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mn.gov/boards/nursing-home/

#### AT A GLANCE

- The Board's main function is licensing Nursing Home Administrators.
- It also serves as the fiscal agent for the Administrative Services Unit (ASU)

#### **PURPOSE**

**BENHA**: The Minnesota Board of Examiners for Nursing home Administrators (BENHA) was established in 1970 under Minnesota Statutes 144A.19 – 144A.28 and Minnesota Rules 6400. The board is charged with the responsibility to act as the official licensure agency for nursing home administrators.

BENHA works to promote safe living and thriving environments for Minnesota elders and to promote strong families and communities. This is completed by having strong academic and preparatory requirements for Administrators.

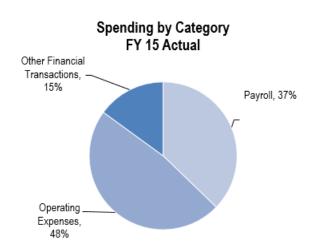
**ASU**: The Board of Examiners for Nursing Home Administrators has an additional budgetary responsibility as the fiscal agent for the Administrative Services Unit (ASU). The mission of the ASU is to:

- Provide centralized administrative services to 15 health-related licensing boards, and three boards funded out of the General Fund-- the Emergency Medical Services Regulatory Board (EMSRB), Board of Barbers, and Board of Cosmetology. The services provided include budgeting, fiscal analysis, human resources, payment transaction processing, purchasing and printing services, operations analysis, contracts, information technology, audit controls, research and policy analysis.
- Provide high quality services by having individually trained subject matter experts focused on specific administrative tasks
- Assist in the establishment of a consortium of boards to cooperate on matters of common interest
- Register individuals and organizations in the Volunteer Health Care Provider Program
- Process criminal background checks for new applicants.

The Board contributes to the following state wide outcomes:

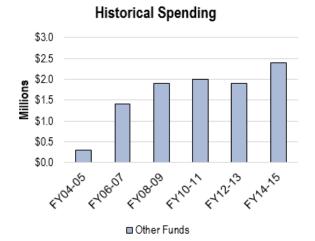
- All Minnesotans have optimal health
- People in Minnesota are safe
- Efficient and accountable government services

#### BUDGET



FY 15 includes spending for both Board of Nursing Home Administrators and the Administrative Services Unit

Source: BPAS



FY 06-15 includes spending for both Board of Nursing Home Administrators and the Administrative Services Unit

Source: Consolidated Fund Statement

**BENHA**: The Board is funded by licensure fees. Minnesota Statutes section 214.06, subdivision 1(a) compels the Board to collect fees in the amount sufficient to cover direct and indirect expenditures. Funds are deposited as non-dedicated revenue into the state government special revenue fund. From this fund, the Board receives a direct appropriation to pay for agency expenses such as salaries, rent, costs associated with disciplinary/contested cases and operating expenditures. It also pays statewide indirect costs through an open appropriation. Fees have not been raised since 1995. The Board receives no general fund dollars.

In addition to Board operations, licensure fees fund activities that support multiple boards and/or other agencies. Some of these are: the Administrative Services Unit (inter-board), Health Professionals Services Program (inter-board), Office of the Attorney General for legal services, and Criminal Background Check Program (inter-board).

**ASU**: All 18 health- and non health-related licensing boards fund the operations of Administrative Services Unit and the Criminal Background Checks Program. Fees generated by the boards are deposited in the state government special revenue fund. The Administrative Services Unit and the Criminal Background Checks Program receive a direct appropriation from the state government special revenue fund. The costs to fund the operations of these two programs are allocated to the boards using an agreed budget formulary.

#### **STRATEGIES**

**BENHA**: The eleven governor-appointed citizens serving on the Minnesota Board of Examiners for Nursing Home Administrators (BENHA) take serious the obligation to ensure that leaders of elder care campuses are sufficiently trained and held accountable for their actions without imposing unintended barriers or restrictions. The licensure of Nursing Home Administrators is a federal requirement impacting Medicare and Medicaid funding for facilities. BENHA is currently partnering with other state agencies to review credentialing for the long term care continuum, and engaged with national stakeholders on streamlining the portability of licensure.

Currently, the board is engaged in a four year strategic planning process. The four global goals relate to:

- Completion of new rules in FY 2017 and partner with academic and applicant stakeholders during implementation phase of those rules.
- Review of Housing Manager / Administrators Credentialing
- Implementation of practicum/field experience "train the trainer"
- Evaluation of experienced administrators' continued competency
- Review of board effectiveness of daily operations

**ASU**: The Administrative Services Unit (ASU) is a model for providing efficient and accountable government services. ASU is the centralized business office and provides subject matter experts on financial, human resource, contracting, and other common office services. This allows each board to focus their staff resources on public safety and board specific practices.

