THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL No. 136 Session of 2003

INTRODUCED BY MOWERY, BOSCOLA, EARLL, ERICKSON, GREENLEAF, KASUNIC, KITCHEN, KUKOVICH, LEMMOND, MADIGAN, ORIE, TARTAGLIONE, THOMPSON, WAGNER AND C. WILLIAMS, FEBRUARY 3, 2003

REFERRED TO PUBLIC HEALTH AND WELFARE, FEBRUARY 3, 2003

AN ACT

1	Providing for the licensure of assisted living residences and
2	services, for expansion of publicly funded home-based and
3	community-based assisted living services and for greater
4	information to the public about long-term care options;
5	expanding Medicaid-funded services under the Pennsylvania
6	State plan and through the expansion of home-based and
7	community-based services waivers; establishing a new State-
8	funded program of assisted living services to help consumers
9	bridge to eligibility under Medicaid; eliminating barriers
10 11	and financial disincentives to receiving home-based and
12	community-based assisted living services; conferring powers and duties on the Department of Public Welfare, the
13	Department of Health and the Department of Aging; and making
14^{13}	an appropriation.
ТТ	
15	The General Assembly finds and declares as follows:
16	(1) Assisted living residences and community-based
17	assisted living services are a rapidly growing long-term care
18	alternative across the nation.
19	(2) Whereas there have been a number of instances of
20	consumer harm due to inadequate training or staffing,
21	Pennsylvanians want to know that they will receive quality
22	care from adequately and appropriately trained and

23 credentialed staff.

(3) Assisted living residences and home-based and
 community-based assisted living services are widely accepted
 by the general public because they allow people to age in
 place, maintain their independence and exercise decision
 making and personal choice.

6 (4) Consumers continue to say if they should need long-7 term care services, the four things they want most are:

8 (i) To stay independent and live at home or in their 9 community as long as possible.

10

(ii) To be treated with respect and dignity.

11 (iii) To have a choice of long-term care and12 supportive services options.

13 (iv) If they can no longer be maintained at home, they want to be in as residential a setting as possible 14 15 where they can have their own private living unit. (5) Medicare, Medicaid State plan services and most 16 17 private insurance pay for very little home-based and 18 community-based assisted living services or assisted living 19 residences and many Pennsylvanians cannot afford to pay for 20 themselves.

(6) It is often far less expensive to provide publicly funded assisted living services in the home or in an assisted living residence than to provide such services in a nursing facility.

(7) Presently, Pennsylvania lags behind other states in
the imbalance of its public funding for nursing facility care
versus home-based and community-based services.

(8) Pennsylvania's publicly funded programs for home based and community-based services have complicated
 application forms, delays for assessment and approval and
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inadequate assisted living services available for
 Pennsylvanians needing long-term care services who wish to
 remain in the community.

4 (9) Although Pennsylvanians wish to remain in the
5 community when they are in need of long-term care services,
6 they are generally unaware of what assisted living services
7 are available or of the availability of public funding for
8 those services other than in a nursing facility.

9 (10) Publicly funded home-based and community-based 10 services should meet consumers' needs, assist family 11 caregivers, permit consumers to live independently in the 12 residential environment of their choice, promote integration 13 of consumers into the community, maximize consumer choice to 14 promote and support the consumer's changing needs, be 15 consumer oriented and meet professional standards of quality.

It is in the best interest of all Pennsylvanians 16 (11)17 that the Commonwealth license assisted living residences and 18 services and establish a wider range of publicly funded home-19 based and community-based assisted living services, make 20 information about these services widely available, streamline and simplify the application and publicly funded services in 21 22 the community rather than a nursing facility and make these 23 services available in residential settings with the 24 availability of 24-hour services, if the consumer lives alone 25 and needs to move to such a setting.

26 The General Assembly of the Commonwealth of Pennsylvania 27 hereby enacts as follows:

28 Section 1. Short title.

29 This act shall be known and may be cited as the Pennsylvania 30 Assisted Living Act.

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1 Section 2. Definitions.

2 The following words and phrases when used in this act shall 3 have the meanings given to them in this section unless the 4 context clearly indicates otherwise:

5 "Abuse." One or more of the following acts:

6 (1) infliction of injury, unreasonable confinement,
7 intimidation or punishment with resulting physical harm, pain
8 or mental anguish;

9 (2) willful deprivation of goods or services by a
10 caretaker or assisted living provider or direct service staff
11 which are necessary to maintain physical or mental health;

12 (3) sexual harassment, rape or abuse as defined in 23
13 Pa.C.S. Ch. 61 (relating to protection from abuse);

(4) exploitation by an act or a course of conduct, including misrepresentation or failure to obtain informed consent which results in monetary, personal or other benefit, gain or profit for the perpetrator or monetary or personal loss to the consumer;

19 (5) neglect of the consumer which results in physical20 harm, pain or mental anguish; or

21 (6) abandonment or desertion by a caretaker.

22 "Activities of daily living." Activities including eating,
23 bathing, dressing, toileting, transferring in and out of bed or
24 in and out of a chair and personal hygiene.

25 "Adult." A person who is 18 year of age or older.

26 "Aging in place." The process of providing increased or 27 adjusted services to a person to compensate for the physical or 28 mental decline that occurs with the aging process in order to 29 maximize individual dignity and independence and permit the 30 person to remain in a familiar, noninstitutional, residential 20030S0136B0148 - 4 - environment for as long as possible. Such services may be
 provided through residence staff, a third party, volunteers,
 friends or family.

4 "Applicant." An individual who has expressed interest in
5 applying for residence in an assisted living residence or
6 obtaining services from an assisted living services provider.
7 "Area agency on aging." The local agency designated by the
8 Department of Aging within each planning and service area to
9 administer the delivery of a comprehensive and coordinated plan
10 of social and other services and activities.

11 "Assisted living." Services as determined and self-directed by a consumer or by a legal representative that permit and 12 13 assist the consumer to live in a community, including such housing assistance or residency in an assisted living residence 14 15 that permits the consumer to safely be supported in a residence 16 in which the consumer's independence, dignity and ability to 17 make choices are maintained, to the extent of the consumer's 18 capabilities.

19 "Assisted living residence." A residential setting that:

(1) Offers, provides and/or coordinates a combination of
personal care services, activities, whether scheduled or
unscheduled, and 24-hour supervision and health-related
services for four or more consumers who are not related to
the operator.

(2) Has a service program and physical environment
designed to minimize the need for residents to move within or
from the setting to accommodate changing needs and
preferences.

29 (3) Has an organized mission, service programs and a 30 physical environment designed to maximize residents' dignity, 20030S0136B0148 - 5 - autonomy, privacy and independence and encourages family and
 community involvement.

3 (4) Charges costs for housing and services which may be 4 independent of one another and that provides consumers with 5 the ability to choose their service provider and the services 6 to be provided.

7 Has a goal of fostering aging in place and promoting (5) 8 consumer self-direction and active participation in decision making while emphasizing an individual's privacy and dignity. 9 10 The term does not include residential living units in continuing 11 care providers certified by the Insurance Department or residential living units in subsidized housing apartments, 12 13 unless required to be licensed under the United States 14 Department of Housing and Urban Development Assisted Living 15 Conversion Program.

16 "Assisted living residency agreement." The contract or 17 contracts between a provider and a consumer regarding the 18 consumer's residency at the assisted living residence. The term 19 also includes the agreement between an assisted living residence 20 and an entity contracting for assisted living residence for the 21 consumer using public funding.

22 "Assisted living services." A combination of supportive 23 services, personal care services, personalized assistance 24 services, assistive technology and health-related services 25 designed to respond to the individual needs of those who need 26 assistance with activities of daily living (ADLs) and 27 instrumental activities of daily living (IADLs).

28 "Assisted living services agreement." The contract or 29 contracts between a provider or providers and the consumer 30 needing assisted living services regarding the provision and 20030S0136B0148 - 6 - terms of the assisted living services. The term includes
 contracts between assisted living service providers and entities
 contracting for services for consumers using public funding.

4 "Assistive technology." Those devices and services, whether 5 medically necessary or not, that are used to increase, maintain 6 or improve the functional capabilities of individuals with 7 disabilities which may or may not be needed to permit the person 8 to live independently. The term shall include, but not be 9 limited to, hand reachers, adapted telephones, reading aids and 10 other nonmedical devices.

11 "Cognitive support services." Services provided as part of a coordinated care plan to individuals who have memory impairments 12 13 and other cognitive problems that significantly interfere with 14 their ability to carry out activities of daily living without 15 assistance and who require that supervision, monitoring and 16 programming be available to them 24 hours a day, seven days a 17 week in order for them to reside safely in setting of their 18 choice, including assessment, service planning, ongoing monitoring, personal care services, health support services and 19 20 a full range of dementia-capable activity programming and crisis 21 management.

