Stricken language would be deleted from and underlined language would be added to law as it existed prior to the 82nd General Assembly.

1	State of ArkansasAs Engrossed: S1/28/99 S2/11/99 S2/12/99 S2/17/99 S2/25/99 S3/4/99 S3/11/99 S3/18/99 H3/29/99
2	82nd General Assembly A B1II Act 1181 of 1999
3	Regular Session, 1999SENATE BILL226
4	
5	By: Senators Brown, Bearden, Bisbee, Bradford, Hoofman, Ross, Scott, B. Walker, Wilson
6	By: Representatives Magnus, T. Steele, Faris
7	
8	
9	For An Act To Be Entitled
10	"AN ACT TO PROVIDE FOR THE PROTECTION OF LONG-TERM
11	CARE FACILITY RESIDENTS; AND FOR OTHER PURPOSES."
12	
13	Subtitle
14	"TO PROVIDE FOR THE PROTECTION OF LONG-
15	TERM CARE FACILITY RESIDENTS."
16	
17	
18	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
19	
20	SECTION 1. <u>PURPOSE.</u>
21	The purpose of this act is to provide for the development,
22	establishment, and enforcement of basic standards for:
23	(1) The health, care and treatment of persons in long-term care
24	facilities; and
25	(2) The construction, maintenance, and operation of such facilities
26	which will ensure safe, adequate, and appropriate care, treatment, and health
27	of persons in such facilities.
28	
29	SECTION 2. <u>DEFINITIONS.</u>
30	When used in this act unless the context otherwise requires, the term:
31	(1) "Administrator" means a person who administers, manages,
32	<u>supervises, or is in general administrative charge of a long-term care</u>
33	<u>facility;</u>
34	(2) <u>"Bed reservation policy" means the number of consecutive days and</u>
35	<u>the number of days per year that a resident may leave the long-term care</u>
36	facility for overnight therapeutic visits with the family or friends or for

1	hospitalization for an acute condition before the licensee may
2	discharge the resident due to his or her absence from the facility;
3	(3) "Board" means the Long Term Care Facility Advisory board created by
4	Arkansas Code 20-10-301;
5	(4) "Custodial service" means care for a person which entails
6	observation of diet and sleeping habits and maintenance of a watchfulness over
7	the general health, safety, and well-being of the person;
8	(5) "Department" means the Department of Human Services;
9	(6) "OLTC" means the Office of Long Term Care, created by Arkansas Code
10	<u>20-10-202;</u>
11	(7) "Ombudsman" means the Long-Term Care Ombudsman established pursuant
12	to Arkansas Code 20-10-601 through 20-10-603;
13	(8) "Long-term care facility" means a nursing home, residential care
14	facility, post-acute head injury retraining and residential care facility, or
15	any other facility which provides long-term medical or personal care, but
16	shall not include any facility which is conducted by and for those who rely
17	exclusively upon treatment by prayer alone for healing in accordance with the
18	tenets or practices of any recognized religious denomination;
19	(9) "Residential care plan" means a written plan developed, maintained,
20	and reviewed not less than quarterly by a registered nurse, with participation
21	from other facility staff and the resident or his or her designee or legal
22	representative, which includes a comprehensive assessment of the needs of an
23	individual resident, a listing of services provided within or outside the
24	facility to meet those needs, and an explanation of service goals; and
25	(10) "Resident designee" means a person, other than the owner,
26	administrator, or employee of the facility, designated in writing by a
27	resident or a resident's guardian, if the resident is adjudicated incompetent,
28	to be the resident's representative for a specific, limited purpose.
29	
30	SECTION 3. <u>RESIDENTS' RIGHTS.</u>
31	(a) All long-term care facilities shall adopt and make public a
32	statement of the rights and responsibilities of the residents of such
33	facilities and shall treat such residents in accordance with the provisions of
34	that statement. The statement shall assure each resident of the following:
35	(1) The right to civil and religious liberties, including
36	knowledge of available choices and the right to independent personal