The ASU also operates the Volunteer Health Care Provider Program, which was created to allow liability insurance coverage for health care professionals providing care in community-based clinic settings. This program has grown significantly and eliminates a critical expense for many volunteering practitioners. The ASU also operates the Criminal Background Checks Program, which was created to process criminal background checks for all new health-related licensing board applicants.

The authorizing Minnesota statute for BENHA is found at: <a href="https://www.revisor.mn.gov/statutes/?id=144A&view=chapter#stat.144A.19">https://www.revisor.mn.gov/statutes/?id=144A&view=chapter#stat.144A.19</a>

The Minnesota Rules for BENHA are located at: https://www.revisor.leg.state.mn.us/rules?id=6400.5000

## **Expenditures By Fund**

<u></u>						
	Actual	Actual	Actual	Estimate	Forecasted	l Base
	FY14	FY15	FY16	FY17	FY18	FY19
1201 - Health Related Boards	952	1,441	1,335	4,415	2,088	2,088
2000 - Restrict Misc Special Revenue	0	0	0	5	7	7
2001 - Other Misc Special Revenue	3	2	2	1,088	200	200
Total	955	1,443	1,337	5,508	2,295	2,295
Biennial Change Biennial % Change				4,447 185		(2,255) (33)
Expenditures by Program				_		\ /.
Program: Nursing Home Admin Board Of	955	1,443	1,337	5,508	2,295	2,295
Total	955	1,443	1,337	5,508	2,295	2,295
Expenditures by Category				_		
Compensation	471	537	622	1,102	758	774
Operating Expenses	477	749	714	4,403	1,526	1,510
Other Financial Transactions	6	156	1	3	11	11
Total	955	1,443	1,337	5,508	2,295	2,295
		Т		П		
Full-Time Equivalents	6.9	6.8	8.2	9.5	9.5	9.5

1201 - Health Related Boards

	Actu FY14	al FY 15	Actual FY 16	Estimate FY17	Forecas FY18	t Base FY19
Balance Forward In	1,000	3,758	1,400	2,328	0	0
Direct Appropriation	3,742	2,255	2,365	2,062	2,062	2,062
Open Appropriation	7	9	17	23	24	24
Receipts	0	1	1	2	2	2
Net Transfers	(67)	(243)	(120)	0	0	0
Cancellations	0	2,939	0	0	0	0
Expenditures	952	1,441	1,335	4,415	2,088	2,088
Balance Forward Out	3,730	1,400	2,328	0	0	0
Biennial Change in Expenditures				3,356		(1,575)
Biennial % Change in Expenditures				140		(27)
Full-Time Equivalents	6.7	6.8	8.2	9.5	9.5	9.5

2000 - Restrict Misc Special Revenue

	Actual		Actual	Estimate	Forecas	t Base
	FY14	FY 15	FY 16	FY17	FY18	FY19
Receipts	0	0	0	5	7	7
Expenditures	0	0	0	5	7	7
Biennial Change in Expenditures				5		9
Biennial % Change in Expenditures						180

2001 - Other Misc Special Revenue

	Actual		Actual	Estimate	Forecas	t Base
_	FY14	FY 15	FY 16	FY17	FY18	FY19
Balance Forward In	471	468	771	888	0	0
Receipts	0	305	118	200	200	200
Expenditures	3	2	2	1,088	200	200
Balance Forward Out	468	771	888	0	0	0
Biennial Change in Expenditures				1,085		(690)
Biennial % Change in Expenditures				23,962		(63)
Full-Time Equivalents	0.2	0				

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## Nursing Home Administrators, Board of Examiners

**Budget Activity Narrative** 

Program: Board of Examiners for Nursing Home Administrators (BENHA)
Activity: Board of Examiners for Nursing Home Administrators (BENHA)

mn.gov/boards/nursing-home/

#### AT A GLANCE

#### Credentialing

- 895 Licensed Nursing Home Administrators (LNHA)
- 91,000 Minnesotans reside along the long term care continuum
- 67 New licensees
- 20 acting permits issued
- 10 Minnesota Accredited Centers of LTC Education
- 106 state jurisprudence exams
- 163 continuing education reviews and approvals
- 61 complaints received

Source: Annual QI Report for June, 30, 2016

#### **PURPOSE & CONTEXT**

The Minnesota Board of Examiners for Nursing Home Administrators (BENHA) was established in 1970 under Minnesota Statutes 144A.19 – 144A.28 and Minnesota Rules 6400. The board, which was originally created by federal mandate, ensures that nursing home administrators have the education and skills necessary to provide strong, safe communities for Minnesota's elders. We carry out this mission through regulation of the practice, education and licensure of practitioners, and investigation of complaints.

