
deficiency.

“(bb) CERTAIN OTHER DE-
FICIENCIES.—The Secretary may
not reduce the amount of a pen-
alty under subclause (IV) if the
penalty is imposed for a defi-
ciency described in subclause
(II)(aa) or (III)(a) and the ac-
tual harm is found to result in a
pattern of harm or widespread
harm that immediately jeopar-
izes the health or safety of a resident or residents of the facility, or if the penalty is imposed for a deficiency described in subclause (II)(a).

“(VI) LIMITATION ON AGGREGATE REDUCTIONS.—The aggregate reduction in a penalty under subclause (IV) may not exceed 35 percent on the basis of self-reporting, on the basis of a waiver of an appeal (as provided for under regulations under section 488.436 of title 42, Code of Federal Regulations), or on the basis of both.

“(VII) COLLECTION OF CIVIL MONEY PENALTIES.—In the case of a civil money penalty imposed under subparagraph (A)(ii) for a deficiency described in subclause (I) or (II) of clause (ii) or clause (iii)(I), the State—

“(aa) subject to subclause (II), shall provide the opportunity for the facility to participate in
an informal dispute resolution process prior to the collection of such penalty;

“(bb) may provide for the collection of such civil money penalty and the placement of such amounts collected in an escrow account on the earlier of the date on which the informal dispute resolution process under subclause (I) is completed or the date that is 90 days after the date of the imposition of the penalty;

“(cc) may provide that such amounts collected are kept in such account pending the resolution of any appeals;

“(dd) in the case where the facility successfully appeals the penalty, shall provide for the return of such amounts collected (plus interest) to the facility; and

“(ee) in the case where all such appeals are unsuccessful,
may provide that such funds col-
lected shall be used for the pur-
poses described in the second
sentence of paragraph (2)(A)(ii).

“(VIII) INDEXING AMOUNTS.—
For years beginning after 2010, each
of the amounts specified in subclauses
(II) and (III) shall be subject to peri-
odic increase in accordance with the
provisions of section 5 of the Federal
Civil Penalties Inflation Adjustment
Act of 1990 (Public Law 101–410; 28

“(IX) PROCEDURE.—The provi-
sions of section 1128A (other than
subsections (a) and (b) and except to
the extent that such provisions require
a hearing prior to the imposition of a
civil money penalty in the case de-
scribed in subclause (VII)) shall apply
to a civil money penalty under this
clause in the same manner as such
provisions apply to a penalty or pro-
ceeding under section 1128A(a).”.
(B) CONFORMING AMENDMENT.—Section 1919(h)(5)(8) of the Social Security Act (42 U.S.C. 1396r(h)(5)(8)) is amended by inserting “(ii)(V),” after “(i),”.

c) EFFECTIVE DATE.—The amendments made by this section shall take effect 1 year after the date of enactment of this Act.

SEC. 202. NATIONAL INDEPENDENT MONITORING REQUIREMENTS.

(a) SKILLED NURSING FACILITIES.—Section 1819(h) of the Social Security Act (42 U.S.C. 1395i–3(h)(2)) is amended—

(1) by redesignating paragraphs (5) and (6) as paragraphs (6) and (7), respectively; and

(2) by inserting after paragraph (4) the following new paragraph:

“(5) NATIONAL INDEPENDENT MONITORING REQUIREMENTS.—

“(A) IN GENERAL.—Not later than 1 year after the date of enactment of this paragraph, the Secretary shall, in consultation with the Inspector General of the Department of Health and Human Services, evaluate the potential benefit and feasibility of applying independent
monitoring requirements to interstate and large intrastate chains of skilled nursing facilities.

“(B) CONSIDERATIONS.— The feasibility evaluation under subparagraph (A) shall consider the following:

“(i) The need for independent monitoring requirements to address and remedy patterns of chronic poor performance, based on quality deficiencies, high staff turnover rates, or poor performance on other metrics of quality of care.

“(ii) Criteria for selecting interstate and large intrastate chains subject to independent monitoring requirements, including—

“(I) chains that have had a number of the facilities of such chain enrolled in the ‘Special Focus Facility program’ (or a successor program) established by the Centers for Medicare & Medicaid Services during the preceding 3 years that exceeds a threshold number specified by the Secretary;
“(II) chains experiencing financial problems that may be linked to serious quality deficiencies;

“(III) chains experiencing low staffing levels in relation to the number and case mix of patients or turnover rates linked to serious quality deficiencies; and

“(IV) chains that have a record of chronic poor performance;

and including other appropriate criteria.

