## SENATE BILL 6225

State of Washington 58th Legislature 2004 Regular Session

By Senators Deccio, Keiser, Parlette, Winsley and Rasmussen

Read first time 01/14/2004. Referred to Committee on Health & Long-Term Care.

AN ACT Relating to boarding homes; amending RCW 18.20.020, 18.20.090, 18.20.160, 18.20.290, 74.39A.009, 74.39A.020, and 70.129.110; adding new sections to chapter 18.20 RCW; providing an effective date; and declaring an emergency.

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

6 Sec. 1. RCW 18.20.020 and 2003 c 231 s 2 are each amended to read 7 as follows:

8 As used in this chapter:

(1) "Boarding home" means any home or other institution, however 9 10 named, which is advertised, announced, or maintained for the express or implied purpose of providing ((board and)) housing and assuming general 11 responsibility for the safety and well-being of the residents, 12 13 consistent with RCW 18.20.280, and may also provide domiciliary care, consistent with section 2 of this act, to seven or more residents after 14 15 July 1, 2000. However, a boarding home that is licensed to provide ((board and)) housing and assume general responsibility for the safety 16 and well-being of the residents consistent with RCW 18.20.280, and 17 which may also provide domiciliary care, consistent with section 2 of 18 19 this act, to three to six residents on July 1, 2000, may maintain its

boarding home license as long as it is continually licensed as a 1 2 boarding home. "Boarding home" shall not include facilities certified as group training homes pursuant to RCW 71A.22.040, nor any home, 3 institution or section thereof which is otherwise licensed and 4 regulated under the provisions of state law providing specifically for 5 the licensing and regulation of such home, institution or section 6 7 thereof. Nor shall it include any independent senior housing, 8 independent living units in continuing care retirement communities, or other similar living situations including those subsidized by the 9 department of housing and urban development. 10

11 (2) "Person" means any individual, firm, partnership, corporation, 12 company, association, or joint stock association, and the legal 13 successor thereof.

14 (3) "Secretary" means the secretary of social and health services.

15 (4) "Department" means the state department of social and health 16 services.

17 (5) "Designated representative" means a person under RCW 7.70.065, 18 or a person appointed by the resident to act on the resident's behalf 19 and at the direction of the resident. The designated representative 20 may not be an employee of the boarding home.

21 (6) "Domiciliary care" means: Assistance with activities of daily 22 living provided by the boarding home either directly or indirectly; or ((assuming general responsibility for the safety and well-being of the 23 24 resident)) health support services, if provided directly or indirectly by the boarding home; or intermittent nursing services, if provided 25 26 directly or indirectly by the boarding home. (("Domiciliary care" does 27 not include general observation or preadmission assessment for the 28 purposes of transitioning to a licensed care setting.

29 (6)) (7) "General responsibility for the safety and well-being of the resident " includes the provision of: Meals, nutritious snacks, 30 laundry, emergency assistance, activities, housekeeping services, and 31 observation of residents for changes in overall functioning. However, 32 observation of residents for changes in overall functioning shall not 33 be construed to include systems or methods employed by independent 34 senior housing, independent living units in continuing care retirement 35 36 communities, or other similar living situations including those subsidized by the department of housing and urban development, to 37 monitor the well-being of nonresident individuals. 38

(8) "General responsibility for the safety and well-being of the 1 2 resident" does not include: (a) Emergency assistance provided on an intermittent or nonroutine basis to any nonresident individual; ((or)) 3 (b) <u>blood</u> pressure checks for nonresident individuals; (c) nurse 4 consultation services provided at the request of a nonresident 5 individual to determine whether referral to an outside health care б provider is recommended; (d) making health care appointments at the 7 request of nonresident individuals; (e) reminding nonresident 8 individuals of scheduled outside health care appointments; (f) one-time 9 or short term treatment, including but not limited to removing sutures 10 or staples for nonresident individuals or applying eye drops following 11 12 eye surgery for nonresident individuals when performed pursuant to an 13 outside health care provider's instructions and the treatment is performed at the request of any nonresident individual, and the 14 activity is within the scope of practice of the available licensed 15 nurse; (g) periodic observation or preadmission assessment for the 16 purposes of transitioning to a licensed care setting; or (h) services 17 customarily provided under landlord tenant agreements governed by the 18 residential landlord-tenant act, chapter 59.18 RCW. Such services do 19 include continual care or supervision for any nonresident 20 not 21 individual.

