

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2017

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HOUSE BILL 907

Short Title: Enhance Health Care Choices for Seniors. (Public)

Sponsors: Representatives Setzer and Earle (Primary Sponsors).

*For a complete list of sponsors, refer to the North Carolina General Assembly web site.*

Referred to: Health, if favorable, Judiciary I

April 26, 2017

A BILL TO BE ENTITLED

1 AN ACT EXEMPTING FROM CERTIFICATE OF NEED REVIEW THE  
2 ESTABLISHMENT OF A HOME HEALTH AGENCY BY A CONTINUING CARE  
3 RETIREMENT COMMUNITY FOR THE PURPOSE OF PROVIDING HOME HEALTH  
4 SERVICES TO RESIDENTS WHO CONTRACT WITH THE CONTINUING CARE  
5 RETIREMENT COMMUNITY TO RECEIVE CONTINUING CARE SERVICES WITH  
6 LODGING.  
7

8 Whereas, the continuing care model of long-term care provides access to all levels  
9 of care (independent living, assisted living, and skilled nursing) on one campus, thereby  
10 ensuring that staff becomes familiar with the individual needs and conditions of each resident  
11 and provides the highest quality of care and timely transitions through all levels of care; and

12 Whereas, North Carolina ranks ninth in the top 10 most heavily populated states in  
13 the nation; and

14 Whereas, by 2019, North Carolina will have more residents over the age of 60 than  
15 under the age of 18; and

16 Whereas, the State's population of individuals age 65 and older is expected to  
17 increase by more than one million people over the next 20 years; and

18 Whereas, in the past nine years, only eight new home health agency slots have  
19 become available, and these new slots have been spread over three counties (one in Forsyth  
20 County, four in Mecklenburg County, and three in Wake County); and

21 Whereas, 97% of the counties in North Carolina have had no new home health  
22 agency slots become available in the past nine years; and

23 Whereas, North Carolinians have paid into the Medicare system for their entire  
24 working lives and should be able to exercise choice and access their Medicare benefits if it  
25 becomes necessary to utilize those benefits; and

26 Whereas, if seniors opt to use the services available through a continuing care  
27 retirement community, North Carolina's current certificate of need laws prevent seniors from  
28 accessing their hard-earned Medicare benefits, causing them to incur out-of-pocket costs for  
29 needed care; Now, therefore,

30 The General Assembly of North Carolina enacts:

31 **SECTION 1.** G.S. 131E-184 is amended by adding a new subsection to read:

32 "(i) The Department shall exempt from certificate of need review the establishment of a  
33 home health agency by a continuing care retirement community licensed under Article 64 of  
34 Chapter 58 of the General Statutes to provide home health services to one or more residents of  
35 a continuing care retirement community who have entered into a contract with the continuing



1 care retirement community to receive continuing care services with lodging. A continuing care  
2 retirement community that seeks to provide home health services to individuals who do not  
3 reside at the continuing care retirement community pursuant to a contract to receive continuing  
4 care services with lodging shall be required to obtain a certificate of need as a home health  
5 agency prior to developing or offering home health services to any individual not a resident of  
6 the continuing care retirement community under a contract to receive continuing care services  
7 with lodging. As used in this subsection, the terms "continuing care" and "lodging" are as  
8 defined in G.S. 58-64-1. Nothing in this subsection shall be construed to exempt from the  
9 State's home health agency licensure and certification requirements a continuing care  
10 retirement community that has been exempted from certificate of need review for the provision  
11 of home health services to one or more residents pursuant to this subsection."

12         **SECTION 2.** This act is effective when it becomes law and applies to continuing  
13 care retirement communities engaged in the direct provision of home health services on or after  
14 that date.