22 "Compliance." A residence or assisted living service provider will be found in compliance with the requirements of 23 this act and its regulations where, but for isolated Class III 24 25 violations for which the assisted living residence administrator 26 has provided written certification of correction of the isolated 27 Class III violations within 30 days of the date of the inspection, and has met all other requirements of this act and 28 its regulations. 29

30 "Comprehensive assessment." A thorough review and analysis
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of a consumer's functional status. The term includes a personal
 history, assessment of physical and emotional health, ability to
 carry out activities of daily living, informal supports,
 environmental factors and cognitive functioning, including
 immobility assessment.

6 "Consumer." A person who receives assisted living services
7 in an assisted living residence, a home or other location
8 approved by the Department of Public Welfare.

9 "Department." The Department of Public Welfare of the10 Commonwealth.

"Direct care staff." A person who directly assists residents with activities of daily living, provides services or is otherwise responsible for the health, safety and welfare of the residents. Direct care staff must meet all training and testing requirements of this act.

16 "Discharge." Termination of the consumer's residency in the 17 assisted living residence or of services from an assisted living 18 services provider.

19 "Federally Funded Home and Community Based Waiver Service 20 Slots and Services." The packages of services which are 21 Federally funded, in part, pursuant to a waiver of Title XIX of 22 the Social Security Act (49 Stat. 620, 42 U.S.C. § 1396 et seq.) and which are available in designated numbers to individuals 23 24 eligible for Pennsylvania medical assistance who qualify for the 25 nursing facility level of care but who elect home-based and 26 community-based services in lieu of institutionalization in a 27 nursing facility.

28 "Financial management." A service provided by an assisted 29 living residence or assisted living services provider with 30 budgeting and spending for the consumer's personal needs. 20030S0136B0148 - 8 - "Fair share first-day-medical assistance access formulae."
The percentage determined by the Department of Public Welfare of those qualifying for publicly funded assisted living services who were income eligible for medical assistance on the first day they met the functional eligibility for publicly funded assisted living services out of all those assessed as functionally qualifying for assisted living services.

8 "Immobile person." An individual who is unable to move from 9 one location to another or has difficulty in understanding and 10 carrying out instructions without the continued full assistance 11 of another person or is incapable of independently operating a 12 device, such as a wheelchair, prosthesis, walker or cane to exit 13 to a point of safety.

14 "Instrumental activities of daily living." The term
15 includes, but is not limited to, preparing meals, taking
16 medication, using the telephone, handling finances, banking and
17 shopping, light housekeeping, heavy housekeeping and getting to
18 appointments.

ISOLATED Class III violations." A finding by the Department of Public Welfare at the annual inspection of less than three Class III violations that had not been previously cited at the last inspection and that related to the services provided to an individual or did not present a threat to the health and wellbeing of consumers.

Isolated violations." A finding by the Department of Public Welfare on any inspection of less than three Class I, II or III violations of separate and distinct provisions of the act or regulations or less than two Class I, II or III violations of the same provision of the act or regulations.

30 "Legal representative." A person duly authorized by law to 20030S0136B0148 - 9 - 1 take certain action on behalf of a consumer, including, but not 2 limited to, legal counsel, a court-appoint guardian, an 3 attorney-in-fact under a durable power of attorney, an agent 4 under a health care proxy or a representative payee. In cases 5 where the consumer has a cognitive impairment, this may include 6 a responsible family member.

7 "Level-of-care screening." An assessment of a person's 8 functional abilities and general health status and family-friend 9 support system completed to determine the level of care and 10 services appropriate for the individual.

11 "Licensing information." Information relating to the 12 licensing agency, licensing process, and licensing status and 13 history of a provider.

14 "Living unit." A room, apartment, cottage or other self-15 contained unit containing no fewer than 100 square feet per 16 person, which need not be shared except by choice of the 17 resident and which is capable of being locked by the resident, 18 with a readily available bathroom, toilet and sink and shower or bath, space and electrical outlets for residents to have a small 19 20 microwave and refrigerator and a sleeping and living area unless 21 adjustments have been made to accommodate persons who are 22 significantly cognitively impaired.

23 "Long-term care ombudsperson/ombudsman." An agent of the 24 Department of Aging who investigates and seeks to resolve 25 complaints made by or on behalf of older individuals or adults 26 with disabilities who are consumers of assisted living services 27 pursuant to section 2203-A of the act of April 9, 1929 (P.L.177, No.175), known as The Administrative Code of 1929. Complaints 28 may relate to action, inaction or decisions of providers of 29 30 assisted living services or residences, of public agencies or of 20030S0136B0148 - 10 -

social service agencies, or their representatives, which may
 adversely affect the health, safety, welfare, interests,
 preferences or rights of consumers.

4 "Options." The Long-Term Care Pre-admission Assessment
5 Program administered by the Department of Aging and operated by
6 the area agencies on aging.

7 "PACE." The Pharmaceutical Assistance Contract for the8 Elderly.

9 "Pattern of violations." A finding by the Department of 10 Public Welfare at the annual inspection of any violations that 11 had been cited at one or both of the last two annual or other 12 consecutive inspections or of more than three distinct 13 violations of the same requirement.

14 "Pennsylvania Assisted Living Services Program" or "PALS."
15 The array of publicly funded home-based and community-based
16 assisted living services and other health and social services
17 benefits available to eligible consumers who have applied for
18 and been found to need these services.

"Personal care home." Any premises in which food, shelter 19 20 and personal assistance or supervision are provided for a period 21 exceeding 24 hours for four or more adults who are not relatives 22 of the operator, who do not require the services in or of a 23 licensed long-term care facility but who do require assistance 24 or supervision in such matters as dressing, bathing, diet, 25 financial management, evacuation of a residence in the event of 26 an emergency or medication prescribed for self-administration. 27 "Personal care services." Assistance or supervision in

28 matters such as dressing, bathing, diet, financial management, 29 evacuation of the resident in the event of an emergency or 30 medication prescribed for self-administration. Personal care 20030S0136B0148 - 11 - services shall include prompting, cuing, monitoring and focusing
 on maintaining functioning.

3 "Provider." An assisted living residence, assisted living
4 services provider, an approved personal care home or an approved
5 domiciliary care home.

Publicly funded assisted living." Includes bridging,
medical assistance, HealthChoices, Options, waiver programs and
other appropriate publicly funded services that assist
individuals to remain in the community.

10 "Qualified assessor." A person approved by the Department of 11 Public Welfare as qualified to conduct assessments of persons needing long-term care services and develop service plans based 12 13 thereon. A qualified assessor may include an employee of an area 14 agency on aging, an assisted living residence, an assisted 15 living services provider or an independent entity, but may not 16 include hospital discharge planners or other staff or employees 17 of an insured's health or long-term care insurance company. 18 "Qualified couple." A qualified couple for cost-of-living increase is two qualified persons, living together, who are 19 20 considered a couple under the Supplemental Security Income 21 program, Title XVI of the Social Security Act (49 Stat. 620, 22 U.S.C. 301 et seq.).

23 "Qualified person." A qualified person for cost-of-living 24 increase includes persons meeting the nonfinancial, categorical 25 eligibility requirements under Title XIX of the Social Security 26 Act (49 Stat. 620, U.S.C. 301 et seq.) as aged, blind or 27 disabled and receiving or applying for long-term care services 28 under a special income level.

29 "Resident." An individual who resides in and may receive 30 assisted living services from an assisted living residence or 20030S0136B0148 - 12 - from a personal care home or domiciliary care home approved by
 the Department of Public Welfare.

3 "Responsible family member." A family member, such as a
4 spouse or adult child, who has been assisting the consumer and
5 to whom the consumer turns to for assistance.

"Restraint." A chemical or mechanical device used to 6 restrict the movement or normal function of an individual or a 7 portion of the individual's body, including geriatric chairs; 8 posey; chest; waist, wrist or ankle restraints; locked 9 10 restraints and locked doors to prevent egress. The term does not 11 include devices used to provide support for the achievement of 12 functional body position or proper balance as long as the device 13 can easily be removed by the resident.

14 "Restricted unit." A unit within a licensed assisted living 15 residence that has received a specialized license designation 16 pursuant to the requirements of this section and regulations of 17 the Department of Public Welfare to provide services to people 18 with cognitive impairments.

19 "Service plan." A detailed plan based on a comprehensive 20 assessment designed to meet the resident's individual physical, 21 mental and psychosocial needs consistent with the resident's 22 preferences and capabilities.

23 "Specialty assisted living residence." A licensed assisted 24 living residence that has received a specialized license 25 designation pursuant to the requirements of this section and the 26 regulations of the Department of Public Welfare to provide 27 services to people with cognitive impairments.

28 "Stakeholders." The Medical Assistance Advisory Committee, 29 the Consumer and Long-Term Care Subcommittees of the Medical 30 Assistance Advisory Committee, the Intra-Governmental Council on 20030S0136B0148 - 13 - Long-Term Care, the Statewide Independent Living Council and the
 Council on Aging.