((<del>(7)</del>)) <u>(9) "Nonresident individual" means a person who resides in</u> independent senior housing, independent living units in continuing care retirement communities, or in other similar living environments including those subsidized by the department of housing and urban development.

27 (10) "Resident" means an individual who((: Lives in a boarding 28 home, including those receiving respite care;)) is not related by blood 29 or marriage to the operator of the boarding home((;)), and by reason of 30 age or disability, <u>resides in the boarding home and may</u> receive((;)) 31 domiciliary care, <u>respite care</u>, <u>or hospice care</u> provided either 32 directly or indirectly by the boarding home.

33 (11) "Resident applicant" means an individual who has completed and
 34 signed an application for admission to a licensed boarding home.

35 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 18.20 RCW 36 to read as follows:

37 (1) A boarding home licensed under this chapter may select the

level and scope of care or services that it chooses to provide from the 1 2 list of domiciliary care services described in subsection (2), (3), or (4) of this section. In addition to the care and services described in 3 subsections (2), (3), and (4) of this section, the boarding home 4 5 licensee may provide additional care and services, as long as the resident does not require medical or nursing care, and as long as such 6 7 additional care or services are disclosed in accordance with this 8 section.

9 (a) The boarding home licensee shall disclose the level and scope 10 of care or services that it chooses to provide to the department, 11 residents or a resident's designated representative, and interested 12 consumers upon request.

(b) If the boarding home licensee changes the level or scope of services that it chooses to provide, the licensee shall provide a minimum of thirty days' notice to the department and to residents before the effective date of any change in the level or scope of care or services provided.

(c) The disclosure of any services or care that a boarding home 18 licensee offers to provide may include exceptions to allow the licensee 19 to, on a limited basis, meet the needs of residents pending discharge. 20 Providing care or services to one or more residents on a limited basis, 21 22 pending discharge, shall not be construed to mean that the licensee can 23 or will reasonably accommodate other residents' similar needs 24 throughout their boarding home stay.

25 (d) Even though the boarding home licensee may disclose that it can provide certain care or services to residents or resident applicants, 26 27 the licensee reserves the right to deny admission to a resident applicant or to discharge any resident when the licensee determines 28 that the needs of the resident applicant or the resident cannot be met 29 based upon the cumulative need for care or services of all residents or 30 the medical complexity of the resident or the resident applicant. 31 The 32 licensee may immediately discharge a resident when the licensee determines that it can no longer meet the residents' needs or when the 33 resident requires care or services that are beyond those that the 34 licensee has disclosed. The department shall, at the request of the 35 licensee, secure an alternative placement for the resident. 36

37 (e) The boarding home licensee shall use the following form, or one

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1 that is substantially similar, to disclose the care or services that 2 the licensee may choose to provide:

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10 This Disclosure Statement is not intended to take the place of 11 visiting the boarding home, communicating with boarding home staff, or 12 understanding the boarding home's fee schedule for services outlined 13 below, and other offered services.

14 This licensed boarding home has selected the level and scope of 15 care or services that it chooses to provide from the list of domiciliary care services outlined below. Should the boarding home 16 change the level or scope of services that it chooses to provide, the 17 18 provider shall provide a minimum of 30 days' notice to the Department of Social and Health Services and to residents before the effective 19 date of any change in the level or scope of care or services provided. 20 The disclosure of any services or care that a boarding home offers 21 22 to provide may include exceptions to allow the provider to, on a 23 limited basis, meet the needs of residents pending discharge. 24 Providing care or services to one or more residents on a limited basis, 25 pending discharge, shall not be construed to mean that the provider can 26 or will reasonably accommodate other residents' similar needs 27 throughout their boarding home stay.

28 This boarding home provides assistance with one or more of the 29 following Activities of Daily Living:

30 🗆 Bathing:

Substantial assistance - The resident requires physical assistance with a significant part of the bathing activity, for example, to lather, wash and/or rinse the resident's hair or body, or physical assistance into a tub or shower is needed.

