1	HOUSE BILL NO. 690
2	AMENDMENT IN THE NATURE OF A SUBSTITUTE
3	(Proposed by the House Committee on Health, Welfare and Institutions
4	on)
5	(Patron Prior to SubstituteDelegate Hope)
6	A BILL to amend and reenact § 63.2-1805 of the Code of Virginia, relating to assisted living facilities;
7	involuntary discharge.
8	Be it enacted by the General Assembly of Virginia:
9	1. That § 63.2-1805 of the Code of Virginia is amended and reenacted as follows:
10	§ 63.2-1805. Admissions and discharge; mandatory minimum liability insurance.
11	A. The Board shall adopt regulations:
12	1. Governing admissions to assisted living facilities;
13	2. Requiring that each assisted living facility prepare and provide a statement, in a format
14	prescribed by the Department, to any prospective resident and his legal representative, if any, prior to
15	admission and upon request, that discloses information, fully and accurately in plain language, about the
16	(i) services; (ii) fees, including clear information about what services are included in the base fee and any
17	fees for additional services; (iii) admission, transfer, and discharge criteria, including criteria for transfer
18	to another level of care within the same facility or complex; (iv) general number and qualifications of staff
19	on each shift; (v) range, frequency, and number of activities provided for residents; and (vi) ownership
20	structure of the facility;
21	3. Establishing a process to ensure that each resident admitted or retained in an assisted living
22	facility receives appropriate services and periodic independent reassessments and reassessments when
23	there is a significant change in the resident's condition in order to determine whether a resident's needs
24	can continue to be met by the facility and whether continued placement in the facility is in the best interests
25	of the resident;

4. Governing appropriate discharge planning for residents whose care needs can no longer be metby the facility;

28 5. Addressing the involuntary discharge of residents. Such regulations shall provide that residents may only be involuntarily discharged (i) in accordance with 22VAC40-73-430, provided that the assisted 29 30 living facility has met the requirements of subsection B, as applicable, and the assisted living facility has 31 made reasonable efforts to meet the needs of the resident; (ii) for nonpayment of contracted charges, 32 provided that the resident has been given at least 30 days to cure the delinquency after notice was provided 33 to the resident and the resident's legal representative or designated contact person of such nonpayment; 34 (iii) for the resident's failure to substantially comply with the terms and conditions, as allowed by 35 regulation, of the resident agreement between the resident and assisted living facility; (iv) if the assisted 36 living facility closes in accordance with Board regulations; or (v) when the resident develops a condition 37 or care need that is prohibited in subsection D. Unless an emergency discharge is necessary due to an immediate and serious risk to the health, safety, or welfare of the resident or others, the assisted living 38 39 facility shall, prior to involuntarily discharging a resident, make reasonable efforts, as appropriate, to 40 resolve any issues with the resident upon which the decision to discharge is based and document such 41 efforts in the resident's file. 42 In addition to notifying the resident and the resident's legal representative or designated contact 43 person, the assisted living facility shall provide notice to the resident, the Department, and the State Long-

44 Term Care Ombudsman of discharge and residency termination at least 30 days prior to an involuntary

45 discharge unless an emergency discharge is necessary due to an immediate and serious risk to the health,

46 safety, or welfare of the resident or others. Such notice of discharge and residency termination shall

47 include the reasons for discharge, the date on which the discharge will occur, and information regarding

48 the resident's right to appeal, within the 30-day notice period, the assisted living facility's decision to

49 discharge the resident and the time restrictions for filing such appeal.

50 In cases of an emergency discharge, such notice shall be provided as soon as possible, but no later

51 than five days after the emergency discharge. Within five days after an emergency discharge, the written

52 <u>discharge notice shall be provided to the resident, the resident's legal representative or designated contact</u>

