

#### 82<sup>nd</sup> Session (2023) LEGISLATIVE UPDATE

Jessica Gandy, Esq.

**Brett Salmon** 







#### SUMMARY OF LEGISLATION THAT FAILED

- AB 108 Enacts the nurse licensure compact (allows a nurse to have one multistate license with the ability to practice in the home state and other compact states)
- AB 263 Enacts provisions relating to the transmission of Legionnaires' disease by building water systems in certain health care facilities – **FAILED** END OF SESSION.
- AB 281 requiring the administrators of certain senior living facilities to ensure that such a senior living facility is equipped with a functional ventilation system -**GOVERNOR VETO**



#### SUMMARY OF LEGISLATION THAT PASSED

- AB 119 Creates the Vulnerable Adult Fatality Review Committee.
- AB 202 Revises provisions governing electronic communication devices in certain health care facilities.
- AB 237 Makes an appropriation and authorizes expenditures for certain purposes relating to health care.
- AB 267 Revises provisions governing cultural competency training.
- AB 404 Medical malpractice changes.
- SB 45 Establishes the amount for the personal needs allowance provided to certain recipients of Medicaid.
- SB 260 Revises provisions relating to certain persons providing referrals to group housing for persons who are aged.
- SB 298 Revises provisions governing the involuntary discharge of a resident from a residential facility for groups.



## AB 119 – CREATES THE VULNERABLE ADULT FATALITY REVIEW COMMITTEE (APPLIES TO AL AND SNF)

- Committee is to review each death known or suspected to have been caused by "adult maltreatment."
- "Adult Maltreatment" means the abuse, neglect, exploitation, isolation or abandonment of an older person or a vulnerable person in violation of NRS 200.5099
  - NRS 200.5099 lists penalties for abuse of an older person or vulnerable person
- Committee Members:
  - Licensed social worker
  - Attorney with AG's office
  - Providers of health care
  - Representatives of organizations with work related to adult maltreatment issues
  - Law enforcement



#### AB 119 - CREATES THE VULNERABLE ADULT FATALITY **REVIEW COMMITTEE (APPLIES TO AL AND SNF)**

- Committee receives referrals from:
  - Division of Public and Behavioral Health (DPBH)
  - Law enforcement agency
  - Adult related to the decedent
- Committee has access to:
  - Medical records
  - Death certificates
  - Autopsy records
  - Facility or provider records
  - Records of DPBH (could include survey records)
  - Mental health records
  - Law enforcement records



## AB 119 – CREATES THE VULNERABLE ADULT FATALITY REVIEW COMMITTEE (APPLIES TO AL AND SNF)

- Purpose of this committee:
  - Develop findings and recommendations to prevent adult maltreatment and address the needs of victims of adult maltreatment
  - Disseminate findings to:
    - DPBH
    - Providers of health care
    - Social service providers
    - Law enforcement agencies
  - Publish a report every two years that shows data concerning adult maltreatment



SUMMARY: ALLOWS RESIDENTS TO HAVE ELECTRONIC COMMUNICATION DEVICES IN THEIR ROOMS IF REQUESTED

**ONLY APPLIES TO SNFs** (NOT TO ALS...YET)



- Allows a resident (or **representative**) request the installation of an **electronic communication device** in the living quarters of the resident.
  - What is an electronic communication device?
    - Is not defined in the legislation
    - Examples: Alexa, iPad, Echo Dot, Echo Show, camera with audio, etc.
  - How is "representative" defined in this new law?
    - A person may serve as a "representative" if the person is:
      - The **guardian** of the resident AND this is allowed under that guardianship OR the guardian has separately petitioned for and been granted such power by the court with power of the guardianship
    - A person given the power of attorney (POA) to make decisions concerning health care for that resident.



# RESIDENT

## AB 202 – ALLOWS ELECTRONIC COMMUNICATION DEVICES IN SNFs

#### REQUESTING INSTALLATION OF ELECTRONIC DEVICE

- A resident or his/her representative in a skilled nursing facility may request the installation and use of an electronic communication device in the living quarters of the resident by submitting:
  - A completed form prescribed by the facility; or
  - If the facility has no prescribed form, a written request that meets the requirements
  - Any form that meets the requirements is allowed.