3 "Transfer." Movement of a consumer within the assisted
4 living residence or to a hospital or other temporary placement.
5 For consumers receiving assisted living services in their home,
6 the term means movement between assisted living services
7 providers.

8 Section 3. Assisted living residences.

9 (a) Licensure.--The department shall license and regulate 10 living residences and shall establish an annual licensure fee 11 schedule.

12 (b) Physical site standards.--The department shall require 13 assisted living residences to meet all requirements of the act 14 of November 10, 1999 (P.L.491, No.45), known as the Pennsylvania 15 Construction Code Act.

16 (c) Level-of-care screening, assessment and comprehensive 17 service plan.--

18 (1) Prior to admission to an assisted living residence 19 or start of services by an assisted living services provider, 20 a level-of-care screening to determine the level of care and 21 services needed by the applicant shall be obtained. A 22 standardized screening instrument developed by the Department 23 of Aging in consultation with the Department of Public 24 Welfare and the Department of Health shall be used for all 25 screens. The area agency on aging shall be available to 26 conduct level-of-care screenings for applicants. Qualified 27 employees of assisted living residences or assisted living 28 services providers may conduct level-of-care screening but 29 shall inform individuals of the right to receive a screening 30 by an area agency on aging.

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1 (2) A medical evaluation, using a form developed by the 2 Department of Public Welfare, the Department of Aging and the 3 Department of Health, shall be obtained by all applicants 4 prior to admission to an assisted living residence or start 5 of services by an assisted living provider.

6 (3) A qualified assessor must assess an individual's
7 care and service needs after the level-of-care screening has
8 determined a need for assisted living services or residency.

9 (i) The department shall develop a training and 10 certification program for qualified assessors.

(ii) Only those qualified assessors trained and certified by the Commonwealth shall be permitted to conduct assessments to identify the services an individual requires and that serve as the basis for a comprehensive service plan.

16 (iii) Assessors must certify that the assessment is 17 true and correct to the best of their knowledge and 18 skill. The department shall revoke the certification of 19 any long-term care assessor that falsely certifies a need 20 for services.

(iv) The qualified assessor must use a standardized
assessment instrument that shall be developed by the
Department of Public Welfare, the Department of Aging and
the Department of Health, within six months of the
effective date of this act.

(v) When the area agency on aging is the chosen
assessor, the area agency on aging must complete an
assessment within five business days or, if there is an
expedited need, within one business day of the request
for an assessment.

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(vi) Consumers shall have choice of assisted living
 providers and be free to present a completed assessment
 to any provider to compare services and price.

4 (vii) The department shall review provider's
5 compliance with the assessment provisions of this act as
6 part of the annual licensure inspection.

7 (viii) The area agency on aging shall assist any 8 assessed consumer found to need long-term care services 9 to seek public funding, where eligible, and to set up the 10 services if family members or friends are not available 11 to do so.

(4) Following completion of a comprehensive assessment 12 13 and prior to admission or start of services, an appropriately trained person employed by the provider shall work in 14 15 cooperation with an interdisciplinary team that includes the 16 consumer, the consumer's legal representative or the consumer's responsible family member, with the consumer's 17 18 consent, to develop a written comprehensive services plan 19 based on the comprehensive assessment and consistent with the 20 consumer's unique physical and psychosocial needs, with 21 recognition of the consumer's capabilities and preferences.

(5) Reassessment and revision of service plan, if
necessary based on reassessment, will take place annually or
when there is a significant change in a consumer's condition.

(6) The comprehensive assessment and comprehensive
services plan shall be kept on file for each consumer by the
provider and shall be available to the consumer or the
consumer's legal representative.

29 (d) Assisted living residence administrator qualifications30 and training.--

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(1) An assisted living residence administrator shall satisfy either of the following qualifications:

3 (i) Be at least 21 years of age and meet the
4 requirements of Chapters 5 and 7 of the act of November
5 6, 1987 (P.L.381, No.79), known as the Older Adults
6 Protective Services Act, regarding criminal history.

7 (ii) Have a high school diploma or a general
8 educational development diploma (GED).

9 (iii) Complete an education and training course 10 which has been approved by the department of not less 11 than 120 hours. The department shall establish a training 12 curriculum that shall include comprehensive training in 13 areas appropriate to the care and health of residents in 14 an assisted living residence, including, but not limited 15 to:

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(A) Training in assistive technology.

17 (B) Training in working with persons with18 cognitive impairments.

19 (C) Training in assisted living principles and20 laws.

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(D) Training in medication assistance.

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(E) Consumer rights.

(2) The department shall develop a shorter program of
instruction for licensed nursing home administrators,
nationally accredited retirement housing professionals or
NAB-licensed assisted living administrators that does not
duplicate areas where proficiency has been demonstrated but
that is particular to assisted living in this Commonwealth.

29 (3) All administrators shall pass a test which has been 30 approved by the department and is administered by an entity 20030S0136B0148 - 17 - approved by the department at the end of training to
 demonstrate proficiency in the application of skills and
 knowledge.

4 (4) All administrators shall complete 36 hours of
5 continuing education every two years that has been approved
6 by the department and is applicable to the practice of
7 assisted living administrator. Coordinating education program
8 shall include training and competency testing.

9 (5) One year after the effective date of this act, no 10 one shall be employed as an assisted living administrator 11 unless they have completed the training and testing 12 requirements herein.

13 (e) Direct care and other staff qualifications and 14 training.--

15 (1) Direct care staff in an assisted living residence or 16 of an assisted living services provider must meet the 17 following qualifications:

18 (i) Be either at least 18 years of age with a high
19 school diploma or 17 years of age with a high school
20 diploma and meet the requirements of the Older Adult
21 Protective Services Act regarding criminal history.

22 (ii) Complete an education and training course which 23 has been approved by the department for a minimum of 40 24 hours and obtain a certificate of completion. The department shall establish a training curriculum. Direct 25 26 care staff of assisted living residences and assisted 27 living services providers must demonstrate proficiency in 28 a manner approved by the department in each component 29 prior to start of independent work in that component. 30 Approved coursework shall include comprehensive training

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1 in areas appropriate to the care and health of assisted living residents and recipients, including, but not 2 3 limited to:

4 (A) Training in assistive technology. Training in working with persons with 5 (B) cognitive impairments. 6

Training in assisted living principles and 7 (C) 8 laws.

> Consumer rights. (D)

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10 (2) The department shall develop a shorter program of 11 instruction for nurse assistants deemed competent that does 12 not duplicate areas where proficiency has been demonstrated 13 but that is particular to assisted living in this Commonwealth. 14

15 (f) Direct care staff assisting residents with medication .--Within six months of the effective date of this act, the 16 17 department shall:

18 (1) Develop a special training and certification program 19 or expand its current medications administration course for 20 direct care staff that assist residents with medication. The 21 program shall include testing and demonstrated proficiency.

22 (2) Establish regulations permitting only those who have 23 completed and passed the training on assisting with the 24 administration of medication to do so in assisted living 25 residences or as an assisted living service provider. 26 (g) Other assisted living residence staff.--Within 30 days 27 of employment or start of voluntary service, staff persons and 28 volunteers shall receive orientation to the general operation of the assisted living residence, training in fire prevention, 29 operation of safety equipment, emergency procedures and 30 20030S0136B0148

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1 evacuation of residents.

2 Exemptions. -- Existing personal care home staff employed (h) 3 by personal care homes that apply for and become licensed as 4 assisted living residences have one year from the date of 5 application to complete the direct care staff training except that those who have been working as direct care staff for more 6 7 than 24 months can opt not to take the training provided they demonstrate proficiency in each training component within one 8 year of the personal care home becoming an assisted living 9 residence. 10

11 (i) Staffing levels.--

(1) The department shall establish minimum staffing levels for assisted living residences, restricted units and specialty assisted living residences depending upon the residence population, mobility of residents and cognitive impairments to ensure adequate 24 hours a day awake direct care staff to meet the unplanned and unscheduled needs of residents.

19 The department shall require each assisted living (2) 20 residence to maintain adequate additional direct care staff 21 to meet the residents' planned and scheduled needs as 22 required in their service plans as well as to ensure a safe 23 and efficient evacuation to a place of safety in case of 24 emergency. Each assisted living residence shall have as a 25 minimum the staff necessary to meet the hours of care set 26 forth in the service plans and the staffing requirements of 27 paragraph (1).

28 (3) Additional staff or contracted services shall be
 29 provided as necessary to meet laundry, food service,
 30 housekeeping, transportation and maintenance needs of the
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assisted living residence.