53	person, the Department, and the State Long-Term Care Ombudsman. A resident may appeal any discharge
54	except discharges pursuant to clause (iv).
55	The Department shall provide a form to be used by assisted living facilities to provide notice to a
56	resident of the resident's right to appeal the facility's decision to discharge the resident, which shall also
57	include information regarding the process for initiating an appeal, the number for a toll-free information
58	line, a hearing request form, the facility's obligation to assist the resident in filing an appeal and provide,
59	upon request, a postage prepaid envelope addressed to the Department, and a statement of the resident's
60	right to continue to reside in the facility, free from retaliation, until the appeal is finalized unless the
61	discharge is an emergency discharge.
62	Prior to involuntarily discharging a resident, the assisted living facility shall provide relocation
63	assistance to the resident and the resident's legal representative in accordance with 22VAC40-73-430. The
64	Board shall adopt regulations that establish a process for appeals filed pursuant to this subdivision. Court
65	review of final agency determinations shall be made in accordance with the provisions of the
66	Administrative Process Act (§ 2.2-4000 et seq.);
66 67	<u>Administrative Process Act (§ 2.2-4000 et seq.);</u> 6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of
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67 68	6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission;
67 68 69	6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission;7. Establishing a process to ensure that any resident temporarily detained in a facility pursuant to
67 68 69 70	 6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission; 7. Establishing a process to ensure that any resident temporarily detained in a facility pursuant to §§ 37.2-809 through 37.2-813 is accepted back in the assisted living facility if the resident is not
67 68 69 70 71	 6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission; 7. Establishing a process to ensure that any resident temporarily detained in a facility pursuant to §§ 37.2-809 through 37.2-813 is accepted back in the assisted living facility if the resident is not involuntarily admitted pursuant to §§ 37.2-814 through 37.2-819;
67 68 69 70 71 72	 6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission; 7. Establishing a process to ensure that any resident temporarily detained in a facility pursuant to §§ 37.2-809 through 37.2-813 is accepted back in the assisted living facility if the resident is not involuntarily admitted pursuant to §§ 37.2-814 through 37.2-819; 8. Requiring that each assisted living facility train all employees who are mandated to report adult
 67 68 69 70 71 72 73 	 6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission; 7. Establishing a process to ensure that any resident temporarily detained in a facility pursuant to §§ 37.2-809 through 37.2-813 is accepted back in the assisted living facility if the resident is not involuntarily admitted pursuant to §§ 37.2-814 through 37.2-819; 8. Requiring that each assisted living facility train all employees who are mandated to report adult abuse, neglect, or exploitation pursuant to § 63.2-1606 on such reporting procedures and the consequences
67 68 69 70 71 72 73 74	 6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission; 7. Establishing a process to ensure that any resident temporarily detained in a facility pursuant to §§ 37.2-809 through 37.2-813 is accepted back in the assisted living facility if the resident is not involuntarily admitted pursuant to §§ 37.2-814 through 37.2-819; 8. Requiring that each assisted living facility train all employees who are mandated to report adult abuse, neglect, or exploitation pursuant to § 63.2-1606 on such reporting procedures and the consequences for failing to make a required report;
67 68 69 70 71 72 73 74 75	 6. Requiring that residents are informed of their rights pursuant to § 63.2-1808 at the time of admission; 7. Establishing a process to ensure that any resident temporarily detained in a facility pursuant to §§ 37.2-809 through 37.2-813 is accepted back in the assisted living facility if the resident is not involuntarily admitted pursuant to §§ 37.2-814 through 37.2-819; 8. Requiring that each assisted living facility train all employees who are mandated to report adult abuse, neglect, or exploitation pursuant to § 63.2-1606 on such reporting procedures and the consequences for failing to make a required report; 9. Requiring that each assisted living facility prepare and provide a statement, in a format

79 provided that no facility shall state that liability insurance is in place unless such insurance provides a 80 minimum amount of coverage as established by the Board;

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10. Establishing the minimum amount of liability insurance coverage to be maintained by an 82 assisted living facility for purposes of disclosure in accordance with subdivision 9; and

83 11. Requiring that all assisted living facilities disclose to each prospective resident, or his legal 84 representative, in writing in a document provided to the prospective resident or his legal representative 85 and as evidenced by the written acknowledgment of the resident or his legal representative on the same 86 document, whether the facility has an on-site emergency electrical power source for the provision of 87 electricity during an interruption of the normal electric power supply and, if the assisted living facility 88 does have an on-site emergency electrical power source, (i) the items for which such on-site emergency 89 electrical power source will supply power in the event of an interruption of the normal electric power 90 supply and (ii) whether staff of the assisted living facility have been trained to maintain and operate such 91 on-site emergency electrical power source to ensure the provision of electricity during an interruption of 92 the normal electrical power supply. For the purposes of this subdivision, an on-site emergency electrical 93 power supply shall include both permanent emergency electrical power supply sources and portable 94 emergency electrical power sources, provided that such temporary electrical power supply source remains 95 on the premises of the assisted living facility at all times. Written acknowledgement of the disclosure shall 96 be represented by the signature or initials of the resident or his legal representative immediately following 97 the on-site emergency electrical power source disclosure statement.