The BENHA has an additional budgetary responsibility as the fiscal agent for the Administrative Services Unit (ASU). The main purpose of the ASU is:

- To provide centralized administrative services to 15 health-related licensing boards, and three boards funded out of the
  general fund -- the Emergency Medical Services Regulatory Board (EMSRB), Board of Barber Examiners, and Board of
  Cosmetologist Examiners. The areas of administrative support oversight includes budgeting, fiscal analysis, human
  resources, payment transaction processing, purchasing and printing services, operations analysis, contracts, information
  technology, audit controls, research and policy analysis.
- In its twenty-second year, the ASU model has proven effective at using subject matter experts and a centralized business model to promote efficient and accountable government services.

#### SERVICES PROVIDED

The BENHA is required to set the standard for Nursing Home Administrator licensure in order for the state to receive Center of Medicare and Medicaid Service funds per federal guidelines. We accomplish this by:

- Maintaining educational standards for prospective and existing licensees
- Licensing qualified individuals so that Minnesotans seeking nursing home care will be able to identify those working in the field with skills necessary to provide services in compliance with Minnesota Statutes and Rules.
- Implementing disciplinary and compliance actions when licensees do not perform at a contemporary standard of practice.
- Educating the public on health-related professions, practitioners, and standards.
- Working with ten (10) approved colleges with Long Term Care Administration programs.

Currently, Minnesota has 895 licensed administrators that oversee the care provided to nearly 35,000 Minnesotans, residing in skilled nursing facilities. Resident safety is the primary focus working with all stakeholders. Research is very active at this time as it relates to leadership of long term care supports and services and its relationship to customer satisfaction. The board remains active with the National Association of Boards for Long Term Care Administrators (NAB) to ensure contemporary practice standards for Minnesotans.

BENHA initiated their last four year strategic plan in 2012 with most areas nearly completion. New goals and strategies are being identified for 2017 primarily in the areas of implementing the national portability of license or the Health Service Executive (HSE) credential. The HSE will be an advanced credential which will meet the current requirement for an administrator of record at a Minnesota skilled facility community. Additional goals include review of the long term care supports and services

credentialing, revising practicum and field experience guidelines, and coordination with other state agencies. The Board receives an annual statistical review in October of each year. This data is used to identify new initiatives or areas of concern. In 2016, rules were revised in the area of academic preparation for administrators. The board engages with many stakeholder groups to ensure administrative involvement in problem resolution.

#### **RESULTS**

Type of Measure	Name of Measure	Previous	Current	Dates
Quantity	Percent of license renewals completed online	85%	97%	FY 2014 & FY 2015
Quantity	Percent of initial license applications submitted online	44%	75%	FY 2014 & FY 2015
Quality	Percent of initial license applications approved within 48 hours of final submission	98%	98%	FY 2014 & FY 2015

The authorizing Minnesota statute for BENHA is found at: <a href="https://www.revisor.mn.gov/statutes/?id=144A&view=chapter#stat.144A.19">https://www.revisor.mn.gov/statutes/?id=144A&view=chapter#stat.144A.19</a>.

The Minnesota Rules for BENHA are located at: https://www.revisor.leg.state.mn.us/rules?id=6400.5000.

The Board operates under other Minnesota Statutes including Chapter 214, 13, and 16.

## **Expenditures By Fund**

	Actual	Actual	Actual	Estimate	Forecast	ed Base
	FY14	FY15	FY16	FY17	FY18	FY19
1201 - Health Related Boards	152	150	157	283	224	224
2000 - Restrict Misc Special Revenue	0	0	0	0	2	2
Total	152	150	157	283	226	226
Biennial Change Biennial % Change				138 46		11 3
Expenditures by Category						
Compensation	113	112	118	122	125	127
Operating Expenses	35	35	39	158	101	99
Other Financial Transactions	3	3	0	3	0	0
Total	152	150	157	283	226	226
Full-Time Equivalents	1.6	1.5	1.5	1.5	1.5	1.5