9 D Minimal assistance - The resident can dress and undress but may 10 need clothing laid out and/or needs to be reminded or supervised on 11 occasion.

12 □ Substantial assistance - The resident can assist in dressing or 13 undressing but frequently or most of the time needs some physical 14 assistance.

21 □ Substantial assistance - The resident can self-feed but needs 22 standby assistance for occasional gagging, choking, or swallowing 23 difficulty. The resident may need reminding or assistance with 24 adaptive feeding equipment.

29 🗆 Personal hygiene:

Minimal assistance - The resident can manage personal hygiene and grooming tasks but must be reminded, supervised, or have personal grooming items set out, at least some of the time. The resident may require occasional assistance with both personal hygiene and grooming.
Substantial assistance - The resident regularly requires assistance with personal hygiene and grooming.

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4 🗆 Transferring:

12 🗆 Toileting:

15 □ Substantial assistance - The resident needs occasional assistance
 16 with parts of the toileting tasks.

1	□ Medication assistance	Clarification/Other Comments:		
2	□ Assistance with treatments	Clarification/Other Comments:		
3	□ Blood glucose testing	Clarification/Other Comments:		
4	□ Low sodium diets	Clarification/Other Comments:		
5	General diabetic diets	Clarification/Other Comments:		
6	□ Puree diets	Clarification/Other Comments:		
7	□ Mechanical soft diets	Clarification/Other Comments:		
8	Calorie-controlled diabetic diets	Clarification/Other Comments:		
9	□ Other diets	Clarification/Other Comments:		
10				
11	□ Arrangement of health care appointments with outside health care providers			
12		Clarification/Other Comments:		
13	□ Coordination of health care services with outside health care providers			
14		Clarification/Other Comments:		
15	□ Assistance with obtaining and maintaining glasses, hearing aids, dentures, canes, crutches, walkers, wheelchairs,			
16	and assistive communication devices	Clarification/Other Comments:		
17	Other Health Support Services:			
18				
19	□ This boarding home provides one or more of the following Intermittent Nursing Services:			
20	□ Medication administration	Clarification/Other Comments:		
21	□ Administration of health care treatments	Clarification/Other Comments:		
22	□ Blood glucose monitoring	Clarification/Other Comments:		
23	□ Ostomy care	Clarification/Other Comments:		
24	□ Tube feeding	Clarification/Other Comments:		
25	□ Insertion of indwelling urinary catheter	Clarification/Other Comments:		
26 27	□ Other Intermittent Nursing Services:			
28	Admission/Discharge/Transfer			
29	Even though the licensee ma	ay disclose that it can provide certain care		
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30 or services to residents or resident applicants, the licensee may deny 31 admission to a resident applicant or to discharge a resident when the 32 licensee determines that the needs of the resident applicant or the 33 resident cannot be met based upon the cumulative need for care or 34 services of all residents or the medical complexity of the resident or 35 the resident applicant. Notwithstanding RCW 70.129.110 (1)(a) and 36 (4)(a), the licensee may immediately discharge a resident when the 37 licensee determines that it can no longer meet the residents' needs or

when the resident requires care or services that are beyond those that the licensee has disclosed. The licensee and the resident otherwise retain all other rights of transfer and discharge under RCW 70.129.110. The department of social and health services shall, at the request of the licensee, secure an alternative placement for the resident.

6 Optional Services/Amenities:

7		This boarding home				
8		Does permit residents' designated representatives to administer or assist with medications or				
9		treatments, with the following limitations and/or conditions:				
10		Does not permit residents' designated representatives to administer or assist with medications or				
11		treatments.				
12		This boarding home has the capacity to assist with the use of oxygen, with the following limitations				
13		or conditions:				
14		This boarding home				
15		Does permit	smoking, with the follo	owing limitations or conditions:		
16		Does not permit smoking				
17		This boarding home				
18		$\Box$ Does permit pets, with the following limitations or conditions:				
19		□ Does not per	mit pets			
20		Religious/Spir	tual support services	Clarification/Other Comments:		
21		Barber/Beauty Shop services		Clarification/Other Comments:		
22		Facility transportation,		Clarification/Other Comments:		
23		Housekeeping ( day/week)		Clarification/Other Comments:		
24		This boarding home has the ability to assist with management of wandering behavior:				
25		□ Indoor	□ Outdoor	Clarification/Other Comments:		
26						
27		Other:				
28		Other:				
29		D Other:				
30	Phone number to call for more information on this boarding home, or to					
31	schedule an appointment to visit the boarding home: $\ldots$ . $\ldots$ .					
32	This Disclosure Statement was completed by:		npleted by:	Name:		
33				Title:		
34				Company:		

