

CERTIFICATION OF ENROLLMENT

SUBSTITUTE HOUSE BILL 1218

67th Legislature
2021 Regular Session

Passed by the House April 20, 2021
Yeas 96 Nays 2

**Speaker of the House of
Representatives**

Passed by the Senate April 10, 2021
Yeas 27 Nays 21

President of the Senate

Approved

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 1218** as passed by the House of Representatives and the Senate on the dates hereon set forth.

Chief Clerk

FILED

**Secretary of State
State of Washington**

SUBSTITUTE HOUSE BILL 1218

AS AMENDED BY THE SENATE

Passed Legislature - 2021 Regular Session

State of Washington 67th Legislature 2021 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Bateman, Simmons, Sells, Lekanoff, Peterson, Stonier, Davis, Taylor, Dolan, Orwall, Cody, Santos, Ortiz-Self, Fitzgibbon, Slatter, Bronoske, Callan, Valdez, Ramel, Riccelli, Macri, Goodman, and Harris-Talley)

READ FIRST TIME 02/12/21.

1 AN ACT Relating to improving the health, safety, and quality of
2 life for residents in long-term care facilities through emergency
3 preparedness, improvements in communications, resident information,
4 and notice of sanctions; amending RCW 18.51.009, 18.51.260,
5 74.42.420, 74.42.460, 70.129.020, 70.129.030, 70.129.040, 70.129.080,
6 70.129.090, 70.129.110, 70.129.150, and 70.129.180; reenacting and
7 amending RCW 70.129.010; adding new sections to chapter 18.20 RCW;
8 adding new sections to chapter 18.51 RCW; adding new sections to
9 chapter 70.97 RCW; adding new sections to chapter 70.128 RCW; adding
10 new sections to chapter 70.129 RCW; adding a new section to chapter
11 70.01 RCW; and creating a new section.

12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

13 NEW SECTION. **Sec. 1.** The legislature finds that:

14 (1) Residents in licensed long-term care facilities have been
15 disproportionately impacted and isolated by the COVID-19 pandemic and
16 over 50 percent of all COVID-19 deaths in Washington have been
17 associated with long-term care facilities;

18 (2) According to a University of Washington report, social
19 isolation creates a "double pandemic" that disrupts care and
20 exacerbates the difficulties of dementia, depression, suicide risk,

1 chronic health conditions, and other challenges faced by long-term
2 care residents and providers;

3 (3) A "digital divide" exists in many parts of Washington,
4 particularly for older adults of color with low incomes and those in
5 rural communities;

6 (4) Residents with sensory limitations, mental illness,
7 intellectual disabilities, dementia, cognitive limitations, traumatic
8 brain injuries, or other disabilities may not be able to fully
9 utilize digital tools which exacerbates their social isolation;

10 (5) Long-term care facilities already have the legal
11 responsibility to care for their residents in a manner and in an
12 environment that promotes the maintenance or enhancement of each
13 resident's quality of life. A resident should have a safe, clean,
14 comfortable, and homelike environment as detailed in chapter 70.129
15 RCW; and

16 (6) The COVID-19 pandemic has exposed systematic weaknesses in
17 the state's long-term care system and there is a need to enact
18 additional measures to protect and improve the health, safety, and
19 quality of life of residents.

20 NEW SECTION. **Sec. 2.** A new section is added to chapter 18.20
21 RCW to read as follows:

22 The department must require an assisted living facility that is
23 subject to a stop placement order or limited stop placement order
24 under RCW 18.20.190 to publicly post in a conspicuous place at the
25 facility a standardized notice that the department has issued a stop
26 placement order or limited stop placement order for the facility. The
27 standardized notice shall be developed by the department to include
28 the date of the stop placement order or limited stop placement order,
29 any conditions placed upon the facility's license, contact
30 information for the department, contact information for the
31 administrator or provider of the assisted living facility, and a
32 statement that anyone may contact the department or the administrator
33 or provider for further information. The notice must remain posted
34 until the department has terminated the stop placement order or
35 limited stop placement order.

36 NEW SECTION. **Sec. 3.** A new section is added to chapter 18.20
37 RCW to read as follows:

1 (1) The department shall require each assisted living facility
2 to:

3 (a) Create and regularly maintain a current resident roster
4 containing the name and room number of each resident and provide a
5 written copy immediately upon an in-person request from any long-term
6 care ombuds;

7 (b) Create and regularly maintain current, accurate, and
8 aggregated contact information for all residents, including contact
9 information for the resident representative, if any, of each
10 resident. The contact information for each resident must include the
11 resident's name, room number, and, if available, telephone number and
12 email address. The contact information for each resident
13 representative must include the resident representative's name,
14 relationship to the resident, phone number, and, if available, email
15 and mailing address;

16 (c) Record and update the aggregated contact information required
17 by this section, upon receipt of new or updated contact information
18 from the resident or resident representative; and

19 (d) Upon the written request of any long-term care ombuds that
20 includes reference to this section and the relevant legal functions
21 and duties of long-term care ombuds, provide a copy of the aggregated
22 contact information required by this section within 48 hours, or
23 within a reasonable time if agreed to by the requesting long-term
24 care ombuds by electronic copy to the secure email address or
25 facsimile number provided in the written request.

26 (2) In accordance with the federal older Americans act, federal
27 regulations, and state laws that govern the state long-term care
28 ombuds program, the department shall inform assisted living
29 facilities that:

30 (a) Any long-term care ombuds is authorized to request and obtain
31 from assisted living facilities the information required by this
32 section in order to perform the functions and duties of long-term
33 care ombuds as set forth in federal and state laws;

34 (b) The state long-term care ombuds program and all long-term
35 care ombuds are considered a "health oversight agency," so that the
36 federal health insurance portability and accountability act and
37 chapter 70.02 RCW do not preclude assisted living facilities from
38 providing the information required by this section when requested by
39 any long-term care ombuds, and pursuant to these laws, the federal
40 older Americans act, federal regulations, and state laws that govern

1 the state long-term care ombuds program, facilities are not required
2 to seek or obtain consent from residents or resident representatives
3 prior to providing the information required by this section in
4 accordance with the requirements of this section;

5 (c) The information required by this section, when provided by an
6 assisted living facility to a requesting long-term care ombuds,
7 becomes property of the state long-term care ombuds program and is
8 subject to all state and federal laws governing the confidentiality
9 and disclosure of the files, records, and information maintained by
10 the state long-term care ombuds program or any local long-term care
11 ombuds entity; and

12 (d) The assisted living facility may not refuse to provide or
13 unreasonably delay providing the resident roster, the contact
14 information for a resident or resident representative, or the
15 aggregated contact information required by this section on any basis,
16 including on the basis that the facility must first seek or obtain
17 consent from one or more of the residents or resident
18 representatives.

19 (3) Nothing in this section shall interfere with or diminish the
20 authority of any long-term care ombuds to access facilities,
21 residents, and resident records as otherwise authorized by law.

22 (4) For the purposes of this section, "resident representative"
23 has the same meaning as in RCW 70.129.010.

