

## MINUTES

### MONTANA HOUSE OF REPRESENTATIVES 51st LEGISLATURE - REGULAR SESSION

#### COMMITTEE ON HUMAN SERVICES AND AGING

Call to Order: By Stella Jean Hansen, on January 25, 1989,  
at 3:10 p.m.

#### ROLL CALL

Members Present: All

Members Excused: None

Members Absent: None

Staff Present: Mary McCue, Legislative Council

Announcements/Discussion: None

#### HEARING ON HB 242

Presentation and Opening Statement By Sponsor: Rep. Cobb  
stated that this bill was an act to generally  
revise and clarify the laws relating to public  
assistance; to extend the period of time in which  
transfer of property may result in  
disqualification for public assistance; to  
eliminate the requirement that county welfare  
departments provide notice to law enforcement  
officials concerning the provision of AFDC to a  
child who has been deserted or abandoned by a  
parent, to clarify requirements and county  
reimbursements to the state for AFDC provided to  
households that include an enrolled Indian.

#### List of Testifying Proponents and What Group They Represent:

Lee Tickell, Montana Department of Social and  
Rehabilitative Services

#### List of Testifying Opponents and What Group They Represent:

Virginia Jellison, Montana Low Income Coalition.

#### Testimony:

Lee Tickell stated his support of this bill and said that  
the bill drafted to conform with the federal  
requirements under the Family Support Act.

Virginia Jellison opposes this bill and stated her concern

about the changes made by this bill that would disqualify someone from public assistance if transfer of property had occurred within 3 years of applying for assistance. Exhibit 1.

Questions From Committee Members: None.

Closing By Sponsor: Rep. Cobb closes on the bill.

DISPOSITION OF HB 242

Motion: Rep. Boharski made a Motion to DO PASS.

Recommendation and Vote: A vote was taken and all voted in favor.

HEARING ON HB 211

Presentation and Opening Statement By Sponsor: Rep. Addy stated that this bill was an act allowing an applicant for licensure as a nursing home administrator to satisfy the education and experience requirements by presenting evidence of a baccalaureate degree and field experience.

List of Testifying Proponents and What Group They Represent:

Linda Smith, Montana Board of Nursing Home  
Administrators  
Carol Ann Andrews, Montana Board of Nursing Home  
Administrators

List of Testifying Opponents and What Group They Represent:

Rose Hughes, Montana Health Care Association  
James Ahrens, Montana Hospital Association

Testimony:

Linda Smith supports this bill and states that the current statutes indicate that an applicant cannot combine experience and education. Complaints were received from both administrator applicants and nursing home owners that the rules were too strict. Exhibit 2.

Carol Ann Andrews supports this legislation and supplied Exhibit 2.

Rose Hughes opposes this legislation and states that it is unnecessary, costly, and bearing no relationship on patient care in our facilities. Exhibit 3.

James Ahrens opposes this bill and states that a grandfather clause would be acceptable.

Questions From the Committee: Rep. Squires asked Ms. Smith if a baccalaureate degree was required and Ms. Smith indicated that it was not.

Rep. Stickney asked Ms. Smith if the baccalaureate degree had any affiliation with the legislation proposed in the nursing field and Ms. Smith said it was not.

Rep. Boharski questioned Ms. Smith on the federal requirements and she stated that the state was trying to stay with the regulations which were required by the federal government and that was the reason for the legislation.

Rep. Simon asked Ms. Smith her reason for the degree if one could pass the examination and she stated that the combination of the education plus the experience as a stipulation was the requirement they were seeking.

Rep. Gould asked Ms. Smith why she would not wish to license a 18 year old out of high school and Ms. Smith said because of the lack of experience.

Rep. Boharski asked Ms. Smith if she thought the administrators were doing a good job and she said that they were.

Closing By the Sponsor: Rep. Addy closes on the bill.

#### HEARING ON HB 253

Presentation and Opening Statement by Sponsor: Rep. Spring stated that this bill was an act generally revising the definition of "unprofessional conduct" for purposes of the practice of medicine.

List of Testifying Proponents and What Group They Represent:

Jerry Loendorf, Montana Medical Association  
Michael Sherwood, Montana Trial Lawyers Association

List of Testifying Opponents and What Group They Represent:

None

Testimony:

Jerry Loendorf supports this bill and indicated that an amendment on page 1, line 24 and strike the words "and

personally."

Michael Sherwood stated his support of this legislation.

Questions From the Committee: Rep. Boharski asked Mr. Loendorf to explain subsection 8 on the bill regarding the writing of bad checks and Mr. Loendorf said that the Board felt that any activity that is so serious which is classified as a felony should be considered unprofessional conduct.

Rep. Good asked Jerry Loendorf about page 1, line 21 regarding the use of abusive billing practices and questioned if the language were specific enough and Mr. Loendorf stated that the Board wanted to go ahead with the wording as it is.

Closing By Sponsor: Rep. Spring closes on the bill.

DISPOSITION OF HB 253

Motion: Rep. Stickney made a Motion to DO PASS.

Discussion: Rep. Boharski made a Motion to amend line 24, strike "and personally."

Amendments, Discussion and Votes: A vote was taken on the amendment and all voted in favor.

Rep. Knapp questioned p. 4, lines 4 and 5 and asked if this would interfere with the physicians assistants. Rep. Stickney stated that she felt that it did not.

Rep. Whalen questioned subsection 8, on page 2 which was initially brought up by Rep. Boharski. Rep. Whalen then made a motion to strike lines 9, 10 and 11 on page 2 of the bill.

Rep. Hansen stated that Committee had heard the amended motion and then asked for discussion on the motion.

Rep. Simon stated that there was a portion of the bill which relates to Rep. Whalen's motion and all of this language which was non professional conduct.

Amendments, Discussion and Votes: A vote was then taken on the Motion to amend out the lines 9 through 11. All voted in favor with the exception of Reps. Blotkamp, Knapp, Lee, McCormick, Simon, Stickney and Strizich. Rep. Squires requested that she not vote. A roll call vote was then taken by the secretary. Rep. Hansen stated that the motion had

failed. Rep. Hansen referred back to the bill as amended.

Rep. Stickney made a Motion that the bill DO PASS AS AMENDED.

Rep. Hansen asked if there were any questions on the bill do pass as amended.

Recommendation and Vote: A vote was taken and all voted in favor of the bill as DO PASS AS AMENDED.

DISPOSITION OF HB 211

Motion: Rep. Squires made a motion to move the bill and would like the bill amended with two years of the education and experience as well as the grandfather clause into the bill.

Rep. Hansen stated that the committee had heard the motion and then asked for further discussion.

Rep. Hansen then stated that the Committee had a DO NOT PASS Motion on the floor.

Rep. Strizich rises in opposition to a DO NOT PASS Motion.

Rep. Boharski proposed a Substitute Motion to strike, including the baccalaureate degree, leave it at sufficient education, and leave the rest of the bill as it is.

Rep. Hansen addressed Rep. Boharski in saying that this was a DO PASS Motion - just an amendment to the bill on the DO NOT PASS Motion.

Rep. Boharski said that he did not want to risk losing the bill because he was not going to vote on the DO NOT PASS yet.

Rep. Hansen asked for further discussion on the amendment?

Amendments and Votes: Rep. Hansen asked for further discussion on the amendment. A vote was taken and all voted in favor with the exception of Rep. Gould and Knapp. Rep. Hansen stated that the Committee was back to the DO NOT PASS Motion as amended.

Rep. Stickney made a Motion to Move the bill to include a grandfather clause.

Rep. Hansen stated that the Committee had heard the amendment and asked for further discussion on the amendment. Rep. Hansen stated that this was amending still a DO NOT PASS Motion. Rep. Hansen asked for further discussion on the amendment?

Rep. Hansen stated that someone would be required to move the bill as amended. A vote was taken and all voted in favor. Rep. Hansen then stated that the bill would need to be moved as amended.

Rep. Stickney asked if a substitute motion could be done if the motion made was not wanted.

Rep. Stickney made a Motion to DO PASS AS AMENDED.

Rep. Knapp asked what had happened to the DO NOT PASS Motion.

Rep. Hansen stated that in amending it had negated the DO NOT PASS Motion and the Committee just needed another Motion to Move the bill.

Rep. Gould stated that if someone wanted to make a Tabling or DO NOT PASS the amended Motion then that is in order.

Rep. Hansen stated that we had a Motion on the floor to pass the bill as amended.

Recommendation and Vote: Rep. Hansen asked if there was any further discussion on the Motion to DO PASS AS AMENDED. A vote was taken and all voted in favor with the exception of Reps. Lee, Knapp, McCormick, Simon, Gould and Good. Motion carries.

ADJOURNMENT

Adjournment At: 5:15 p.m.

  
REP. STELLA JEAN HANSEN, Chairman

SJH/ajs

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# DAILY ROLL CALL

## HUMAN SERVICES AND AGING COMMITTEE

51st LEGISLATIVE SESSION -- 1989

Date January 25, 1989

NAME	PRESENT	ABSENT	EXCUSED
Stella Jean Hansen	✓		
Bill Strizich	✓		
Robert Blotkamp	✓		
Jan Brown	✓		
Lloyd McCormick	✓		
Angela Russell	✓		
Carolyn Squires	✓		
Jessica Stickney	✓		
Timothy Whalen	✓		
William Boharski	✓		
Susan Good	✓		
Budd Gould	✓		
Roger Knapp	✓		
Thomas Lee	✓		
Thomas Nelson	✓		
Bruce Simon	✓		

# ROLL CALL VOTE

HUMAN SERVICES AND AGING

COMMITTEE

DATE 1/25/89 BILL NO. HB 253 NUMBER 1

NAME	AYE	NAY
Rep. Blotkamp		✓
Rep. Boharski	✓	
Rep. Brown	✓	
Rep. Good	✓	
Rep. Gould	✓	
Rep. Knapp		✓
Rep. Lee		✓
Rep. McCormick		✓
Rep. Nelson	✓	
Rep. Russell	✓	
Rep. Simon		✓
Rep. Squires		
Rep. Stickney		✓
Rep. Strizich		✓
Rep. Whalen	✓	
Rep. Hansen	✓	

TALLY

8 7

Secretary

Chairman

Motion: To amend out the <sup>lines</sup> section on 9 through 11.



STANDING COMMITTEE REPORT

January 26, 1985

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that HOUSE BILL 211 (first reading copy -- white) do pass as amended .

Signed: \_\_\_\_\_  
Stella Jean Hansen, Chairman

And, that such amendments read:

1. Page 2, line 6.

Strike: "sufficient"

Insert: "2 years of"

Strike: "including a baccalaureate degree,"

2. Page 2, following line 15.

Insert: "NEW SECTION. Section 2. Grandfather clause.

A person licensed as a nursing home administrator on [the effective date of this act] does not have to present evidence satisfactory to the board of 2 years of education as required by 37-9-301(1)(b)(ii) in order to renew his license as a nursing home administrator."

Renumber: subsequent section

STANDING COMMITTEE REPORT

January 26, 1949

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging  
report that House Bill 242 (first reading copy -- white) do  
pass.

Signed: \_\_\_\_\_  
Stella Jean Hansen, Chairman

STANDING COMMITTEE REPORT

January 26, 1989

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging  
report that House Bill 253 | do pass as amended .