1201 - Health Related Boards

	Actu		Actual	Estimate	Forecas	
	FY14	FY 15	FY 16	FY17	FY18	FY19
Balance Forward In	0	102	0	59	0	0
Direct Appropriation	253	212	213	215	215	215
Open Appropriation	1	1	4	8	9	9
Net Transfers		(10)				
Cancellations	0	155	0	0	0	0
Expenditures	152	150	157	283	224	224
Balance Forward Out	102	0	59	0	0	0
Biennial Change in Expenditures				138		7
Biennial % Change in Expenditures				46		2
Full-Time Equivalents	1.6	1.5	1.5	1.5	1.5	1.5

2000 - Restrict Misc Special Revenue

	Act	Actual		Actual Estimate		Forecast Base	
	FY14	FY 15	FY 16	FY17	FY18	FY19	
Receipts	0	0	O	0	2	2	
Expenditures	0	0	0	0	2	2	
Biennial Change in Expenditures						4	

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## **Nursing Home Administrators, Board of Examiners**

**Budget Activity Narrative** 

Program: Board of Examiners for Nursing Home Administrators (BENHA)

Activity: Administrative Services Unit (ASU)

http://mn.gov/boards/asu/

#### AT A GLANCE

- Serves 18 heath and non-health related licensing boards
- Serves 187 state employees
- Serves 183 appointed board members
- Registered 24 Volunteer Health Care Provider facilities
- Registered 110 Volunteer Health Care Provider volunteers
- Processed over 795 purchase orders
- Processed over 9,669 vendor payments
- Processed over 7,518 revenue deposits
- Processed 1,575 criminal background checks

#### **PURPOSE & CONTEXT**

The mission of the Administrative Services Unit (ASU) is to:

Provide centralized administrative services to 15 health-related licensing boards and three non-health related licensing boards – the Emergency Medical Services Regulatory Board (EMSRB), Board of Barber Examiners, and Board of Cosmetologist Examiners. The services provided include budgeting, fiscal analysis, human resources, payment transaction processing, purchasing and printing services, operations analysis, contracts, information technology, research and policy analysis.

- Provide high quality services by having individually trained staff focused on specific administrative tasks.
- Assist in the establishment of a consortium of boards to cooperate on matters of common interest.
- Register individuals and organizations for the Volunteer Health Care Provider Program (VHCPP).
- Process criminal background checks on new applicants for the health-related licensing boards through the Criminal Background Checks Program (CBC).

#### SERVICES PROVIDED

In 1995 the Health Licensing Boards voluntarily and informally created the ASU to increase efficiencies among the Boards in performing their duties. The ASU was formalized in statute in 2011 (Minnesota Statutes Chapter 214.107).

The ASU is required to perform administrative, financial, and management functions common to all the boards using procedures that streamline services, reduce expenditures, target the use of state resources, and meet the mission of public protection. Specifically, the ASU processes payroll; pays invoices; records receipts; performs purchasing, contracting and grant functions; maintains fixed assets; prepares annual and biennial budgets, annual spending plans and fiscal notes; compiles financial reports; administers building leases; and performs human resource functions and labor relations.

ASU was recognized nationally for occupational governance by the PEW commission.

The ASU is funded by all the independent boards and consists of 7 FTE staff members who perform shared administrative and business services for all the boards. ASU also coordinates the Voluntary Health Care Provider Program (which provides malpractice coverage for physicians, physician assistants, dentists, dental hygienists, dental therapists, dental assistants, and nurses serving in a voluntary capacity at a charitable organization). The ASU also operates the Criminal Background Checks Program, which was created in FY 2015 to process criminal background checks for all new health-related licensing board applicants. All health boards must process criminal background checks on new applicants by FY 2018. ASU's annual budget is determined by the Executive Directors Forum. Oversight of ASU is assigned on a rotating basis to one of the health-related boards. The current ASU oversight board is the Minnesota Board of Examiners for Nursing Home Administrators. ASU is managed by the Executive Directors Forum's Management Committee.

The Executive Director's Forum holds monthly meets. The HLB's governance structure consists of an elected Chair, Vice-Chair who serves as chair of the Management Committee. Standing Committees include Policy Committee, MNIT HLB Governance Committee, Criminal Background Checks Program (CBC) and Health Professional Services Program (HPSP) Committees. Each Committee is comprised of one small, medium and large board member. An Office Manager also serves on the Management Committee.