24 NEW SECTION. **Sec. 4.** A new section is added to chapter 18.20
25 RCW to read as follows:

26 (1) Each assisted living facility shall be responsive to incoming
27 communications and respond within a reasonable time to phone and
28 electronic messages.

29 (2) Each assisted living facility must have a communication
30 system, including a sufficient quantity of working telephones and
31 other communication equipment, to ensure that residents have 24-hour
32 access to communications with family, medical providers, and others,
33 and also to allow for emergency contact to and from facility staff.
34 The telephones and communication equipment must provide for auditory
35 privacy, not be located in a staff office or station, be accessible
36 and usable by persons with hearing loss and other disabilities, and
37 not require payment for local calls. An assisted living facility is
38 not required to provide telephones at no cost in each resident room.

1 NEW SECTION. **Sec. 5.** A new section is added to chapter 18.20
2 RCW to read as follows:

3 (1) Each assisted living facility shall develop and maintain a
4 comprehensive disaster preparedness plan to be followed in the event
5 of a disaster or emergency, including fires, earthquakes, floods,
6 infectious disease outbreaks, loss of power or water, and other
7 events that may require sheltering in place, evacuations, or other
8 emergency measures to protect the health and safety of residents. The
9 facility shall review the comprehensive disaster preparedness plan
10 annually, update the plan as needed, and train all employees when
11 they begin work in the facility on the comprehensive disaster
12 preparedness plan and related staff procedures.

13 (2) The department shall adopt rules governing the comprehensive
14 disaster preparedness plan. At a minimum, the rules must address:
15 Timely communication with the residents' emergency contacts; timely
16 communication with state and local agencies, long-term care ombuds,
17 and developmental disabilities ombuds; contacting and requesting
18 emergency assistance; on-duty employees' responsibilities; meeting
19 residents' essential needs; procedures to identify and locate
20 residents; and procedures to provide emergency information to provide
21 for the health and safety of residents. In addition, the rules shall
22 establish standards for maintaining personal protective equipment and
23 infection control capabilities, as well as department inspection
24 procedures with respect to the plans.

25 **Sec. 6.** RCW 18.51.009 and 1994 c 214 s 22 are each amended to
26 read as follows:

27 RCW 70.129.007, 70.129.105, (~~and~~) 70.129.150 through
28 70.129.170, and section 20 of this act apply to this chapter and
29 persons regulated under this chapter.

30 **Sec. 7.** RCW 18.51.260 and 1987 c 476 s 26 are each amended to
31 read as follows:

32 (1) Each citation for a violation specified in RCW 18.51.060
33 which is issued pursuant to this section (~~and which has become~~
34 ~~final~~), or a copy or copies thereof, shall be prominently posted, as
35 prescribed in regulations issued by the director, until the violation
36 is corrected to the satisfaction of the department up to a maximum of
37 one hundred twenty days. The citation or copy shall be posted in a
38 place or places in plain view of the patients in the nursing home,

1 persons visiting those patients, and persons who inquire about
2 placement in the facility.

3 (2) The department shall require a nursing home that is subject
4 to a stop placement order or limited stop placement order under RCW
5 18.51.060 to publicly post in a conspicuous place at the nursing home
6 a standardized notice that the department has issued a stop placement
7 order or limited stop placement order for the nursing home. The
8 standardized notice shall be developed by the department to include
9 the date of the stop placement order or limited stop placement order,
10 any conditions placed upon the nursing home's license, contact
11 information for the department, contact information for the
12 administrator or provider of the nursing home, and a statement that
13 anyone may contact the department or the administrator or provider
14 for further information. The notice must remain posted until the
15 department has terminated the stop placement order or limited stop
16 placement order.

17 NEW SECTION. Sec. 8. A new section is added to chapter 18.51
18 RCW to read as follows:

19 (1) The department shall require each nursing home to:

20 (a) Create and regularly maintain a current resident roster
21 containing the name and room number of each resident and provide a
22 written copy immediately upon an in-person request from any long-term
23 care ombuds;

24 (b) Create and regularly maintain current, accurate, and
25 aggregated contact information for all residents, including contact
26 information for the resident representative, if any, of each
27 resident. The contact information for each resident must include the
28 resident's name, room number, and, if available, telephone number and
29 email address. The contact information for each resident
30 representative must include the resident representative's name,
31 relationship to the resident, phone number, and, if available, email
32 and mailing address;

33 (c) Record and update the aggregated contact information required
34 by this section, upon receipt of new or updated contact information
35 from the resident or resident representative; and

36 (d) Upon the written request of any long-term care ombuds that
37 includes reference to this section and the relevant legal functions
38 and duties of long-term care ombuds, provide a copy of the aggregated
39 contact information required by this section within 48 hours, or

1 within a reasonable time if agreed to by the requesting long-term
2 care ombuds, by electronic copy to the secure email address or
3 facsimile number provided in the written request.

4 (2) In accordance with the federal older Americans act, federal
5 regulations, and state laws that govern the state long-term care
6 ombuds program, the department shall inform nursing homes that:

7 (a) Any long-term care ombuds is authorized to request and obtain
8 from nursing homes the information required by this section in order
9 to perform the functions and duties of long-term care ombuds as set
10 forth in federal and state laws;

11 (b) The state long-term care ombuds program and all long-term
12 care ombuds are considered a "health oversight agency," so that the
13 federal health insurance portability and accountability act and
14 chapter 70.02 RCW do not preclude nursing homes from providing the
15 information required by this section when requested by any long-term
16 care ombuds, and pursuant to these laws, the federal older Americans
17 act, federal regulations, and state laws that govern the state long-
18 term care ombuds program, nursing homes are not required to seek or
19 obtain consent from residents or resident representatives prior to
20 providing the information required by this section in accordance with
21 the requirements of this section;

22 (c) The information required by this section, when provided by a
23 nursing home to a requesting long-term care ombuds, becomes property
24 of the state long-term care ombuds program and is subject to all
25 state and federal laws governing the confidentiality and disclosure
26 of the files, records, and information maintained by the state long-
27 term care ombuds program or any local long-term care ombuds entity;
28 and

29 (d) The nursing home may not refuse to provide or unreasonably
30 delay providing the resident roster, the contact information for a
31 resident or resident representative, or the aggregated contact
32 information required by this section, on any basis, including on the
33 basis that the nursing home must first seek or obtain consent from
34 one or more of the residents or resident representatives.

35 (3) Nothing in this section shall interfere with or diminish the
36 authority of any long-term care ombuds to access nursing homes,
37 residents, and resident records as otherwise authorized by law.

38 (4) For the purposes of this section, "resident representative"
39 has the same meaning as in RCW 70.129.010.

1 NEW SECTION. **Sec. 9.** A new section is added to chapter 18.51
2 RCW to read as follows:

3 (1) Each nursing home must be responsive to incoming
4 communications and respond within a reasonable time to phone and
5 electronic messages.