1	Email:
2	Phone No.: Date:
3	
4	Signature:
5	(2) Activities of daily living assistance may include one or more
6	of the following:
7	(a) Bathing:
8	(i) Minimal assistance. The resident requires oversight or
9	reminding only. The resident is capable of bathing without assistance
10	or supervision, but must be reminded occasionally or cannot get into
11	the tub or shower alone. Help is limited to standby assistance only.
12	(ii) Substantial assistance. The resident requires physical
13	assistance with a significant part of the bathing activity, for
14	example, to lather, wash and/or rinse the resident's hair or body, or
15	physical assistance into a tub or shower is needed.
16	(iii) Total assistance. The resident is dependent upon caregivers
17	to provide a complete bath.
18	(b) Dressing:
19	(i) Minimal assistance. The resident can dress and undress but may
20	need clothing laid out and/or needs to be reminded or supervised on
21	occasion.
22	(ii) Substantial assistance. The resident can assist in dressing
23	or undressing but frequently or most of the time needs some physical
24	assistance.
25	(iii) Total assistance. The resident is dependent upon caregivers
26	to do all dressing and undressing.
27	(c) Eating:
28	(i) Minimal assistance. The resident may need assistance cutting
29	or preparing food or beverages for consumption.
30	(ii) Substantial assistance. The resident can self-feed but needs
31	standby assistance for occasional gagging, choking, or swallowing
32	difficulty. The resident may need reminding or assistance with
33	adaptive feeding equipment.
34	(iii) Total assistance. The resident must be fed some or all food
35	by a caregiver and/or frequently gags or chokes due to difficulty in
36	swallowing.

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(d) Personal Hygiene:

(i) Minimal assistance. The resident can manage personal hygiene
and grooming tasks but must occasionally be reminded, supervised, or
have personal grooming items set out. The resident may require
occasional assistance with both personal hygiene and grooming.

6 (ii) Substantial assistance. The resident regularly requires 7 assistance with personal hygiene and grooming.

8 (iii) Total assistance. The resident is dependent upon caregivers 9 to provide all personal hygiene and grooming.

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(e) Transferring:

(i) Minimal assistance. The resident occasionally requires verbalcuing or standby assistance for transfers.

(ii) Substantial assistance. The resident occasionally requireslight touch to guide or steady the resident in transferring.

(iii) Total assistance. The resident requires physical assistancewith some or all transfers.

17 (f) Toileting:

(i) Minimal assistance. The resident needs reminding to toilet orto change a protective garment.

(ii) Substantial assistance. The resident needs occasionalassistance with parts of the toileting tasks.

(iii) Total assistance. The resident needs physical assistance to use the toilet on a scheduled toileting, or incontinence program which may include management of a closed drainage system if the resident has a catheter or sheath.

26 (g) Ambulation and Mobility:

(i) Minimal assistance. The resident is ambulatory or mobile, withor without assistive devices, but requires occasional verbal cuing.

(ii) Substantial assistance. The resident is ambulatory or mobile but needs occasional standby assistance or light touch assistance to guide or steady during ambulation or mobility.

(iii) Total assistance. The resident is only ambulatory or mobile,
 with or without assistive devices, with the physical assistance of a
 caregiver.

1 (3) Health support services may include one or more of the 2 following:

- 3 (a) Medication assistance;
- 4 (b) Assistance with treatments;
- 5 (c) Blood glucose testing;
- 6 (d) Low sodium diets;
- 7 (e) General diabetic diets;
- 8 (f) Puree diets;
- 9 (g) Mechanical soft foods;
- 10 (h) Calorie-controlled diabetic diets;

(i) Arrangement of health care appointments with outside health care providers;

13 (j) Coordination of health care services with outside health care 14 providers; and

(k) Assistance with obtaining and maintaining glasses, hearing aids, dentures, canes, crutches, walkers, wheelchairs, and assistive communication devices.

