



# 2005 Legislative and Executive Impact of JLARC Studies

A number of significant actions were taken by the 2005 General Assembly and the executive branch in response to JLARC reports and recommendations.

## Review of Emergency Medical Services in Virginia

In 2004, JLARC conducted a review of emergency medical services (EMS), focusing on the availability and funding of services statewide, as well as recruitment and retention of EMS providers. The report found that 60 percent of the 815 licensed EMS agencies were volunteer, and that there were 33,000 certified EMS providers statewide. The report noted that all Virginians have access to some level of EMS, and that compared to other states Virginia has a relatively high number of EMS agencies and providers.

The report recommended legislation:

- requiring that, in instances where a local EMS provider went out of business, local governments should ensure the continuous provision of EMS;
- establishing a uniform definition of “response time,” and making public relevant performance data for EMS agencies;
- expanding paramedic training opportunities;
- authorizing intermediate sanctions for enforcement of EMS regulations; and
- requiring the Board of Health to review and publish the comprehensive EMS plan.



Several bills were adopted by the 2005 General Assembly to accomplish these objectives. HB 2521 (O'Bannon) provided that localities should take steps to ensure the maintenance of services. HB 2238 (O'Bannon) provided for a uniform response time definition and required that the data be made available to the public upon request. It also authorized civil penalties for noncompliance with State EMS regulations. HB 2253 (Bell) provided for additional paramedic training, and required the Board of Health to regularly review and publish the statewide EMS plan.

---

## Use and Financing of Trauma Centers in Virginia



As a result of concerns that access to trauma centers in Virginia might be compromised, JLARC was directed to complete a study of steps that could be taken to maintain appropriate trauma services in the Commonwealth. The study found that hospitals designated as trauma centers and the physicians who staff them are incurring substantial financial losses as a result of treating trauma patients. These losses appear to be driven primarily by uncompensated care, low reimbursement rates from public insurers, and readiness costs. To alleviate the burden of these losses and mitigate the possibility that trauma programs in certain regions of the State might be discontinued, the report offered an array of financial support options and funding mechanisms.

Several of these options were considered by the 2005 General Assembly through legislation and budget amendments. The adoption of HB 2664 (McDonnell) imposed an additional \$40 fee on the reinstatement of suspended or revoked driver's licenses and registrations. These fees, estimated to generate \$4.3 million annually, will be deposited into a Trauma Center Fund and used to defray the cost of caring for victims of automobile accidents attributable to alcohol or drug use. Budget amendments seeking to improve Medicaid reimbursement rates to trauma centers and trauma physicians were introduced but were not adopted.

---

## Review of Nutrient Management Planning in Virginia



The 2005 General Assembly passed two pieces of legislation based on recommendations from JLARC's study of nutrient management planning in Virginia. First, HB 1790 (Cox) requires the development and implementation of nutrient management plans by State agencies that apply nutrients to State-owned or leased lands. Agencies are required to submit these plans to the Department of Conservation and Recreation (DCR) for approval at least once every three years. States agencies affected by this requirement must submit plans by July 1, 2006. DCR is responsible for providing help to agencies that may request assistance, and is authorized to charge a fee to cover the cost of services.

Additionally, amendments were made to Virginia's Poultry Waste Management Act requirements regarding the use of phosphorus-based nutrient management planning on State-permitted poultry operations. HB 1971 (Cox) ensures that if DCR implements a phosphorus index, State-permitted poultry operations with field soils that are assessed as "low risk" for phosphorus loss will be allowed to apply poultry litter at a nitrogen-based rate similar to all other producers.

Previously, confined poultry feeding operations in Virginia that had to obtain an operating permit from the Commonwealth were required to apply nutrients to their farm fields based at rates designed to supply crop phosphorus needs. Typically, such phosphorus-based applications are more restrictive than nitrogen-based applications, because animal manures, especially poultry litter, contain almost twice as much nitrogen as phosphorus. As a result of this imbalance and the potential for excess soil phosphorus to negatively affect water quality, both the federal and State governments implemented legislative and regulatory restrictions on the amount of phosphorus that can be applied to a farm field.



As part of an update to DCR's nutrient management training and certification regulations, the department has proposed adopting a phosphorus index (P Index) designed to measure the potential for phosphorus loss on a field. While fields that are classified as having a high risk for phosphorus loss will be restricted to phosphorus-based rates, those fields that are calculated as having low loss potential will be permitted to apply at nitrogen-based rates. As passed, HB 1971 requires that phosphorus application rates for poultry operations conform to the regulatory criteria adopted by the department, which will include a determination of potential phosphorus loss and the use of a P Index.

---

### **Update on Studies of Assisted Living Facilities**

JLARC has conducted three reviews of assisted living facilities (previously called adult care residences) since 1979, most recently in 1997. All three reports recommended stronger State oversight and improved services, especially for residents with mental disabilities. A number of steps have been taken over the years, such as legislation establishing different levels of care within the facilities, increased auxiliary grant payments, and better relationships with community services boards. Although some facilities were found to be model service providers, problems persisted with State inspection and quality of services in some other facilities.

The 2005 General Assembly responded to renewed concerns about the quality of care and services in assisted living facilities with major legislation. Under HB 2512 (Hamilton), new requirements will increase the accountability of facility staff, for example by requiring that facility administrators be licensed by the Department of Health Professions, and that medication aides be registered with the Board of Nursing. Enforcement is strengthened by increasing the maximum monetary penalty per inspection from \$500 to \$10,000, by allowing a summary suspension of a facility's license to protect public health or safety, and by adding 11 additional enforcement positions in

the Department of Social Services. The monthly auxiliary grant payment was also increased to \$944 per month.

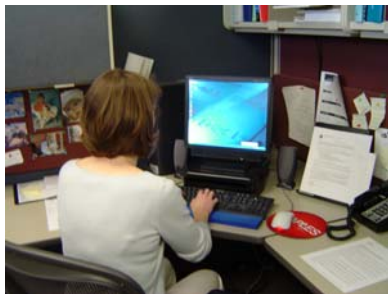
These major steps should help to improve the safety and well-being of residents of assisted living facilities.

---

### **Avoidance of General Fund Appropriations for an Internal Service Fund Agency**

At the request of the Senate Finance Committee, JLARC staff reviewed several proposed amendments to the 2004-06 biennial budget which would have appropriated general funds to the Virginia Information Technologies Agency (VITA). The Governor's proposed budget and member amendments requested a total of \$14 million in new general fund appropriations for the biennium. These requested general fund amounts were for various VITA projects related to the consolidation of IT functions and start-up costs.

Consistent with the General Assembly's long-standing policy not to use general funds for internal service fund agencies, JLARC staff recommended that the General Assembly reject the VITA general fund amendments. By requiring all costs to be recovered from VITA's customer agencies through its normal billings, the full burden of costs is allocated equitably to federal and other special fund sources as well as general funds. This makes the general funds available for other priorities of the General Assembly.



The JLARC staff recommendation to reject the use of general funds for VITA was adopted by the budget conferees and the full General Assembly.