6 (2) Each nursing home must have a communication system, including
7 a sufficient quantity of working telephones and other communication
8 equipment to ensure that residents have 24-hour access to
9 communications with family, medical providers, and others, and also
10 to allow for emergency contact to and from facility staff. The
11 telephones and communication equipment must provide for auditory
12 privacy, not be located in a staff office or station, be accessible
13 and usable by persons with hearing loss and other disabilities, and
14 not require payment for local calls. A nursing home is not required
15 to provide telephones at no cost in each resident room.

16 **Sec. 10.** RCW 74.42.420 and 1979 ex.s. c 211 s 42 are each
17 amended to read as follows:

18 The facility shall maintain an organized record system containing
19 a record for each resident. The record shall contain:

20 (1) Identification information, including the information listed
21 in section 8(1) of this act;

22 (2) Admission information, including the resident's medical and
23 social history;

24 (3) A comprehensive plan of care and subsequent changes to the
25 comprehensive plan of care;

26 (4) Copies of initial and subsequent periodic examinations,
27 assessments, evaluations, and progress notes made by the facility and
28 the department;

29 (5) Descriptions of all treatments, services, and medications
30 provided for the resident since the resident's admission;

31 (6) Information about all illnesses and injuries including
32 information about the date, time, and action taken; and

33 (7) A discharge summary.

34 Resident records shall be available to the staff members directly
35 involved with the resident and to appropriate representatives of the
36 department. The facility shall protect resident records against
37 destruction, loss, and unauthorized use. The facility shall keep a
38 resident's record after the resident is discharged as provided in RCW
39 18.51.300.

1 NEW SECTION. **Sec. 11.** A new section is added to chapter 18.51
2 RCW to read as follows:

3 (1) Each nursing home shall develop and maintain a comprehensive
4 disaster preparedness plan to be followed in the event of a disaster
5 or emergency, including fires, earthquakes, floods, infectious
6 disease outbreaks, loss of power or water, and other events that may
7 require sheltering in place, evacuations, or other emergency measures
8 to protect the health and safety of residents. The nursing home shall
9 review the comprehensive disaster preparedness plan annually, update
10 the plan as needed, and train all employees when they begin work in
11 the nursing home on the comprehensive disaster preparedness plan and
12 related staff procedures.

13 (2) The department shall adopt rules governing the comprehensive
14 disaster preparedness plan. At a minimum, the rules must address the
15 following if not already adequately addressed by federal requirements
16 for emergency planning: Timely communication with the residents'
17 emergency contacts; timely communication with state and local
18 agencies, long-term care ombuds, and developmental disabilities
19 ombuds; contacting and requesting emergency assistance; on-duty
20 employees' responsibilities; meeting residents' essential needs;
21 procedures to identify and locate residents; and procedures to
22 provide emergency information to provide for the health and safety of
23 residents. In addition, the rules shall establish standards for
24 maintaining personal protective equipment and infection control
25 capabilities, as well as department inspection procedures with
26 respect to the plans.

27 **Sec. 12.** RCW 74.42.460 and 1979 ex.s. c 211 s 46 are each
28 amended to read as follows:

29 The facility shall have a written staff organization plan and
30 detailed written procedures to meet potential emergencies and
31 disasters. The facility shall clearly communicate and periodically
32 review the plan and procedures with the staff and residents. The plan
33 and procedures shall be posted at suitable locations throughout the
34 facility. The planning requirement of this section shall complement
35 the comprehensive disaster preparedness planning requirement of
36 section 11 of this act.

37 NEW SECTION. **Sec. 13.** A new section is added to chapter 70.97
38 RCW to read as follows:

1 The department shall require an enhanced services facility that
2 is subject to a stop placement order or limited stop placement order
3 under RCW 70.97.110 to publicly post in a conspicuous place at the
4 facility a standardized notice that the department has issued a stop
5 placement order or limited stop placement order for the facility. The
6 standardized notice shall be developed by the department to include
7 the date of the stop placement order or limited stop placement order,
8 any conditions placed upon the facility's license, contact
9 information for the department, contact information for the
10 administrator or provider of the facility, and a statement that
11 anyone may contact the department or the administrator or provider
12 for further information. The notice must remain posted until the
13 department has terminated the stop placement order or limited stop
14 placement order.

15 NEW SECTION. **Sec. 14.** A new section is added to chapter 70.97
16 RCW to read as follows:

17 (1) The department shall require each enhanced services facility
18 to:

19 (a) Create and regularly maintain a current resident roster
20 containing the name and room number of each resident and provide a
21 written copy immediately upon an in-person request from any long-term
22 care ombuds;

23 (b) Create and regularly maintain current, accurate, and
24 aggregated contact information for all residents, including contact
25 information for the resident representative, if any, of each
26 resident. The contact information for each resident must include the
27 resident's name, room number, and, if available, telephone number and
28 email address. The contact information for each resident
29 representative must include the resident representative's name,
30 relationship to the resident, phone number, and, if available, email
31 and mailing address;

32 (c) Record and update the aggregated contact information required
33 by this section, upon receipt of new or updated contact information
34 from the resident or resident representative; and

35 (d) Upon the written request of any long-term care ombuds that
36 includes reference to this section and the relevant legal functions
37 and duties of long-term care ombuds, provide a copy of the aggregated
38 contact information required by this section within 48 hours, or
39 within a reasonable time if agreed to by the requesting long-term

1 care ombuds, by electronic copy to the secure email address or
2 facsimile number provided in the written request.

3 (2) In accordance with the federal older Americans act, federal
4 regulations, and state laws that govern the state long-term care
5 ombuds program, the department shall inform enhanced services
6 facilities that:

7 (a) Any long-term care ombuds is authorized to request and obtain
8 from enhanced services facilities the information required by this
9 section in order to perform the functions and duties of long-term
10 care ombuds as set forth in federal and state laws;

11 (b) The state long-term care ombuds program and all long-term
12 care ombuds are considered a "health oversight agency," so that the
13 federal health insurance portability and accountability act and
14 chapter 70.02 RCW do not preclude enhanced services facilities from
15 providing the information required by this section when requested by
16 any long-term care ombuds, and pursuant to these laws, the federal
17 older Americans act, federal regulations, and state laws that govern
18 the state long-term care ombuds program, facilities are not required
19 to seek or obtain consent from residents or resident representatives
20 prior to providing the information required by this section in
21 accordance with the requirements of this section;

22 (c) The information required by this section, when provided by an
23 enhanced services facility to a requesting long-term care ombuds,
24 becomes property of the state long-term care ombuds program and is
25 subject to all state and federal laws governing the confidentiality
26 and disclosure of the files, records, and information maintained by
27 the state long-term care ombuds program or any local long-term care
28 ombuds entity; and

29 (d) The enhanced services facility may not refuse to provide or
30 unreasonably delay providing the resident roster, the contact
31 information for a resident or resident representative, or the
32 aggregated contact information required by this section, on any
33 basis, including on the basis that the enhanced services facility
34 must first seek or obtain consent from one or more of the residents
35 or resident representatives.

