

**FISCAL NOTE
PUBLIC COST**

- I. Department Title: Department of Health and Senior Services
Division Title: Division of Regulation and Licensure
Chapter Title: 19 CSR 30-91.010 Authorized Electronic Monitoring in Long Term Care Facilities**

Rule Number and Title:	19 CSR 30-91.010 Authorized Electronic Monitoring in Long Term Care Facilities
Type of Rulemaking:	Emergency Rule

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
(34) Skilled Nursing Facilities	\$50,161.50
(15) Residential Care Facilities and Assisted Living Facilities	\$7,188.75
TOTAL COSTS =	\$57,350.25

III. WORKSHEET

Designated facility staff person

Median wages were used to calculate the average pay per hour for a designated facility staff person:

- Manager/Administrator: \$47.26 per hour
- Licensed Practical Nurse (LPN): \$22.23 per hour
- Registered Nurse (RN): \$35.24 per hour.
- Social Services “designee”: \$23.07per hour

$\$47.26 + \$22.23 + \$35.24 + \$23.07/4 = \$31.95$ average pay per hour for a designated facility staff person.

34 SNFs with a combined total of 3,139 licensed beds (residents)/2= 1570 residents choosing to utilize electronic monitoring devices.

15 public RCFs and ALFs with a combined total of 449 licensed beds (residents)/2=225 residents choosing to utilize electronic monitoring devices.

Costs of a designed facility staff person on public SNFs

One (1) facility staff person @ \$31.95 per hour for one (1) hour x 1570 residents of 34 public owned SNFs = \$50,161.50.

Costs of a designated facility staff person on public RCF/ALFs

One (1) facility staff person @\$31.95 per hour for one (1) hour x 225 residents of 15 public owned RCFs/ALFs = \$7,188.75.

Total for costs for public entities (RCF/ALF/SNF) to designate a staff person for oversight/management to ensure appropriate placement of an electronic monitoring device and to ensure the required prescribed form is properly completed, signed, and placed in the resident's medical record: \$50,161.50 + \$ 7,188.75 = \$57,350.25

IV. ASSUMPTIONS

At least one (1) designated facility staff person will be needed for oversight/management to ensure appropriate placement of an electronic monitoring device and that the required prescribed form is properly completed, signed, and placed in the resident's medical record. The department assumes the facility may designate a manager/administrator, a licensed nurse, or a social services "designee" to complete this task. Furthermore, the department assumes it will take this designated staff person at least one (1) hour to review the prescribed form for completeness, file the form in the resident's medical record, and then work with the resident or their representative to determine appropriate placement of the electronic monitoring device.

The department is estimating during the emergency rule period between September 3, 2020 to March 1, 2021 the number of residents or the resident's guardian or legal representative requesting to place an electronic monitoring device in the resident's room and the number of required forms needing to be completed will initially be high. It is estimated at least fifty percent (50%) of residents will need to have the required form completed to install an electronic monitoring device. This number is initially high because those families currently utilizing electronic monitoring devices will need to complete forms to come into compliance with the law and regulation. Additionally, this number is high because the Department has received an overwhelming response from families asking questions about this new law and expressing a desire to place electronic monitoring devices into their loved ones' rooms. Finally, as residents move in and out of facilities, move rooms and roommates change, then forms will have to be completed based on the situation.

There are currently 34 public owned skilled nursing care facilities (SNFs) and 0 public owned intermediate care facilities that are licensed by the department:

Licensed ICFs = 0

Licensed SNFs = 34

There are currently 15 public owned residential care facilities (RCFs) and assisted living facilities (ALFs) that are licensed by the department:

Licensed RCFs/RCF IIs = 11

Licensed ALFs = 4

There are 0 public owned ICFs and 34 SNFs with a combined total of 3,139 licensed beds. The department estimates at least 50% of residents, the residents' guardians or legal representatives will request to place and use an electronic monitoring device in the residents' rooms which would be 1570 licensed beds/residents.

There are 15 public RCFs and ALFs with a combined total of 449 licensed beds. The department estimates at least 50% of residents, or the residents' guardians or legal representatives will request to place and use an electronic monitoring device in the residents' rooms which would be 225 licensed beds/residents.

The Department is not including the costs a facility may incur as a result of proper placement of residents' electronic monitoring devices because section 198.622, RSMo requires that the resident or the resident's guardian or legal representative is responsible to pay for all costs associated with conducting electronic monitoring, except for the costs of electricity.

The Department is also not including the costs of the facility to ensure all staff are knowledgeable of the applicable laws as this can be completed during in-service trainings that is already occurring or through other methods of training the facilities already utilize with their employees.

The Department is not including costs for the facility staff to help control (turn off and on) the electronic monitoring devices as indicated by the resident and any of the resident's roommates on their respective electronic monitoring forms. Any assistance that staff may provide to help control (turn off and on) the electronic monitoring devices will be part of the care already being given to the residents and roommates for activities of daily living. For example, a certified nurse assistant may turn off the electronic monitoring device before dressing a resident who has an electronic monitoring device pointed towards the resident because the resident checked the box on the resident's electronic monitoring device form electing to have the electronic monitoring device turned off when dressing.

Finally, the Department is not including costs to the facility or to the family to post electronic monitoring notices as these notices can be done on paper that the facility or families already have at their disposal.