- Responsibilities of the Management Committee include:
- Administering shared conference rooms and shared equipment, such as copiers
- Coordinating the boards' computer collaboration efforts
- Developing recommended policies and procedures for all boards, and reviewing best practices
- Oversight of the Administrative Services Unit

Responsibilities of the Policy Committee include:

- Making recommendations to the Executive Directors Forum on issues relating to public policy.
- Reviewing legislative proposals
- Making recommendations on legislative initiatives affecting all the boards
- Undertaking efforts to make investigative data more readily available to share among health boards

Responsibilities of the MNIT HLB Governance Committee include:

- Expanding the use of electronic communications in the provision of HLB services, this Committee is responsible for collaboration and coordination of MNIT projects and implementation of technological improvements for occupational licenses.
- Coordination of HLB's delivery of technology solutions and services.
- Coordination with the State of Minnesota's MN.IT's Enterprise solutions and services.

Responsibilities of the Criminal Background Checks Program (CBC) Committee include:

- Implementation of the CBC requirements per Minnesota Statute 214.075
- Coordination of an efficient and effective CBC system for health related professionals.

#### **RESULTS**

Type of Measure	Name of Measure	Previous	Current	Dates
Quantity	Number of Registered VHCPP Facilities	15	24	2013 & 2016
Quantity	Number of Registered VHCPP Clinics	73	110	2013 & 2016
Quantity	Number of Criminal Background Checks	0	1,575	2013 & 2016

The authorizing Minnesota statute for Administrative Services Unit is found at: <a href="https://www.revisor.mn.gov/statutes/?id=214.107&view=chapter#stat.214.107">https://www.revisor.mn.gov/statutes/?id=214.107&view=chapter#stat.214.107</a>

The authorizing Minnesota statute for Volunteer Health Care Provider Program is found at: https://www.revisor.mn.gov/statutes/?id=214.40&view=chapter#stat.214.40

The authorizing Minnesota statute for Criminal Background Checks Program is found at: https://www.revisor.mn.gov/statutes/?id=214.075&view=chapter#stat.214.075

**Expenditures By Fund** 

	Actual	Actual	Actual	Estimate	Forecaste	ed Base
-	FY14	FY15	FY16	FY17	FY18	FY19
1201 - Health Related Boards	800	1,291	1,178	4,132	1,864	1,864
2000 - Restrict Misc Special Revenue	0	0	0	5	5	5
2001 - Other Misc Special Revenue	3	2	2	1,088	200	200
Total	803	1,292	1,180	5,225	2,069	2,069
Biennial Change				4,309		(2,267)
Biennial % Change				206		(35)
Expenditures by Category				ı		
Compensation	358	425	504	980	633	647
Operating Expenses	442	714	675	4,245	1,425	1,411
Other Financial Transactions	3	153	1	0	11	11
Total	803	1,292	1,180	5,225	2,069	2,069
Full-Time Equivalents	5.3	5.3	6.6	8.0	8.0	8.0

1201 - Health Related Boards

	Actual		Actual	Estimate	e Forecast Base	
	FY14	FY 15	FY 16	FY17	FY18	FY19
Balance Forward In	1,000	3,656	1,400	2,268	0	0
Direct Appropriation	3,489	2,043	2,152	1,847	1,847	1,847
Open Appropriation	5	8	13	15	15	15
Receipts	0	1	1	2	2	2
Net Transfers	(67)	(233)	(120)			
Cancellations	0	2,784	0	0	0	0
Expenditures	800	1,291	1,178	4,132	1,864	1,864
Balance Forward Out	3,628	1,400	2,268	0	0	0
Biennial Change in Expenditures				3,218		(1,582)
Biennial % Change in Expenditures				154		(30)
Full-Time Equivalents	5.1	5.3	6.6	8.0	8.0	8.0

2000 - Restrict Misc Special Revenue

	Actual FY14 FY 15		Actual FY 16	Estimate FY17	Forecast Base FY18 FY19	
Receipts	0	0	C		5	5
Expenditures	0	0	С	5	5	5
Biennial Change in Expenditures				5		5
Biennial % Change in Expenditures						100

2001 - Other Misc Special Revenue

	Actual FY14 FY 15		Actual FY 16	Estimate FY17	Forecast Base FY18 FY19	
Balance Forward In	471	468	771	888	-	0
balance Forward in	471	400	771	000	U	U
Receipts	0	305	118	200	200	200
Expenditures	3	2	2	1,088	200	200
Balance Forward Out	468	771	888	0	0	0
Biennial Change in Expenditures				1,085		(690)
Biennial % Change in Expenditures				23,962		(63)
Full-Time Equivalents	0.2	0	0.0	0.0	0.0	0.0