36 (3) Nothing in this section shall interfere with or diminish the
37 authority of any long-term care ombuds to access facilities,
38 residents, and resident records as otherwise authorized by law.

39 (4) For the purposes of this section, "resident representative"
40 has the same meaning as in RCW 70.129.010.

1 NEW SECTION. **Sec. 15.** A new section is added to chapter 70.97
2 RCW to read as follows:

3 (1) Each enhanced services facility must be responsive to
4 incoming communications and respond within a reasonable time to phone
5 and electronic messages.

6 (2) Each enhanced services facility must have a communication
7 system, including a sufficient quantity of working telephones and
8 other communication equipment to assure that residents have 24-hour
9 access to communications with family, medical providers, and others,
10 and also to allow for emergency contact to and from facility staff.
11 The telephones and communication equipment must provide for auditory
12 privacy, not be located in a staff office or station, be accessible
13 and usable by persons with hearing loss and other disabilities, and
14 not require payment for local calls. An enhanced services facility is
15 not required to provide telephones at no cost in each resident room.

16 NEW SECTION. **Sec. 16.** A new section is added to chapter 70.97
17 RCW to read as follows:

18 (1) Each enhanced services facility shall develop and maintain a
19 comprehensive disaster preparedness plan to be followed in the event
20 of a disaster or emergency, including fires, earthquakes, floods,
21 infectious disease outbreaks, loss of power or water, and other
22 events that may require sheltering in place, evacuations, or other
23 emergency measures to protect the health and safety of residents. The
24 enhanced services facility must review the comprehensive disaster
25 preparedness plan annually, update the plan as needed, and train all
26 employees when they begin work in the enhanced services facility on
27 the comprehensive disaster preparedness plan and related staff
28 procedures.

29 (2) The department shall adopt rules governing the comprehensive
30 disaster preparedness plan. At a minimum, the rules must address:
31 Timely communication with the residents' emergency contacts; timely
32 communication with state and local agencies, long-term care ombuds,
33 and developmental disabilities ombuds; contacting and requesting
34 emergency assistance; on-duty employees' responsibilities; meeting
35 residents' essential needs; procedures to identify and locate
36 residents; and procedures to provide emergency information to provide
37 for the health and safety of residents. In addition, the rules shall
38 establish standards for maintaining personal protective equipment and

1 infection control capabilities, as well as department inspection
2 procedures with respect to the plans.

3 NEW SECTION. **Sec. 17.** A new section is added to chapter 70.128
4 RCW to read as follows:

5 (1) The department shall require each adult family home to:

6 (a) Create and regularly maintain a current resident roster
7 containing the name and room number of each resident and provide a
8 written copy immediately upon an in-person request from any long-term
9 care ombuds;

10 (b) Create and regularly maintain current, accurate, and
11 aggregated contact information for all residents, including contact
12 information for the resident representative, if any, of each
13 resident. The contact information for each resident must include the
14 resident's name, room number, and, if available, telephone number and
15 email address. The contact information for each resident
16 representative must include the resident representative's name,
17 relationship to the resident, phone number, and, if available, email
18 and mailing address;

19 (c) Record and update the aggregated contact information required
20 by this section, upon receipt of new or updated contact information
21 from the resident or resident representative; and

22 (d) Upon the written request of any long-term care ombuds that
23 includes reference to this section and the relevant legal functions
24 and duties of long-term care ombuds, provide a copy of the aggregated
25 contact information required by this section within 48 hours, or
26 within a reasonable time if agreed to by the requesting long-term
27 care ombuds, by electronic copy to the secure email address or
28 facsimile number provided in the written request.

29 (2) In accordance with the federal older Americans act, federal
30 regulations, and state laws that govern the state long-term care
31 ombuds program, the department shall inform adult family homes that:

32 (a) Any long-term care ombuds is authorized to request and obtain
33 from adult family homes the information required by this section in
34 order to perform the functions and duties of long-term care ombuds as
35 set forth in federal and state laws;

36 (b) The state long-term care ombuds program and all long-term
37 care ombuds are considered a "health oversight agency," so that the
38 federal health insurance portability and accountability act and
39 chapter 70.02 RCW do not preclude adult family homes from providing

1 the information required by this section when requested by any long-
2 term care ombuds, and pursuant to these laws, the federal older
3 Americans act, federal regulations, and state laws that govern the
4 state long-term care ombuds program, adult family homes are not
5 required to seek or obtain consent from residents or resident
6 representatives prior to providing the information required by this
7 section in accordance with the requirements of this section;

8 (c) The information required by this section, when provided by an
9 adult family home to a requesting long-term care ombuds, becomes
10 property of the state long-term care ombuds program and is subject to
11 all state and federal laws governing the confidentiality and
12 disclosure of the files, records, and information maintained by the
13 state long-term care ombuds program or any local long-term care
14 ombuds entity; and

15 (d) The adult family home may not refuse to provide or
16 unreasonably delay providing the resident roster, the contact
17 information for a resident or resident representative, or the
18 aggregated contact information required by this section, on any
19 basis, including on the basis that the adult family home must first
20 seek or obtain consent from one or more of the residents or resident
21 representatives.

22 (3) Nothing in this section shall interfere with or diminish the
23 authority of any long-term care ombuds to access facilities,
24 residents, and resident records as otherwise authorized by law.

25 (4) For the purposes of this section, "resident representative"
26 has the same meaning as in RCW 70.129.010.

27 NEW SECTION. **Sec. 18.** A new section is added to chapter 70.128
28 RCW to read as follows:

29 The department must require an adult family home that is subject
30 to a stop placement order or limited stop placement order under RCW
31 70.128.160 to publicly post in a conspicuous place at the adult
32 family home a standardized notice that the department has issued a
33 stop placement order or limited stop placement order for the adult
34 family home. The standardized notice shall be developed by the
35 department to include the date of the stop placement order or limited
36 stop placement order, any conditions placed upon the adult family
37 home's license, contact information for the department, contact
38 information for the administrator or provider of the adult family
39 home, and a statement that anyone may contact the department or the

1 administrator or provider for further information. The notice must
2 remain posted until the department has terminated the stop placement
3 order or limited stop placement order.

4 NEW SECTION. **Sec. 19.** A new section is added to chapter 70.129
5 RCW to read as follows:

6 The department of social and health services and the department
7 of health, in collaboration with the state office of the long-term
8 care ombuds and representatives of long-term care facilities, shall
9 develop training materials to educate the leadership and staff of
10 local health jurisdictions on the state's long-term care system. The
11 training materials must provide information to assist local health
12 jurisdiction personnel when establishing and enforcing public health
13 measures in long-term care facilities and nursing homes, including:

14 (1) All applicable state and federal resident rights, including
15 the due process rights of residents; and

16 (2) The process for local health jurisdiction personnel to report
17 abuse and neglect in facilities and nursing homes, including during
18 periods when visitation may be limited.