1	decisions, which will not be infringed upon, and the right to encouragement
2	and assistance from the staff of the facility in the exercise of these rights.
3	(2) The right to private and uncensored communication, including,
4	but not limited to, receiving and sending unopened correspondence, access to a
5	telephone, visiting with any person of the resident's choice during visiting
6	hours provided that such visitors are not disruptive or dangerous, and
7	overnight visitation outside the facility with family and friends in
8	accordance with facility policies, physician orders, and Title XVIII
9	(Medicare) and Title XIX (Medicaid) of the Social Security Act regulations,
10	without the resident's losing his or her bed. Facility visiting hours shall
11	be flexible, taking into consideration special circumstances such as, but not
12	limited to, out-of-town visitors and working relatives or friends. Unless
13	otherwise indicated in the resident care plan, the licensee shall, with the
14	consent of the resident and in accordance with policies approved by the
15	agency, permit recognized volunteer groups, representatives of community-based
16	legal, social, mental health, and leisure programs, and members of the clergy
17	access to the facility during visiting hours for the purpose of visiting with
18	and providing services to any resident.
19	(3) Any entity or individual that provides health, social, legal,
20	or other services to a resident has the right to have reasonable access to the
21	resident. The resident has the right to deny or withdraw consent to access at
22	any time by any entity or individual. Notwithstanding the visiting policy of
23	the facility, the following individuals must be permitted immediate access to
24	the resident.
25	(A) Any representative of the federal or state government,
26	including, but not limited to, representatives of the Department of Human
27	<u>Services, any law enforcement officer; any ombudsman; and the resident's</u>
28	individual physician.
29	(B) Subject to the resident's right to deny or withdraw
30	consent, immediate family or other relatives of the resident. The facility
31	must allow any ombudsman to examine a resident's clinical records with the
32	permission of the resident or the resident's legal representative and
33	consistent with state law.
34	(4) The right to present grievances on behalf of himself or
35	<u>herself or others to the staff or administrator of the facility, to</u>
36	governmental officials, or to any other person; to recommend changes in

1	policies and services to facility personnel; and to join with other residents
2	<u>or individuals within or outside the facility to work for improvements in</u>
3	resident care, freedom from restraint, interference, coercion, discrimination,
4	or reprisal. This right includes access to ombudsmen and advocates and the
5	right to be a member of, to be active in, and to associate with advocacy or
6	special interest groups. The right also includes the right to prompt efforts
7	by the facility to resolve resident grievances, including grievances with
8	respect to the behavior of other residents.
9	(5) The right to organize and participate in resident groups in
10	the facility and the right to have the resident's family meet in the facility
11	with the families of other residents.
12	(6) The right to participate in social, religious, and community
13	activities that do not interfere with the rights of other residents.
14	(7) The right to examine, at any time, the results which the
15	facility shall post of the most recent inspection of the facility conducted by
16	a federal or state agency and any plan of correction in effect with respect to
17	the facility.
18	(8) The right to manage his or her own financial affairs or to
19	<u>delegate such responsibility to the licensee, but only to the extent of the</u>
20	funds held in trust by the licensee for the resident. An annual accounting of
21	any transactions made on behalf of the resident shall be furnished to the
22	resident or the person responsible for the resident. The facility may not
23	require a resident to deposit personal funds with the facility. However, upon
24	written authorization of a resident, the facility must hold, safeguard,
25	manage, and account for the personal funds of the resident deposited with the
26	facility as follows:
27	(A) The facility must establish and maintain a system that
28	ensures a full, complete, and separate accounting, according to generally
29	accepted accounting principles or regulations established by OLTC of each
30	resident's personal funds entrusted to the facility on the resident's behalf;
31	(B) The accounting system established and maintained by the
32	facility must preclude any commingling of resident funds with facility funds
33	or with the funds of any person other than a resident;
34	(C) An annual accounting of any transaction made on behalf
35	of the resident shall be furnished to the resident or the person responsible
36	for the resident; and