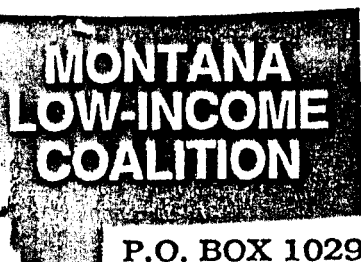
Signed: \_\_\_\_\_  
Stella Jean Hansen, Chairman

And, that such amendments read:

1. Page 1, line 24.  
Strike: "and personally"

hb025302..

hb025302..



P.O. BOX 1029  
HELENA, MONTANA 59624  
(406) 449-8801  
(406) 443-0012

BUTTE  
COMMUNITY UNION  
113 HAMILTON  
BUTTE 59701 • 782-0670

BOZEMAN  
HOUSING COALITION  
226 EAST KOCH  
BOZEMAN 59715 • 587-3736

CONCERNED CITIZENS  
COALITION  
825 THIRD AVENUE SOUTH  
GREAT FALLS 59402 • 727-9136

LAST CHANCE  
PEACEMAKERS COALITION  
107 WEST LAWRENCE  
HELENA 59601 • 449-8680

LOW INCOME  
SENIOR CITIZENS ADVOCATES  
BOX 897  
HELENA 59624 • 443-1630

MONTANA ALLIANCE FOR  
PROGRESSIVE POLICY  
324 FULLER  
HELENA 59601 • 443-7283

MONTANA LEGAL SERVICES  
EMPLOYEES ASSOCIATION  
801 N. MAIN  
HELENA 59601 • 442-9830

MONTANA  
SENIOR CITIZENS ASSOCIATION  
BOX 423  
HELENA 59624 • 443-5341

MONTANANS  
FOR SOCIAL JUSTICE  
436 NORTH JACKSON  
HELENA 59601 • 449-3140 • 227-8694

POWELL COUNTY  
NEIGHBORHOOD  
SUPPORT GROUP  
BOX 342  
DEER LODGE 59722 • 846-3437

TESTIMONY ON H.B. 242

HOUSE HUMAN SERVICES AND AGING COMMITTEE

REPRESENTATIVE STELLA JEAN HANSEN, CHAIRPERSON

JANUARY 25, 1989

Madam Chairperson and Members of the Committee:

My name is Virginia Jellison and I'm the Lobbyist for the Montana Low Income Coalition. MLIC is a member based organization that represents elderly, low income, people on assistance or working, and children in poverty. We are concerned about social justice and equity issues. Many of our members come from situations of abuse, neglect or abandonment.

We are concerned about the changes made by this bill that would disqualify someone from public assistance if transfer of property had occurred within 3 years of applying for assistance. It is absurd to think someone would deliberately do this in order to receive the whopping sum of \$212 per month in the case of an individual seeking general assistance.

For example, if a woman had been abused by her husband and, in her fear of him, she was coerced into signing property over to him, then he abandoned her, she would not be eligible for assistance. The state would presume that she had intentionally transferred her property in order to be eligible for public assistance. When people are under such emotional stress, they often do not make rational decisions.

Another example of unfairness in this provision, is the situation of a widow who has been left with property that she cannot afford to keep but is not able to sell. The wise thing to do is to give it away to an adult child. If later on she finds herself fallen on hard times and needs public assistance, she will not be eligible because the state assumes she has deliberately transferred her property to someone with the intent of going on public assistance. We think this is

1-25-89  
242

2

ludicrous; however, we are willing to accept that some unscrupulous people will always find a way to beat the system. Therefore, we recommend that a better protection to the state would be to disqualify someone from public assistance if there has been a transfer of property within one year and the value was less than fair market value. Most reasonable people would question that situation.

MLIC requests the Committee to look closely at Section 4 lines 7 through 12 on page 6. If it is better to allow the department to define dependent child, as in (1)(b), then clear direction should be given to the department to include all of the definitions of a relative stated in current language. Many people of Indian culture or other cultures with extended families may be adversely effected by eliminating any of the family members listed.

MLIC has no comment on language changes concerning the method of reimbursement to the state by the counties.

Thank you for the opportunity to testify on H.B. 242.

Educational Requirements - Synopsis

ADMINISTRATIVE STATUTES OF MONTANA CHAPTER 3 Section 37-9-301

Qualifications for Licensure - Examinations. (1)

The department shall register and issue licenses to qualified persons as nursing home administrators and the board shall establish qualification criteria for nursing home administrators. No registration or license shall be issued to a person as a nursing home administrator unless he:

(a) is of good character, of sound physical and mental health, has received a high school diploma or its equivalent;

✱ (b) has satisfactorily completed a course of instruction and training prescribed by the board, which shall be designed and administered to present sufficient knowledge of the needs properly served by long-term care facilities, laws governing the operation of long-term care facilities and the protection of the interests of patients, and the elements of good nursing home administration or has presented evidence satisfactory to the board of sufficient education, training, or experience in the foregoing fields to administer, supervise, and manage a long-term care facility; and

(c) has passed an examination designed to test for competence in the subject matters referred to in subsection (1)(b).

(2) The minimum standards for qualification shall comply with the requirements, if any, set forth in Title XIX of the Social Security Act (P.L. 90-248, 1967), as amended.

EXHIBIT 2  
DATE 1-25-89  
HB 211

ADMINISTRATIVE RULES OF MONTANA SUB-CHAPTER 4, SECTION 8.34.114

EXAMINATIONS (1) Examinations will be administered in May and November of each year. An application for examination shall be filed at least 30 days prior to the examination date and must be accompanied by the required fee, which shall not be refunded.

(2) A signed physician's statement of recent date will be accepted as evidence that the applicant is of sound physical and mental health.

(3) Applicant must provide a recent photograph approximately 2 1/2 x 2 1/2" in size of the head and shoulders only.

\* (4) After November 11, 1983, applicants for nursing home administrator examinations will be required to:

\* (a) have completed 2 years of formal education in an accredited college or university or have an associate degree from an accredited college or university.

\* (b) In addition, 2 years out of the last 4 years of administrative experience in a hospital or nursing home will be required.

\* (c) Applicants holding a BA or BS degree in hospital or nursing home administration will not be required to have working experience.

(5) A passing score in examinations prepared by the Professional Examination Service, or the National Association of Boards and passing score in an open book examination relating to the provisions of the Montana long-term care facility licensing law and regulations will be required of each applicant.

(6) Each applicant shall be required to attain a final score of at least 75% in examinations prepared by the Professional Examination Service, or the National Association of Boards, and final score of at least 90% in the open book examination relating to the provisions of the Montana long-term care facility licensing law and regulations.

(7) In the event of failure, the individual may retake the examination within the period of 1 year, by paying only the application fee.

## Sub-Chapter 4

## Substantive Rules

8.34.401 PURPOSE OF BOARD (1) The purpose of the board shall be to:

- (a) serve the public interest;
- (b) examine and license qualified applicants;
- (c) improve the profession and practice; and
- (d) secure adequate laws to carry out the purpose and policies.

(2) The program of this board shall be educational to foster high standards and quality performance by those engaged in the profession.

(3) The board shall not endorse any commercial enterprise. The name of the board shall not be used in connection with a commercial concern. (History: Sec. 37-9-201, MCA; IMP, Sec. 37-9-202, 37-9-203, 37-9-301, 37-9-307, MCA, EFF. 12/31/72; TRANS, from Dept. of Prof. & Occup. Lic., C. 274, L. 1981, EFF. 7/1/81.)

8.34.402 QUORUM (1) A majority of the voting members of the board shall constitute a quorum.

(2) Unless otherwise specifically provided by statute, a majority of all the voting members to which the board is entitled shall constitute a quorum to transact business, and the concurrence of a majority of all the voting members to which the board is entitled shall be necessary to make any action of the board valid. (History: Sec. 37-9-201, MCA; IMP, Sec. 37-9-201, MCA, EFF. 12/31/72; TRANS, from Dept. of Prof. & Occup. Lic., C. 274, L. 1981, EFF. 7/1/81.)

8.34.403 BOARD MEETINGS (1) Regular meetings of the board shall be held at least two times each year. Each member shall be advised of business to be considered at least 7 days prior to any meeting.

(a) Special meetings may be called by the chairman or any 3 voting members.

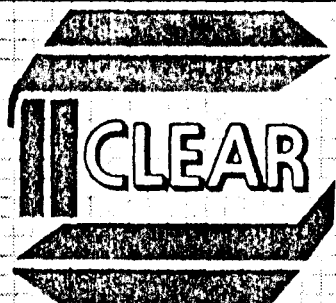
(b) The annual meeting shall be held in the fall of each year.

(2) Roberts' Rules of Order, newly revised, shall govern this board in all cases to which they are applicable and in which they are not inconsistent with these bylaws, the rules or with the provisions of law.

(3) The bylaws may be amended at any regular meeting of the board by a majority vote of the voting members of the board.

(4) The chairman shall preside at all meetings of the board and shall coordinate the work of the board in order that the purposes may be served. He/she shall have the general powers and duties of management usually vested in the





# NEWS

Published by the National Clearinghouse on Licensure, Enforcement and Regulation

Volume V, No. 3, October 1988

## NURSING HOME ADMINISTRATORS TO HAVE MINIMUM FEDERAL STANDARDS

Standards for nursing home administrators are under development by the federal Department of Health and Human Services. Medicaid-participating facilities were to receive the standards last March, but there have been delays in their promulgation. The Advocacy Committee of the American College of Health Care Administrators has developed proposed standards that have been for-

warded to the federal Health Care Financing Administration. They are:

- 1.) As of January 1, 1994, all people applying for initial licensure as nursing home administrators must have a baccalaureate degree;
- 2.) As of January 1, 1994, all entry-level administrators must complete an Administrator-in-Training program, academic-based practicum in long-term care facility, or have related health care management experience before initial licensure;
- 3.) As of January 1, 1991, all people applying for initial licensure must demonstrate knowledge in the prin-

*Continued on Page 3*

*From Page 1*

cipal domains of practice as evidenced by passage of a standard national examination;

- 4.) As of January 1, 1990, people applying for licensure must submit personal character information including an affidavit as to whether or not the applicant has ever been subject to disciplinary proceedings by any professional body or licensure board in any state and whether or not the applicant has been convicted of a felony or misdemeanor under state or federal law;

- 5.) Beginning in 1990, state licensing boards must file an annual report with the Health Care Financing Administration.

- 6.) As of January 1, 1991, administrators will be required to complete a minimum average of 20 clock hours of continuing education related to the domains of practice;

- 7.) As of January 1, 1991, all state licensure boards must have a written policy for nursing home administrator licensure reciprocity/endorsement.

Source: *The Long Term Care Administrator*.

Further information is available from Ann Tourigny (703) 549-5822. □

DEPARTMENT OF COMMERCE  
DIVISION OF BUSINESS REGULATION



TED SCHWINDEN, GOVERNOR

1424 9TH AVENUE

STATE OF MONTANA

(406) 444-3737

HELENA, MONTANA 59620-0407

March 4, 1988

TO: BOARD OF NURSING HOME ADMINISTRATORS  
FROM: JEFF BRAZIER, STAFF ATTORNEY *JB*  
RE: PROPOSED AMENDMENT TO RULE 8.34.414(3), MCA

Before adoption of the proposed rules for Nursing Home Administrators, the board should be aware that it is going against repeated advice of counsel and staff; against the advice of a practicing attorney; against a decision of a hearing examiner; and against the objections of the Administrative Code Committee.