19 NEW SECTION. **Sec. 20.** A new section is added to chapter 70.129
20 RCW to read as follows:

21 (1) In circumstances in which limitations must be placed on
22 resident visitation due to a public health emergency or other threat
23 to the health and safety of the residents and staff of a facility or
24 nursing home, residents must still be allowed access to an essential
25 support person, subject to reasonable limitations on such access
26 tailored to protecting the health and safety of essential support
27 persons, residents, and staff.

28 (2) The facility or nursing home must allow private, in-person
29 access to the resident by the essential support person in the
30 resident's room. If the resident resides in a shared room, and the
31 roommate, or the roommate's resident representative, if any, does not
32 consent or the visit cannot be conducted safely in a shared room,
33 then the facility or nursing home shall designate a substitute
34 location in the facility or nursing home for the resident and
35 essential support person to visit.

36 (3) The facility or nursing home shall develop and implement
37 reasonable conditions on access by an essential support person
38 tailored to protecting the health and safety of the essential support

1 person, residents, and staff, based upon the particular public health
2 emergency or other health or safety threat.

3 (4) The facility or nursing home may temporarily suspend an
4 individual's designation as an essential support person for failure
5 to comply with these requirements or reasonable conditions developed
6 and implemented by the facility or nursing home that are tailored to
7 protecting that health and safety of the essential support person,
8 residents, and staff, based upon the particular public health
9 emergency or other health or safety threat. Unless immediate action
10 is necessary to prevent an imminent and serious threat to the health
11 or safety of residents or staff, the facility or nursing home shall
12 attempt to resolve the concerns with the essential support person and
13 the resident prior to temporarily suspending the individual's
14 designation as an essential support person. The suspension shall last
15 no longer than 48 hours during which time the facility or nursing
16 home must contact the department for guidance and must provide the
17 essential support person:

18 (a) Information regarding the steps the essential support person
19 must take to resume the visits, such as agreeing to comply with
20 reasonable conditions tailored to protecting the health and safety of
21 the essential support person, residents, and staff, based upon the
22 particular public health emergency or other health or safety threat;

23 (b) The contact information for the long-term care ombuds
24 program; and

25 (c) As appropriate, the contact information for the developmental
26 disabilities ombuds, the agency responsible for the protection and
27 advocacy system for individuals with developmental disabilities, and
28 the agency responsible for the protection and advocacy system for
29 individuals with mental illness.

30 (5) For the purposes of this section, "essential support person"
31 means an individual who is:

32 (a) At least 18 years of age;

33 (b) Designated by the resident, or by the resident's
34 representative, if the resident is determined to be incapacitated or
35 otherwise legally incapacitated; and

36 (c) Necessary for the resident's emotional, mental, or physical
37 well-being during situations that include, but are not limited to,
38 circumstances involving compassionate care or end-of-life care,
39 circumstances where visitation from a familiar person will assist
40 with important continuity of care or the reduction of confusion and

1 anxiety for residents with cognitive impairments, or other
2 circumstances where the presence of an essential support person will
3 prevent or reduce significant emotional distress to the resident.

4 **Sec. 21.** RCW 70.129.010 and 2020 c 278 s 13 are each reenacted
5 and amended to read as follows:

6 Unless the context clearly requires otherwise, the definitions in
7 this section apply throughout this chapter.

8 (1) "Chemical restraint" means a psychopharmacologic drug that is
9 used for discipline or convenience and not required to treat the
10 resident's medical symptoms.

11 (2) "Department" means the department of state government
12 responsible for licensing the provider in question.

13 (3) "Facility" means a long-term care facility.

14 (4) "Long-term care facility" means a facility that is licensed
15 or required to be licensed under chapter 18.20, 70.97, 72.36, or
16 70.128 RCW.

17 (5) "Physical restraint" means a manual method, obstacle, or
18 physical or mechanical device, material, or equipment attached or
19 adjacent to the resident's body that restricts freedom of movement or
20 access to his or her body, is used for discipline or convenience, and
21 not required to treat the resident's medical symptoms.

22 (6) "Reasonable accommodation" by a facility to the needs of a
23 prospective or current resident has the meaning given to this term
24 under the federal Americans with disabilities act of 1990, 42 U.S.C.
25 Sec. 12101 et seq. and other applicable federal or state
26 antidiscrimination laws and regulations.

27 (~~(7) ("Representative" means a person appointed under RCW~~
28 ~~7.70.065.~~

29 ~~(8))~~ "Resident" means the individual receiving services in a
30 long-term care facility, that resident's attorney-in-fact, guardian,
31 or other (~~legal~~) representative acting within the scope of their
32 authority.

33 (8) "Resident representative" means:

34 (a) (i) A court-appointed guardian or conservator of a resident,
35 if any;

36 (ii) An individual otherwise authorized by state or federal law
37 including, but not limited to, agents under power of attorney,
38 representative payees, and other fiduciaries, to act on behalf of the
39 resident in order to support the resident in decision making; access

1 medical, social, or other personal information of the resident;
2 manage financial matters; or receive notifications; or

3 (iii) If there is no individual who meets the criteria under
4 (a)(i) or (ii) of this subsection, an individual chosen by the
5 resident to act on behalf of the resident in order to support the
6 resident in decision making; access medical, social, or other
7 personal information of the resident; manage financial matters; or
8 receive notifications.

9 (b) The term "resident representative" does not include any
10 individual described in (a) of this subsection who is affiliated with
11 any long-term care facility or nursing home where the resident
12 resides, or its licensee or management company, unless the affiliated
13 individual is a family member of the resident.

14 **Sec. 22.** RCW 70.129.020 and 1994 c 214 s 3 are each amended to
15 read as follows:

16 The resident has a right to a dignified existence, self-
17 determination, and communication with and access to persons and
18 services inside and outside the facility. A facility must protect and
19 promote the rights of each resident and assist the resident which
20 include:

21 (1) The resident has the right to exercise his or her rights as a
22 resident of the facility and as a citizen or resident of the United
23 States and the state of Washington.

24 (2) The resident has the right to be free of interference,
25 coercion, discrimination, and reprisal from the facility in
26 exercising his or her rights.

27 (3) In the case of a resident adjudged incompetent by a court of
28 competent jurisdiction, the rights of the resident are exercised by
29 the person appointed to act on the resident's behalf.

30 (4) In the case of a resident who has not been adjudged
31 incompetent by a court of competent jurisdiction, a resident
32 representative may exercise the resident's rights to the extent
33 provided by law.

34 **Sec. 23.** RCW 70.129.030 and 2013 c 23 s 184 are each amended to
35 read as follows:

36 (1) The facility must inform the resident both orally and in
37 writing in a language that the resident understands of his or her
38 rights and all rules and regulations governing resident conduct and

1 responsibilities during the stay in the facility. The notification
2 must be made prior to or upon admission. Receipt of the information
3 must be acknowledged in writing.

4 (2) The resident to the extent provided by law or (~~his or her~~
5 ~~legal~~) resident representative to the extent provided by law, has
6 the right:

7 (a) Upon an oral or written request, to access all records
8 pertaining to himself or herself including clinical records within
9 twenty-four hours; and

10 (b) After receipt of his or her records for inspection, to
11 purchase at a cost not to exceed the community standard photocopies
12 of the records or portions of them upon request and two working days'
13 advance notice to the facility.

