

SECOND REGULAR SESSION
HOUSE COMMITTEE SUBSTITUTE FOR
HOUSE BILL NO. 2481
100TH GENERAL ASSEMBLY

5382H.02C

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal section 192.2000, RSMo, and to enact in lieu thereof one new section relating to dementia training for certain persons employed as caregivers.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 192.2000, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 192.2000, to read as follows:

192.2000. 1. The "Division of Aging" is hereby transferred from the department of social services to the department of health and senior services by a type I transfer as defined in the Omnibus State Reorganization Act of 1974. The department shall aid and assist the elderly and low-income disabled adults living in the state of Missouri to secure and maintain maximum economic and personal independence and dignity. The department shall regulate adult long-term care facilities pursuant to the laws of this state and rules and regulations of federal and state agencies, to safeguard the lives and rights of residents in these facilities.

2. In addition to its duties and responsibilities enumerated pursuant to other provisions of law, the department shall:

(1) Serve as advocate for the elderly by promoting a comprehensive, coordinated service program through administration of Older Americans Act (OAA) programs (Title III) P.L. 89-73, (42 U.S.C. Section 3001, et seq.), as amended;

(2) Assure that an information and referral system is developed and operated for the elderly, including information on home and community based services;

(3) Provide technical assistance, planning and training to local area agencies on aging;

(4) Contract with the federal government to conduct surveys of long-term care facilities certified for participation in the Title XVIII program;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 (5) Conduct medical review (inspections of care) activities such as utilization reviews,
19 independent professional reviews, and periodic medical reviews to determine medical and social
20 needs for the purpose of eligibility for Title XIX, and for level of care determination;

21 (6) Certify long-term care facilities for participation in the Title XIX program;

22 (7) Conduct a survey and review of compliance with P.L. 96-566 Sec. 505(d) for
23 Supplemental Security Income recipients in long-term care facilities and serve as the liaison
24 between the Social Security Administration and the department of health and senior services
25 concerning Supplemental Security Income beneficiaries;

26 (8) Review plans of proposed long-term care facilities before they are constructed to
27 determine if they meet applicable state and federal construction standards;

28 (9) Provide consultation to long-term care facilities in all areas governed by state and
29 federal regulations;

30 (10) Serve as the central state agency with primary responsibility for the planning,
31 coordination, development, and evaluation of policy, programs, and services for elderly persons
32 in Missouri consistent with the provisions of subsection 1 of this section and serve as the
33 designated state unit on aging, as defined in the Older Americans Act of 1965;

34 (11) Develop long-range state plans for programs, services, and activities for elderly and
35 handicapped persons. State plans should be revised annually and should be based on area agency
36 on aging plans, statewide priorities, and state and federal requirements;

37 (12) Receive and disburse all federal and state funds allocated to the division and solicit,
38 accept, and administer grants, including federal grants, or gifts made to the division or to the
39 state for the benefit of elderly persons in this state;

40 (13) Serve, within government and in the state at large, as an advocate for elderly
41 persons by holding hearings and conducting studies or investigations concerning matters
42 affecting the health, safety, and welfare of elderly persons and by assisting elderly persons to
43 assure their rights to apply for and receive services and to be given fair hearings when such
44 services are denied;

45 (14) Conduct research and other appropriate activities to determine the needs of elderly
46 persons in this state, including, but not limited to, their needs for social and health services, and
47 to determine what existing services and facilities, private and public, are available to elderly
48 persons to meet those needs;

49 (15) Maintain and serve as a clearinghouse for up-to-date information and technical
50 assistance related to the needs and interests of elderly persons and persons with Alzheimer's
51 disease or related dementias, including information on the home and community based services
52 program, dementia-specific training materials and dementia-specific trainers. Such
53 dementia-specific information and technical assistance shall be maintained and provided in

54 consultation with agencies, organizations and/or institutions of higher learning with expertise in
55 dementia care;

56 (16) Provide area agencies on aging with assistance in applying for federal, state, and
57 private grants and identifying new funding sources;

58 (17) Determine area agencies on aging annual allocations for Title XX and Title III of
59 the Older Americans Act expenditures;

60 (18) Provide transportation services, home-delivered and congregate meals, in-home
61 services, counseling and other services to the elderly and low-income handicapped adults as
62 designated in the Social Services Block Grant Report, through contract with other agencies, and
63 shall monitor such agencies to ensure that services contracted for are delivered and meet
64 standards of quality set by the division;

65 (19) Monitor the process pursuant to the federal Patient Self-determination Act, 42
66 U.S.C. Section 1396a (w), in long-term care facilities by which information is provided to
67 patients concerning durable powers of attorney and living wills.