1	(D) The facility may not impose a charge against the
2	<u>personal funds of a resident for any item or service for which payment is made</u>
3	under Title XVIII or Title XIX of the Social Security Act.
4	(9) The right to be fully informed, in writing and orally, prior
5	to or at the time of admission and during his or her stay, of services
6	available in the facility and of related charges for such services, including
7	any charges for services not covered under Title XVIII or Title XIX of the
8	Social Security Act or not covered by the basic per diem rates and of bed
9	reservation and refund policies of the facility.
10	(10) The right to be adequately informed of his or her medical
11	condition and proposed treatment, unless the resident is determined to be
12	<u>unable to provide informed consent under Arkansas law, or the right to be</u>
13	fully informed in advance of any nonemergency changes in care or treatment
14	that may affect the resident's well-being; and, except with respect to a
15	resident adjudged incompetent, the right to participate in the planning of all
16	medical treatment, including the right to refuse medication and treatment,
17	unless otherwise indicated by the resident's physician; and to know the
18	consequences of such actions.
19	(11) The right to refuse medication or treatment and to be
20	informed of the consequences of such decisions, unless determined unable to
21	provide informed consent under state law. When the resident refuses
22	medication or treatment, the long-term care facility must notify the resident
23	or the resident's legal representative of the consequences of such decision
24	and must document the resident's decision in his or her medical record. The
25	long-term care facility must continue to provide other services the resident
26	agrees to in accordance with the resident's care plan.
27	(12) The right to receive adequate and appropriate health care
28	and protective and support services, including social services; mental health
29	services, if available; planned recreational activities; and therapeutic and
30	rehabilitative services consistent with the resident care plan, with
31	established and recognized practice standards within the community, and with
32	rules as adopted by the agency.
33	(13) The right to have privacy in treatment and in caring for
34	personal needs; to close room doors and to have facility personnel knock
35	before entering the room, except in the case of an emergency or unless
36	medically contraindicated; and to security in storing and using personal

1	possessions. Privacy of the resident's body shall be maintained during, but
2	not limited to, toileting, bathing, and other activities of personal hygiene,
3	except as needed for resident safety or assistance.
4	(14) The right to be treated courteously, fairly, and with the
5	fullest measure of dignity and to receive a written statement and an oral
6	explanation of the services provided by the licensee, including those required
7	to be offered on an as-needed basis.
8	(15) The right to be free from mental and physical abuse,
9	corporal punishment, extended involuntary seclusion, and from physical and
10	chemical restraints, except those restraints authorized in writing by a
11	physician for a specified and limited period of time or as are necessitated by
12	an emergency. In case of an emergency, restraint may be applied only by a
13	qualified licensed nurse who shall set forth in writing the circumstances
14	requiring the use of restraint, and, in the case of use of a chemical
15	restraint, a physician shall be consulted immediately thereafter. Restraints
16	may not be used in lieu of staff supervision or merely for staff convenience,
17	for punishment, or for reasons other than resident protection or safety.
18	(16) The right to be transferred or discharged only for medical
19	reasons or for the welfare of other residents, and the right to be given
20	<u>reasonable advance notice of no less than thirty (30) days of any involuntary</u>
21	transfer or discharge, except in the case of an emergency as determined by a
22	licensed professional on the staff of the long-term care facility, or in the
22	
23	case of conflicting rules and regulations which govern Title XVIII or Title
23 24	case of conflicting rules and regulations which govern Title XVIII or Title XIX of the Social Security Act. For nonpayment of a bill for care received,
24	XIX of the Social Security Act. For nonpayment of a bill for care received,
24 25	XIX of the Social Security Act. For nonpayment of a bill for care received, the resident shall be given thirty (30) days advance notice. A licensee
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24 25 26 27 28 29	XIX of the Social Security Act. For nonpayment of a bill for care received, the resident shall be given thirty (30) days advance notice. A licensee certified to provide services under Title XIX of the Social Security Act may not transfer or discharge a resident solely because the source of payment for care changes. Admission to a long-term care facility operated by a licensee may not be conditioned upon a waiver of such right, and any document or
24 25 26 27 28 29 30	XIX of the Social Security Act. For nonpayment of a bill for care received, the resident shall be given thirty (30) days advance notice. A licensee certified to provide services under Title XIX of the Social Security Act may not transfer or discharge a resident solely because the source of payment for care changes. Admission to a long-term care facility operated by a licensee may not be conditioned upon a waiver of such right, and any document or provision in a document which purports to waive or preclude such right is void
24 25 26 27 28 29 30 31	XIX of the Social Security Act. For nonpayment of a bill for care received, the resident shall be given thirty (30) days advance notice. A licensee certified to provide services under Title XIX of the Social Security Act may not transfer or discharge a resident solely because the source of payment for care changes. Admission to a long-term care facility operated by a licensee may not be conditioned upon a waiver of such right, and any document or provision in a document which purports to waive or preclude such right is void and unenforceable. Any licensee certified to provide services under Title XIX
24 25 26 27 28 29 30 31 32	XIX of the Social Security Act. For nonpayment of a bill for care received, the resident shall be given thirty (30) days advance notice. A licensee certified to provide services under Title XIX of the Social Security Act may not transfer or discharge a resident solely because the source of payment for care changes. Admission to a long-term care facility operated by a licensee may not be conditioned upon a waiver of such right, and any document or provision in a document which purports to waive or preclude such right is void and unenforceable. Any licensee certified to provide services under Title XIX of the Social Security Act that obtains or attempts to obtain such a waiver of
24 25 26 27 28 29 30 31 32 33	XIX of the Social Security Act. For nonpayment of a bill for care received, the resident shall be given thirty (30) days advance notice. A licensee certified to provide services under Title XIX of the Social Security Act may not transfer or discharge a resident solely because the source of payment for care changes. Admission to a long-term care facility operated by a licensee may not be conditioned upon a waiver of such right, and any document or provision in a document which purports to waive or preclude such right is void and unenforceable. Any licensee certified to provide services under Title XIX of the Social Security Act that obtains or attempts to obtain such a waiver of a resident's rights as established herein is subject to disciplinary action as

