1	State of Arkansas	As Engrossed: S3/22/11		
2	88th General Assembly	A Bill		
3	Regular Session, 2011		SENATE BILL 759	
4				
5	By: Senator P. Malone			
6				
7		For An Act To Be Entitle	ed	
8	AN ACT TO A	MEND THE INFORMAL DISPUTE R	ESOLUTION	
9	PROCESS FOR LONG-TERM CARE FACILITIES; AND FOR OTHER			
10	PURPOSES.			
11				
12				
13		Subtitle		
14	AN ACT	TO AMEND THE INFORMAL DISP	PUTE	
15	RESOLU	JTION PROCESS FOR LONG-TERM	CARE	
16	FACILI	TIES; AND FOR OTHER PURPOSE	es.	
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19	BE IT ENACTED BY THE GE	NERAL ASSEMBLY OF THE STATE	OF ARKANSAS:	
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21			oncerning the definition of	
22	_	r for dispute resolution fo	r long-term care	
23	facilities, is amended			
24		partial decision maker" mea		
25		nduct an informal dispute r	esolution hearing for the	
26	agency.			
27		"Impartial decision maker"		
28		ntly or has been within the		
29	-	d in any survey process und	<u>er the Department of Human</u>	
30	<u>Services;</u>			
31	GTGTTON 0 4 1			
32		as Code § 20-10-1906(a), co		
33	-	tion hearings, is amended to		
34	 -	ipt of a request for an inf	-	
35 36	•	, the Division of Health of rtment of Health shall assi	-	
, ()	and numan activities Depa	rument of health shall assi	zu lue maller LO an	

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1	impartial decision maker.		
2	(2) If a deficiency in dispute concerns a pharmacy, a		
3	pharmacist, a pharmacy tag, or a deficiency where the expertise of a		
4	pharmacist is required, the informal decision maker shall:		
5	(A) Be a pharmacist if the informal decision maker is a		
6	single individual; or		
7	(B) Include a pharmacist if the informal decision maker is		
8	a group of individuals.		
9			
10	SECTION 3. Arkansas Code § 20-10-1906(e)(2)(A), concerning submission		
11	of documentary evidence for an informal dispute resolution record review, is		
12	amended to read as follows:		
13	(2)(A) If the informal dispute resolution hearing is conducted		
14	by record review, the impartial hearing officer <u>impartial decision maker</u> may		
15	request, and the parties shall provide, a written statement setting forth the		
16	parties' positions for accepting, rejecting, or modifying each deficiency in		
17	dispute.		
18			
19	SECTION 4. Arkansas Code § 20-10-1907 is amended to read as follows:		
20	20-10-1907. Informal dispute resolution hearing Conduct.		
21	(a)(1) In all cases except record review, the facility shall present		
22	the initial arguments.		
23	(2) The Office of Long-Term Care shall then present its		
24	arguments.		
25	(a) Unless the facility chooses another order of presentation of		
26	<u>arguments:</u>		
27	(1) The Office of Long-Term Care shall present the initial		
28	arguments at the hearing; and		
29	(2) After the office completes its arguments, the facility shall		
30	present its arguments.		
31	(b)(l) As a matter of fairness to all parties, the impartial decision		
32	maker shall determine in conjunction with all parties:		
33	(A) The appropriate time needed for each presentation of		
34	information and argument; and		
35	(B) The sequence and appropriate time for each rebuttal		
36	argument.		

1	(b)(1) The hearing shall be limited to no more than two (2) hours in	
2	length, with each party being permitted one (1) hour to present its	
3	arguments.	
4	(2) However, the impartial hearing officer impartial decision	
5	maker may grant each party additional equal time for good cause as determined	
6	by the impartial decision maker in conjunction with all parties.	
7	(c)(l) Rules of evidence or procedure shall not apply except as	
8	provided in this section.	
9	(2) The impartial decision maker may:	
10	(A) Accept any information that the impartial decision	
11	maker deems material to the issue being presented; and	
12	(B) Reject any information that the impartial decision	
13	maker deems immaterial to the issue being presented.	
14	(d)(1) The hearing may not be recorded.	
15	(2) However, the impartial decision maker may make written or	
16	recorded notes of the arguments.	
17	(e) Only employees of the facility, attending physicians of residents	
18	of the facility at the time of the deficiency, pharmacists providing	
19	medications to residents of the facility at the time of the deficiency, and	
20	consultant pharmacists or nurse consultants utilized by the facility, or the	
21	medical director of the facility may appear or participate at the hearing for	
22	or on the behalf of the facility.	
23	(f) Only employees of the office may appear or participate at the	
24	hearing for or on behalf of the office.	
25	(g) A person authorized under subsection (e) or (f) of this section to	
26	participate in the hearing may present direct questions to an opposing	
27	participant during the rebuttal argument.	
28	(h)(1) Within fourteen (14) days of a final decision concerning the	
29	issues presented in the hearing and any related matters, the Department of	
30	Health shall provide the parties with a report concerning the hearing, all	
31	decisions made on the basis of the hearing, and any related matters.	
32	(2) The report required under subdivision (h)(1) of this section	
33	shall include without limitation:	
34	(A) Information concerning any change to the disputed	
35	<u>deficiency; and</u>	
36	(B) A listing of each specific item of the deficiency and	

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1	all changes made to the deficiency.		
2	(i)(1) The Department of Human Services shall compile and make		
3	available to all facilities subject to this section a quarterly report that		
4	shall include without limitation the number of informal dispute resolutions		
5	during the previous quarter that were:		
6	(A) Heard;		
7	(B) Decided in favor of the state agency; and		
8	(C) Decided in favor of the facility.		
9	(2) The office shall review the reports under subdivision (i)(1		
10	of this section and shall:		
11	(A) Determine what patterns of sustained and overturned		
12	deficiencies exist; and		
13	(B) Evaluate the training process to address the		
14	identified patterns.		
15	$\frac{(g)(j)}{(j)}$ No A party may shall not be represented by an attorney.		
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17	/s/P. Malone		
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