2 (j) Supplemental services.--A resident receiving assisted
3 living services in an assisted living residence may arrange for
4 the receipt of supplemental services where:

5 (1) the supplemental services adequately meet the 6 residents changing needs so that the assisted living 7 residence is not required to fundamentally change its program 8 or residence to accommodate the resident; and

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(2) the supplemental services are provided by:

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(i) a licensed entity or an area agency on aging; or

(ii) an unlicensed provider, permitted by specified criteria and conditions of the department to provide supplemental services agreed to by resident and assisted living services provider.

15 (k) Transfer and discharge.--

16 (1) A resident may not be transferred or discharged
17 without consent, except for nonpayment of contractual fees
18 after a good faith effort to obtain payment unless:

19 (i) the person has one of the conditions determined20 by the department;

(ii) to accommodate the consumer's needs would require the assisted living residence to fundamentally change the basic program or building modification;

(iii) the person is a danger to self or others; or
(iv) transfer to a hospital or treatment facility is
necessary to meet the consumer's needs and the resident's
needs cannot be maintained in the assisted living
residence.

29 (2) The assisted living residence must insure that the 30 transfer or discharge is safe, orderly and appropriate to the 20030S0136B0148 - 21 - 1 resident's needs.

(1) Notices.--The assisted living residence must provide 30 2 3 days' advance written notice of changes in policies, services or costs and of intent to transfer or discharge a resident. Written 4 notice must include the reason for the transfer or discharge, 5 the effective date of the transfer or discharge, the location to 6 which the consumer is being transferred or discharged, if known, 7 8 a statement that the resident has the right to appeal to the department and the contact information for the Long-Term Care 9 10 Ombudsman and the department's 24-hour hotline. 11 (m) Dispute resolution. -- Consumers may seek resolution of disputes in the following ways and selection of one option does 12 13 not preclude simultaneous or subsequent selection of the other: The department's hearing and appeals bureau will 14 (1)15 hear complaints and appeals through its fair hearing process. 16 (i) Appeal hearings must include notice, opportunity 17 to be heard, impartial review and prompt decision. 18 (ii) Assisted living residents may appeal decisions 19 regarding: 20 (A) Whether discharge or transfer is 21 appropriate. 22 Whether accommodations would fundamentally (B) 23 alter the program or residence. 24 (C) Whether supplemental services provider is 25 unsafe. 26 (D) What level of care is appropriate. 27 (2) Each provider shall maintain an internal process for 28 resolving consumer complaints and grievances. 29 The department shall develop an expedited hearing (3)

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process for review of department, consumer or provider

1 actions.

(n) Written agreements. -- The department shall require as a 2 3 condition of licensure that all providers shall have an assisted 4 living residency agreement in writing with each consumer. Each agreement should be signed prior to admission or start of 5 services or no later than 24 hours after admission and shall 6 include in clear and simple language the following: 7 8 (1) Standardized clauses provided by the department on: 9 (i) The consumer's rights. 10 (ii) Negotiated risk, if appropriate. 11 (iii) The Commonwealth's processes for resolving disputes under the contract. 12 13 (iv) Explanation of the screening, assessment and annual reassessment requirements. 14 15 (v) The available financial management services a 16 provider may or may not provide. 17 (vi) A prohibition on resident assignment of assets 18 for life to the assisted living residence. 19 (vii) If a resident is receiving publicly funded 20 care and services, details about Social Security Income recipient protections, rent rebate programs and the 21 22 personal needs allowance. 23 (viii) Explanation of the right to continued residency in an assisted living residence as provided in 24 25 this act. 26 (ix) Applicant's right to cancel without penalty an assisted living residency agreement within 72 hours of 27 28 signing. (x) Requirement that consumer receive 30 days' 29 30 advance written notice of changes to contract, to the

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1 charges of the provider and to the provider's policies. (xi) The bases under which a consumer or provider 2 3 may terminate the agreement. 4 (xii) Contractual enforcement rights of the parties. (2) At a minimum, the provider shall include the 5 following in the agreement: 6 (i) The provider's list of services offered. 7 (ii) By addendum or otherwise, individualized 8 itemization of services that will be provided to the 9 resident and costs thereof, separating housing costs from 10 11 service costs. (iii) Provider policies. 12 13 (iv) Internal dispute resolution process. (v) Clear and specific occupancy criteria and 14 15 procedures, based on Commonwealth requirements and assisted living residence's policies regarding bedholds 16 17 and refunds. 18 The department shall review contracts at site visits for 19 compliance with this section and the provisions of this act and 20 its regulations. 21 (o) Disclosure.--Each consumer or the consumer's legal 22 representative or responsible family member shall receive an 23 information packet at the time of application for admission or

24 start of services which shall include the following items to be 25 presented in a form able to be easily understood and read by the 26 consumer:

27 (1) A standardized form developed by the department with28 information pertaining to:

29 (i) The use of advance directives during residency.
30 (ii) Information regarding how to contact and obtain
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1 what is required by the licensing agency for providers. (iii) Information about availability and access to 2 3 and contact information for the ombudsman and the department's 24-hour hotline. 4 5 (iv) Details about the department's external complaint mechanisms available to consumers. 6 (v) General information about the admission and 7 8 application process. (vi) Details about the applicant's rights to 9 independent assessment and nondiscrimination in the 10 11 application process. 12 (vii) Consumer rights. 13 (2) Documentation from the provider to provide the applicant with the following information: 14 15 (i) A copy of the provider's policies affecting consumers, including discharge or termination or 16 bedholds. 17 18 (ii) Information regarding the department's 19 inspections and inspection reports demonstrating 20 provider's licensing status. 21 (iii) Complete copy of the assisted living residence 22 agreement, including all attachments and all current 23 rates that may be charged. 24 (iv) Details about the internal complaint mechanism 25 used by the provider. 26 (v) Provider's specific admission and application 27 process. 28 Information on discharge policies. (vi) (p) Housing and services.--29 30 (1) Assisted living residences shall separately charge 20030S0136B0148 - 25 -

1 for housing and services.

2 (2) Residents who have been assessed as needing personal
3 care services may be required by the assisted living
4 residence to receive those services from the assisted living
5 residence as a condition of admission to the assisted living
6 residence.

7 (3) No resident shall be required to pay for services
8 not needed, as indicated in their initial or annual
9 assessment.

10 (4) Services other than those identified in paragraph 11 (2), including, but not limited to, home health, massage, physician services and physical therapy services, can be 12 13 purchased by the resident from the assisted living residence or from an outside provider, unless to accommodate the person 14 15 would require the assisted living residence to fundamentally 16 change the basic program or building and to do so would put 17 in jeopardy the life and safety of persons in the assisted 18 living residence.

19 (5) If the resident arranges for services other than 20 those identified in paragraph (2) from unlicensed persons or 21 those not on the area agency provider list, the assisted 22 living residence may screen providers but shall not 23 unreasonably deny their access to the resident's living unit. Living unit.--Assisted living residences shall provide 24 (q) 25 residents with their own individual living units, which shall 26 include a sleeping and living area, shared only with the consent of the residents in the unit. A bathroom must be readily 27 28 available for each resident. One bathroom can be shared between adjacent living units. Except for residents with cognitive 29 30 impairments, each living unit must provide space and electrical 20030S0136B0148 - 26 -

outlets for residents to have small microwaves and
 refrigerators. Each living unit shall contain no fewer than 100
 square feet per resident. Each living unit shall have
 individually lockable doors, except where inappropriate for
 individuals with cognitive impairments.

6 (r) Department of Aging.--The Department of Aging shall take steps to extend the provisions of the Older Adults Protective 7 8 Services Act to assisted living residences and consumers. The Department of Aging shall insure that the ombudsman program is 9 10 made available to assisted living residences and recipients. 11 Contact information. -- The department shall require (s) assisted living residences to post contact information for the 12 13 local ombudsman and shall make available a 24-hour toll-free 14 hotline for consumers to use in contacting the department with 15 questions, concerns and complaints about their care and services. 16

17 Section 4. Assisted living residences providing cognitive18 support services.

19 (a) Special designation. --Within six months of the effective 20 date of this act, the department shall establish a special license designation for assisted living residences that wish to 21 22 maintain restricted units or to be specialized for the purpose 23 of serving individuals with cognitive impairments. Only those assisted living residences that receive this special license 24 25 designation may have or hold themselves out as having 26 specialized units or specialized purpose. This special 27 designation shall require that the assisted living residences 28 meet all the requirements for assisted living residences set forth in this act and resulting regulations and additional 29 30 requirements that address:

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(1)Special admission and transfer criteria.

Adequate indoor and outdoor wandering space 2 (2) 3 requirements.

4 (3) Requirements relating to provision of therapeutic 5 activities that meet the scheduled and unscheduled individual needs of each resident, with such services focusing on 6 7 maximizing independence and on the individual's strengths and abilities. 8

9

(4) Physical design and safety requirements.