1	physician; to obtain pharmaceutical supplies and services from a pharmacy of
2	<u>the resident's choice, at the resident's own expense or through Title XIX of</u>
3	<u>the Social Security Act; and to obtain information about, and to participate</u>
4	in, community-based activities programs, unless medically contraindicated as
5	documented by a physician in the resident's medical record. If a resident
6	chooses to use a community pharmacy and the facility in which the resident
7	resides uses a unit-dose system, the pharmacy selected by the resident shall
8	<u>be one that provides a compatible unit-dose system, provides service delivery,</u>
9	and stocks the drugs normally used by long term care residents. If a resident
10	chooses to use a community unit-dose system, and the facility in which the
11	resident resides does not use a unit-dose system, the pharmacy selected by the
12	resident shall be one that provides service delivery and stocks the drugs
13	normally used by the long-term care residents.
14	(18) The right to retain and use personal clothing and
15	possessions as space permits, unless to do so would infringe upon the rights
16	of other residents or unless medically contraindicated as documented in the
17	resident's medical record by a physician. If clothing is provided to the
18	resident by the licensee, it shall be of reasonable fit.
19	(19) The right to have copies of the rules and regulations of the
20	facility and an explanation of the responsibility of the resident to obey all
21	reasonable rules and regulations of the facility and to respect the personal
22	rights and private property of the other residents.
23	(20) The right to receive notice before the room of the resident
24	in the facility is changed.
25	(21) The right to be informed of the bed reservation policy for a
26	hospitalization. The long-term care facility shall inform a private-pay
27	resident and his or her responsible party that his or her bed will be reserved
28	for any single hospitalization for a period up to thirty (30) days provided
29	the long-term care facility receives reimbursement. Any resident who is a
30	recipient of assistance under Title XIX of the Social Security Act, or the
31	resident's designee or legal representative, shall be informed by the licensee
32	that his or her bed, for which there is Title XIX reimbursement available,
33	will be reserved up to five (5) days but that the bed will not be reserved if
34	it is medically determined by a physician that the resident will not need it
35	<u>or will not be able to return to the long-term care facility, or if the agency</u>
36	<u>determines that the long-term care facility's occupancy rate ensures the</u>