14 (3) The facility shall only admit or retain individuals whose
15 needs it can safely and appropriately serve in the facility with
16 appropriate available staff and through the provision of reasonable
17 accommodations required by state or federal law. Except in cases of
18 genuine emergency, the facility shall not admit an individual before
19 obtaining a thorough assessment of the resident's needs and
20 preferences. The assessment shall contain, unless unavailable despite
21 the best efforts of the facility, the resident applicant, and other
22 interested parties, the following minimum information: Recent medical
23 history; necessary and contraindicated medications; a licensed
24 medical or other health professional's diagnosis, unless the
25 individual objects for religious reasons; significant known behaviors
26 or symptoms that may cause concern or require special care; mental
27 illness, except where protected by confidentiality laws; level of
28 personal care needs; activities and service preferences; and
29 preferences regarding other issues important to the resident
30 applicant, such as food and daily routine.

31 (4) The facility must inform each resident in writing in a
32 language the resident or (~~his or her~~) resident representative
33 understands before admission, and at least once every twenty-four
34 months thereafter of: (a) Services, items, and activities customarily
35 available in the facility or arranged for by the facility as
36 permitted by the facility's license; (b) charges for those services,
37 items, and activities including charges for services, items, and
38 activities not covered by the facility's per diem rate or applicable
39 public benefit programs; and (c) the rules of facility operations
40 required under RCW 70.129.140(2). Each resident and (~~his or her~~)

1 resident representative must be informed in writing in advance of
2 changes in the availability or the charges for services, items, or
3 activities, or of changes in the facility's rules. Except in
4 emergencies, thirty days' advance notice must be given prior to the
5 change. However, for facilities licensed for six or fewer residents,
6 if there has been a substantial and continuing change in the
7 resident's condition necessitating substantially greater or lesser
8 services, items, or activities, then the charges for those services,
9 items, or activities may be changed upon fourteen days' advance
10 written notice.

11 (5) The facility must furnish a written description of residents
12 rights that includes:

13 (a) A description of the manner of protecting personal funds,
14 under RCW 70.129.040;

15 (b) A posting of names, addresses, and telephone numbers of the
16 state survey and certification agency, the state licensure office,
17 the state ombuds program, and the protection and advocacy systems;
18 and

19 (c) A statement that the resident may file a complaint with the
20 appropriate state licensing agency concerning alleged resident abuse,
21 neglect, and misappropriation of resident property in the facility.

22 (6) Notification of changes.

23 (a) A facility must immediately consult with the resident's
24 physician, and if known, make reasonable efforts to notify the
25 (~~resident's legal~~) resident representative (~~or an interested~~
26 ~~family member~~) to the extent provided by law when there is:

27 (i) An accident involving the resident which requires or has the
28 potential for requiring physician intervention;

29 (ii) A significant change in the resident's physical, mental, or
30 psychosocial status (i.e., a deterioration in health, mental, or
31 psychosocial status in either life-threatening conditions or clinical
32 complications).

33 (b) The facility must promptly notify the resident or (~~the~~
34 ~~resident's~~) resident representative (~~shall make reasonable efforts~~
35 ~~to notify an interested family member, if known,~~) when there is:

36 (i) A change in room or roommate assignment; or

37 (ii) A decision to transfer or discharge the resident from the
38 facility.

39 (c) The facility must record and update the address (~~and~~),
40 phone number, and any other contact information of the (~~resident's~~)

1 resident representative (~~(or interested family member)~~), upon receipt
2 of notice from them.

3 **Sec. 24.** RCW 70.129.040 and 2011 1st sp.s. c 3 s 301 are each
4 amended to read as follows:

5 (1) The resident has the right to manage his or her financial
6 affairs, and the facility may not require residents to deposit their
7 personal funds with the facility.

8 (2) Upon written authorization of a resident, if the facility
9 agrees to manage the resident's personal funds, the facility must
10 hold, safeguard, manage, and account for the personal funds of the
11 resident deposited with the facility as specified in this section.

12 (a) The facility must deposit a resident's personal funds in
13 excess of one hundred dollars in an interest-bearing account or
14 accounts that is separate from any of the facility's operating
15 accounts, and that credits all interest earned on residents' funds to
16 that account. In pooled accounts, there must be a separate accounting
17 for each resident's share.

18 (b) The facility must maintain a resident's personal funds that
19 do not exceed one hundred dollars in a noninterest-bearing account,
20 interest-bearing account, or petty cash fund.

21 (3) The facility must establish and maintain a system that
22 assures a full and complete and separate accounting of each
23 resident's personal funds entrusted to the facility on the resident's
24 behalf.

25 (a) The system must preclude any commingling of resident funds
26 with facility funds or with the funds of any person other than
27 another resident.

28 (b) The individual financial record must be available on request
29 to the resident, or (~~(his or her legal)~~) resident representative to
30 the extent provided by law.

31 (4) Upon the death of a resident with personal funds deposited
32 with the facility, the facility must convey within thirty days the
33 resident's funds, and a final accounting of those funds, to the
34 individual or probate jurisdiction administering the resident's
35 estate; but in the case of a resident who received long-term care
36 services paid for by the state, the funds and accounting shall be
37 sent to the state of Washington, department of social and health
38 services, office of financial recovery. The department shall
39 establish a release procedure for use for burial expenses.

1 (5) If any funds in excess of one hundred dollars are paid to an
2 adult family home by the resident or ((a)) resident representative
3 (~~of the resident~~), as a security deposit for performance of the
4 resident's obligations, or as prepayment of charges beyond the first
5 month's residency, the funds shall be deposited by the adult family
6 home in an interest-bearing account that is separate from any of the
7 home's operating accounts, and that credits all interest earned on
8 the resident's funds to that account. In pooled accounts, there must
9 be a separate accounting for each resident's share. The account or
10 accounts shall be in a financial institution as defined by RCW
11 (~~30.22.041~~) 30A.22.041, and the resident shall be notified in
12 writing of the name, address, and location of the depository. The
13 adult family home may not commingle resident funds from these
14 accounts with the adult family home's funds or with the funds of any
15 person other than another resident. The individual resident's account
16 record shall be available upon request by the resident or (~~the~~
17 ~~resident's~~) resident representative to the extent provided by law.

18 (6) The adult family home shall provide the resident or (~~the~~
19 ~~resident's~~) resident representative full disclosure in writing,
20 prior to the receipt of any funds for a deposit, security, prepaid
21 charges, or any other fees or charges, specifying what the funds are
22 paid for and the basis for retaining any portion of the funds if the
23 resident dies, is hospitalized, or is transferred or discharged from
24 the adult family home. The disclosure must be in a language that the
25 resident or (~~the resident's~~) resident representative understands,
26 and be acknowledged in writing by the resident or (~~the resident's~~)
27 resident representative. The adult family home shall retain a copy of
28 the disclosure and the acknowledgment. The adult family home may not
29 retain funds for reasonable wear and tear by the resident or for any
30 basis that would violate RCW 70.129.150.