The decision to proceed in adopting the proposed rules as written and against advice and over objection could result in the Administrative Code Committee publishing an objection under Section 2-4-406, MCA. Please note that section 2-4-406, MCA provides that a person who successfully challenges the rule in court may be awarded attorney fees. Section 25-10-711, MCA, also provides authority for the award of attorney fees if a court finds that the agency defended the case frivolously or in bad faith.

In addition, because of problems in unsuccessfully defending boards which went against the advice of counsel, staff of the Department will refuse to defend such cases in the future. Rule 1.16(b)(3) of the Rules of Professional Conduct for Lawyers, provides that a lawyer may withdraw when a client insists on pursuing an objective which the lawyer considers repugnant. The Department is in the process of adopting a policy whereby staff attorneys will not be required to participate in cases when boards have gone against their advice. This means the Board may have to hire its own attorney at a much higher cost than staff attorneys cost. Therefore there is the strong possibility that the Board will be burdened with fees for two attorneys in a losing cause.

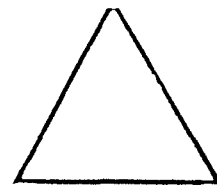
One alternative is to modify the rules before adoption in order to comply with the statutory provision that candidates should meet either the education qualification, or the experience qualification. If the Board feels strongly that license applicants should meet both experience qualifications and education qualifications it should have the legislature amend the statute. Staff will help with bill drafting.

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Under the provisions of ARM 8.34.414(3) qualifications to take the licensing examination include at least one of the following: (a) Successful completion of 60 semester hours or 90 quarter hours in an accredited college or university or graduation from a nationally accredited school of nursing; (b) at least 1 year out of the last 3 years experience as an assistant administrator or director of nursing, or (c) a one-year internship with a licensed nursing home administrator. Time claimed must be verified. The application must include a written recommendation that the applicant be granted a license. This recommendation must be from a person who has been a practicing administrator for at least the past 3 years. Applicants holding a BA, a BS or a higher degree in health care administration will not be required to have working experience.

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# MONTANA HEALTH CARE ASSOCIATION



36 South Last Chance Gulch, Suite A  
Helena, Montana 59601  
406-443-2876

TO: BOARD OF NURSING HOME ADMINISTRATORS

FROM: ROSE M. (SKOOG) HUGHES, EXECUTIVE DIRECTOR

DATE: July 7, 1987

SUBJECT: LICENSURE REQUIREMENTS

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The Montana Health Care Association represents 70 of the state's 90 long term care facilities. We recently conducted a survey of all our facilities relating to licensure requirements for nursing home administrators. Thirty-one of our 70 administrators responded, which is an excellent response to this type of survey.

A summary of the survey results is attached for your information.

In reviewing the survey results, comments on the forms, and in discussing this issue with our administrators, the following trends become apparent:

1. **Education.** a. Most administrators feel that education is important and that there is a need for education beyond high school. Many would like to see a college degree required.

b. Those who feel that 2 or more years of college should be required also feel that the required education should be in specific areas. However, equal emphasis was placed on business-related degrees as on health-related degrees. The major areas of emphasis listed were nursing home administration, hospital administration, and business administration, followed by nursing, public health/administration, and accounting.

2. **Experience.** Most administrators agree that some level of health care experience should be required, but most believe that the current requirement that 2 of the last 4 years be spent in an administrative capacity in a nursing home is too restrictive. Many would opt for a 6-month to 1-year experience requirement, or a 6-month to 1-year AIT program.

3. **AIT Programs.** There's a great deal of support for development of standards for AIT programs, although many administrators feel their facilities could not afford such a program. A surprising 26% of those responding had in fact been involved in some form of AIT program before licensure in Montana.

Most of those responding to our survey are licensed administrators, with an average of 5.6 years experience as nursing home administrators in Montana. Over 70% of those responding have bachelor's or master's degrees.

I hope you will find the results of this survey helpful in considering changes to your licensure requirements.

In addition, MHCA specifically recommends the following changes to sections 8.34.413 and 8.34.414 relating to temporary permits and examinations:

1. 8.34.413 TEMPORARY PERMIT (1) An application for a temporary permit must be accompanied by the required fee, ~~which will not be refunded.~~ If the temporary permit is not granted, the fee, less a \$20 administrative fee, shall be refunded.

2. 8.34.414 EXAMINATIONS (1) Examinations will be administered in May and November of each year. An application for examination shall be filed at least 30 days prior to the examination date and must be accompanied by the required fee, ~~which will not be refunded.~~ The Board will notify applicants of their eligibility to take the exam no less than 7 days before the scheduled date of the exam. If the applicant is determined ineligible to take the exam, the application fee, less a \$20 administrative fee, shall be refunded.

These changes provide for a refund of a portion of the application fee for examination or a temporary permit if the permit is not granted or the applicant is ineligible to take the exam. It also provides for not less than 7 days notice of eligibility to sit for the exam to applicants to allow adequate scheduling for travel to Helena.

MHCA and its special task force on licensure continue to be willing to assist you in any way in the development of your requirements. We do urge you to proceed cautiously and only after appropriate research and analysis.

*The second in a two-part series on the  
licensure requirements of administrators*

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# STATE LICENSURE REQUIREMENTS FOR NURSING HOME ADMINISTRATORS:

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## A Comparison

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*By Katherine V. Warzinski and  
Ann Ward Tourigny, Ph.D.*

States today vary widely in their licensure requirements for nursing home administrators as a result of their individual interpretations of Title XIX, section 1908, of the Social Security Act (PL 90-248). Section 1908, enacted by Congress in 1967, gave states the responsibility of licensing administrators.

In January 1987, as a reflection of its commitment to standardizing licensure requirements, the board of governors of the American College of Health Care Administrators (ACHCA) adopted its "Statement on Licensure of Long-Term Care Administrators." The statement called for the incorporation of ACHCA's Code of Ethics, Standards of Practice for Long-Term Care Administrators, and Professional Certification Program into the licensure requirements of all states.

It also called for the licensure of administrators of all types of long-term care services, including hospital-based facilities, foster care programs, and Veterans Administration facilities. (See page 9 of the Winter 1986 *Journal of Long-Term Care Administration* for the complete statement.)

For use as a reference in developing the statement, the authors made a comparative study, presented here, of state licensure requirements for the years 1975, 1979, 1983, 1985, and 1987. The study compared four major types of requirements: minimum education requirements; licensure renewal periods; the availability of administrator-in-training (AIT) programs, and the requirements of such programs; and continuing-education requirements. The data were taken from the *Summary of States' Licensure Requirements for Nursing Home Administrators* (1975), compiled by the American College of Nursing Home Administrators (ACNHA); the *State Licensure Requirements for Nursing Home Administrators* (1979), compiled by the Foundation of ACNHA; the 1983 *Roster*, compiled by the National Association of Boards of Examiners for Nursing Home Administrators, Inc. (NAB); the 1985 *State*

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*Katherine Warzinski is former information specialist, and Ann Tourigny is director of Professional Affairs, for the American College of Health Care Administrators.*

Table 1

## Division of States by Region

Northeast (13 total)	Midwest (13 total)
Connecticut	Illinois
Delaware	Iowa
District of Columbia	Indiana
Maine	Kansas
Maryland	Kentucky
Massachusetts	Michigan
New Hampshire	Missouri
New Jersey	Minnesota
New York	Nebraska
Pennsylvania	North Dakota
Rhode Island	Ohio
Vermont	South Dakota
West Virginia	Wisconsin
West (13 total)	South (12 total)
Alaska	Alabama
Arizona	Arkansas
California	Florida
Colorado	Georgia
Hawaii	Louisiana
Idaho	Mississippi
Montana	North Carolina
Nevada	Oklahoma
New Mexico	South Carolina
Oregon	Tennessee
Utah	Texas
Washington	Virginia
Wyoming	

*Roster of Licensure Boards*, compiled by NAB; and the 1986-1987 *State Roster of Licensure Boards*, compiled by NAB.

For purposes of analysis, the 50 states and the District of Columbia were divided into four regions: Northeast, West, Midwest, and South. Table 1 shows the states contained in each region.

### Minimum Education Requirements

Table 2 shows the number of states in each region, by year, (a) with no education requirements for licensure, (b) requiring a high school diploma or equivalent for licensure, (c) requiring an associate's degree for licensure, and (d) requiring a baccalaureate degree for licensure.

According to the comparison, education requirements for licensure rose substantially overall from 1975 to 1987. Whereas 13 states had no minimum education requirements in 1975, all states required at least a high school diploma or equivalent by 1985. An increase in educational standards nationally is evident by the gradual decline in the number of states requiring only a high school diploma or equivalent over the 11-year period. During the period 1983-87, the

Table 2

## Minimum State Education Requirements for Administrator Licensure, by Region

	1975	1979	1983	1985	1987
<b>No Requirement:</b>					
Northeast	3	0	0	0	0
South	0	1	0	0	0
Midwest	4	2	0	0	0
West	6	3	1	0	0
Total	13	6	1	0	0
<b>High School Diploma:</b>					
Northeast	5	3	3	3	2
South	4	4	5	5	5
Midwest	5	4	1	1	1
West	3	3	2	1	1
Total	17	14	11	10	10
<b>Associate's Degree:</b>					
Northeast	4	6	4	3	4
South	8	7	2	3	2
Midwest	3	4	3	8	7
West	4	6	5	5	5
Total	19	23	14	19	18
<b>Baccalaureate Degree:</b>					
Northeast	1	4	6	7	7
South	0	0	4	3	4
Midwest	1	3	3	3	5
West	0	1	5	7	7
Total	2	8	18	20	23
Data Unavailable	0	0	2	1	0

South had the most states requiring a high school diploma, the Midwest had the most states requiring an associate's degree, and the Northeast, followed closely by the West, had the most states requiring a minimum of a baccalaureate degree.

### Licensure Renewal Periods

Table 3 shows the number of states, by year, requiring annual and biennial licensure renewal. The trend from 1975 to 1987 was toward requiring biennial licensure renewal. The Midwest and the West both had the most states switching from annual to biennial renewal requirements during this period.

### AIT Programs

Table 4 shows the number of states, by year, having administrator-in-training (AIT) programs available. Under such programs, qualified preceptors supervise and educate potential administrators within their facilities for a specified period. The number of states having AIT programs rose over 50% during the period 1975-87, from 22 to 35. During the period 1983-87,

**Table 3**  
**State Licensure-Renewal-Period**  
**Requirements, by Region**

	1975	1979	1983	1985	1987
<b>Annual Renewal:</b>					
Northeast	8	7	6	6	6
South	8	6	6	4	4
Midwest	11	10	6	5	6
West	11	9	7	7	7
<b>Total</b>	<b>38</b>	<b>32</b>	<b>25</b>	<b>22</b>	<b>23</b>
<b>Biennial Renewal:</b>					
Northeast	5	6	7	7	7
South	4	6	6	3	3
Midwest	2	3	7	8	7
West	1	4	5	5	6
<b>Total</b>	<b>12</b>	<b>19</b>	<b>25</b>	<b>23</b>	<b>28</b>
<b>No Requirements</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>

however, the number of states having AIT programs increased by only one. Some states dropped their AIT programs during this period, which consequently lowered the period's totals. The Northeast had the highest percentage of states with AIT programs in 1987, followed by the South.