- 18 (4) Intermittent nursing services may include one or more of the 19 following:
- 20 (a) Medication administration;
- 21 (b) Administration of health care treatments;
- 22 (c) Blood glucose monitoring;
- 23 (d) Ostomy care;
- 24 (e) Tube feeding; and
- 25 (f) Insertion of indwelling urinary catheters.

26 <u>NEW SECTION.</u> **Sec. 3.** A new section is added to chapter 18.20 RCW 27 to read as follows:

(1) A boarding home licensee may permit residents' designated 28 29 representatives to administer medications or treatments or to provide 30 medication or treatment assistance to residents. If the licensee permits this, the licensee may establish conditions under which such 31 assistance may occur. The licensee shall disclose to the department, 32 residents, and each resident's designated representative, and to 33 34 interested consumers upon request, information describing whether the 35 licensee permits assistance with or permits the administration of

medications or treatments and, if so, whether there are any limitations
 or conditions and the extent thereof.

3 (2) A resident's designated representative may only administer or 4 provide assistance with medications or treatments on behalf of the 5 resident who has granted the designated representative the authority to 6 so act.

7 (3) If a licensee permits residents' designated representatives to 8 administer medications or treatments or to provide medication or 9 treatment assistance, the licensee shall request that each designated 10 representative submit to the licensee a written medication or treatment 11 plan. At a minimum, the written medication or treatment plan shall 12 identify:

(a) By name, the designated representative who will administer themedication or treatment or provide assistance therewith;

15 (b) The primary medication or treatment administration or 16 assistance that the designated representative will provide consistent 17 with subsection (1) of this section. This will be referred to as the 18 primary plan;

(c) An alternate plan that will meet the resident's medication or treatment needs if the designated representative is unable to fulfill his or her duties as specified in the primary plan; and

(d) An emergency contact person and telephone number if the boarding home licensee observes changes in the resident's functioning or condition that may relate to the medication or treatment plan.

(4) The boarding home licensee may require that the primary or alternate medication or treatment plan include other information in addition to that specified in subsection (3) of this section.

(5) The medication or treatment plan shall be signed and dated by the resident, the resident's designated representative, and the boarding home licensee.

31 (6) The designated representative shall immediately notify the 32 boarding home licensee of any change in the primary or alternate 33 medication or treatment plan.

(7) When a boarding home licensee permits residents' designated representatives to assist with or administer medications or treatments, the licensee must observe the resident for changes in overall functioning consistent with RCW 18.20.280. The licensee's duty of care under this section, and any negligence that may be attributed thereto, 1 is limited to the licensee's failure to observe the resident for a 2 change in overall functioning, and then to the extent that such change 3 in overall functioning would have been observed by a reasonable person 4 having the same skill and knowledge as the licensee.

5 **Sec. 4.** RCW 18.20.090 and 1985 c 213 s 6 are each amended to read 6 as follows:

7 The department shall adopt, amend, and promulgate such rules, 8 regulations, and standards with respect to all boarding homes and operators thereof to be licensed hereunder as may be designed to 9 10 further the accomplishment of the purposes of this chapter in promoting 11 safe and adequate care of individuals in boarding homes and the sanitary, hygienic and safe conditions of the boarding home in the 12 interest of public health, safety, and welfare. 13 However, the department may not adopt or amend rules, with respect to matters 14 pertaining to chapter 18.79 RCW, or any other health professional 15 16 licensing matters that are under the purview of the department of health. The department may, by reference, incorporate any such rules 17 adopted under chapter 18.79 RCW. 18

19 <u>NEW SECTION.</u> Sec. 5. A new section is added to chapter 18.20 RCW 20 to read as follows:

(1) The boarding home licensee shall conduct an initial assessment for each resident applicant. The initial assessment shall include the following minimum information:

24 (a) Medical history;

25 (b) Necessary and contraindicated medications;

(c) A licensed medical or health professional's diagnosis, unlessthe individual objects for religious reasons;

28 (d) Significant known behaviors or symptoms that may cause concern or require special care. 29 The licensee shall complete the initial 30 assessment before admission unless there is an emergency. In an emergency admission, the initial assessment must be completed within 31 32 five days of the date of admission. For purposes of this section, an emergency includes, but is not limited to, evenings, weekends, or 33 34 Friday afternoons and the resident applicant would otherwise need to 35 remain in a licensed hospital, nursing facility, adult family home, an 36 unsafe home environment, or be without adequate and safe housing.