10

Additional and specialized training requirements. (5)

Prearranged procedures for notification of 11 (6) 12 authorities should a resident wander away from the residence. 13 (b) Admission or transfer to specially designated unit or specialty assisted living residence.--Assisted living residences 14 15 should be able to support residents with cognitive impairments 16 if or until the person's needs are such that they are a danger 17 to themselves or others and accommodation would require the 18 assisted living residence to fundamentally change the basic 19 program or building.

When either of these conditions are met and if this 20 (1)21 is reflected in an annual or other assessment, the resident 22 may be transferred to a specialized, restricted unit or 23 specialty assisted living residence or may be requested to 24 leave.

25 (2) Before a person may be transferred or admitted to a 26 specially designated restricted unit or a specially 27 designated specialty assisted living residence:

28 (i) The person, responsible family member or person with legal authority, if any, must be advised of the 29 30 assisted living residence's intent to discharge or 20030S0136B0148 - 28 -

1 transfer with 30 days' advance written notice and of resident's right to seek an assessment from the area 2 3 agency on aging or other individual who is independent 4 from the assisted living residence and of the resident's 5 right to appeal to the department or use the internal grievance process to address the appropriateness of 6 restricted movement, or both. The 30-day notice 7 requirement shall not apply, but the provider shall give 8 as much advance notice as possible where transfer or 9 10 discharge is necessary to meet a consumer's urgent or 11 emergency medical needs or in emergency situations where there is a danger to consumers or others. 12

(ii) A physician must approve the transfer to a restricted unit or admission to a specialized assisted living residence, and the resident or individual with legal authority to act for the resident must sign off on the transfer or admission.

(iii) Where neither the resident, the resident's
responsible family member nor anyone with legal authority
signs to authorize the transfer or discharge, the
assisted living residence must refer the matter to the
local agency charged to administer the act of November 6,
1987 (P.L.381, No.79), known as the Older Adults
Protective Services Act, for review.

The department shall, through its inspection 25 (3) 26 process, review transfer and discharge cases that are based 27 on cognitive impairments for compliance with this provision. 28 Administer training.--Administrators working in special (C) license designation restricted units or specialized assisted 29 30 living residences must be trained and tested in a program - 29 -20030S0136B0148

approved by the department in training areas developed by the
 department in consultation with stakeholders on issues relating
 to providing care and services to cognitively impaired
 individuals. This training shall be in addition to that required
 under section 3.

6 Staff training.--All direct care staff wishing to work (d) 7 in specially designated restricted units or specialty assisted living residences shall, in addition to the training required of 8 direct care staff in section 3, receive additional specialized 9 10 training approved by the department in training areas 11 established by the department in consultation with stakeholders relating to providing care and services to cognitively impaired 12 13 individuals.

14 (e) Disclosures.--Assisted living residences with specially 15 designated restricted units or that are specialty assisted 16 living residences must, in addition to the disclosures required 17 under section 3:

18 Provide each applicant with a standardized (1)19 disclosure form designed by the department in consultation 20 with stakeholders describing the requirements that must be met by a restricted unit or specialty assisted living 21 22 residence which shall include, but not be limited to, the 23 philosophy and mission of serving individuals with cognitive impairments, the requirements for physical space, wandering 24 space, therapeutic activities, additional training and 25 26 security, that must be met for special designation.

27 (2) A representation that the residence meets the
28 special licensure designation, including a description of the
29 frequency and types of individual and group activities,
30 security measures and family support programs.

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1 (f) Accreditation.--If national accreditation of specialty 2 assisted living units becomes available with standards that 3 equal or exceed those in this act and supporting regulations, 4 the department may deem that an accredited assisted living 5 residence meets the special licensing designations under this 6 section.

7 (g) Staffing levels.--Staffing levels will be set in
8 accordance with the staffing levels required under section 3.
9 However, if an assisted living residence has national
10 accreditation which has higher staffing requirements, the
11 residence shall meet the higher requirements.
12 Section 5. Assisted living services providers.

13 (a) Licensure.--The Department of Health shall license
14 entities that are not already licensed by the department that
15 either coordinate and provide, or coordinate and subcontract for
16 provisions of assisted living services.

17 (b) Application.--

18 (1) Within six months of the effective date of this act,
19 the department shall license assisted living services
20 providers. Assisted living services providers shall be
21 licensed and bonded, and a licensure fee shall be applied.

(2) Direct care staff employed by assisted living
services providers or providing direct care services to
consumers in their homes shall meet all training and testing
requirements of this act and present documentation from the
State of completed training and testing to employers and
consumers. Passing a criminal history check shall be a
prerequisite to training and testing.

29 (3) Family or friend caregivers shall be exempt from the30 requirements of this act.

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(4) Entities that do not provide personal care services,
 but that solely provide assistance with instrumental
 activities of daily living shall be exempt from the
 requirements of this act.

5 (c) Requirements.--

6 (1) Assisted living services providers shall be subject 7 to the disclosure and contract requirements set forth in 8 section 3 to the extent applicable to assisted living 9 services providers.

(2) Direct care staff shall provide assisted living 10 services consumers with 30 days' advance written notice, 11 12 where possible, of interruption or termination of service 13 delivery, except where the safety of the direct care staff is at risk. Direct care staff shall be included under the 14 15 reporting requirements of older adult protective services 16 review. Direct care staff found to be in violation of the advance notice provision of this section may be sanctioned by 17 18 the department and have their documentation of training 19 necessary for employment withdrawn.

20 (3) All consumer rights specified in section 6 shall apply to consumers of assisted living services providers 21 unless the right is specific to residency. The department 22 23 shall craft a standardized assisted living service disclosure 24 from such as the one required in section 3 for assisted living residences. As a condition of licensure, all assisted 25 26 living services providers must provide consumers and 27 applicants with the department's standardized disclosure form 28 of consumers rights.

29 (d) Inspection.--The department shall conduct annual 30 unannounced inspections of assisted living services providers 20030S0136B0148 - 32 - and shall include visits to and interviews of a random sample of
 consumers as part of the inspection process.

3 Section 6. Consumer rights.

4 (a) Regulations.--Consumers shall have the following rights
5 which shall attach upon admission to an assisted living
6 residence or start of service receipt from an assisted living
7 services provider and the department shall promptly implement
8 regulations to insure these rights:

9

(1) With respect to management of funds:

10 (i) There shall be no commingling of the residence's11 and residents' funds.

12 (ii) Assisted living residences shall maintain
13 residents' funds in accounts separate from those of the
14 residence.

(iii) When a residents' funds exceed \$200, the
assisted living residence must offer the resident an
opportunity to have the funds placed in an interestbearing account.

19 (iv) The assisted living residence must keep20 individual records of individual moneys.

(v) Residents are only required to deposit funds
with an assisted living residence if they are accepting
financial management services.

(vi) The department shall develop a means of
safeguarding residents' funds and requiring prompt
repayment by the assisted living residence of funds that
are stolen by residence employees, subcontractors or
otherwise mismanaged.

29 (vii) Residents shall have prompt access to funds.
30 (viii) Residents shall receive quarterly statements
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from assisted living residences holding their funds.

2 (ix) Upon death or discharge, the assisted living
3 residence is required to repay funds to estate or
4 resident within five business days.

5 (x) Assisted living residence staff must obtain 6 written permission for expenditures from the consumer of 7 legally responsible person and keep receipts of 8 expenditures.

No provider or staff of provider or individual 9 (xi) 10 affiliated with the provider may assume power of attorney 11 or guardianship over any resident. However, the department shall come up with a process for allowing 12 13 guardianship in emergency situations where the consumer is unable to authorize and where there is no existing 14 15 legal representative or the legal representative cannot be reached. 16

17 (xii) No resident may be required to endorse checks
18 over to the assisted living residence.

19 (2) Each consumer has the right to:

20 (i) Be involved in service planning process and to
21 receive services with reasonable accommodation of
22 individual needs and preferences except where the health
23 or safety of the individual or other residents would be
24 endangered.

25 (ii) Have privacy, confidentiality and freedom from
26 abuse, neglect and financial exploitation.

27 (iii) Refuse treatment or services under the plan.
28 (iv) Receive from the assisted living residence 30
29 days' advance written notice of the assisted living
30 residence's proposed changes to charges and policies and
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of the intent of the residence to transfer or discharge the resident, except where transfer is necessary to meet consumer's urgent or emergency medical needs or where immediate risk of harm to consumer or others warrants shorter notice.

6

(v) Be free from physical or chemical restraints.

7 (vi) Be free from unreasonable interference with 8 right to leave and return, have visitors, send and 9 receive mail, and participate or not participate in 10 religious activities.

11 (vii) Receive a qualified assessment by someone not12 associated with the residence.

13 (viii) Be entitled to residency and services 365
14 days a year, with no planned or intermittent
15 interruptions.

16 (ix) Access the ombudsman and the department's 24-17 hour hotline.

18 (x) Be free from discrimination on the basis of
19 race, color, religious creed, disability, handicap,
20 ancestry, sexual orientation, national origin, age or
21 sex.