Table 5 compares the lengths of state AIT programs during the period 1979-87. The Northeast had, on the average, the most states with the longest AIT programs during this period, followed by the South, the

**Table 4**  
**Availability of State AIT Programs,**  
**by Region**

	1975	1979	1983	1985	1987
<b>States Having AIT Programs:</b>					
Northeast	7	8	9	11	11
South	7	10	9	8	8
Midwest	3	6	7	7	7
West	5	7	9	7	8
<b>Total</b>	<b>22</b>	<b>31</b>	<b>34</b>	<b>33</b>	<b>35</b>
<b>States Not Having AIT Programs:</b>					
Northeast	6	5	4	2	2
South	5	2	3	4	3
Midwest	10	7	6	6	6
West	8	6	4	6	5
<b>Total</b>	<b>29</b>	<b>20</b>	<b>17</b>	<b>18</b>	<b>16</b>

NOTE: The availability of AIT programs, as stated in the state licensure rosters, did not guarantee that their completion was a requirement of licensure. Experience or education often substituted for AIT requirements.

**Table 5**  
**Minimum Lengths of State AIT Programs,**  
**by Region**

	1979	1983	1985	1987
<b>1 to 3 Months:</b>				
Northeast	1	2	2	2
South	1	0	1	1
Midwest	4	2	1	1
West	0	1	0	0
<b>Total</b>	<b>6</b>	<b>5</b>	<b>4</b>	<b>4</b>
<b>Over 3 Months to 6 Months:</b>				
Northeast	2	1	2	2
South	3	2	3	3
Midwest	3	6	5	5
West	2	4	4	4
<b>Total</b>	<b>10</b>	<b>13</b>	<b>14</b>	<b>14</b>
<b>Over 6 Months to 9 Months:</b>				
Northeast	0	0	1	1
South	0	1	0	1
Midwest	0	0	0	0
West	0	0	0	0
<b>Total</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>
<b>Over 9 Months to 1 Year:</b>				
Northeast	4	6	6	6
South	5	5	4	4
Midwest	0	0	1	1
West	3	4	3	4
<b>Total</b>	<b>12</b>	<b>15</b>	<b>14</b>	<b>15</b>
<b>Data Unavailable</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total AIT Programs Available</b>	<b>31</b>	<b>34</b>	<b>33</b>	<b>35</b>

NOTE: Data unavailable for 1975.

West, and the Midwest. In 1987, the length of AIT programs ranged from two months to one year.

Many states with AIT programs require that AIT preceptors be certified by their licensure boards. As indicated in Table 6, there was a negligible rise in the number of states requiring AIT preceptors to be certified by boards from 1983 to 1987.

### *Continuing-Education Requirements*

Table 7 shows the number of states requiring continuing-education hours for licensure during the period 1979-87. The number increased during this period, with most states now requiring extensive continuing education to keep administrators up to date on trends in the long-term care field. All midwestern and all but one of the southern states required continuing-education hours by 1985. There were decreases, however, in the number of northeastern and western states with continuing-education requirements from 1979 to 1987.

For those states requiring continuing education, the



**Table 6**  
**Number of States Requiring**  
**Licensure-Board-Certified AIT**  
**Preceptors, by Region**

	1983	1985	1987
<b>Require:</b>			
Northeast	2	3	4
South	7	7	8
Midwest	5	5	5
West	5	4	4
<b>Total</b>	<b>19</b>	<b>19</b>	<b>21</b>
<b>Do Not Require:</b>			
Northeast	7	6	6
South	2	1	1
Midwest	2	2	2
West	4	4	4
<b>Total</b>	<b>15</b>	<b>13</b>	<b>13</b>
Data Unavailable	0	1	1
<b>Total AIT Programs Available</b>	<b>34</b>	<b>33</b>	<b>35</b>

NOTE: Data unavailable for 1975 and 1979.

number of class hours required annually ranged from 10 to 36 during the period 1979-87. Table 8 shows both the mean and median number of hours required by states mandating continuing education for this period. The total mean number of hours required declined by a negligible amount—from 21.9 to 20.7—during this period, with the total median number of hours remaining constant at 20. On the average, the

**Table 7**  
**Number of States Requiring**  
**Continuing-Education Hours, by Region**

	1975	1979	1983	1985	1987
<b>Require:</b>					
Northeast	10	11	11	10	9
South	9	9	8	11	11
Midwest	9	10	11	13	13
West	10	12	11	9	10
<b>Total</b>	<b>38</b>	<b>42</b>	<b>41</b>	<b>43</b>	<b>43</b>
<b>Do Not Require:</b>					
Northeast	3	2	2	3	4
South	3	3	4	1	1
Midwest	4	3	2	0	0
West	3	1	2	4	3
<b>Total</b>	<b>13</b>	<b>9</b>	<b>10</b>	<b>8</b>	<b>8</b>

NOTE: A minimum requirement for education often could not be ascertained from the variety of education and experience equivalencies described in the state licensure rosters. While a minimum educational level was specified, experience in the long-term care field often substituted for degree requirements.

**Table 8**  
**Mean and Median Continuing-Education**  
**Hours Required Annually, by Region**

	1979		1983		1985		1987	
	Md.	Mn.	Md.	Mn.	Md.	Mn.	Md.	Mn.
Northeast	24	23.0	20	21.4	20	20.5	20	20.6
South	20	19.8	20	18.6	20	18.2	20	18.2
Midwest	20	22.5	20	21.6	20	20.5	20	21.2
West	22	22.2	24	23.7	24	23.0	22	22.7
<b>Total</b>	<b>20</b>	<b>21.9</b>	<b>20</b>	<b>21.7</b>	<b>20</b>	<b>20.4</b>	<b>20</b>	<b>20.7</b>

NOTES: 1. Md. = Median; Mn. = Mean

2. Median and mean values were determined for those states with continuing-education requirements.

3. Data unavailable for 1975.

western states consistently required the most continuing-education hours.

### Conclusion

This study illustrates the wide variance in state licensure requirements for nursing home administrators during the last 12 years. Although educational standards increased overall during this period, there are still differences in the minimum level of education required for licensure. Almost half of the states require a baccalaureate degree, yet many others still require only a high school diploma or equivalent. States are divided in their choice of requiring either annual or biennial licensure renewal. Although an increasing number of states require the completion of an administrator-in-training program, about one-third still have no such requirement. States with AIT programs have minimum training periods ranging from one month to one year. More than one-third of these states do not require certification of AIT preceptors through their licensure boards. And while the majority of states have continuing-education requirements, the number of hours required annually by individual states ranged from 10 to 36 during the period 1979-87.

The results of this study demonstrate the importance of the ACHCA's role in the creation of uniformly high standards by which administrators can be measured. Through its Code of Ethics, Standards of Practice, and Professional Certification Program, the ACHCA assures the delivery of quality care and the enhancement of quality of life for long-term care residents.

### REFERENCES

- American College of Nursing Home Administrators. *Summary of States' Licensure Requirements for Nursing Home Administrators*. Silver Spring, Maryland: 1975.
- Foundation of the American College of Nursing Home Administrators. *State Licensure Requirements for Nursing Home*

January 25, 1989

FACT SHEET

BOARD OF NURSING HOME ADMINISTRATORS  
PROPOSED LEGISLATION (HB0211)

Intent of Legislation

The current statutes provide for licensing based on either experience or education, but is not clear as to both being required. For some time the Board has been requiring both experience and education. (REF: 37-9-301(b), MCA) (Attached)

In order to clarify the statutes and avoid legal confrontation, the Board, at its last meeting, proposed legislation. The need for such legislation is further emphasized by recent federal programs. This federal legislation could result in higher standards being imposed on state health care licensing boards.

National Groups Backing Increased Standards

The following groups have reached a consensus for regulations to comply with OBRA.

National Citizen's Coalition for Nursing Home Reform:

A national nonprofit membership organization formed to improve the long-term care system and the quality of care for nursing home residents.

American Health Care Association: One of the largest national organizations which represents nursing homes. Membership exceeds 9,000 Long-Term Care Facilities, which care for over 950,000 patients each day. This organization is also a federation of State Health Care Associations.

American Association of Homes for the Aging: A national nonprofit organization represents not-for-profit homes, housing, health-related facilities, and community services for the elderly.

American College of Health Care Administrators: A nonprofit international professional-membership society for long-term health and residential care administrators designed to promote preserve and sustain the well-being of the aged and chronically ill.

American Association of Retired Persons

National Association of Boards of Examiners of Nursing Home Administrators

EXHIBIT 3  
DATE 1-25-89  
HB \_\_\_\_\_

Proposed Standards (Consensus):

- 1) As of January 1, 1994, all people applying for initial licensure as nursing home administrators must have a baccalaureate degree; (This is the reason for the wording "...including a baccalaureate degree". At this time, Montana does not require a baccalaureate degree, and will not require such a degree unless required by HFCA.)
- 2) As of January 1, 1994, all entry level administrators must complete an Administrator-in-Training program, academic-based practicum in long-term care facility, or have related health care management experience before initial licensure; (At this time, Montana does not have an Administrator-in-Training program, but has statutory authority to institute such a program REF: 37-9-301(b).)
- 3) As of January 1, 1991, all people applying for initial licensure must demonstrate knowledge in the principal domains of practice as evidenced by passage of a standard national examination; (Montana gives the National Association of Boards of Examiners for Nursing Home Administrators Examination (NAB), which is the standard national examination.)
- 4) As of January 1, 1990, people applying for licensure must submit personal character information including an affidavit as to whether or not the applicant has ever been subject to disciplinary proceedings by any professional body or licensure board in any state and whether or not the applicant has been convicted of a felony or misdemeanor under state or federal law; (Montana uses a statement in the application form, which must be signed, stating the above. Also, we require three letters of reference to be submitted with the application.)
- 5) Beginning in 1990, state licensing boards must file an annual report with the Health Care Financing Administration. (This board has not received information regarding this report as of this date.)
- 6) As of January 1, 1991, administrators will be required to complete a minimum average of 20 clock hours of continuing education related to the domains of practice; (Montana requires 25 clock hours of continuing education for both active and inactive licenses per year.)
- 7) As of January 1, 1991, all state licensure boards must have a written policy for nursing home administrator licensure reciprocity/endorsement. (At the present time, we do not have formal signed reciprocity/endorsement agreements between states.)

1424 16th Street, N.W.  
Suite L2  
Washington, DC 20036  
202-797-0657

# NURSING HOME REFORM

Elma Holder, Executive Director  
Betty Hamburger, President

July 27, 1988

TO: Campaign for Quality Care

FROM: Nursing Home Administrator Standards Work Group\*

RE: Sign-ons to Recommendations to HCFA

Enclosed are the recommendations adopted by the Nursing Home Administrator Standards Work Group to forward to HCFA for its consideration in writing regulations to comply with OBRA. We need to hear from you by Monday, Aug. 8, if you can sign on to the recommendations.

The Work Group decided to use a format similar to the Consensus and Supplemental approach the Campaign for Quality Care used last year in making recommendations to Congress on nursing home reform. We present several types of options for you to consider before signing on:

(1) Consensus positions (with comments that augment them) on which all work group members agreed. You may sign on to these individually.

(2) Supplemental positions which generally conform to the consensus but vary in the level of detail recommended or stringency of the requirement. If you agree with the supplemental, you may sign on to it in addition to or instead of the consensus.

(3) Alternative positions are presented on one issue (Interagency Reporting) on which no consensus was reached. You may sign on to one.

(4) Additional supplemental positions are presented on which there was no consensus in the work group and no alternative positions were presented. You may sign on to any of these.