1 (e) Mental illness diagnosis, except where protected by 2 confidentiality laws;

3 (f) Level of personal care needs;

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(g) Activities and service preferences; and

5 (h) Preferences regarding other issues important to the resident 6 applicant, such as food and daily routine.

7 (2) The boarding home licensee shall complete an initial resident 8 service plan upon move-in to identify the resident's immediate needs 9 and to provide direction to staff and caregivers relating to the 10 resident's immediate needs.

(3) The boarding home licensee shall complete a negotiated service 11 12 agreement involving the resident and the resident's designated 13 representative, within thirty days of a resident's move-in date. The 14 resident's designated representative will not be included in the development of the negotiated service agreement if the resident objects 15 to his or her involvement. If the resident is a Medicaid client, the 16 17 department's case manager shall also be involved. However, if the case manager is not available, the completion of the negotiated service 18 agreement shall not be delayed but shall be sent to the case manager 19 for review. 20

21 <u>NEW SECTION.</u> Sec. 6. A new section is added to chapter 18.20 RCW 22 to read as follows:

23 By December 12, 2005, the department shall report on the payment 24 system for licensed boarding homes to the chairs of the senate and house of representatives health care committees. The department shall 25 26 include in the report findings regarding the average costs of providing 27 and services for the nonmetropolitan statistical areas, care metropolitan statistical areas, and King county to determine whether 28 the rates of payment within the designated areas are, on average, 29 reasonably related to the identified average costs. To protect the 30 31 confidentiality of the cost data, the department shall work in collaboration with the three statewide associations representing 32 boarding home providers, so that the department does not possess 33 individual provider identifiable cost data. 34 This cost-to-rate comparison study shall assess any cost impacts that may be attributed 35 36 to the implementation of new boarding home rules occurring between September 1, 2004, and June 30, 2005. If the department adopts new 37

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boarding home rules after June 30, 2005, the report to the chairs of the senate and house of representatives health care committees will instead be due by December 12, 2006.

4 **Sec. 7.** RCW 18.20.160 and 1985 c 297 s 2 are each amended to read 5 as follows:

6 Because boarding homes are engaged in the rental or leasing of real property to residents, no person operating a boarding home licensed 7 under this chapter shall admit to or retain in the boarding home any 8 aged person requiring nursing or medical care of a type provided by 9 institutions licensed under chapters 18.51, 70.41 or 71.12 RCW, except 10 11 that when registered nurses are available, and upon a doctor's order that a supervised medication service is needed, it may be provided. 12 Supervised medication services, as defined by the department but not 13 exceeding that which is permitted under chapters 69.41 and 18.79 RCW, 14 15 may include an approved program of self-medication or self-directed 16 medication. Such medication service shall be provided only to boarders 17 who otherwise meet all requirements for residency in a boarding home. No boarding home shall admit or retain a person requiring twenty-four 18 hours of continuous skilled nursing care or supervision, excluding 19 20 persons who are receiving hospice care or persons who have a short-term 21 illness that is expected to be resolved within fourteen days.

22 Sec. 8. RCW 18.20.290 and 2003 c 231 s 11 are each amended to read 23 as follows:

(1) When a boarding home contracts with the department to provide adult residential care services, enhanced adult residential care services, or assisted living services under chapter 74.39A RCW, the boarding home must hold a medicaid eligible resident's room or unit when short-term care is needed in a nursing home or hospital, the resident is likely to return to the boarding home, and payment is made under subsection (2) of this section.