22 (xi) Be free from any duration of stay requirements23 prior to public funding.

24 (xii) Select a doctor or other health care provider25 of the consumer's choice.

26 (xiii) Reside and receive services with reasonable
27 accommodation of individual needs and preferences except
28 where health, safety, or rights of individual or other is
29 endangered and does not change the nature, etc., of the
30 assisted living residence.

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(xiv) Review inspection and complaint survey and
 inspection results conducted by the department.

3 (xv) Exercise all rights as a citizen, including,
4 but not limited to, the right to vote, the right to voice
5 grievances with respect to services without retaliation
6 and to organize and participate in resident and family
7 groups.

8 Section 7. Survey, inspection and enforcement process.

9 (a) Licensure and inspection.--The appropriate department 10 shall license and inspect all assisted living residences and 11 assisted living services providers at least annually. Licensure 12 fees shall be established and funds from such fees shall be 13 employed to defray the costs of enforcing the provisions of this 14 act.

15 (1) The appropriate department shall establish and make 16 public specific, objective quidelines for inspectors to 17 employ in the inspection of assisted living residences and 18 assisted living services providers. Inspectors shall be 19 adequately trained in the intention and interpretation of 20 inspection guidelines to ensure consistent application of 21 legal requirements. Each department shall ensure adequate, 22 trained staff and provide annual continuing education courses 23 to inspection staff.

24 There shall be four classes of licensure as follows: (2) 25 (i) Exceptional quality licensure will be awarded to 26 providers based on a finding by a panel established by 27 each department that the provider is in compliance with 28 licensure requirements and should be recognized for its use of best practices and high consumer satisfaction and 29 positive outcomes. Providers with this licensure 30 - 36 -20030S0136B0148

classification may advertise and each department shall
 post names of those providers with this licensure
 classification on its web site.

4 (ii) Compliance licensure will be provided to
5 providers with either no violations or isolated Class III
6 (minor) violations which the administrator or provider
7 has certified in writing to the appropriate department
8 have been corrected within 30 days of the date of the
9 annual licensure inspection.

(iii) Provisional licensure will be given to 10 11 providers with a pattern of Class III (minor) violations or isolated Class II violations for a period of six 12 13 months. Substantial improvement must be demonstrated for a provider to receive a second six-month provisional 14 15 license. Those providers which do not meet the standards 16 for a compliance license at the next scheduled inspection 17 shall have their license revoked by the appropriate 18 department.

19 (iv) Provisional licensure with ban on admissions
20 will be given for a six-month period to providers with a
21 pattern of Class II, isolated Class I or a pattern of
22 Class I violations such that new consumers may not be
23 admitted or provided services by the provider with this
24 licensure status.

25 (3) Before an assisted living residence is licensed and
26 permitted to open, operate or admit residents and before an
27 assisted living services provider is permitted to provide
28 services to consumers, it shall be inspected by the
29 appropriate department and must be found in compliance with
30 the requirements set forth in this act and the resulting
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1 regulations.

2 (4) After initial licensure inspection, survey staff
3 shall, at a minimum, conduct one onsite unannounced
4 inspection per year. Each department shall develop a uniform
5 survey tool to be used by inspectors.

6 Within 24 hours, upon receipt of a complaint from (5) any person alleging an immediate serious risk to the health 7 8 or safety of a consumer, the appropriate department shall 9 conduct an onsite unannounced inspection of the provider. Complaints prompting an inspection pursuant to this 10 11 subsection may include severe injury or death of a consumer, 12 reports of abuse or conditions or practices that cause an 13 immediate and serious risk to a consumer. Complaints shall be investigated immediately but no later than 48 hours after 14 receipt of the complaint. 15

16 (6) Each department shall develop requirements for the 17 preinspection provision of information and documents by the 18 provider on the annual anniversary of initial licensure, to 19 be reviewed by the appropriate department's inspectors prior 20 to the onsite inspection.

Within six months of the passage of this act, each 21 (7) 22 department shall develop a time line and work plan to be used 23 to develop quality indicators of care and consumer 24 satisfaction surveys that will be used as part of the annual 25 inspection process. The quality indicators of care and 26 consumer satisfaction surveys shall be developed in 27 consultation with stakeholders and shall be placed within 24 28 months of the passage of this act.

29 (8) Each department shall develop a provider survey 30 instrument to obtain provider feedback on the inspection 20030S0136B0148 - 38 - process. The survey instrument shall be sent in the preinspection submission information to be returned to the deputy secretary of the appropriate department by the provider after the onsite inspection.

5 (9) After three annual unannounced inspections resulting 6 in compliance or exceptional quality licensure status, a 7 provider shall receive abbreviated inspections for as long as 8 it maintains compliance or exceptional quality licensure 9 status. The appropriate department shall develop an 10 abbreviated inspection process.

(10) As provided in section 7(b), assisted living residences not in compliance with the requirements of this act and its regulations shall be subject to intensified inspections which shall include intensified frequency, duration and scope.

16 (11) There shall be no transfer of license unless the
appropriate department approves the transfer of license. The
appropriate department may deny transfers to friends,
relatives, business associates, etc., if it appears that
purpose of transfer is to avoid licensure action or it
appears that the previous owner will continue to have
involvement in the residence or business.

23 (b) Violations.--

(1) Within six months of the effective date of this
section, the Department of Public Welfare and the Department
of Health shall classify each violation of its regulations
into one of the following categories:

(i) Class I. A violation, including failure to or
negligent provision of services in the service plan,
which indicates a substantial probability that death or
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serious mental or physical harm to a consumer may result
 or death actually results.

3 (ii) Class II. A violation, including failure to or
4 negligent provision of services in the service plan,
5 which has a potential or actual substantial adverse
6 effect upon the health, safety or well-being of a
7 consumer.

8 (iii) Class III. A minor violation which has an 9 adverse effect upon the health, safety or well-being of a 10 consumer.

11 (2) The remedy and penalty for violations will depend on 12 the violations.

(i) Isolated Class III violation. Within 30 days of
the date of the citation, the assisted living residence
administrator or assisted living services provider must
correct the violation and certify in writing to the
appropriate department that the violation has been
corrected.

(ii) Pattern of Class III violations. Within ten 19 20 days of the date of the citation, the assisted living residence administrator or assisted living services 21 22 provider must submit a plan of correction for appropriate 23 department approval. Within 30 days of the date of the citation, the assisted living residence administrator or 24 25 assisted living services provider must correct the 26 violations and certify in writing to the appropriate department that corrections have been made. The 27 28 appropriate department shall issue fines and grant a provisional license, which shall be in effect only until 29 30 written certification of corrections has been received by 20030S0136B0148 - 40 -

the appropriate department. Immediate correction of the violation to the inspector's satisfaction during the survey process will preclude the application of a penalty under this subsection.

(iii) Isolated Class II violations. Within ten days 5 of the date of the citation, the assisted living 6 residence administrator or assisted living services 7 provider must submit a plan of correction for appropriate 8 departmental approval. Within 30 days of the date of the 9 10 citation, the assisted living residence administrator or 11 assisted living services provider shall correct the violations and certify in writing to the appropriate 12 department that corrections have been made. The 13 14 appropriate department shall fine the assisted living 15 residence or assisted living service provider and issue a provisional license until certification of corrections 16 17 has been received by the appropriate department. Immediate correction of the violation to the inspector's 18 19 satisfaction during the survey process will preclude the 20 application of a penalty under this subsection.

(iv) Pattern of Class II violations. Within ten days 21 22 of the date of the citation, the assisted living 23 residence administrator or assisted living services provider shall submit a plan of correction for 24 25 appropriate departmental approval. Within 30 days of the 26 date of the citation, the assisted living residence 27 administrator or assisted living services provider shall 28 correct the violations and shall certify in writing to the appropriate department that all corrections have been 29 30 made. The appropriate department shall fine the provider 20030S0136B0148 - 41 -

1 and issue a provisional license with a ban on admissions or service until written certification of corrections has 2 3 been received and corrections have been verified by the appropriate department. The appropriate department shall 4 5 conduct an onsite inspection to verify corrections within two business days of receipt of the certification of 6 correction. The appropriate department shall conduct 7 intensified inspections of the provider with more 8 numerous unannounced inspections. 9

(v) Isolated Class I violations. Upon a finding by
 the appropriate department of a Class I violation, the
 appropriate department shall immediately decide whether:

13 (A) to give a provisional license with a ban on
14 admissions or services and allow the assisted living
15 residence or assisted living services provider to
16 correct the violation;

17 (B) require the appointment of a master at the
18 assisted living residence's expense to oversee the
19 immediate correction of the violations; or

20 (C) to revoke the license and arrange for the 21 immediate relocation or transfer of consumers. The 22 appropriate department shall fine the provider and 23 should the provider remain in operation, subject it 24 to intensified and more numerous unannounced 25 inspections.