To sign on, call Janet Wells at NCCNHR, 797-0657, by noon, Monday, August 8, with the consensus, supplemental, alternative and additional supplemental positions you endorse.

---

\* Work Group members are Ann Tourigny, ACHCA, chair; Joel Mandelman, AHCA; Susan Weiss and Evvie Munley, AAHA; Bob Elliott and Jerry Miller, NAB; Bente Cooney, NCPSSM; Deidre Rye, Northern VA Ombudsman, and Janet Wells, NCCNHR.

## Recommendations for Nursing Home Administrator Standards

The following recommendations are proposed as the minimum national standards for nursing home administrators:

### 1. BACCALAUREATE DEGREE

#### Consensus (No Supplemental)

As of Jan. 1, 1994, all persons applying for initial licensure as nursing home administrators must have a baccalaureate degree.

Comment: Current educational requirements would stand until Dec. 31, 1993. State licensure boards would be responsible for determining curricular requirements; however, coursework should include content inherent to long-term care administration.

### 2. AIT OR OTHER EXPERIENCE

#### Consensus

As of Jan. 1, 1994, all entry-level administrators must complete an Administrator-in-Training (AIT) program, academic-based practicum in a long term care facility, or have related health care management experience before initial licensure.

Comment: Under the guidance of a state-approved preceptor, the AIT/practicum student would gain practical experience in the underlying knowledge, skills, and abilities that are essential to ensure competency as a nursing home administrator. Specifically, content should include but is not limited to the following areas: general administration; patient/resident care; personnel management; financial management; marketing, public/community relations; physical resource management/safety, and governance/regulations, which are delineated in the Role Delineation Study of 1986 and amplified in the Standards of Practice for Long Term Care Administrators. Exposure to administrative ethics, judgment/decision-making, and leadership skills should be encouraged during the AIT program/practicum.

#### Supplemental Position

a. Persons applying for initial licensure would have to have one of the following:

- A minimum of 1,000 hours in an AIT program.
- Clinical experience in a long term care facility as part of the applicant's degree program.
- Two years experience in a long term care facility either in a management or supervisory position.

b. States would be required to set standards for preceptors, including at least 10 hours of continuing education related to their role as preceptors.

### 3. NATIONAL EXAMINATION

#### Consensus

As of Jan. 1, 1991, all persons applying for initial licensure must demonstrate knowledge in the principle domains of practice as evidenced by passage of a standard national examination.

Comment: Content for the standard national examination will be determined by a role delineation or job analysis study with input from representatives of the healthcare professions, state nursing home licensure and certification agencies, state nursing home licensing boards (including at least one member representing the general public), professional associations of nursing home administrators, provider organizations and consumer groups. The minimum passing score will be set at a pass/fail level established in a manner that is generally accepted in the psychometric community as fair and reasonable. The overall score as well as scores in the individual domains will be made available to examinees. In addition, states may require applicants to demonstrate knowledge of state laws and regulations through taking a state examination or through other methods.

#### Supplemental

- a. Areas on which first-time applicants will be examined will include residents' rights and quality of life.
- b. States must require applicants to demonstrate a knowledge of state laws and regulations through a written examination or other methods.
- c. The requirement for states to accept a minimum passing score established by the national examining service shall not preclude states from establishing higher passing scores.

### 4. EVIDENCE OF MORAL CHARACTER

#### Consensus

As of Jan. 1, 1990, all persons applying for licensure must submit personal character information including an affidavit as to whether or not the applicant has ever been subject to disciplinary proceedings by any professional body or licensure board in any state and whether or not the applicant has been convicted of a felony or misdemeanor under state or federal law.

#### Supplemental

When the registry established by the Medicare and Medicaid Patient Abuse Act of 1987 is fully operational, licensing boards shall be required to contact the Bureau of Health Professions to assure that applicants have not been reported to the registry.

## 5. STATE LICENSING BOARD REPORT

### Consensus

Beginning in 1990, state licensing boards must file an annual report with HCFA.

Comment: The report must include data relative to the number of meetings held, attendance records including quorum counts, how the board composition complies with requirements in the Code of Federal Regulations (Sec. 431.707), and a summary of activities.

### Supplemental

a. The annual report licensing boards file with HCFA should include the following:

- The number of investigations undertaken.
- The number of cases referred for a hearing.
- The number of cases closed without investigation.
- The number of disciplinary actions taken, specified by type of action.
- The number of times the board met and the percentage of members present at each meeting; whether a quorum was present.
- Actions taken during the year to comply with 42 CFR § 431.713 requiring continuing study and improvement of licensing standards and procedures for enforcing them.

b. Based on these reports, which shall be made available to the public, HCFA shall conduct at least five look-behind surveys annually of administrator licensing boards to determine whether the state is in compliance with all federal regulations regarding licensing of administrators. Failure of the board to perform its responsibilities should subject the state to loss of federal financial participation.

## 6. CONTINUING EDUCATION

### Consensus (No Supplemental)

As of Jan. 1, 1991, administrators will be required to complete a minimum average of twenty (20) clock hours of continuing education related to the domains of practice (see #2 above) for each year of the licensing period.

Comment: Opportunities for continuing education must be available from a variety of sources and settings that demonstrate expertise in long term care.

## 7. RECIPROCITY OR ENDORSEMENT

### Consensus

As of Jan. 1, 1991, all state licensure boards must have a written policy for nursing home administrator licensure reciprocity/endorsement.

Comment: State licensing boards should be encouraged to develop comparable policies for recognizing administrator competency. For example, Professional Certification as a Nursing Home Administrator, personal interviews with relocating administrators, establishment of minimum passing scores on existing licensing examinations, state laws and regulations examination, and minimum education requirements could be considered in establishing a reciprocity/endorsement policy.

## RECIPROCITY OR ENDORSEMENT (cont.)

### Supplemental

If licensure reciprocity or endorsement is supported, regulations should specify that (1) the licensing board must document that the applicant meets minimum federal and state qualifications for licensing, including requirements in these regulations related to initial licensing, and (2) the applicant must demonstrate a knowledge of state laws and regulations. These requirements are not intended to preclude states from requiring administrators to meet higher standards than those set by federal law.

## 8. INTERAGENCY REPORTING

OBRA requires that after Oct. 1, 1990, HCFA and state facility licensure and certification agencies report administrators to the administrator licensing board when "a nursing facility has provided substandard quality of care." Two alternative positions are presented on this issue:

### Alternative #1

As of Jan. 1, 1991, HCFA and the state survey agencies must report to the state nursing home administrator licensing board when a nursing home is out of compliance with the Governing Body and Management Condition of Participation. The licensing board will be required to review the case within 6 months of the report.

### Alternative #2

a. The requirement shall be effective Oct. 1, 1990.

b. The regulations should establish that the reporting requirement requires a reciprocal action on the part of the licensing board to investigate the administrator within the specified time frames.

c. HCFA should establish a definition of "substandard care" that includes: conditions that immediately jeopardize the health, safety, welfare and rights of residents; being out of compliance with one or more conditions of participation on three or more consecutive surveys, or any finding for which a sanction (denial of payment, placement under temporary management, closure or a civil monetary penalty for a serious violation) is imposed.

d. HCFA should require licensure and certification agencies and administrator licensing boards to develop an agreement regarding:

- the maximum time limit after a finding of substandard care for the licensure and certification agency to report to the licensing board;
- time frames for the licensing board to conduct an investigation, provide the administrator an opportunity to respond to charges, determine whether a disciplinary action is appropriate, and implement its decision. In no case should the entire process take more than 6 months; in cases in which there is an immediate threat to resident health, safety, welfare and rights, no more than three months. The same time frames should be applicable to all complaints regarding administrators, regardless of source.



INTERAGENCY REPORTING (cont.)

e. The administrator licensing board should be encouraged to enter into an agreement with the facility licensure and certification agency or another agency, such as the state Medicaid fraud and abuse agency or the attorney general, to coordinate investigations and discipline of administrator malfeasance.

ADDITIONAL RECOMMENDATIONS

The following are supplemental positions which were not addressed in the consensus:

9. MORAL CHARACTER AND SUITABILITY

Supplemental

investigation of and

The following are grounds for disciplinary action against a licensed administrator:

- Acting in a manner inconsistent with the health, safety, welfare and rights of residents, including impaired ability to safely and effectively operate a nursing home because of alcohol or drug abuse.

- Being reported to the licensing board by the state office of facility licensure and certification for abuse, neglect or theft against residents, as required in sec. 4212(a)(1)(C) of OBRA, as amended.

10. LICENSING BOARD MEMBERSHIP

Supplemental

The legislative history of the 1967 law which created the nursing home administrator licensing board indicates the law's sponsors intended for boards to have public members. In a speech introducing the bill, Senator Kennedy said, "It [H.R. 12080] would require states to establish a board of individuals representative of the professions, occupations and institutions directly concerned with the care and treatment of the chronically ill and infirm elderly, as well as of the public." However, HCFA has never required public membership by regulation and many state boards do not have public members. The regulations should be amended to require that at least 20 percent of seats on the board, or two seats, whichever is greater, be reserved for members of the public.

11. LAPSED LICENSES

Supplemental

Administrators whose licenses have lapsed or been suspended or revoked should be required after July 1, 1989, to meet the new licensing requirements in these regulations as they become effective.

nursing home residents is kind, caring staff.) The film was prepared by the Illinois Department of Health, and is available for rental or purchase in video or 16-millimeter formats from Terra Nova Films, 9848 South Winchester Avenue, Chicago, IL 60643 (312) 881-8491.

New federal standards for nursing home administrators discussed

A major focus for the Pubnet members was a provision of the Nursing Home Reform Amendments of 1987 -- passed by Congress last December -- which is sure to have a substantial impact on NHA boards. The amendments require that the Medicare program develop minimum standards for NHA qualifications by March 1, 1989. Right now, the Campaign for Quality Care, coordinated by the National Citizens' Coalition for Nursing Home Reform with support from AARP is preparing recommendations on these regulations and is very interested in public member input. The issues discussed at the Pubnet meetings were:

- Minimum educational qualifications, including degree level, specialized degrees or coursework, and internships,
- Minimum state and federal examination requirements, including content and passing score,
- Continuing education, including hours, type of coursework, and re-examination requirements,
- Procedures to investigate allegations of unprofessional conduct and to discipline administrators guilty of willful misconduct or poor resident care,
- Standardization to enable states to grant reciprocity and create an interstate record of administrators who are in good standing or who have been disciplined by their state boards, and
- Reforms in administrator licensing systems.

Innovations and ideas

Pubnet members came together to share not only the problems they face but some of the solutions their states have to offer. One of the best was a Nursing Home Report Card. In Nevada, the State Health Division releases a helpful consumer flyer: a "Nursing Homes Compliance Report," which lists all the licensed homes by name along with any

serious violations (for example: nursing, infection control, dietetic services) and the date, as well as when any provisional licenses have been issued.

#### Future directions

Participants at the Washington, D.C. meeting made these suggestions for future efforts to help public members:

- Hold regional gatherings of all public members, including those on other health boards as well as NHA boards;
- Have AARP volunteers attend board meetings on a walk-in basis;
- Encourage excellence by sponsoring a nursing home or nursing home administrator of the year award.

Seattle participants offered these ideas:

- Sponsor statewide awards of excellence for nursing homes;
- Begin a cooperative effort between public members and volunteers on AARP's state legislative committees;
- Continue meeting with members of other NHA boards to improve information sharing;
- Increase public member awareness of AARP programs and activities.