31 (2) The medicaid resident's bed or unit shall be held for up to 32 twenty days. The per day bed or unit hold compensation amount shall be 33 seventy percent of the daily rate paid for the first seven days the bed 34 or unit is held for the resident who needs short-term nursing home care 35 or hospitalization. The rate for the eighth through the twentieth day a bed is held shall be established in rule, but shall be no lower than
 ten dollars per day the bed or unit is held.

3 (3) The boarding home may seek third-party payment to hold a bed or 4 unit for twenty-one days or longer. The third-party payment shall not 5 exceed eighty-five percent of the average daily <u>private pay and</u> 6 <u>Medicaid</u> rate paid to the facility, and as determined by the facility. 7 If third-party payment is not available, the medicaid resident may 8 return to the first available and appropriate bed or unit, if the 9 resident continues to meet the admission criteria under this chapter.

10 (4) The department shall monitor the use and impact of the policy 11 established under this section and shall report its findings to the 12 appropriate committees of the senate and house of representatives by 13 December 31, 2005.

14 (5) This section expires June 30, 2006.

15 **Sec. 9.** RCW 74.39A.009 and 1997 c 392 s 103 are each amended to 16 read as follows:

17 Unless the context clearly requires otherwise, the definitions in 18 this section apply throughout this chapter.

(1) "Adult family home" means a home licensed under chapter 70.128RCW.

(2) "Adult residential care" means services provided by a boarding home that is licensed under chapter 18.20 RCW and that has a contract with the department under RCW 74.39A.020 to provide personal care services.

(3) "Assisted living services" means services provided by a boarding home that has a contract with the department under RCW 74.39A.010 to provide personal care services, intermittent nursing services, and medication administration services, and the resident is housed in a private apartment-like unit.

30 (4) "Boarding home" means a facility licensed under chapter 18.2031 RCW.

32 (5) "Cost-effective care" means care provided in a setting of an 33 individual's choice that is necessary to promote the most appropriate 34 level of physical, mental, and psychosocial well-being consistent with 35 client choice, in an environment that is appropriate to the care and 36 safety needs of the individual, and such care cannot be provided at a lower cost in any other setting. But this in no way precludes an
 individual from choosing a different residential setting to achieve his
 or her desired quality of life.

4 (6) "Department" means the department of social and health 5 services.

6 (7) "Enhanced adult residential care" means services provided by a 7 boarding home that is licensed under chapter 18.20 RCW and that has a 8 contract with the department under RCW 74.39A.010 to provide personal 9 care services, intermittent nursing services, and medication 10 administration services.

(8) "Functionally disabled person" is synonymous with chronic 11 12 functionally disabled and means a person who because of a recognized chronic physical or mental condition or disease, including chemical 13 14 dependency, is impaired to the extent of being dependent upon others for direct care, support, supervision, or monitoring to perform 15 activities of daily living. "Activities of daily living", in this 16 17 context, means self-care abilities related to personal care such as bathing, eating, using the toilet, dressing, and transfer. 18 Instrumental activities of daily living may also be used to assess a 19 person's functional abilities as they are related to the mental 20 21 capacity to perform activities in the home and the community such as 22 cooking, shopping, house cleaning, doing laundry, working, and managing 23 personal finances.

(9) "Home and community services" means adult family homes, in-home services, and other services administered or provided by contract by the department directly or through contract with area agencies on aging or similar services provided by facilities and agencies licensed by the department.

(10) "Long-term care" is synonymous with chronic care and means 29 care and supports delivered indefinitely, intermittently, or over a 30 31 sustained time to persons of any age disabled by chronic mental or 32 physical illness, disease, chemical dependency, or a medical condition that is permanent, not reversible or curable, or is long-lasting and 33 34 severely limits their mental or physical capacity for self-care. The 35 use of this definition is not intended to expand the scope of services, 36 care, or assistance by any individuals, groups, residential care 37 settings, or professions unless otherwise expressed by law.

(11) "Nursing home" means a facility licensed under chapter 18.51
 RCW.

3 (12) "Secretary" means the secretary of social and health services.

4 (13) "Tribally licensed boarding home" means a boarding home 5 licensed by a federally recognized Indian tribe which home provides 6 services similar to boarding homes licensed under chapter 18.20 RCW.