“(iii) Responsibilities of independent monitors, including—

“(I) conducting periodic reviews and preparing root-cause quality and deficiency analyses of a chain described in such subparagraph to assess compliance by the chain with State and Federal laws and regulations;

“(II) conducting oversight of efforts by such a chain, whether publicly or privately held, to achieve compliance with State and Federal laws and regulations;
“(III) analyzing the management structure, distribution of expenditures, and direct care staffing levels of facilities of such a chain in relation to resident census, staff turnover rates, and tenure;

“(IV) reporting findings and recommendations with respect to such reviews, analyses, and oversight to the chain and facilities of the chain, to the Secretary, and to relevant States;

and

“(V) other responsibilities of independent monitors;

“(iv) Other implementation issues, including timelines, processes, and enforcement mechanisms for implementation of independent monitor recommendations and corrective action plans.”.

(b) NURSING FACILITIES.—Section 1919(h) of the Social Security Act (42 U.S.C. 1396r(h)) is amended—

(1) by redesignating paragraphs (8) and (9) as paragraphs (9) and (10), respectively; and

(2) by inserting after paragraph (7) the following new paragraph:
“(7) NATIONAL INDEPENDENT MONITORING REQUIREMENTS.—

“(A) IN GENERAL.—Not later than 1 year after the date of enactment of this paragraph, the Secretary shall, in consultation with the Inspector General of the Department of Health and Human Services, evaluate the potential benefit and feasibility of applying independent monitoring requirements to interstate and large intrastate chains of nursing facilities.

“(B) CONSIDERATIONS.—The feasibility evaluation under subparagraph (A) shall consider the following:

“(i) The need for independent monitoring requirements to address and remedy patterns of chronic poor performance, based on quality deficiencies, high staff turnover rates, or poor performance on other metrics of quality of care.

“(ii) Criteria for selecting interstate and large intrastate chains subject to independent monitoring requirements, including—

“(I) chains that have had a number of the facilities of such chain en-
rolled in the ‘Special Focus Facility program’ (or a successor program) established by the Centers for Medicare & Medicaid Services during the preceding 3 years that exceeds a threshold number specified by the Secretary;

“(II) chains experiencing financial problems that may be linked to serious quality deficiencies;

“(III) chains experiencing low staffing levels in relation to the number and case mix of patients or turnover rates linked to serious quality deficiencies; and

“(IV) chains that have a record of chronic poor performance;

and including other appropriate criteria.

“(iii) Responsibilities of independent monitors, including—

“(I) conducting periodic reviews and preparing root-cause quality and deficiency analyses of a chain described in such subparagraph to assess compliance by the chain with
State and Federal laws and regulations;

“(II) conducting oversight of efforts by such a chain, whether publicly or privately held, to achieve compliance with State and Federal laws and regulations;

“(III) analyzing the management structure, distribution of expenditures, and direct care staffing levels of facilities of such a chain in relation to resident census, staff turnover rates, and tenure;

“(IV) reporting findings and recommendations with respect to such reviews, analyses, and oversight to the chain and facilities of the chain, to the Secretary, and to relevant States; and

“(V) other responsibilities of independent monitors;

“(iv) Other implementation issues, including timelines, processes, and enforcement mechanisms for implementation of
independent monitor recommendations and corrective action plans.”.

SEC. 203. GAO STUDIES AND REPORTS ON TEMPORARY MANAGEMENT.

(a) IN GENERAL.—The Comptroller General of the United States (in this section referred to as the “Comptroller General”) shall conduct a study on—

(1) best practices for the appointment of temporary management under sections 1819(h)(2)(B)(iii), 1919(h)(2)(A)(iii), and 1919(h)(3)(C)(iii) of the Social Security Act (42 U.S.C. 1395i–3(h)(2)(B)(iii); 1396r(h)(2)(A)(iii); 1396r(h)(3)(C)(iii)); and

(2) barriers to the appointment of such temporary management.

(b) REPORT.—Not later than 1 year after the date of enactment of this Act, the Comptroller General shall submit a report to Congress containing the results of the study conducted under subsection (a), together with recommendations for such legislation and administrative action as the Comptroller General determines appropriate.

