HCS SCS SB 616 -- ASSISTED LIVING FACILITIES

SPONSOR: Stouffer (Bruns)

COMMITTEE ACTION: Voted "do pass" by the Committee on Senior Citizen Advocacy by a vote of 10 to 1.

This substitute changes the laws regarding assisted living facilities. "Residential care facility I" as it applies to long-term care provided to the elderly and disabled is changed to "residential care facility" and "residential care facility II" is changed to "assisted living facility." In its main provisions, the substitute:

- (1) Defines "assisted living facility" as any premises other than a residential care facility, intermediate care facility, or skilled nursing facility that provides or coordinates 24-hour care and protective oversight to three or more residents. Care may include the provision of shelter, board, and assistance with any activities of daily living or supervision of health care under the direction of a licensed physician;
- (2) Defines "community based assessment," "dementia," "activities of daily living," "instrumental activities of daily living," "shared responsibility agreement," "appropriately trained individual," and "social model of care";
- (3) Requires an assisted living facility to provide for or coordinate oversight and services to meet the needs of a resident as specified in a written contract signed by the resident or other responsible party;
- (4) Prohibits an assisted living facility from accepting an individual who is a danger to self or others, requires physical or chemical restraint, requires more than one person to simultaneously assist the resident in daily activities, or is bed-bound;
- (5) Requires an assisted living facility to provide staff in appropriate numbers and with appropriate skills to provide 24-hour care to residents;
- (6) Requires that residents with cognitive or physical limitations preventing timely evacuation be housed on the ground floor of a facility;
- (7) Requires multilevel facilities or facilities accepting residents with cognitive or physical impairments to be in compliance with National Fire Protection Association Code 13 and the 1997 Life Safety Codes for Existing Health Care Occupancy;

- (8) Requires an assisted living facility to keep a written plan for the protection of all residents in the event of a disaster;
- (9) Creates a grandfather provision regarding the new licensing requirements for existing residential care facility II entities;
- (10) Requires an assisted living facility to complete a resident assessment upon admission, at least semi-annually, and whenever a significant change has occurred in the resident's condition;
- (11) Requires the use of a personal electronic monitoring device for any resident of an assisted living facility whose physician recommends its use;
- (12) Prohibits any facility from naming or advertising itself as an assisted living facility without obtaining a license from the Department of Health and Senior Services; and
- (13) Requires the department to develop rules to ensure the compliance of the provisions of the substitute.

FISCAL NOTE: Estimated Cost on General Revenue Fund of Unknown, greater than \$100,000 in FY 2007, FY 2008, and FY 2009. No impact on Other State Funds in FY 2007, FY 2008, and FY 2009.

PROPONENTS: Supporters say that the bill is long overdue in redefining residential care facilities to assisted living facilities, expanding options, and creating choices for older Missourians. Residents with diminished capacity will be allowed to remain at the assisted living facility with certain protections in place, rather than transferred to a skilled nursing facility when they are unable to exit safely in an emergency. Those living with dementia can continue to live a dignified and meaningful life if surrounded by competent and caring staff.

Testifying for the bill were Senator Stouffer; Lieutenant Governor; Arthritis Foundation; Missouri Association of Homes for the Aging; Missouri Alliance of Area Agencies on Aging; Mary Lee Sharp; Missouri Alzheimer's Coalition; AARP; Missouri Coalition for Quality Care; and Lutheran Senior Services.

OPPONENTS: Those who oppose the bill say that in its current form, the bill is inconsistent with current regulations and practices and unsafe for residents. There is a great need for the proper enforcement of the regulations. The bill removes a category of homes and forces facilities to change their mission and standards. The standard for "appropriately trained individual" leads to inappropriate evaluations and assessments.

Testifying against the bill were Missouri Assisted Living Association; Missouri Health Care Association; Pete Stayton; Carla Lungren; and Michael Schrappen.

Alex Curchin, Legislative Analyst