7 Sec. 10. RCW 74.39A.020 and 1995 1st sp.s. c 18 s 15 are each 8 amended to read as follows:

9 (1) To the extent of available funding, the department of social 10 and health services may contract for adult residential care ((and 11 enhanced adult residential care)).

12 (2) The department shall, by rule, develop terms and conditions for 13 facilities that contract with the department for adult residential care 14 ((and enhanced adult residential care)) to establish:

(a) Facility service standards consistent with the principles in
 RCW 74.39A.050 and consistent with chapter 70.129 RCW; and

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(b) Training requirements for providers and their staff.

(3) The department shall, by rule, provide that services in adult
 residential care ((and enhanced adult residential care)) facilities:

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(a) Recognize individual needs, privacy, and autonomy;

(b) Include personal care ((and limited nursing services)) and other services that promote independence and self-sufficiency and aging in place;

(c) Are directed first to those persons most likely, in the absence of adult residential care ((and enhanced adult residential care)) services, to need hospital, nursing facility, or other out-of-home placement; and

(d) Are provided in compliance with applicable facility andprofessional licensing laws and rules.

30 (4) When a facility contracts with the department for adult 31 residential care ((and enhanced adult residential care)), only services 32 and facility standards that are provided to or in behalf of the adult 33 residential care ((or the enhanced adult residential care)) client 34 shall be subject to the adult residential care ((or enhanced adult 35 residential care)) rules.

36 (5) To the extent of available funding, the department may also 37 contract under this section with a tribally licensed boarding home for the provision of services of the same nature as the services provided by adult residential care facilities. The provisions of subsections (2)(a) and (b) and (3)(a) through (d) of this section apply to such a contract.

5 <u>NEW SECTION.</u> Sec. 11. A new section is added to chapter 18.20 RCW 6 to read as follows:

7 When the department performs assessments of Medicaid eligible 8 clients to determine whether such persons are eligible for boarding 9 home placement, the department shall not adjust the assessment method, 10 including the algorithms used to categorize clients into assessment 11 categories, for the sole purpose of remaining within the funding amount 12 appropriated by the legislature for boarding homes.

13 Sec. 12. RCW 70.129.110 and 1997 c 392 s 205 are each amended to 14 read as follows:

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

18 (a) Except as provided in section 2 of this act, the transfer or 19 discharge is necessary for the resident's welfare and the resident's 20 needs cannot be met in the facility;

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

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

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

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(e) The facility ceases to operate.

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

33 (3) Before a long-term care facility transfers or discharges a 34 resident, the facility must:

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

1 (b) Notify the resident and representative and make a reasonable 2 effort to notify, if known, an interested family member of the transfer 3 or discharge and the reasons for the move in writing and in a language 4 and manner they understand;

5

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

6 (d) Include in the notice the items described in subsection (5) of 7 this section.

8 (4)(a) Except when specified in this subsection <u>and as provided in</u> 9 <u>section 2 of this act</u>, the notice of transfer or discharge required 10 under subsection (3) of this section must be made by the facility at 11 least thirty days before the resident is transferred or discharged.

(b) Notice may be made as soon as practicable before transfer ordischarge when:

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

15 (ii) The health of individuals in the facility would be endangered; 16 (iii) An immediate transfer or discharge is required by the 17 resident's urgent medical needs; or

18

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

19 (5) The written notice specified in subsection (3) of this section 20 must include the following:

21

(a) The reason for transfer or discharge;

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

23 (c) The location to which the resident is transferred or 24 discharged;

25 (d) The name, address, and telephone number of the state long-term 26 care ombudsman;

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

32 (f) For residents who are mentally ill, the mailing address and 33 telephone number of the agency responsible for the protection and 34 advocacy of mentally ill individuals established under the protection 35 and advocacy for mentally ill individuals act.

36 (6) A facility must provide sufficient preparation and orientation 37 to residents to ensure safe and orderly transfer or discharge from the 38 facility. 1 (7) A resident discharged in violation of this section has the 2 right to be readmitted immediately upon the first availability of a 3 gender-appropriate bed in the facility.

<u>NEW SECTION.</u> Sec. 13. This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect immediately, except that sections 2, 3, and 5 of this act take effect September 1, 2004.

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