(c) GUIDANCE TO STATES.—The Secretary of Health and Human Services shall issue guidance to States based on the recommendations contained in the report submitted under subsection (b).
SEC. 204. NOTIFICATION OF FACILITY CLOSURE.

(a) Skilled Nursing Facilities.—

(1) In general.—Section 1819(c) of the Social Security Act (42 U.S.C. 1395i–3(c)) is amended by adding at the end the following new paragraph:

“(7) Notification of facility closure.—

“(A) In general.—Any individual who is the license holder of a skilled nursing facility must—

“(i) submit to the Secretary, the State long-term care ombudsman, residents of the facility, and the legal representatives of such residents or other responsible parties, written notification of an impending closure—

“(I) subject to subclause (II), not later than the date that is 60 days prior to the date of such closure; and

“(II) in the case of a facility where the Secretary terminates the facility’s participation under this title, not later than the date that the Secretary determines appropriate;

“(ii) ensure that the facility does not admit any new residents on or after the
date on which such written notification is submitted; and

“(iii) include in the notice a plan for the transfer and adequate relocation of the residents of the facility by a specified date prior to closure that has been approved by the State, including assurances that the residents will be transferred to the most appropriate facility or other setting in terms of quality, services, and location, taking into consideration the needs, best interests, and preferences of each resident.

“(B) RELOCATION.—

“(i) IN GENERAL.—The State shall ensure that, before a facility closes, all residents of the facility have been successfully relocated to another facility or an alternative home and community-based setting.

“(ii) CONTINUATION OF PAYMENTS UNTIL RESIDENTS RELOCATED.—The Secretary may, as the Secretary determines appropriate, continue to make payments under this title with respect to residents of a facility that has submitted a notification
under subparagraph (A) during the period beginning on the date such notification is submitted and ending on the date on which the resident is successfully relocated.”.

(2) CONFORMING AMENDMENTS.—Section 1819(h)(4) of the Social Security Act (42 U.S.C. 1395i–3(h)(4)) is amended—

(A) in the first sentence, by striking “the Secretary shall terminate” and inserting “the Secretary, subject to subsection (c)(7), shall terminate”; and

(B) in the second sentence, by striking “subsection (c)(2)” and inserting “paragraphs (2) and (7) of subsection (c)”.

(b) NURSING FACILITIES.—

(1) IN GENERAL.—Section 1919(c) of the Social Security Act (42 U.S.C. 1396r(c)) is amended by adding at the end the following new paragraph:

“(9) NOTIFICATION OF FACILITY CLOSURE.—

“(A) IN GENERAL.—Any individual who is the license holder of a nursing facility must—

“(i) submit to the Secretary, the State long-term care ombudsman, residents of the facility, and the legal representatives of such residents or other responsible parties,
written notification of an impending closure—

“(I) subject to subclause (II), not later than the date that is 60 days prior to the date of such closure; and

“(II) in the case of a facility where the Secretary terminates the facility’s participation under this title, not later than the date that the Secretary determines appropriate;

“(ii) ensure that the facility does not admit any new residents on or after the date on which such written notification is submitted; and

“(iii) include in the notice a plan for the transfer and adequate relocation of the residents of the facility by a specified date prior to closure that has been approved by the State, including assurances that the residents will be transferred to the most appropriate facility or other setting in terms of quality, services, and location, taking into consideration the needs, best interests, and preferences of each resident.

“(B) RELOCATION.—
“(i) **In general.**—The State shall ensure that, before a facility closes, all residents of the facility have been successfully relocated to another facility or an alternative home and community-based setting.

“(ii) **Continuation of payments until residents relocated.**—The Secretary may, as the Secretary determines appropriate, continue to make payments under this title with respect to residents of a facility that has submitted a notification under subparagraph (A) during the period beginning on the date such notification is submitted and ending on the date on which the resident is successfully relocated.”.

(c) **Effective date.**—The amendments made by this section shall take effect 1 year after the date of enactment of this Act.

**SEC. 205. NATIONAL DEMONSTRATION PROJECTS ON CULTURE CHANGE AND USE OF INFORMATION TECHNOLOGY IN NURSING HOMES.**

(a) **In general.**—The Secretary shall conduct 2 demonstration projects, 1 for the development of best practices in skilled nursing facilities and nursing facilities
that are involved in the culture change movement (including the development of resources for facilities to find and access funding in order to undertake culture change) and 1 for the development of best practices in skilled nursing facilities and nursing facilities for the use of information technology to improve resident care.