## RESIDENT

## AB 202 – ALLOWS ELECTRONIC COMMUNICATION DEVICES IN SNFs

## REQUEST FOR ELECTRONIC COMMUNICATION DEVICE MUST INCLUDE THE FOLLOWING INFORMATION

- The **type**, **function** and **expected use** of the electronic communication device which will be installed and used;
- The name and contact information for any person other than the resident or his or her representative who is authorized to view or listen to the images or sounds which are displayed, broadcast or recorded by the electronic communication device



## RESIDENT

## AB 202 – ALLOWS ELECTRONIC COMMUNICATION DEVICES IN SNFs

## REQUEST FOR ELECTRONIC COMMUNICATION DEVICE MUST INCLUDE THE FOLLOWING INFORMATION

- An agreement by the resident or the representative of the resident to:
  - Waive the resident's right to privacy in connection with use of the electronic communication device; and
  - Release the facility for skilled nursing and any employee of the facility from any administrative, civil or criminal liability for a violation of the resident's right to privacy in connection with use of the electronic communication device



#### WHO IS A REPRESENTATIVE?

- A Spouse
- A Legal Guardian
- A General Power of Attorney
- NOT a child, friend, or other family member absent POA or **Guardianship Paperwork**
- Documents should be on file



# ROOMMATE

## AB 202 – ALLOWS ELECTRONIC COMMUNICATION DEVICES IN SNFs

### REQUEST FOR ELECTRONIC COMMUNICATION DEVICE MUST INCLUDE THE FOLLOWING INFORMATION

- If the resident has a roommate:
  - The written consent of the roommate or the representative of the roommate to the installation and use of an electronic communication device in the living quarters of the resident; and
  - An agreement by the roommate or the representative of the roommate to waive the roommate's right to privacy in connection with use of the electronic communication device; and



# ROOMMATE

## AB 202 – ALLOWS ELECTRONIC COMMUNICATION DEVICES IN SNFs

## REQUEST FOR ELECTRONIC COMMUNICATION DEVICE MUST INCLUDE THE FOLLOWING INFORMATION

- An agreement by the roommate or the representative of the roommate to:
  - Release the facility for skilled nursing and any employee of the facility from any administrative, civil or criminal liability for a violation of the roommate's right to privacy in connection with the use of the electronic communication device; and





## WHAT IF A ROOMMATE REFUSES CONSENT TO THE ELECTRONIC DEVICE IN THE ROOM?

- Facility must make **reasonable attempts to accommodate** the roommate.
- Such reasonable attempts may include moving either the resident or his or her roommate to different living quarters with the consent of the person being moved or his or her representative.
- The move should **not result in a financial burden** to the individual refusing electronic monitoring





#### WHAT HAPPENS IF A ROOMMATE WITHDRAWS CONSENT TO THE ELECTRONIC DEVICE IN THE ROOM?

- Roommate or representative may withdraw this consent at any time
- Roommate must submit a written revocation to the facility
- Not later than 24 hours after the submission of such a written revocation, the facility shall cause to be removed any electronic communication device that has been installed
- In the alternative, the facility could move one of the two individuals (again, no financial burden to the objecting resident)



#### REQUEST FOR ELECTRONIC COMMUNICATION DEVICE MUST INCLUDE THE FOLLOWING INFORMATION

- If the request is submitted by the representative of the resident, proof that the representative of the resident meets these requirements:
  - Is the **guardian of the resident** whom he or she is representing and:
    - Has the power to make decisions on behalf of the resident specifically authorized under the existing guardianship; or
    - The guardian has separately petitioned for and been granted such power by the court that has jurisdiction over the guardianship; or
  - Has been given power of attorney to make decisions concerning health care for the resident pursuant to NRS 162A.700 to 162A.870

#### **VERIFY AUTHORITY OF THE REPRESENTATIVE!**



#### MANDATORY APPROVAL OF REQUEST OF REQUEST TO **INSTALL ELECTRONIC DEVICE**

- Requires nursing facility to approve a request for the installation and use of an electronic communication device if the applicable requirements are met
- It is important to understand that this is **not optional**.
- Facilities must approve the request if all requirements have been met.



#### INTERACTING WITH ELECTRONIC DEVICE

- Prohibits a person other than the resident or the resident's representative who has requested the installation and use of an electronic communication device from intentionally:
  - Obstructing, tampering with or destroying any such device or recording made by such a device; and
  - Viewing or listening to any images or sounds which are displayed, broadcast or recorded by any such device except as authorized
  - This includes a roommate, third party medical provider, etc.