1	availability of a bed for the resident. Notice shall be provided within
2	twenty-four (24) hours of hospitalization.
3	(22) For residents of Medicaid or Medicare certified facilities,
4	the right to challenge a decision by the facility to discharge or transfer the
5	resident, as required under Title 42 C.F.R. Part 488.12.
6	(b) The licensee for each long-term care facility shall orally inform
7	the resident of the resident's rights and provide a copy of the statement
8	required by subdivision (a)(1) to each resident or the resident's legal
9	representative at or before the resident's admission to a facility. The
10	licensee shall provide a copy of the residents' rights to each staff member of
11	the facility. Each such licensee shall prepare a written plan and provide
12	appropriate staff training to implement the provisions of this section. The
13	written statement of rights must include a statement that a resident may file
14	a complaint with the OLTC or ombudsman. The statement must be in boldfaced
15	type and shall include the name, address, and telephone numbers of the
16	ombudsman and adult abuse registry where complaints may be lodged.
17	(c) Any violation of the residents' rights set forth in this section
18	may constitute grounds for action by the OLTC. In order to determine whether
19	the licensee is adequately protecting residents' rights, the annual inspection
20	of the facility shall include private informal conversations with a sample of
21	residents to discuss residents' experiences within the facility with respect
22	to rights specified in this section and general compliance with standards, and
23	consultation with the ombudsman in the area in which the long-term care
24	facility is located.
25	(d) Any person who submits or reports a complaint concerning a
26	suspected violation of the residents' rights or concerning services or
27	conditions in a facility or who testifies in any administrative or judicial
28	proceeding arising from such complaint shall have immunity from civil
29	liability thereof, unless that person has acted in bad faith, with malicious
30	purpose, or if the court finds that there was a complete absence of a
31	justiciable issue of either law or fact.
32	
33	SECTION 4. <u>CIVIL ENFORCEMENT.</u>
34	(a) Any resident who is injured by a deprivation or infringement of his
35	or her rights as specified in this act may bring a cause of action against any
36	licensee responsible for the deprivation or infringement. The action may be

1 brought by the resident or his or her guardian or by the personal 2 representative of the estate of a deceased resident. The action may be brought 3 in any court of competent jurisdiction in the county in which the injury 4 occurred or where the licensee is located to enforce such rights and to 5 recover actual and punitive damages. No separate award of attorney's fees may be made by the court. The resident may seek to recover actual damages when 6 7 there is a finding that an employee of the long term care facility failed to 8 do something which a reasonably careful person would do, or did something 9 which a reasonable person would not do, under circumstances similar to those 10 shown by the evidence in the case, which caused an injury due to an infringement or a deprivation of the resident's rights. 11 12 (b) A licensee shall not be liable for the medical negligence of any 13 physician rendering care or treatment to the resident except for the services 14 of a medical director as required in this act. Nothing in this subsection 15 shall be construed to protect a licensee from liability for failure to provide a resident with appropriate observation, assessment, nursing diagnosis, 16 17 planning, intervention, and evaluation of care by nursing staff. 18 (c) For the purpose of this section, punitive damages may be awarded 19 for conduct which is willful, wanton, gross or flagrant, reckless, or 20 consciously indifferent to the rights of the resident. 21 22 SECTION 5. PATIENT RECORDS - PENALTIES FOR ALTERATION. (a) Any person who fraudulently alters, defaces, or falsifies any 23 24 medical or other long-term care facility record, or causes or procures any of these offenses to be committed, commits a Class A misdemeanor. 25 26 (b) A conviction *under this section* is also grounds for restriction, 27 suspension, or termination of license privileges for the person. 28 29 SECTION 6. ADMINISTRATION AND MANAGEMENT OF LONG-TERM CARE FACILITIES. 30 Every licensed facility shall comply with all applicable standards and rules of the OLTC and shall: 31 32 (1) Be under the administrative direction and charge of a licensed 33 administrator. (2) Have available the regular, consultative, and emergency services 34 35 of physicians licensed by the state and required by state and federal 36 regul ati ons.