#### SPECIAL BULLETIN

##### Standards Work Group submits recommendations on NHA regulation to Medicare

Since the Pubnet meetings were held, the NHA Standards Work Group completed its recommendations on what standards Medicare should adopt for regulating nursing home administrators. The group consensus was submitted to the Health Care Financing Administration August 8. On some issues, such as the baccalaureate degree minimum and mandatory continuing education, the group was in unanimous agreement. In other areas, it submitted supplemental or alternative positions. There was least consensus on a proposed requirement to report administrators to the licensing board when the facility had provided substandard care.

The work group included representatives from the American College of Health Care Administrators, the American

Health Care Association, the American Association of Homes for the Aging, the National Association of Boards of Examiners of Nursing Home Administrators, and the state ombudsmen.

A copy of the group report is attached to this newsletter. Pubnet would still like to learn your reactions to any or all of the recommendations. Let us know what you think and we'll share it with the rest of the Pubnet network.

# **NAB's Recommendations**

## **RE: HCFA STANDARDS**

At the February 29 meeting of the full group, six working subgroups were formed to develop specific recommendations for report to the whole group. The topics were nurse aide training, nurse aide registry, assessment, enforcement, mental health and administrator licensure. President Bob Elliott and Jerry Miller serve on the administrator licensing subgroup.

At the first meeting of the administrator licensure group on March 15, NAB representatives suggested that the purpose should be to answer the question "What did Congress want the Secretary to do when it passed the law saying that the Secretary shall develop standards to be applied in assuring the qualifications administrators of nursing facilities." NAB suggested three general areas for consideration: Initial licensure requirements, accountability and continued competency. The group then identified specifics in each category and were to get feedback from the groups they represented.

These items were discussed in detail at the March meeting of NAB's Executive Committee, which developed the following preliminary recommendations:

1. Baccalaureate degree required for all entry level administrators by 1994.
2. A mandatory Administrator-In-Training (AIT)/Practicum program by 1995.
3. Mandatory national examination and mandatory state examination.
4. At least three (3) notarized character references required of all applicants.
5. States required to accept as the minimum passing score that pass/fail level which has been established by NAB in a manner that is generally accepted in the psychometric community as being fair and reasonable.
6. States required to report scores to candidates in all of the domains of practice.
7. A list of mandatory standards for professional performance, discipline and sanctions to be developed as a basis for regulations. It is recommended that these standards be incorporated into the federal survey booklet and inspectors be required to report uncorrected violations to state licensure boards. Costs for disciplinary actions to be shared by state and federal regulatory agencies.
8. States must require annually for licensure a minimum of twenty (20) clock hours of continuing education related to the domains of practice. Criteria for approval of continuing education programs to be developed.
9. States must file an annual report with HCFA disclosing a summary of yearly board activities.

We were anxious to see what the reactions would be to these recommendations. Our HCFA contact said his reaction was positive. At the meeting of the full group on April 27, Elma Holder (Executive Director of the National Citizens Coalition) who was presiding at the meeting was very complimentary on the work done by NAB's Executive Committee.

The next meeting of the working subgroup was on May 9, at which time there was general acceptance of NAB's preliminary recommendations. Most of the time was spent clarifying the wording and developing a brief explanation. Some wanted to add a recommendation on reciprocity but NAB was not in favor of such an addition because 1) the issue is too complex and 2) the subject does not fall within the Congressional mandate to develop standards "to assure the qualifications of administrators."

The recommendations are now being written up in their expanded form for a report to the full group at its next meeting on May 25 and will be ready for presentation to the Board in Baltimore for full discussion.

MONTANA HEALTH CARE ASSOCIATION  
ADMINISTRATOR LICENSURE SURVEY

EDUCATION:

- \* 1. Montana law provides that licensed nursing home administrators be at least high school graduates. Do you feel that additional formal education should be required for licensure?

24 Yes 77.4% 7 No 22.6%

If Yes:

What educational level do you feel should be required:

50% 12 two years of college

50% 12 college degree

       more than 4 years of college

       other: \_\_\_\_\_

Do you believe the required formal education should be in a particular field?

\* 91.7% 22 Yes 8.3% 2 No

If yes, what field should be required?

18 Hospital Administration

21 Nursing Home Administration

17 Business Administration

10 Accounting

13 Public Health / Public Administration

14 Nursing

Other (specify): .....

**EXPERIENCE:**

2. Do you feel that the Board of Nursing Home Administrators should require experience in the long term care field before a candidate is eligible to take the exam?

71% 22 Yes

29%      9      No

**If yes, please reply below:**

45.5% 10 The current requirement that 2 of the last 4 years must be spent in an administrative capacity is adequate.

27.3%      6 - 1 year

13.7% 3 - 6 mos. I would prefer a requirement of \_\_\_\_\_  
(amount of time)

be spent in an administrative capacity in a nursing home before licensure.

\_\_\_\_\_ Other: 1 - look at background  
5 - AIT program (some of these overlapped  
with 6 mos. or 1 year of experience)  
\_\_\_\_\_

3. Do you feel that other health care field experience (not limited to long-term care) should also qualify?

83.9%      26 Yes      16.1%      5 No

If yes, in your opinion what additional health care fields should qualify? (Please list) hospital, home health, hospice,  
regulatory agencies, nursing, pharmacy, PT, OT, speech therapy,  
public health, lab, clinic, social work, any health related  
management experience.

4. Do you feel that other experience (other than health care) should also qualify? If so, please list what other types of experience you feel would be appropriate qualifications:: \_\_\_\_\_

 8 - yes      13 - no

Any business, management or supervisory experience.

5. Currently it is required for licensure that 2 of the last 4 years experience be in a hospital or nursing home. Do you feel this requirement is necessary?

29%      9 Yes      71%      22 No



Title for fiche:

MONTANA legislature. Abuse, Human  
Services and Aging Committee.  
51st legislature. 1989

Continuing

If no, which of the following do you feel is appropriate?

2 No nursing home or hospital experience

3 6 months administrative experience

7 1 year administrative experience

12 A formal AIT program in lieu of experience

1 Other: degree but not experience

\*some respondents gave more than one option, such as 1 year experience OR a 1 year AIT program

#### ADMINISTRATOR IN-TRAINING (AIT) PROGRAMS:

4. Montana does not currently make provision for administrator in training programs to substitute for some or all of the education and work experience requirements. Do you believe that AIT programs should be encouraged and utilized to help determine eligibility to take the nursing home administrator licensure exam?

24 Yes

5 No

If yes, answer the following:

a. Do you believe that your facility could afford to utilize an AIT program?

12 Yes

14 No

b. Do you think such a program should require:

14 6 months training

11 1 year's training

1 2 years training

Other (specify): .....

c. Other comments about ALT programs: .....

Board should develop guidelines and then facilities should  
develop their own AIT programs but get board approval of such  
programs.

**GENERAL:**

5. Do you feel that the requirements for licensure should include:

4 educational requirement only

3 work experience requirement only

\* 22 a combination of education and work experience

8 education plus an AIT program

           other (specify): .....

6. Do you think licensure requirements are sufficient?

15 Yes

15 No

If no, what do you see as the biggest problem with the current requirements? Several indicated the need for a degree; many indicated the need for recognition of AIT programs; several indicated that current experience requirement of 2 of last 4 years too stringent & keeping good people out.

7. In general, do you feel current requirements should be:

19.4% 6 relaxed

\* 41.9% 13 strengthened

35.7 % 11 maintained at the same level

3% 1 not sure

#### PERSONAL DATA:

8. Are you a licensed Montana administrator? 29 Yes 2 / No <sup>pending</sup>

If so, how long have you been licensed? see below years  
from 2 months to 17 years (average was 5.6 years)

9. At the time you were licensed, what was your education level?

1 high school

.....2..... post high school, but less than 2 years college

.....1..... 2 years college

6 more than 2 years college

\* 17 4 year degree in the field of: 4 - hospital administration;  
7 - Business Administration ; (specify)  
3 - Nursing 1 - Soc. 1 - ARRT  
5 Master's Degree in the field of: Business administration;  
hospital admin.; health planning; (specify)  
health services admin.; public health; social work  
Other (specify):

What was your nursing home related work experience?

10 None

16 Administrative capacity for \_\_\_\_\_ years

6 DON for \_\_\_\_\_ years

4 Other (specify): \_\_\_\_\_ for \_\_\_\_\_ years

Had you participated in an AIT program?

8 Yes

22 No

If yes:

What type of program, length of time, sponsor, etc.?

Programs ranged from 3 months to a year.

10. Prior to your licensure, how long did you wait for temporary  
licensure and being scheduled to take the exam? \_\_\_\_\_  
responses ranged from 2 weeks to 6 months

11. What other comments do you have on this subject?

Need reciprocity with other states; should waive requirements

for those administrators certified by the American College of

Nursing Home Administrators; licensure not necessary; fee

structure needs to be improved; standards should be upgraded;

AIT programs need to be provided for and guidelines established;

degree in nursing home administration should be offered in

Montana; upgrade but grandfather those currently licensed.

January 25, 1989

BOARD OF NURSING HOME ADMINISTRATORS

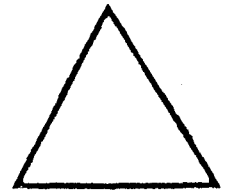
This licensing board has just completed the regular annual renewal cycle, deadline date, December 31, 1988.

The following is a breakdown of the total number of Nursing Home Administrators in the State of Montana as of this date:

Active licenses current through 12/31/89:	119
Inactive licenses current through 12/31/89:	<u>46</u>
Total number of current licensees:	165
Licenses Expired:	33
Licenses not renewed:	<u>29*</u>
Total:	<u>62</u>
Total number of files:	<u>227</u>
	---

\*Please note that the licensees that have not renewed (29) may still receive their 1989 license by paying the renewal fee plus the \$50.00 penalty fee, and by meeting the continuing education requirement of 25 hours per year. Therefore, it is possible that the total number of current licenses could be 194.

# MONTANA HEALTH CARE ASSOCIATION



## HOUSE BILL 211 Nursing Home Administrator Licensure

36 South Last Chance Gulch, Suite A  
Helena, Montana 59601  
406-443-2876

For the record, I am Rose Hughes, Executive Director of the Montana Health Care Association, representing 80 of Montana's 93 skilled and intermediate care facilities.

We oppose HB 211 as being unnecessary, costly, and bearing no relationship on patient care in our facilities:

We judge all legislation on three criteria:

1. Is there a need?
2. What is the cost?
3. What is the impact on patient care?

I'll go through these one at a time.

### 1. IS THERE A NEED?

There is no need for this legislation that we are aware of. There is no evidence that the administrators of Montana's nursing homes are not doing a good job; and there is no evidence that administrators without a degree function any less effectively than those with degrees. There are no more deficiencies in facilities with non-degreed administrators than in those whose administrators have a degree. The Condition of Participation dealing with Administration and Management of a facility is not found out of compliance with any greater frequency in facilities whose administrators do not have a degree than those that do. This Board of Nursing Home Administrators has dealt with no more complaints or disciplinary actions regarding administrators without degrees than with.

It should also be noted that there is no degree requirement for hospital administrators, nor do they even have to be licensed.