(vi) Pattern of Class I violations. Upon a finding
 by the appropriate department that a provider has a
 pattern of Class I violations, the appropriate department
 shall immediately revoke the provider's license and
 arrange for relocation or transfer of the consumers or
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1 appoint a master at the assisted living residence's 2 expense to bring the assisted living residence into 3 compliance within 30 days. The appropriate department 4 shall issue a provisional license with a ban on admissions or service if the provider is permitted to 5 continue in operation and shall fine the provider. Should 6 the provider remain in operation, the appropriate 7 8 department shall conduct intensified and more numerous inspections. 9

10 (vii) False certifications. Any administrator that 11 falsely certifies to the appropriate department that 12 violations have been corrected shall be fined by the 13 appropriate department and shall lose his administrator 14 license.

15 (3) Within six months of the effective date of this act, 16 the appropriate department shall issue regulations pursuant 17 to this section. The regulations shall ensure that 18 inspections are not invasive of consumer's privacy or 19 dignity, support the principles of assisted living and can be 20 uniformly and consistently applied by the appropriate 21 department.

22 (4)The appropriate department shall establish monetary 23 penalties that relate to the severity of the violation. Money 24 collected by the appropriate department under this section 25 shall be first used to defray the expenses incurred by 26 consumers relocated under this act. Any moneys remaining 27 shall be used by the appropriate department for enforcing the 28 provisions of this act. Fines collected pursuant to this act 29 shall not be subject to the provisions of 42 Pa.C.S. § 3733 30 (relating to deposits into account).

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(c) Relocation, relocation assistance and transfer.--

(1) In addition to making all licensing surveys
available, assisted living residences shall post all Class I
and II licensing actions. The department shall inform all
residents of their right to leave the assisted living
residence and to receive relocation assistance.

7 (i) The department shall promptly relocate consumers
8 from an assisted living residence if any of the following
9 conditions exist:

10 (A) The assisted living residence is operating11 without a license.

(B) The licensee is voluntarily closing an
assisted living residence and relocation is necessary
for the health and welfare of the consumers.

15 (C) The assisted living residence has engaged in
16 conduct that endangers the health and safety of its
17 residents, leading a reasonable consumer to be
18 concerned for his or her safety.

19 (D) When the assisted living resident wishes to20 leave.

21 (ii) The department shall offer relocation
22 assistance to consumers of assisted living residences.
23 This shall include:

24 (A) Providing residents with pertinent
25 information, such as referrals to nearby social
26 service agencies or assisted living residences in
27 complete compliance with governing regulations.

(B) Determining other options for relocation;
 and assisting residents to make arrangements for
 relocation if family members are not available for
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this purpose.

(iii) Except in an emergency, the consumer shall be 2 3 involved in planning his transfer to another placement 4 and shall have the right to choose among the available 5 alternative placements. The department may make temporary placement until final placement can be arranged. 6 Consumers shall be provided with an opportunity to visit 7 alternative placement before relocation or following 8 9 temporary emergency relocation. Consumers shall choose 10 their final placement and shall be given assistance in 11 transferring to such place.

12 (iv) Consumers shall not be relocated pursuant to 13 this section if the department determines in writing and 14 consistent with consumer preference that such relocation 15 is not in the best interest of the consumer.

(2) All consumers of assisted living services providers 16 17 shall be notified by the Department of Health of its Class I 18 and II licensing actions against their provider, informed of 19 their right to switch providers and informed of their right 20 to receive assistance in locating a new assisted living 21 services provider. The Department of Health shall provide 22 assistance to consumers of assisted living services providers 23 who require assistance in transferring to other assisted living services providers. The assistance shall be consistent 24 with the conditions for and forms of assistance stated in 25 26 paragraph (1).

(d) Appeal of violations.--A provider appealing appropriate departmental ban on admissions and/or license revocation or nonrenewal shall be denied a supersedeas unless the provider demonstrates substantial likelihood of prevailing on the merits. 20030S0136B0148 - 45 - Where a supersedeas is granted it shall be revoked if the
 department presents evidence of any intervening Class I or II
 violations. Where supersedeas is granted:

4 (1) The appropriate department shall inspect a residence
5 or assisted living services provider at least monthly or more
6 frequently to ensure residents' or recipients' safety and
7 well-being. These inspection reports will be maintained as
8 part of the public record for the assisted living residence
9 or assisted living services provider.

10 (2) Where a supersedeas has been granted, a Class I or
11 II violation cited after the granting of the supersedeas
12 shall lead to a revocation of the supersedeas.

(e) Hearings.--The Department of Public Welfare and the Department of Health, respectively, shall make the assisted living residence or services consumer and provider appeals a priority, with no appeal outstanding more than 60 days beyond the date on which the appeal was filed.

18 (f) Expedited reconsideration.--The Secretary of Public19 Welfare shall rule on reconsiderations within 60 days.

20 (g) Definitions.--As used in this section, the following 21 words and phrases shall have the meanings given to them in this 22 subsection:

23 "Appropriate department." The appropriate department with 24 respect to assisted living residences shall be the Department of 25 Public Welfare and the appropriate department with respect to 26 assisted living services providers shall be the Department of 27 Health.

28 "Each department." The term shall mean both the Department 29 of Public Welfare and the Department of Health acting 30 independently but following the same instruction from the 20030S0136B0148 - 46 - 1 legislature.

Section 8. Expansion of availability of publicly funded home based and community-based assisted living
 services.

5 (a) Categories and services.--Within the next fiscal year
6 following the effective date of this act, the department shall:

7 (1) Immediately work with stakeholders to identify
8 categories of persons qualifying for nursing facility care
9 who do not presently fit in any of Pennsylvania's present
10 Medicaid home-based and community-based waiver programs, such
11 as persons with autism, persons who have suffered a stroke
12 and others.

13 (2) Seek amendment of all present Medicaid home-based and community-based services waivers consistent with Federal 14 15 requirements for the purposes of adding/increasing needed 16 services not presently provided and covering populations 17 identified in paragraph (1), to fill in the gaps in 18 Pennsylvania's current Medicaid waivers and to maximize caps 19 on payment, such as adding cognitive support services and 20 assistive technology to the PDA waiver, amending the AIDS 21 waiver and increasing the 80% cap on PDA waiver services.

(3) Amend, if permitted by Federal law, the State plan
to include in medical assistance financial eligibility
determination the following:

(i) In determining the countable resources of
qualified persons for purposes of medical assistance
eligibility, the department shall use a computation
method which exempts an amount of otherwise countable
resources which is equal to the difference between \$2,000
and an amount calculated as follows: \$2,000 increased by
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each of the Social Security cost-of-living adjustments sequentially from January 1, 1990, to the present.

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(ii) For qualified couples, the department shall use
a computation method which exempts an amount of otherwise
countable resources which is equal to the difference
between \$3,000 and the amount calculated as follows:
\$3,000 increased by each of the Social Security cost-ofliving adjustments sequentially from January 1, 1990, to
the present.

10 (iii) The department shall promptly adjust upward
11 the exempted amounts each year as new Social Security
12 cost-of-living adjustments go into effect.

13 (4) Change and, where necessary, seek Federal approval to liberalize eligibility requirements for nursing facility-14 15 eligible persons receiving Medicaid-funded services in the 16 community to parallel the requirements for those receiving 17 care in a nursing facility. Where permitted by Federal law, 18 the department shall increase the resource level, adjust the 19 spousal impoverishment level and revise spenddown allowances 20 for those receiving services in their home and community to parallel the requirements for those persons receiving such 21 22 services in a Medicaid-funded nursing facility.

(b) Housing.--Within nine months the Department of Aging andthe Department of Public Welfare shall:

(1) Establish a presumptive eligibility program for
immediately putting assisted living services in place for
persons needing long-term care services who appear to be
eligible for State-funded or Medicaid-funded programs, where
the individual is at risk of imminent placement in a nursing
facility. In so doing, the department shall attempt to
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maximize Federal matching funding but, if necessary, may use
 State funding exclusively.

3 (2) Establish rules and procedures for a program to 4 provide payment for a housing supplement funded with State 5 dollars to be used with Medicaid-funded home-based and 6 community-based services to help keep the consumer at home, 7 in an approved domiciliary care home, in an assisted living 8 residence or in an approved personal care home where:

9 (i) the total State cost of the housing supplement 10 and home-based and community-based services is less than 11 the State cost for that consumer in a nursing facility; 12 or

(ii) a housing supplement is necessary to avoidnursing facility placement unwanted by the consumer:

(A) the person is certified for an available
waiver slot in the Medicaid-funded home-based and
community-based services waiver program; and

(B) adequate State funds have been appropriated
for the year for the payment of the supplement.
(3) Begin annual assessment of the availability of homebased and community-based assisted living services in all
counties and assist counties to develop needed services, such
as adult day care, where they are presently unavailable.