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1	(3) Provide for the access of the facility residents to dental and
2	<u>other health-related services, recreational services, rehabilitative services,</u>
3	and social work services appropriate to their needs and conditions and not
4	directly furnished by the licensee.
5	(4) If the facility was not cited for any deficiencies in the past
6	twelve (12) months, be encouraged by OLTC to provide services, including, but
7	not limited to, respite and adult day services, which enable individuals to
8	move in and out of the facility. A facility is not subject to any additional
9	licensure requirements for providing these services. Respite care may be
10	offered to persons in need of short-term or temporary long-term care services.
11	Respite care must be provided in accordance with this act and rules adopted by
12	the OLTC. However, the OLTC shall, by rule, adopt modified requirements for
13	resident assessment, resident care plans, resident contracts, physician
14	orders, and other provisions, as appropriate, for short-term or temporary
15	long-term care services. The OLTC shall allow for shared programming and
16	staff in a facility which meets minimum standards and offers services pursuant
17	to this subsection, but, if the facility is cited for deficiencies in quality
18	of care, categories or tags, may require additional staff and programs
19	appropriate to the needs of service recipients. A person who receives respite
20	care may not be counted as a resident of the facility for purposes of the
21	facility's licensed capacity unless that person receives twenty-four (24) hour
22	respite care. A person receiving either respite care for 24 hours or longer
23	or adult day services must be included when calculating minimum staffing for
24	the facility. Any costs and revenues generated by a long-term care facility
25	from nonresidential programs or services shall be excluded from the
26	calculations of Medicaid per diems for long-term care institutional care
27	reimbursement.
28	(5) If the facility was not cited for any deficiencies in the last
29	twelve (12) months, exceeds minimum staffing standards, and is part of a
30	retirement community that offers other services pursuant to part III, part IV,
31	or part V, be allowed to share programming and staff.
32	(6) Maintain the facility premises and equipment and conduct its
33	operations in a safe and sanitary manner.
34	(7) If the licensee furnishes food service, provide a wholesome and
35	nourishing diet sufficient to meet generally accepted standards of proper
36	nutrition for its residents and provide such therapeutic diets as may be

1	prescribed by attending physicians. In making rules to implement this
2	subsection, the OLTC shall be guided by standards recommended by nationally
3	recognized professional groups and associations with knowledge of dietetics.
4	(8) Keep full records of resident admissions and discharges, medical
5	and general health status, including medical records, personal and social
6	history, and identity and address of next of kin, or other persons who may
7	have responsibility for the affairs of the residents; and individual resident
8	care plans including, but not limited to, prescribed services, service
9	frequency and duration, and service goals. The records shall be open to
10	inspection by the OLTC.
11	(9) Keep such fiscal records of its operations and conditions as may be
12	necessary to provide information pursuant to this act.
13	(10) Furnish copies of personnel records for employees affiliated with
14	such facility, to any other facility licensed by this state requesting this
15	information pursuant to this act. Such information contained in the records
16	may include, but is not limited to, disciplinary matters and any reason for
17	termination. Any facility releasing such records pursuant to this act shall
18	<u>be considered to be acting in good faith and may not be held liable for</u>
19	information contained in such records, absent a showing that the facility
20	maliciously falsified such records.
21	
22	SECTION 7. PROPERTY AND PERSONAL AFFAIRS OF RESIDENTS.
23	(a) The admission of a resident to a facility and his or her presence
24	in the facility shall not confer on the facility or its owner, administrator,
25	employees, or representatives any authority to manage, use, or dispose of any
26	property of the resident; nor shall such admission or presence confer on any
27	of the aforementioned persons any authority or responsibility for the personal
28	affairs of the resident, except that which may be necessary for the safety of
29	the residents and orderly management of the facility.
30	<u>(b) No licensee, owner, administrator, employee, or representative</u>
31	thereof shall act as guardian, trustee, or conservator for any resident of the
32	
33	facility or any such resident's property unless the person is the resident's
00	facility or any such resident's property unless the person is the resident's spouse or blood relative within the third degree of consanguinity or if
34	
	spouse or blood relative within the third degree of consanguinity or if