### 2. WHAT IS THE COST?

Any time the qualifications for licensure are raised, the pool of applicants for a job is reduced. The higher qualifications and smaller pool of competing applicants leads to the need to offer a higher wage. There is no doubt that this proposal will push up the cost of hiring administrators in some of our facilities. We have presented a proposal to the Legislative Appropriations Subcommittee on Human Services outlining \$15 million of new costs

to nursing homes resulting from new regulations placed on the industry. Those estimates do not include the costs associated with this bill. Should this bill pass, we will ask that committee for additional funds to pay for it.

3. WHAT IS THE AFFECT OF THIS LEGISLATION ON PATIENT CARE?

We do not believe this legislation will improve patient care. The medical care in our facilities is overseen by a Medical Director who is a physician, in addition to the attending physicians of each of the patients. The nursing care in the facilities is overseen by the Director of Nurses, who must be an R.N. Facilities are required to have appropriately licensed staff as consultants in the dietary, pharmacy, medical records, social services, and activities areas. The Department of Health inspects all of these areas as well as the "Management" area of the facilities.

No problems have been identified in patient care areas that can be attributed to whether or not the administrator has a bachelor's degree.

Current law gives the Board the ability to establish training requirements for nursing home administrators - or to allow an applicant the opportunity to present evidence "satisfactory to the Board of sufficient education, training, or experience to administer, supervise, and manage a long term care facility." This bill mandates both education and experience and would not allow outstanding experience to substitute for the educational requirement.

I urge your "do not pass" recommendation on HB 211, as a piece of legislation that is unnecessary, costly, and does nothing to improve patient care.



*Administrator  
Signature*

**An Interim Report on the 1988  
Test Development and Standard Setting Activities  
and a  
Statistical Summary for the NAB  
Nursing Home Administrators  
Licensing Examination Program**



**Prepared by PES  
for the November 1988  
NAB Board of Governors Meeting  
Mesa, AZ**

**AN INTERIM REPORT ON THE 1988 TEST DEVELOPMENT AND STANDARD SETTING ACTIVITIES  
AND A STATISTICAL SUMMARY FOR THE NATIONAL ASSOCIATION OF BOARDS OF EXAMINERS  
FOR NURSING HOME ADMINISTRATORS LICENSING EXAMINATION PROGRAM**

**I. General Introduction**

The purpose of this interim report is to describe the test development and standard setting activities conducted in 1988 in connection with the NAB examination program. The final section of this report presents a statistical summary of 1987 and 1988 NAB test results and an assessment of the psychometric characteristics of recent NAB tests. PES will submit a complete annual report to NAB summarizing 1988 examination program activities in June 1989.

**II. 1988 Test Development Activities**

**II.A. Introduction**

The procedures used by the NAB Examination Committee to prepare NAB licensure tests are consistent with the technical guidelines recommended by the American Educational Research Association, the American Psychological Association, and the National Council on Measurement in Education (AERA, APA, & NCME, 1985), and they adhere to relevant sections of the uniform guidelines on employee selection adopted by the Equal Employment Opportunity Commission, Civil Service Commission, Department of Labor, and Department of Justice (EEOC, CSC, DOL, & DOJ, 1978). All NAB tests are constructed to meet the test specifications in effect for the NAB examination program. These test specifications are based on the results of a 1986 role delineation study completed by NAB, with participation by the American College of Health Care Administrators (ACHCA), and conducted by PES. This role delineation study was undertaken to define the job-related activities, knowledge, and abilities underlying the work of an entry-level nursing home administrator. A panel of subject matter experts chosen by NAB generated the work-related activities and content areas of the role delineation under the guidance of professional staff from PES. The components delineated in the study were validated by a random sample of licensed nursing home administrators to demonstrate that the domains, tasks, and knowledge developed by the panel of experts were applicable to individuals from a variety of work settings and geographic locations.

The primary objective of the NAB examination program is to protect the public by ensuring that candidates for licensure demonstrate competence in content areas that are relevant to practice as an entry-level nursing home administrator. NAB and PES have instituted a number of review procedures to ensure that the NAB test contains items that are relevant to practice and are critical to assessing the competence of a nursing home administrator at entry-level. The items of the NAB item bank are classified by content experts from the NAB Examination Committee according to the content areas of the validated test specifications. To be accepted for inclusion in the NAB item bank, each item must also meet minimum standards concerning its importance and criticality to entry-level practice as a nursing home administrator. In addition, the item must assess an aspect of work in the field that is frequently performed at entry-level. All new items that fail to meet these standards are automatically rejected from the NAB item pool.

In addition to rigorous content validity reviews, all NAB items are evaluated by PES psychometricians and editors to make sure that they conform to accepted principles of test construction and to rules of grammar and style. Items that survive this screening procedure are placed in the NAB item pool for potential use on a subsequent NAB examination. Before any NAB test is administered, however, the test must be approved by the NAB Examination Committee. The NAB Examination Committee considers each item on the test and they rate the item according to the validity scales in effect for the NAB program. The Committee also checks the accuracy of the question during this review session. At the completion of the Committee review process, the test items undergo one additional round of psychometric and grammatical editing before a final form of the test is assembled.

## *II.B. Item Development Activities*

A NAB item development workshop was held in St. Paul, Minnesota, on October 5 and 6. The workshop was attended by nine item writers, two PES psychometricians, the NAB President, and the NAB Examination Committee Chairman. The item writers were selected from a list of nominees submitted by state boards of nursing home administration, and an attempt was made by the NAB Examination Committee Chairman and PES staff to choose individuals from a wide cross-section of work settings within the field of nursing home administration.

Prior to the workshop, item writers were sent instructional materials on item construction and they were each asked to prepare at home approximately 30 items in specific areas of the NAB test specifications. PES staff reviewed sample items from each participant in order to provide them with item development feedback before they completed the majority of their item writing assignments.

At the workshop, PES staff advised the group regarding item review procedures. Common item flaws were illustrated by PES staff and the participants were provided with techniques of rewriting flawed items to improve their psychometric quality. During this item review orientation session, a cognitive classification system based on Bloom's Taxonomy of Educational Objectives (Bloom et al., 1956) was introduced by PES staff. Participants were given examples of test items that were written at each of three levels: knowledge; interpretation; and problem-solving and evaluation. PES staff asked the item writers to classify all accepted items according to this cognitive taxonomy so that subsequent NAB tests could be constructed to include items at each of the three cognitive levels. Finally, PES staff outlined the procedures that the group should follow to rate items on the item validation rating scales.

The next 1 ½ days were spent reviewing newly written NAB items. The item writers were split into three item review teams to evaluate items. Items were distributed to item review teams to avoid the possibility that the author of an item would review or validate his/her own item. Questions that survived the small-group review and validation process were critiqued by PES psychometricians, and revisions were made at this stage to improve the psychometric quality of new items. Over 200 items were developed by the item writers who attended the item development workshop. Many of these items were written at the interpretation or problem-solving and evaluation cognitive level.

PES will continue to sponsor NAB item writing workshops at different locations throughout the United States to develop new items for the NAB item pool. PES believes that periodic item development activities are essential to the validity and continued success of the NAB examination program.

### *II.C. Test Review Activities*

The NAB Examination Committee developed two new forms of the NAB test in 1988. The procedures used by the NAB Examination Committee to evaluate and approve these examinations were modified this year to promote a more careful consideration of new NAB test forms.

Unlike former test review sessions where the Committee split into smaller groups to evaluate a portion of the new form of the NAB test, the full Committee assessed the entire examination during each test review session in 1988. This procedural change was instituted by NAB and PES to broaden the scope of Committee participation during the review meetings, and to ensure that all Committee members would have an opportunity to evaluate the appropriateness and accuracy of each item selected for the new NAB test form.

The second methodological change in test review activities involved the use of an item validation review box. The item validation review box was printed below each NAB test item on each Committee member's copy of the test. The box presented a number of validation rating scales regarding the importance, criticality, and accuracy of the test items. Committee members completed the various validation scale ratings during their evaluation of the new form of the NAB test, and only items with adequate ratings were accepted by the Committee. PES will maintain the Committee's rating data as part of the permanent documentation of the test items in the event that an item is challenged as to its validity or accuracy. PES has found that the item validation review box is an effective method of collecting evidence in support of the job-relatedness of items, and its use results in a more organized and efficient test review session.

### **III. 1988 Standard Setting Activities**

To assist NAB to establish a pass/fail level for the NAB examination in a manner generally accepted by the psychometric community as being fair and reasonable, PES proposed that NAB use a modification of the Angoff (1971) procedure to set an absolute passing point for the NAB test. The Angoff procedure requires judges who are familiar with the content and purpose of the examination to answer the following question for each test item: What proportion of candidates who are just barely qualified for licensure purposes will answer this item correctly?

The panel of judges convened to set a standard for the NAB test were selected from among the following groups within the field of nursing home administration: educators; entry-level practitioners; experienced practitioners; and state licensure board members. Each panelist was asked to review the NAB test specifications in advance of the workshop and to identify the job-related activities of an entry-level nursing home administrator that would best differentiate a barely qualified candidate from one who is below the standard for licensure.

At the workshop, judges spent the first portion of the meeting reviewing the NAB test form that would serve as the focus of the passing point decision. Panelists were then given a thorough orientation regarding the modified-Angoff procedure, including a review of the current NAB test standard and a summary of the results from previous NAB test administrations. The next stage of the workshop involved the compilation of the job-related characteristics of a nursing home administrator that could be used to distinguish a barely qualified candidate from one who is just below licensure level. After a careful consideration of the Angoff question, judges applied their notions of "barely qualified to receive licensure" to a set of sample NAB items. The ratings offered by panelists were reviewed by the panel, and discrepant ratings were discussed. Finally, the judges rated the NAB test using the modified-Angoff procedure.

PES will calculate the passing point on the basis of the panel's ratings and prepare a report for NAB regarding the consequences of applying the new passing point to subsequent NAB test results. The final report of this project will be submitted to NAB in the late spring of 1989.

#### IV. Statistical Summary of 1987 and 1988 NAB Test Results

##### IV.A. Passing Rates for 1987 and 1988 Candidates

Using 75% (or a raw score of 113) as the passing point for the NAB examination, the following tables present the pass/fail rates for candidates taking the NAB test for the first time (first-timers), candidates repeating the NAB test (repeaters), and all candidates tested in 1987 and 1988 (total sample). Data from candidates who failed to indicate whether they were first timers or repeaters are listed in the "No Response" column.

1987 Pass/Fail Rates				
Status	First-Timers	Repeaters	No Response	Total Sample
Pass (> 113)	378 (62.1%)	125 (47.7%)	1530 (53.6%)	2033 (54.5%)
Fail (< 113)	231 (37.9%)	137 (52.3%)	1327 (46.4%)	1695 (45.5%)
Total Sample	609 (100%)	262 (100%)	2857 (100%)	3728 (100%)

1988 Pass/Fail Rates				
Status	First-Timers	Repeaters	No Response	Total Sample
Pass (> 113)	822 (57.5%)	319 (44.8%)	565 (51.0%)	1706 (52.5%)
Fail (< 113)	608 (42.5%)	393 (55.2%)	542 (49.0%)	1543 (47.5%)
Total Sample	1430 (100%)	712 (100%)	1107 (100%)	3249 (100%)

As one might expect, NAB candidates taking the test for the first time pass the examination at a higher rate than candidates who have previously failed the test. The overall passing rates for the 1987 candidates and the 1988 candidates are approximately equal. The comparability of 1987 and 1988 passing rates suggests that the difficulty of NAB tests and the ability level of candidates in 1987 and 1988 were stable.