68 3. The department may withdraw designation of an area agency on aging only when it
69 can be shown the federal or state laws or rules have not been complied with, state or federal
70 funds are not being expended for the purposes for which they were intended, or the elderly are
71 not receiving appropriate services within available resources, and after consultation with the
72 director of the area agency on aging and the area agency board. Withdrawal of any particular
73 program of services may be appealed to the director of the department of health and senior
74 services and the governor. In the event that the division withdraws the area agency on aging
75 designation in accordance with the Older Americans Act, the department shall administer the
76 services to clients previously performed by the area agency on aging until a new area agency on
77 aging is designated.

78 4. Any person hired by the department of health and senior services after August 13,
79 1988, to conduct or supervise inspections, surveys or investigations pursuant to chapter 198 shall
80 complete at least one hundred hours of basic orientation regarding the inspection process and
81 applicable rules and statutes during the first six months of employment. Any such person shall
82 annually, on the anniversary date of employment, present to the department evidence of having
83 completed at least twenty hours of continuing education in at least two of the following
84 categories: communication techniques, skills development, resident care, or policy update. The
85 department of health and senior services shall by rule describe the curriculum and structure of
86 such continuing education.

87 5. The department may issue and promulgate rules to enforce, implement and effectuate
88 the powers and duties established in this section and sections 198.070 and 198.090 and sections
89 192.2400 and 192.2475 to 192.2500. Any rule or portion of a rule, as that term is defined in

90 section 536.010, that is created under the authority delegated in this section shall become
91 effective only if it complies with and is subject to all of the provisions of chapter 536 and, if
92 applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the
93 powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective
94 date or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of
95 rulemaking authority and any rule proposed or adopted after August 28, 2001, shall be invalid
96 and void.

97 6. Home and community based services is a program, operated and coordinated by the
98 department of health and senior services, which informs individuals of the variety of care options
99 available to them when they may need long-term care.

100 7. The division shall maintain minimum dementia-specific training requirements for
101 employees involved in the delivery of care to persons with Alzheimer's disease or related
102 dementias who are employed by skilled nursing facilities, intermediate care facilities, residential
103 care facilities, agencies providing in-home care services authorized by the division of aging,
104 adult day-care programs, independent contractors providing direct care to persons with
105 Alzheimer's disease or related dementias and the division of aging. Such training shall be
106 incorporated into new employee orientation and ongoing in-service curricula for all employees
107 involved in the care of persons with dementia. The department of health and senior services
108 shall maintain minimum dementia-specific training requirements for employees involved in the
109 delivery of care to persons with Alzheimer's disease or related dementias who are employed by
110 home health and hospice agencies licensed by chapter 197. Such training shall be incorporated
111 into the home health and hospice agency's new employee orientation and ongoing in-service
112 curricula for all employees involved in the care of persons with dementia. The dementia training
113 need not require additional hours of orientation or ongoing in-service. Training shall include at
114 a minimum, the following:

115 (1) For employees providing direct care to persons with Alzheimer's disease or related
116 dementias, the training shall include an overview of Alzheimer's disease and related dementias,
117 communicating with persons with dementia, behavior management, promoting independence in
118 activities of daily living, and understanding and dealing with family issues;

119 (2) For other employees who do not provide direct care for, but may have daily contact
120 with, persons with Alzheimer's disease or related dementias, the training shall include an
121 overview of dementias and communicating with persons with dementia.

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123 **The department shall coordinate with the Alzheimer's Association to develop training**
124 **programs to meet these minimum standards. Such training shall be made publicly**
125 **available on the department's website for use by entities and employees listed in this section**

126 **to meet requirements of this section.** As used in this subsection, the term "employee" includes
127 persons hired as independent contractors. The training requirements of this subsection shall not
128 be construed as superceding any other laws or rules regarding dementia-specific training.

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