(b) Conduct of Demonstration Projects.—

(1) Grant Award.—Under each demonstration project conducted under this section, the Secretary shall award 1 or more grants to facility-based settings for the development of best practices described in subsection (a) with respect to the demonstration project involved. Such award shall be made on a competitive basis and may be allocated in 1 lump-sum payment.

(2) Consideration of Special Needs of Residents.—Each demonstration project conducted under this section shall take into consideration the special needs of residents of skilled nursing facilities and nursing facilities who have cognitive impairment, including dementia.

(c) Implementation and Duration.—

(1) Implementation.—The demonstration projects shall each be implemented not later than 1 year after the date of enactment of this Act.
(2) IN GENERAL.—The demonstration projects shall each be conducted for a period not to exceed 3 years.

(d) DEFINITIONS.—In this section:

(1) NURSING FACILITY.—The term “nursing facility” has the meaning given such term in section 1919(a) of the Social Security Act (42 U.S.C. 1396r(a)).

(2) SECRETARY.—The term “Secretary” means the Secretary of Health and Human Services.

(3) SKILLED NURSING FACILITY.—The term “skilled nursing facility” has the meaning given such term in section 1819(a) of the Social Security Act (42 U.S.C. 1395(a)).

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

(f) REPORT.—Not later than 9 months after the completion of the demonstration project, the Secretary shall submit a report to Congress on such project, together with recommendations for such legislation and administrative action as the Secretary determines appropriate.
TITLE III—IMPROVING STAFF TRAINING

SEC. 301. DEMENTIA AND ABUSE PREVENTION TRAINING.

(a) Skilled Nursing Facilities.—Section 1819(f)(2)(A)(i)(I) of the Social Security Act (42 U.S.C. 1395i–3(f)(2)(A)(i)(I)) is amended by inserting “(including, in the case of initial training and, if the Secretary determines appropriate, in the case of ongoing training, dementia management training, and patient abuse prevention training” before “, (II)”.

(b) Nursing Facilities.—Section 1919(f)(2)(A)(i)(I) of the Social Security Act (42 U.S.C. 1396r(f)(2)(A)(i)(I)) is amended by inserting “(including, in the case of initial training and, if the Secretary determines appropriate, in the case of ongoing training, dementia management training, and patient abuse prevention” before “, (II)”.

(c) Effective Date.—The amendments made by this section shall take effect 1 year after the date of enactment of this Act.

SEC. 302. STUDY AND REPORT ON TRAINING REQUIRED FOR CERTIFIED NURSE AIDES AND SUPERVISORY STAFF.

(a) Study.—
(1) In general.—The Secretary shall conduct a study on the content of training for certified nurse aides and supervisory staff of skilled nursing facilities and nursing facilities. The study shall include an analysis of the following:

(A) Whether the number of initial training hours for certified nurse aides required under sections 1819(f)(2)(A)(i)(II) and 1919(f)(2)(A)(i)(II) of the Social Security Act (42 U.S.C. 1395i–3(f)(2)(A)(i)(II); 1396r(f)(2)(A)(i)(II)) should be increased from 75 and, if so, what the required number of initial training hours should be, including any recommendations for the content of such training (including training related to dementia).

(B) Whether requirements for ongoing training under such sections 1819(f)(2)(A)(i)(II) and 1919(f)(2)(A)(i)(II) should be increased from 12 hours per year, including any recommendations for the content of such training.

(2) Consultation.—In conducting the analysis under paragraph (1)(A), the Secretary shall consult with States that currently (as of the date of
enactment of this Act) require more than 75 hours
of training for certified nurse aides.

(3) DEFINITIONS.—In this section:

(A) NURSING FACILITY.—The term “nurs-
ing facility” has the meaning given such term
in section 1919(a) of the Social Security Act
(42 U.S.C. 1396r(a)).

(B) SECRETARY.—The term “Secretary”
means the Secretary of Health and Human
Services, acting through the Assistant Secretary
for Planning and Evaluation.

(C) SKILLED NURSING FACILITY.—The
term “skilled nursing facility” has the meaning
given such term in section 1819(a) of the Social
Security Act (42 U.S.C. 1395(a)).

(b) REPORT.—Not later than 2 years after the date
of enactment of this Act, the Secretary shall submit a re-
port to Congress containing the results of the study con-
ducted under subsection (a), together with recommenda-
tions for such legislation and administrative action as the
Secretary determines appropriate.

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