31 (7) Funds paid by the resident or (~~the resident's~~) resident
32 representative to the adult family home, which the adult family home
33 in turn pays to a placement agency or person, shall be governed by
34 the disclosure requirements of this section. If the resident then
35 dies, is hospitalized, or is transferred or discharged from the adult
36 family home, and is entitled to any refund of funds under this
37 section or RCW 70.129.150, the adult family home shall refund the
38 funds to the resident or (~~the resident's~~) resident representative
39 to the extent provided by law, within thirty days of the resident

1 leaving the adult family home, and may not require the resident to
2 obtain the refund from the placement agency or person.

3 (8) If, during the stay of the resident, the status of the adult
4 family home licensee or ownership is changed or transferred to
5 another, any funds in the resident's accounts affected by the change
6 or transfer shall simultaneously be deposited in an equivalent
7 account or accounts by the successor or new licensee or owner, who
8 shall promptly notify the resident or (~~the resident's~~) resident
9 representative to the extent provided by law, in writing of the name,
10 address, and location of the new depository.

11 (9) Because it is a matter of great public importance to protect
12 residents who need long-term care from deceptive disclosures and
13 unfair retention of deposits, fees, or prepaid charges by adult
14 family homes, a violation of this section or RCW 70.129.150 shall be
15 construed for purposes of the consumer protection act, chapter 19.86
16 RCW, to constitute an unfair or deceptive act or practice or an
17 unfair method of competition in the conduct of trade or commerce. The
18 resident's claim to any funds paid under this section shall be prior
19 to that of any creditor of the adult family home, its owner, or
20 licensee, even if such funds are commingled.

21 **Sec. 25.** RCW 70.129.080 and 1994 c 214 s 9 are each amended to
22 read as follows:

23 The resident has the right to privacy in communications,
24 including the right to:

25 (1) Send and promptly receive mail that is unopened;

26 (2) Have access to stationery, postage, and writing implements at
27 the resident's own expense; and

28 (3) Have reasonable access within a reasonable time to the use of
29 a telephone and other communication equipment where calls can be made
30 without being overheard.

31 **Sec. 26.** RCW 70.129.090 and 2013 c 23 s 185 are each amended to
32 read as follows:

33 (1) The resident has the right and the facility must not
34 interfere with access to any resident by the following:

35 (a) Any representative of the state;

36 (b) The resident's individual physician;

37 (c) The state long-term care ombuds as established under chapter
38 43.190 RCW;

1 (d) The agency responsible for the protection and advocacy system
2 for individuals with developmental disabilities as established under
3 part C of the developmental disabilities assistance and bill of
4 rights act;

5 (e) The agency responsible for the protection and advocacy system
6 for individuals with mental illness as established under the
7 protection and advocacy for mentally ill individuals act;

8 (f) Subject to reasonable restrictions to protect the rights of
9 others and to the resident's right to deny or withdraw consent at any
10 time, resident representative, immediate family or other relatives of
11 the resident, and others who are visiting with the consent of the
12 resident;

13 (g) The agency responsible for the protection and advocacy system
14 for individuals with disabilities as established under section 509 of
15 the rehabilitation act of 1973, as amended, who are not served under
16 the mandates of existing protection and advocacy systems created
17 under federal law.

18 (2) The facility must provide reasonable access to a resident by
19 (~~his or her~~) the resident representative or an entity or individual
20 that provides health, social, legal, or other services to the
21 resident, subject to the resident's right to deny or withdraw consent
22 at any time.

23 (3) The facility must allow representatives of the state ombuds
24 to examine a resident's clinical records with the permission of the
25 resident or (~~the resident's legal~~) resident representative to the
26 extent provided by law, and consistent with state and federal law.

27 **Sec. 27.** RCW 70.129.110 and 2013 c 23 s 186 are each amended to
28 read as follows:

29 (1) The facility must permit each resident to remain in the
30 facility, and not transfer or discharge the resident from the
31 facility unless:

32 (a) The transfer or discharge is necessary for the resident's
33 welfare and the resident's needs cannot be met in the facility;

34 (b) The safety of individuals in the facility is endangered;

35 (c) The health of individuals in the facility would otherwise be
36 endangered;

37 (d) The resident has failed to make the required payment for his
38 or her stay; or

39 (e) The facility ceases to operate.

1 (2) All long-term care facilities shall fully disclose to
2 potential residents or (~~their legal~~) resident representatives the
3 service capabilities of the facility prior to admission to the
4 facility. If the care needs of the applicant who is medicaid eligible
5 are in excess of the facility's service capabilities, the department
6 shall identify other care settings or residential care options
7 consistent with federal law.

8 (3) Before a long-term care facility transfers or discharges a
9 resident, the facility must:

10 (a) First attempt through reasonable accommodations to avoid the
11 transfer or discharge, unless agreed to by the resident;

12 (b) Notify the resident and resident representative (~~and make a~~
13 ~~reasonable effort to notify, if known, an interested family member~~)
14 of the transfer or discharge and the reasons for the move in writing
15 and in a language and manner they understand;

16 (c) Record the reasons in the resident's record; and

17 (d) Include in the notice the items described in subsection (5)
18 of this section.

19 (4)(a) Except when specified in this subsection, the notice of
20 transfer or discharge required under subsection (3) of this section
21 must be made by the facility at least thirty days before the resident
22 is transferred or discharged.

23 (b) Notice may be made as soon as practicable before transfer or
24 discharge when:

25 (i) The safety of individuals in the facility would be
26 endangered;

27 (ii) The health of individuals in the facility would be
28 endangered;

29 (iii) An immediate transfer or discharge is required by the
30 resident's urgent medical needs; or

31 (iv) A resident has not resided in the facility for thirty days.

32 (5) The written notice specified in subsection (3) of this
33 section must include the following:

34 (a) The reason for transfer or discharge;

35 (b) The effective date of transfer or discharge;

36 (c) The location to which the resident is transferred or
37 discharged;

38 (d) The name, address, and telephone number of the state long-
39 term care ombuds;

1 (e) For residents with developmental disabilities, the mailing
2 address and telephone number of the agency responsible for the
3 protection and advocacy of individuals with developmental
4 disabilities established under part C of the developmental
5 disabilities assistance and bill of rights act; and

6 (f) For residents with mental illness, the mailing address and
7 telephone number of the agency responsible for the protection and
8 advocacy of individuals with mental illness established under the
9 protection and advocacy for mentally ill individuals act.

10 (6) A facility must provide sufficient preparation and
11 orientation to residents to ensure safe and orderly transfer or
12 discharge from the facility.

13 (7) A resident discharged in violation of this section has the
14 right to be readmitted immediately upon the first availability of a
15 gender-appropriate bed in the facility.