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1	for the protection of valuables, or in order to avoid unreasonable
2	responsibility thereof, the licensee may require that such valuables be
3	excluded or removed from the facility and kept at some place not subject to
4	the control of the licensee.
5	(d) A licensee shall keep complete and accurate records of all funds
6	and other effects and property of its residents received by it for
7	safekeeping.
8	(e)(1) Any funds or other property belonging to a resident which are
9	received by a licensee shall be held in trust. Funds held in trust shall be
10	kept separate from the funds and property of the facility; shall be deposited
11	in a bank, savings and loan association, trust company, or credit union
12	located in this state and, if possible, located in the same county in which
13	the facility is located; shall not be represented as part of the assets of the
14	facility on a financial statement; and shall be used or otherwise expended
15	only for the account of the resident.
16	(2) The licensee may enter into a self-insurance agreement as
17	specified in rules adopted by the OLTC. Funds contained in the pool shall run
18	to any resident suffering financial loss as a result of the violation by the
19	licensee of the provisions of this section. Such funds shall be awarded to
20	any resident in an amount equal to the amount that the resident can establish,
21	by affidavit or other adequate evidence, was deposited in trust with the
22	licensee and which could not be paid to the resident within thirty (30) days
23	of the resident's request. The OLTC shall promulgate rules with regard to the
24	establishment, organization, and operation of such self-insurance pools. Such
25	rules shall include, but shall not be limited to, requirements for monetary
26	reserves to be maintained by such self-insurers to assure their financial
27	sol vency.
28	(3) If, at any time during the period for which a license is
29	issued, a licensee that has not entered into a self-insurance agreement, as
30	provided in subsection (b), is requested to provide safekeeping for the
31	personal funds of a resident, the licensee shall notify the agency of the
32	request and make application for a surety bond or for participation in a self-
33	insurance agreement within seven (7) days of the request, exclusive of
34	weekends and holidays. Copies of the application, along with written
35	documentation of related correspondence with an insurance agency or group,
36	shall be maintained by the licensee for review by the OLTC and the Obudsman.

1	(4) Moneys or securities received as advance payment for care may
2	not at any time exceed the cost of care for a six (6) month period.
3	(5) At least <i>annually</i> , the licensee shall furnish the resident
4	and the guardian, trustee, or conservator, if any, for the resident a complete
5	and verified statement of all funds and other property to which this
6	subsection applies, detailing the amounts and items received, together with
7	their sources and disposition. In any event, the licensee shall furnish such
8	a statement annually and upon the discharge or transfer of a resident.
9	(f) In the event of the death of a resident, a licensee shall within
10	thirty (30) days of the resident's death provide an accounting and shall
11	return all refunds and funds held in trust to the resident's personal
12	representative, if one has been appointed at the time the long-term care
13	facility disburses such funds, and if not, to the resident's spouse or adult
14	next of kin named in a beneficiary designation form provided by the long-term
15	care facility to the resident. In the event the resident has no spouse or
16	adult next of kin or such person cannot be located, funds due to the resident
17	shall be placed in an interest-bearing account in a bank, savings and loan
18	<u>association, trust company, or credit union located in this state and, if</u>
19	possible, located within the same county in which the facility is located,
20	which funds shall not be represented as part of the assets of the facility on
21	<u>a financial statement, and the licensee shall maintain such account until such</u>
22	time as the trust funds are disbursed pursuant to the provisions of Arkansas'
23	Probate Code. All other property of a deceased resident being held in trust
24	by the licensee shall be returned to the resident's personal representative,
25	if one has been appointed at the time the long-term care facility disburses
26	such property, and if not, to the resident's spouse or adult next of kin named
27	in a beneficiary designation form provided by the long-term care facility to
28	the resident. In the event the resident has no spouse or adult next of kin or
29	such person cannot be located, property being held is disbursed pursuant to
30	the provisions of Arkansas' Probate Code. The trust funds and property of
31	deceased residents shall be kept separate from the funds and the property of
32	the licensee and from the funds and property of the residents of the facility.
33	The long-term care facility needs to maintain only one account in which the
34	trust funds amounting to less than one hundred dollars (\$100) of deceased
35	residents are placed. However, it shall be the obligation of the long-term
36	care facility to maintain adequate records to permit compilation of interest

As Engrossed: S1/28/99 S2/11/99 S2/12/99 S2/17/99 S2/25/99 S3/4/99 S3/11/99 S3/18/99 H3/29/99