#### WHO IS RESPONSIBLE FOR THE COST OF **INSTALLING/REMOVING ELECTRONIC DEVICE?**

- The resident (or representative) is responsible for:
  - Choosing the electronic communication device; and
  - The cost of installing, maintaining and removing the electronic communication device; and
  - Any repairs required due to the installation or removal of the electronic communication
  - Facility is **only responsible for providing electricity** for the device.
  - Facility does not need to make changes to the room or provide a dedicated or free wi-fi service beyond what is already provided.



## DO I HAVE TO HONOR A REQUEST FOR AN INSTALLATION OF AN ELECTRONIC DEVICE?

- **Prohibits** a facility from:
  - **Denying admission** to a facility because of a decision to request the installation and use of an electronic communication device
  - **Discharging a resident** from a facility because of a decision to request the installation and use of an electronic communication device
  - Discriminating or retaliating against a resident because of a decision to request the installation and use of an electronic communication device



#### POSTING SIGNS WHEN ELECTRONIC DEVICE IS USED

- Requires nursing facility to post a notice in a conspicuous place at the entrance to the living quarters of a resident which contains an electronic communication device stating that such a device is in use in that living quarters; and
- Prohibits an employee at a facility for skilled nursing from refusing to enter the living quarters of a resident or fail to perform any of the duties of the employee on the grounds that an electronic communication device is in use
- Recommend: Laminated sign, brightly colored paper.

Effective Date: October 1, 2023



## AB 237 – SNF MEDICAID RATE INCREASE LEGISLATION

- There is hereby appropriated from the State General Fund. . . for costs related to an increase in the average daily reimbursement rate paid under Medicaid to nursing facilities to \$275.
- Fiscal Year 2024 State Funds Amount: \$4,360,457
  - Total funds (state/county/federal) \$18,169,395
- Fiscal Year 2025 State Funds Amount: \$10,941,488
  - Total funds (state/county/federal) \$43,857,855
- 10% rate increase ventilator rates
- 10% rate increase pediatric rates

Effective on January 1, 2024



#### **AB 267 – REVISES CULTURAL COMP TRAINING REQUIREMENTS (APPLIES TO AL AND SNF)**

- Moves program to the Office of Minority Health and Equity within the Department of Health and Human Services
  - Will create a list of approved course and trainings
- Training only applies to employees with "direct patient contact"
  - "Direct Patient Contact" means a person that provides clinical, administrative or support services and has direct patient contact at least once each week on average as a part of his or her regular job duties (includes telehealth contact). OR
  - Oversees a person listed above.
  - Does not include incidental contact with a resident.

Food service, housekeeping, and other similar departments need not participate in this training.



#### **AB 267 – REVISES CULTURAL COMP TRAINING REQUIREMENTS (APPLIES TO AL AND SNF)**

- Board of Nursing changes
  - Increases cultural comp. training requirement from 2 to 4 hours
- Board of Examiners for Social Workers changes
  - Increases cultural comp. training requirement from 2 to 6 hours
  - A facility is not required to provide cult. comp. training to an agent or employee who has successfully completed a course or program in cultural competency as part of the continuing education requirements for them to renew his or her license or certificate

OUR APPROVED COURSE IS GRANDFATHERED IN FOR THREE YEARS FROM APPROVAL (to Dec. 2024)

"6. Any approved course or program must submit for reapproval no more than 3 years after initially being approved."

Effective Date – January 1, 2024



#### AB 404 – REVISES PROVISIONS GOVERNING CIVIL **ACTIONS AGAINST A PROVIDER OF HEALTH CARE**

- Initially this proposed a sweeping change to NRS 41A
- The final bill made relatively minor changes that may impact long term care facilities
- Statute of Limitations has increased, adding an additional year for residents or estates to bring civil action
- Non-economic damages have increased and will continue to increase annually over the next several years
- Language that would have specifically included SNFs as "providers of medical care" was rejected; however, these claims may still be litigated as professional negligence under certain circumstances



## SB 45 – INCREASES THE PERSONAL NEEDS ALLOWANCE (APPLIES TO SNFs)

- PNA in SNFs had not been increased in over twenty years.
- This bill updates that amount for nursing facility Medicaid residents.
- This bill increased the amount of the personal needs allowance to **\$149 per month** for Medicaid recipients in nursing facilities.