16 **Sec. 28.** RCW 70.129.150 and 1997 c 392 s 206 are each amended to
17 read as follows:

18 (1) Prior to admission, all long-term care facilities or nursing
19 facilities licensed under chapter 18.51 RCW that require payment of
20 an admissions fee, deposit, or a minimum stay fee, by or on behalf of
21 a person seeking admission to the long-term care facility or nursing
22 facility, shall provide the resident, or (~~his or her~~) resident
23 representative, full disclosure in writing in a language the resident
24 or (~~his or her~~) resident representative understands, a statement of
25 the amount of any admissions fees, deposits, prepaid charges, or
26 minimum stay fees. The facility shall also disclose to the person, or
27 (~~his or her~~) resident representative, the facility's advance notice
28 or transfer requirements, prior to admission. In addition, the long-
29 term care facility or nursing facility shall also fully disclose in
30 writing prior to admission what portion of the deposits, admissions
31 fees, prepaid charges, or minimum stay fees will be refunded to the
32 resident or (~~his or her~~) resident representative to the extent
33 provided by law, if the resident leaves the long-term care facility
34 or nursing facility. Receipt of the disclosures required under this
35 subsection must be acknowledged in writing. If the facility does not
36 provide these disclosures, the deposits, admissions fees, prepaid
37 charges, or minimum stay fees may not be kept by the facility. If a
38 resident dies or is hospitalized or is transferred to another
39 facility for more appropriate care and does not return to the

1 original facility, the facility shall refund any deposit or charges
2 already paid less the facility's per diem rate for the days the
3 resident actually resided or reserved or retained a bed in the
4 facility notwithstanding any minimum stay policy or discharge notice
5 requirements, except that the facility may retain an additional
6 amount to cover its reasonable, actual expenses incurred as a result
7 of a private-pay resident's move, not to exceed five days' per diem
8 charges, unless the resident has given advance notice in compliance
9 with the admission agreement. All long-term care facilities or
10 nursing facilities covered under this section are required to refund
11 any and all refunds due the resident or (~~his or her~~) resident
12 representative to the extent provided by law, within thirty days from
13 the resident's date of discharge from the facility. Nothing in this
14 section applies to provisions in contracts negotiated between a
15 nursing facility or long-term care facility and a certified health
16 plan, health or disability insurer, health maintenance organization,
17 managed care organization, or similar entities.

18 (2) Where a long-term care facility or nursing facility requires
19 the execution of an admission contract by or on behalf of an
20 individual seeking admission to the facility, the terms of the
21 contract shall be consistent with the requirements of this section,
22 and the terms of an admission contract by a long-term care facility
23 shall be consistent with the requirements of this chapter.

24 **Sec. 29.** RCW 70.129.180 and 2009 c 489 s 1 are each amended to
25 read as follows:

26 (1) A long-term care facility must fully disclose to residents
27 the facility's policy on accepting medicaid as a payment source. The
28 policy shall clearly state the circumstances under which the facility
29 provides care for medicaid eligible residents and for residents who
30 may later become eligible for medicaid.

31 (2) The policy under this section must be provided to residents
32 orally and in writing prior to admission, in a language that the
33 resident or (~~the resident's~~) resident representative understands.
34 The written policy must be in type font no smaller than fourteen
35 point and written on a page that is separate from other documents.
36 The policy must be signed and dated by the resident or (~~the~~
37 ~~resident's~~) resident representative to the extent provided by law,
38 if the resident lacks capacity. The facility must retain a copy of

1 the disclosure. Current residents must receive a copy of the policy
2 consistent with this section by July 26, 2009.

3 NEW SECTION. **Sec. 30.** A new section is added to chapter 70.01
4 RCW to read as follows:

5 (1) The department of health and the department of social and
6 health services shall develop a report and guidelines on epidemic
7 disease preparedness and response for long-term care facilities. In
8 developing the report and guidelines, the department of health and
9 the department of social and health services shall consult with
10 interested stakeholders, including but not limited to:

- 11 (a) Local health jurisdictions;
- 12 (b) Advocates for consumers of long-term care;
- 13 (c) Associations representing long-term care facility providers;
- 14 and
- 15 (d) The office of the state long-term care ombuds.

16 (2) The report must identify best practices and lessons learned
17 about containment and mitigation strategies for controlling the
18 spread of the infectious agent. At a minimum, the report must
19 consider:

- 20 (a) Visitation policies that balance the psychosocial and
21 physical health of residents;
- 22 (b) Timely and adequate access to personal protective equipment
23 and other infection control supplies so that employees in long-term
24 care facilities are prioritized for distribution in the event of
25 supply shortages;
- 26 (c) Admission and discharge policies and standards; and
- 27 (d) Rapid and accurate testing to identify infectious outbreaks
28 for:
 - 29 (i) Resident cohorting and treatment;
 - 30 (ii) Contact tracing purposes; and
 - 31 (iii) Protecting the health and well-being of residents and
32 employees.

33 (3) In developing the report, the department of health and the
34 department of social and health services shall work with the
35 stakeholders identified in subsection (1) of this section to:

- 36 (a) Ensure that any corresponding federal rules and guidelines
37 take precedence over the state guidelines;
- 38 (b) Avoid conflict between federal requirements and state
39 guidelines;

1 (c) Develop a timeline for implementing the guidelines and a
2 process for communicating the guidelines to long-term care
3 facilities, local health jurisdictions, and other interested
4 stakeholders in a clear and timely manner;

5 (d) Consider options for targeting available resources towards
6 infection control when epidemic disease outbreaks occur in long-term
7 care facilities;

8 (e) Establish methods for ensuring that epidemic preparedness and
9 response guidelines are consistently applied across all local health
10 jurisdictions and long-term care facilities in Washington state. This
11 may include recommendations to the legislature for any needed
12 statutory changes;

13 (f) Develop a process for maintaining and updating epidemic
14 preparedness and response guidelines as necessary; and

15 (g) Ensure appropriate considerations for each unique provider
16 type.

17 (4) By December 1, 2021, the department of health and the
18 department of social and health services shall provide a draft report
19 and guidelines on COVID-19 as outlined in subsection (2) of this
20 section to the health care committees of the legislature.

21 (5) By July 1, 2022, the department of health and the department
22 of social and health services shall finalize the report and
23 guidelines on COVID-19 and provide the report to the health care
24 committees of the legislature.

25 (6) Beginning December 1, 2022, and annually thereafter, the
26 department of health and the department of social and health services
27 shall:

28 (a) Review the report and any corresponding guidelines;

29 (b) Make any necessary changes regarding COVID-19 and add
30 information about any emerging epidemic of public health concern; and

31 (c) Provide the updated report and guidelines to the health care
32 committees of the legislature. When providing the updated guidelines
33 to the legislature, the department of health and the department of
34 social and health services may include recommendations to the
35 legislature for any needed statutory changes.

36 (7) For purposes of this section, "long-term care facilities"
37 includes:

38 (a) Licensed skilled nursing facilities, assisted living
39 facilities, adult family homes, and enhanced services facilities;

40 (b) Certified community residential services and supports; and

1 (c) Registered continuing care retirement communities.

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