1	due each individual resident's account. Separate accounts shall be maintained
2	with respect to trust funds of deceased residents equal to or in excess of
3	\$100. Any other property of a deceased resident held in trust by a licensee
4	which is not disbursed in accordance with the provisions of Arkansas' Probate
5	Code shall escheat to the state as provided by law.
6	
7	SECTION 8. RIGHT OF ENTRY AND INSPECTION
8	The department and any duly designated officer or employee thereof or an
9	Ombudsman shall have the right to enter upon and into the premises of any
10	long-term care facility, at any time in order to determine the state of
11	compliance with the provisions of this act and rules in force pursuant
12	thereto. The right of entry and inspection shall also extend to any premises
13	which the agency has reason to believe is being operated or maintained as a
14	facility without a license, but no such entry or inspection of any premises
15	shall be made without the permission of the owner or person in charge thereof,
16	unless an inspection order is first obtained from a circuit court upon a
17	showing of reasonable cause to inspect that certain premises are being
18	maintained and operated in violation of this act and statutory licensure
19	requirements.
20	
21	SECTION 9. AVAILABILITY, DISTRIBUTION, AND POSTING OF REPORTS AND
22	RECORDS.
23	(a) The OLTC shall, within <i>ten (10)</i> days after the date of an annual
24	inspection visit or within thirty (30) days after the date of any interim
25	visit, forward the results of all inspections of long-term care facilities to:
26	(1) The ombudsman in whose county the inspected facility is
27	located; and
28	(2) At least one public library or, in the absence of a public
29	library, the county <i>clerk</i> in the county in which the inspected facility is
30	located.
31	(b) Each long-term care facility licensee shall maintain as public
32	information, available upon request, records of inspection reports pertaining
33	to that facility that have been filed with, or issued by, any governmental
34	agency. Copies of such reports shall be retained in such records for not less
35	than five (5) years after the date the reports are filed or issued.
36	

1	be necessary and essential to establish lawful compliance with any rules or
2	standards shall be made available to the OLTC on the premises of the facility,
3	with the exception of quality assurance committee records.
4	(d) Every long-term care facility licensee shall:
5	(1) Post, in a sufficient number of prominent positions in the
6	long-term care facility so as to be accessible to all residents and to the
7	general public, the last inspection report or survey pertaining to the long-
8	term care facility and issued by the OLTC, with references to the page numbers
9	of the full reports, noting any deficiencies found by the OLTC and the actions
10	taken by the licensee to rectify such deficiencies.
11	(2) Upon request, provide to any person who has completed a
12	written application with an intent to be admitted to, or to any resident of,
13	such long-term care facility, or to any relative, spouse, or guardian of such
14	person, a copy of the last inspection report pertaining to the long-term care
15	facility and issued by the agency, provided the person requesting the report
16	agrees to pay a reasonable charge to cover copying costs.
17	
18	SECTION 10. Arkansas Code 20-10-224, as amended by Act 485 of 1989, is
19	repeal ed.
20	20-10-224. License required - Administration by Department of Human
21	Services. [As amended by Acts 1989, No. 485, § 1.]
22	(a) No long-term care facility or related institution shall be
23	established, conducted, or maintained in this state without obtaining a
24	Li cense.
25	(b) The department shall, by properly promulgating rules and regulations,
26	provide for the issuance of appropriate types of long-term care facility
27	licenses, including the licensure of facilities with specialized wings, units,
28	or rooms for dementia residents, those suffering from Alzheimer's disease, and
29	other related conditions.
30	(c) The department may provide, by properly promulgating rules and
31	regulations, for the issuance of permanent type licenses, subject to
32	revocation.
33	(d) This section shall not apply to hospital swing beds.
34	
35	SECTION 11. All provisions of this act of a general and permanent
36	nature are amendatory to the Arkansas Code of 1987 Annotated and the Arkansas

1	Code Revision Commission shall incorporate the same in the Code.
2	
3	SECTION 12. If any provision of this act or the application thereof to
4	any person or circumstance is held invalid, such invalidity shall not affect
5	other provisions or applications of the act which can be given effect without
6	the invalid provision or application, and to this end the provisions of this
7	act are declared to be severable.
8	SECTION 13. All laws and parts of laws in conflict with this act are
9	hereby repealed.
10	/s/ Brown, et al
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13	APPROVED: 4/7/1999
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