98 B. If there are observed behaviors or patterns of behavior indicative of mental illness, intellectual 99 disability, substance abuse, or behavioral disorders, as documented in the uniform assessment instrument 100 completed pursuant to § 63.2-1804, the facility administrator or designated staff member shall ensure that 101 an evaluation of the individual is or has been conducted by a qualified professional as defined in 102 regulations. If the evaluation indicates a need for mental health, developmental, substance abuse, or 103 behavioral disorder services, the facility shall provide (i) a notification of the resident's need for such 104 services to the authorized contact person of record when available and (ii) a notification of the resident's 105 need for such services to the community services board or behavioral health authority established pursuant

106 to Title 37.2 that serves the city or county in which the facility is located, or other appropriate licensed 107 provider. The Department shall not take adverse action against a facility that has demonstrated and 108 documented a continual good faith effort to meet the requirements of this subsection. 109 C. The Department shall not order the removal of a resident from an assisted living facility if (i) 110 the resident, the resident's family, the resident's physician, and the facility consent to the resident's 111 continued stay in the assisted living facility and (ii) the facility is capable of providing, obtaining, or 112 arranging for the provision of necessary services for the resident, including, but not limited to, home health 113 care or hospice care. 114 D. Notwithstanding the provisions of subsection C, assisted living facilities shall not admit or 115 retain an individual with any of the following conditions or care needs: 116 1. Ventilator dependency. 117 2. Dermal ulcers III and IV, except those stage III ulcers that are determined by an independent 118 physician to be healing. 119 3. Intravenous therapy or injections directly into the vein except for intermittent intravenous 120 therapy managed by a health care professional licensed in Virginia or as permitted in subsection E. 121 4. Airborne infectious disease in a communicable state that requires isolation of the individual or 122 requires special precautions by the caretaker to prevent transmission of the disease, including diseases 123 such as tuberculosis and excluding infections such as the common cold. 124 5. Psychotropic medications without appropriate diagnosis and treatment plans. 125 6. Nasogastric tubes. 126 7. Gastric tubes except when the individual is capable of independently feeding himself and caring 127 for the tube or as permitted in subsection E. 128 8. An imminent physical threat or danger to self or others is presented by the individual. 129 9. Continuous licensed nursing care (seven-days-a-week, 24-hours-a-day) is required by the 130 individual. 131 10. Placement is no longer appropriate as certified by the individual's physician.

132 11. Maximum physical assistance is required by the individual as documented by the uniform 133 assessment instrument and the individual meets Medicaid nursing facility level-of-care criteria as defined 134 in the State Plan for Medical Assistance, unless the individual's independent physician determines 135 otherwise. Maximum physical assistance means that an individual has a rating of total dependence in four 136 or more of the seven activities of daily living as documented on the uniform assessment instrument.

137 12. The assisted living facility determines that it cannot meet the individual's physical or mental138 health care needs.

139 13. Other medical and functional care needs that the Board determines cannot be met properly in140 an assisted living facility.

141 E. Except for auxiliary grant recipients, at the request of the resident in an assisted living facility 142 and when his independent physician determines that it is appropriate, (i) care for the conditions or care 143 needs defined in subdivisions D 3 and D 7 may be provided to the resident by a licensed physician, a 144 licensed nurse or a nurse holding a multistate licensure privilege under a physician's treatment plan, or a 145 home care organization licensed in Virginia or (ii) care for the conditions or care needs defined in 146 subdivision D 7 may also be provided to the resident by facility staff if the care is delivered in accordance 147 with the regulations of the Board of Nursing for delegation by a registered nurse Part VIII (18VAC90-20-148 420 et seq.) of 18VAC90-20.

149 The Board shall adopt regulations to implement the provisions of this subsection.

150 F. In adopting regulations pursuant to subsections A, B, C, D, and E, the Board shall consult with151 the Departments of Health and Behavioral Health and Developmental Services.

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