(4) Establish a program which allows persons with
medical assistance countable assets of up to \$40,000, but who
are presently income eligible for Medicaid-funded home-based
and community-based assisted living services to equally share
the cost of those services with a State-funded program and
provides State support to bridge the transition to Medicaidfunded services.

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1 (5) Implement a quality assessment and improvement 2 program, which includes consumer satisfaction surveys and 3 quality-of-life outcome measures to ensure that publicly 4 funded home-based and community-based services meet 5 consumers' needs and permit consumers to live independently in the residential environment of their choice, promote 6 integration of consumers into the community, maximize 7 8 consumer choice to promote and support the consumer's 9 changing needs, are consumer-oriented and meet professional standards of quality. 10

11 (6) Work with stakeholders to develop recommendations 12 for the General Assembly for public funding and cost sharing 13 for consumers needing assistance with activities of daily living whose income is higher than the Medicaid or 14 15 Supplemental Security Income State supplement but less than the medical assistance home-based and community-based waiver 16 17 income level, and who do not meet the functional eligibility 18 for Medicaid home-based and community-based waiver services. 19 Transition. -- On a timely and ongoing basis, the (C) 20 department shall identify persons aging out of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program and 21 22 other publicly funded programs who would be eligible for 23 publicly funded home-based and community-based assisted living 24 services and assist them to make a safe and uninterrupted 25 transfer to those programs so that they may continue to remain 26 in their communities.

(d) Report.--The Department of Public Welfare and the
Department of Aging shall provide annually a public report
including the following information:

30 (1) The types of home-based and community-based services
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1 funded through public sources by county, including 2 descriptions of services, units of services, an unduplicated 3 count of people served by service and consumer satisfaction 4 information.

5 The number of people who applied for home-based and (2) community-based services, the number of people on waiting 6 lists, the number of people denied home-based and community-7 8 based services because of financial ineligibility, the 9 adequacy of access to providers funded under this act and 10 choice of quality providers for first-day medical assistance 11 beneficiaries qualifying for services under this act, an 12 analysis of the adequacy of reimbursement to providers for 13 publicly funded services under this act and the number of people denied home-based and community-based services because 14 15 of functional ineligibility.

16 The number, types and results of complaints, (3) 17 consumer satisfaction information, length of stay or service 18 delivery, reasons for termination of service and development 19 of evaluation tools for determining quality of life and care. 20 (e) Annual determination. -- The department shall annually determine, on a county-by-county basis, the adequacy of access 21 22 of first-day medical assistance beneficiaries who qualify for 23 services under this act to a reasonable choice of quality providers funded for services under this act. In those counties 24 25 where first-day Medicaid beneficiaries do not have adequate 26 access and choice of quality providers, the department shall, after consultation with stakeholders, determine a fair share 27 28 first-day medical assistance access formula to be applied to providers in that county who provide services under this act, 29 for the purpose of providing access for first-day medical 30 20030S0136B0148 - 51 -

assistance beneficiaries. In such cases, the department shall 1 only contract with those providers who agree to serve a fair 2 3 share of first-day medical assistance consumers. However, no 4 provider shall be penalized for not meeting the fair share 5 requirements if it can demonstrate that access or services have not been denied to any first-day medical assistance recipient 6 meeting the providers' admission/acceptance standards. 7 Section 9. Application, assessment and appeal process for 8 publicly funded home-based and community-based 9

10 assisted living services.

11 (a) Application form and application process. --Within six months of the effective date of this act, the Department of 12 13 Public Welfare and the Department of Aging, working with the 14 stakeholders, shall design and utilize a single, simple, 15 consumer-friendly, attractive and readily available PALS 16 application form for publicly funded services and benefits 17 available in Pennsylvania for persons needing long-term care 18 services, which will serve as a one-stop application for these 19 services. The application shall be for all publicly funded 20 assisted living services available in Pennsylvania and shall be 21 known as the PALS Program Application.

22 (b) Duties of departments.--The departments shall:

(1) To the extent possible, rely primarily on income and
asset verification that is independently available to the
Commonwealth, with little burden placed on the applicant.

26 (2) Ensure swift and seamless application process for
 27 all PALS programs so that there are consistent income 28 eligibility periods and use of self-declaration of income for
 29 PACE and Medicaid so that Medicaid-eligible PACE applicants
 30 will receive the greater package of services through
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Medicaid, while helping the Commonwealth maximize Federal
 funding and free up State lottery funds.

3 (3) Permit PALS application submission to either the
4 Department of Aging or the Department of Public Welfare and
5 take other steps to ensure the prompt and seamless processing
6 of applications and provision of services.

7 (4) Promptly assist and advise applicants and their
8 family members in gathering necessary nonindependently
9 available verification of income and assets and directly
10 contact sources of information if the consumer requests.

(5) Ensure that the application is capable of swift determination on completeness and eligibility so that, upon submission, additional items necessary for processing the completed application will be identified to the applicant or their family members.

16 (6) Ensure that eligibility determinations made in one
17 county shall be good for use in any county of this
18 Commonwealth during the period of eligibility.

19 (c) Legislative Budget and Finance Committee.--Within six 20 months of the effective date of this act, the Legislative Budget and Finance Committee shall evaluate the efficiency, 21 responsiveness to consumers, consumer satisfaction with and 22 23 effectiveness of the present staffing and application and verification process for publicly funded home-based and 24 25 community-based assisted living services and make 26 recommendations for improvements.

(d) Screening, assessment and eligibility determination.- (1) The department shall immediately establish
 procedures requiring all persons seeking long-term care
 services in an assisted living residence or personal care
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home to obtain a level-of-care screening and comprehensive
 assessment from the area agency on aging program prior to
 admission to such residence.

4 (2) The procedures may permit an area agency on aging 5 level-of-care screening and comprehensive assessment to be 6 conducted by telephone based on representations made by the 7 provider and applicant subject to retrospective face-to-face 8 evaluation of the applicant thereafter.

9 (3) All persons may obtain level-of-care screenings and 10 comprehensive assessments from the area agency on aging.

(4) All area agency on aging level-of-care screenings or comprehensive assessments must be completed within five business days of the request, except where an urgent situation requires that they be completed within one business day, and shall be valid for six months unless the resident's or recipient's condition changes.

17 (5) All area agency on aging determinations of need for 18 publicly funded long-term care services shall be evaluated by 19 the county assistance offices for financial eligibility 20 within five business days generally or one day for emergency 21 cases from date of receipt of completed Medicaid application.

(6) The departments, in consultation with stakeholders,
shall establish the negotiated risk standards to be used in
determining the consumer's eligibility for publicly funded
assisted living services.

(e) Appeals.--The department shall promptly develop an expedited fair hearing process for addressing challenges to financial eligibility, level of care, service plan and Supplemental Security Income supplemental decisions where the denial has resulted in failure to provide long-term care 20030S0136B0148 - 54 - services. Hearing and decision must take place within 30 days of
 filing of fair hearing.

3 Section 10. Information on publicly funded assisted living4 services.

5 Within nine months of the effective date of this act, the6 Department of Public Welfare and the Department of Aging shall:

7 Develop an extensive multimedia public information (1)8 campaign to inform Pennsylvanians needing home-based and 9 community-based long-term assisted living services of the 10 range of options available, which list shall be updated and disseminated annually, and of the availability of the 11 12 Pennsylvania Assisted Living Services (PALS) Program. The 13 public information campaign shall be reviewed and updated 14 every two years with reports to and an opportunity for input 15 by the stakeholders.

16 (2) Establish a toll-free PALS Help Line for consumers
17 needing home-based and community-based assisted living
18 services to advise consumers of programs in their area and of
19 public funding availability and to assist with the
20 application process.

(3) Initiate a training program for hospital discharge
planners, area aging personnel, nursing home staff,
Department of Public Welfare caseworkers, HealthChoices
special needs personnel and social service programs on the
range of publicly funded home-based and community-based
assisted living services and the new application process
therefore.

28 Section 11. Information sharing.

29 The department shall maintain a data base of licensed 30 assisted living residences and assisted living services 20030S0136B0148 - 55 - providers and shall make available from the department and on its World Wide Web site, at a minimum, the following information for each licensed provider: name, address, licensing status, resident profiles, number of beds, payer sources, consumer satisfaction and quality indicators, and important links to related long-term care World Wide Web sites. This information must be regularly updated and it must be timely.

8 Section 12. Appropriation.

9 The sum of \$1,000,000 is hereby appropriated to the 10 Department of Public Welfare for the housing supplement purposes 11 set out in section 8(b)(2) for the fiscal year July 1, 2003, to 12 June 30, 2004, to carry out the provisions of this act.

13 Section 13. Repeal.

14 All acts and parts of acts are repealed insofar as they are 15 inconsistent with this act.

16 Section 14. Effective date.

17 This act shall take effect in 60 days.