##### IV.B. Statistical Summary of Selected Demographic Variables

In addition to taking the NAB examination, candidates are asked to complete a background questionnaire. At the present time, it is not mandatory that the candidates fill out this questionnaire. These data represent the characteristics of those candidates who voluntarily completed the questionnaire. Approximately 70 percent of the candidates who took the examination in 1987 and 1988 completed the background questionnaire. The extent to which these data are representative of the characteristics of all candidates who took the NAB examination cannot be determined. The questionnaire administered with the 1987 and 1988 NAB tests consisted of 11 questions. This questionnaire has recently been revised, and candidate completion of the questionnaire will be mandatory beginning in January 1989.

Page 6  
missing

HIGHEST LEVEL OF EDUCATION VS. PERFORMANCE ON THE EXAM				
Education Level	No. of Candidates	Average Raw Score	Standard Deviation	Average % Score
Some High School	10	112.60	18.51	75.07
High School Graduate	556	108.70	14.65	72.47
Some College	847	111.26	13.20	74.18
College Graduate	2256	112.70	12.37	75.14
Masters Degree	1243	115.07	12.04	76.72
Doctoral Degree	87	112.69	12.63	75.13
Missing Data	1978	112.71	12.25	75.14
Total	6977	112.63	12.69	75.09

In general, scores on the NAB test were directly related to the amount of education completed by candidates. The score differences among educational levels were small. However, high school graduates obtained the lowest scores on the tests.

In summary, the demographic data collected from 1987 and 1988 NAB candidates support the validity of NAB testing program. The requirement that all NAB candidates complete the demographic questionnaire for subsequent administrations of the examination should yield data that will provide a clearer picture of the relationship between NAB test performance and candidate demographic characteristics.



## V. Psychometric Characteristics of 1987 and 1988 NAB Examinations

The following table presents a statistical summary of data for the four (4) most recent forms of the NAB test. Appendix 1 contains a glossary of the statistical terms used in this table.

LONGITUDINAL STATISTICS FOR NAB/NHA EXAMINATION				
MAY 1987 – OCT. 1988				
Date of Analysis	OCT 1988	MARCH 1988	NOV 1987	MAY 1987
Examination Code	6442401	6442301	6442201	6442101
No. of Candidates	59	578	516	838
Maximum Raw Score	150	150	150	150
Average Raw Score	110.42	109.83	113.17	111.18
Standard Deviation	13.25	12.61	12.16	11.62
Range of Raw Scores	81–136	60–140	58–140	53–142
Average Percent Score	73.62	73.22	75.44	74.12
KR 20 Reliability	.87	.85	.85	.83
SE Based on KR 20	4.80	4.86	4.73	4.79
Split-Half Reliability	.91	.86	.84	.84
SE Based on Split-Half Rel.	4.00	4.76	4.84	4.69

The average raw scores and standard deviations (a standard deviation is a measure of the amount of dispersion in the distribution of test scores) were quite comparable for these examinations. The range of raw scores differed from form to form; however, these variations were due to fluctuations in the number of candidates included in the analysis rather than to inherent differences among test forms. The average percent score is simply the average test score divided by the number of items on the test.

The final statistics in the table provide an estimate of the reliability of the NAB test forms. The KR 20 reliability estimate and the split-half reliability estimate yield evidence regarding the internal consistency of the NAB test forms. That is, these reliability statistics

address the extent to which the NAB examinations measured a homogeneous set of content areas. Both reliability estimates range from 0 to 1.00. The magnitude of the internal consistency reliability estimates observed for the 4 most recent forms of the NAB test indicates that these tests measured an extremely homogeneous behavior domain, that is, competence within the field of nursing home administration. As a general rule, reliability estimates of .80 or higher are recommended for credentialing programs. The reliability estimates noted for the NAB tests exceed this criteria.

The remaining two (2) statistics in the table (SE Based on KR 20 and SE Based on Split-Half Rel.) provide an estimate of the average amount of error associated with a NAB test score. The larger the standard error of measurement, the more error exists in a test score. The relatively small standard errors of measurement reported for the most recent forms of the NAB test suggest that these tests were very precise measures of entry-level ability within the field of nursing home administration.

In conclusion, an assessment of the psychometric characteristics of the four (4) most recent forms of the NAB test reveals the following: (1) the tests were very comparable with respect to typical performance and the dispersion of candidate scores; (2) the tests measured a relatively homogeneous set of behaviors; and, (3) scores derived from the NAB tests were relatively free of error.

## VI. References

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## APPENDIX I

### Glossary of Statistical Terms

#### For Table of Longitudinal Examination Statistics

**Maximum Raw Score** - The number of items in the test.

**Average Raw Score** - The sum of all scores divided by the total number of candidates who were tested.

**Standard Deviation** - An approximation of the average distance by which test scores differ in either direction from the mean test score.

**Range of Raw Scores** - The two raw scores that represent the lowest and highest scores in the distribution of test scores, respectively.

**Average Percent Score** - The result obtained by dividing the mean test score by the number of questions on the test, and then multiplying the quotient by 100.

**KR 20 Reliability** - The Kuder Richardson Formula #20 is a reliability estimate. This statistic provides an estimate of the consistency with which the test measures a common attribute of examinees. If the test is reliable, examinees who respond correctly to one set of items will respond correctly to other equivalent sets of test items. This statistic ranges from 0 to 1.00. For licensure tests, the KR 20 should be equal to or above .80. By squaring the KR 20 statistic, one can calculate the proportion of test score variance that is due to real differences in ability among candidates taking a test. For example, if the KR 20 is .90, 81% of the score variance would be due to real ability differences between candidates and 19% of the score variance would be due to chance factors (for example, guessing behavior, candidate fatigue, etc.).

**Standard Error (SE) Based on KR 20** - An approximation of the average amount of error in a candidate's test score. This error could serve to increase or decrease a candidate's score on the test. The formula for this statistic is presented below:

$$SE_{kr20} = \text{Standard Deviation} \times \sqrt{1-KR20}$$

As can be seen from this formula, the standard error based on KR 20 will be relatively small for a test that is reliable.

**Split-Half Reliability** - The correlation between scores on one half of the test and scores on the other half of the test. This reliability estimate also yields a measure of the internal consistency of the examination (see KR 20).

**Standard Error (SE) Based on Split Half Reliability** - An approximation of the average amount of error in a candidate's test score based on the split-half reliability of the test (see formula for Standard Error based on KR 20).

National Association of Boards of Examiners  
for Nursing Home Administrators

Licensure Information by State  
(compiled from 1986/87 Statistics)

State	Licensure Requirements Education	Renewal	AIT Training Period	*Cert	Examination Nat'l State	CEU Requi
ALABAMA	HS	yearly	none	---	yes yes	24/yr
ALASKA	BA/BS & 1 yr exp	every 2 yrs	1 yr	no	yes no	none
ARIZONA	AA	every 2 yrs	none	---	yes yes	50/2
ARKANSAS	AA or HS & AIT	yearly	1 yr	no	yes yes	20/yr
CALIFORNIA	BA/BS or exper	every 2 yrs	1000 hr	yes	yes yes	40/2
COLORADO	2 yrs college	yearly	1 yr	no	yes yes	none
CONNECTICUT	BA/BS & courses	yearly	1 yr	no	yes yes	none
DELAWARE	AA & 100 hrs	every 2 yrs	3-12 mth	no	yes yes	48/2
DC	BA/BS	every 2 yrs	1 yr	yes	yes no	none
FLORIDA	HS	every 2 yrs	1 yr	yes	yes yes	20/2
GEORGIA	BA	every 2 yrs	6 mth	yes	yes no	40/2
HAWAII	BA	every 2 yrs	1 yr	no	yes yes	none
IDAHO	BA/BS or HS + exp	yearly	1 yr	yes	yes yes	20/yr
ILLINOIS	BA or AA & exp	every 2 yrs	none	---	yes yes	36/2
INDIANA	AA, BA/BS or courses	every 2 yrs	4-9 mth	yes	yes yes	40/2
IOWA	AA in NHA	every 2 yrs	none	---	yes yes	36/2
KANSAS	60 cred hr or exp	every 2 yrs	6 mth	yes	yes yes	60/2
KENTUCKY	BA/BS & exp	every 2 yrs	none	---	yes no	50/2
LOUISIANA	AA or 60 hrs	every 2 yrs	6 mth	yes	yes yes	30/2
MAINE	2 yr college	yearly	6 mth	yes	yes yes	24/yr
MARYLAND	HS or equiv	every 2 yrs	1 yr	---	yes yes	31/2
MASSACHUSETTS	BA/BS	yearly	6 mth	no	yes no	30/2
MICHIGAN	BA/BS, RN, course, exp	every 2 yrs	none	---	yes yes	36/2
MINNESOTA	BA/BS w/courses	yearly	other	---	yes yes	20/yr
MISSISSIPPI	HS	every 2 yrs	6 mth	yes	yes yes	40/2
MISSOURI	Educ & exp pts	yearly	other	yes	yes yes	20/yr
MONTANA	BA/BS or AA w/exp	yearly	none	---	yes yes	25/yr
NEBRASKA	AA	yearly	6 mth	yes	yes yes	25/yr
NEVADA	HS	every 2 yrs	none	---	yes no	20/yr
NEW HAMPSHIRE	BA/BS	every 2 yrs	1 yr	no	yes yes	25/2
NEW JERSEY	BA/BS	yearly	1 yr	no	yes no	20/yr
NEW MEXICO	BA/BS	yearly	none	---	yes no	24/yr
NEW YORK	BA/BS & courses	every 2 yrs	9 mth	yes	yes no	72/2
NORTH CAROLINA	2 yr coll & courses	every 2 yrs	other	yes	yes yes	30/2
NORTH DAKOTA	AA	yearly	none	---	yes yes	25/yr
OHIO	BA/BS & courses	yearly	6-9 mth	no	yes yes	20/yr
OKLAHOMA	BA/BS or cert	yearly	none	---	yes yes	24/yr
OREGON	BA/BS	yearly	6 mth	yes	yes yes	60/2
PENNSYLVANIA	HS	every 2 yrs	none	---	yes yes	48/2
RHODE ISLAND	BA/BS & exp	yearly	2 mth	no	yes no	none
SOUTH CAROLINA	BA/BS & exp	every 2 yrs	none	---	yes yes	40/2
SOUTH DAKOTA	AA	yearly	6 mth	yes	yes yes	50/2
TENNESSEE	HS	yearly	1 yr	yes	yes no	18/yr
TEXAS	BA/BS	every 2 yrs	none	---	no yes	28/2
UTAH	BS in HCA	every 2 yrs	none	---	yes yes	40/2
VERMONT	AA/BA in HCA	every 2 yrs	none	---	yes yes	none
VIRGINIA	HS	every 2 yrs	1 yr	yes	yes yes	none
WASHINGTON	2 yrs college	yearly	6-24 mth	no	yes yes	54/3
WEST VIRGINIA	BA/BS	yearly	1 yr	yes	yes yes	30/2
WISCONSIN	Courses in LTC	every 2 yrs	none	---	yes yes	24/2
WYOMING	AA	yearly	6 mth	yes	yes yes	50/2

\* Are AIT Preceptors certified by the Board?

## VISITORS' REGISTER

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Rose Hughes	Mt. Alt Care Assn		X
Linda Kenneth	Missoula, MT	X	
LES CONGER	Belgrade, MT		
Keith W. Boone	Helena / Mt. Nurses Assn		
Dorothy A Bempart	Helena mt	X	
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