Effective Date – January 1, 2024



- Makes changes to "senior living community referral agency" operations
  - Sponsors: A Place for Mom, Caring.com
- "Senior Living Community Referral Agency" is:
  - A person who refers persons who are aged to senior living communities for a fee paid by the senior living community, the person who is aged or the representative of such a person.
- "Senior Living Community Referral Agency" is NOT:
  - A senior living community or an employee of a senior living community;
  - A resident of a senior living community, a family member of such a resident or any other person who receives any service from a senior living community, regardless of whether the person receives any form of compensation for a referral.



- Before referring a person, a referral agency shall:
  - Provide a statement clearly disclosing the information required by this paragraph to the person or representative orally, in writing or electronically. If the disclosure is made orally, the disclosure must be recorded. The statement must include, without limitation:
    - A description of each service that the senior living community referral agency is able to provide to the person who is aged;
    - The contact information of the senior living community referral agency, including, without limitation, the telephone number of the senior living community referral agency;
    - The address of the Internet website maintained pursuant to paragraph (f) of subsection 2 of section 5 of this act;
    - An explanation of the provisions of paragraphs (c), (d) and (e) of subsection 2 of section 5 of this act; and



- Before referring a person, a referral agency shall: (cont'd)
  - A statement of whether the person who is aged or the senior living community to which the person who is aged is referred is responsible for paying the applicable referral fee and, if the person who is aged is responsible for paying the fee, the amount of the fee; and
  - Obtain the written or recorded consent of a person who is aged or his or her representative to provide referrals.



- A senior living community referral agency **shall not**:
  - Refer a person who is aged or the representative of such a person to a senior living community:
    - In which the senior living community referral agency, an executive thereof or any immediate family member of such an executive has an ownership or financial interest; or
    - That is managed wholly or partially by the senior living community referral agency, an executive thereof or any immediate family member of such an executive;
  - Issue a referral to a person who is aged or the representative of such a person if the senior living community referral agency, an employee thereof or an immediate family member of such an employee holds a power of attorney or any property of the person who is aged;



- Refer a person who is aged or the representative of such a person to a senior living community that does not hold a license required by law;
- Refer a person who is aged or the representative of such a person to a senior living community that is not capable of adequately caring for the person who is aged; or
- Accept compensation for a referral from a senior living community with which the senior living community referral agency has not entered into a written contract concerning such a referral.



- A senior living community referral agency shall:
  - Use a nationally accredited provider of criminal background investigations to conduct an investigation into the criminal background of each employee of the senior living community referral agency who directly interacts with persons who are aged or representatives of such persons;
  - Maintain liability insurance in an amount of at least \$1,000,000 for each incident and \$2,500,000 in total per year for negligent acts or omissions committed by the senior living community referral agency or an employee thereof;
  - Cease contacting a person who is aged or the representative of such a person as soon as possible and not later than 10 days after the person or representative requests the senior living community referral agency to cease contacting the person;



- A senior living community referral agency shall:
  - Cease making referrals to a senior living community for a person who is aged or the representative of such a person as soon as possible and not later than 10 days after the person or representative requests the senior living community referral agency to cease making such referrals;
  - Refrain from selling the personal information of a person who is aged or the representative of such a person upon the request of the person or representative; and
  - Establish a policy to protect the privacy of persons who are aged and the representatives of such persons and post the policy on an Internet website maintained by the senior living community referral agency.



- A written contract entered may provide for the compensation of a senior living community referral agency by a senior living community in:
  - An amount for all referrals made by the senior living community referral agency to the senior living community in a specified period of time;
  - An amount for each referral to the senior living community that is based on a percentage of the cost of the first month of rent and care received by the person referred to the senior living community; or
  - A fixed amount for each referral to the senior living community.



#### SB 260 - BELTCA ADVISORY OPINION

#### Advisory Opinion Conclusion:

"SB260 does not mandate that a facility must use a referral agency, and the main result from SB260 is that referral agencies are required to be licensed by the Board of Health to do business in Nevada. If so, then referral agencies are permitted to be compensated on a per basis model rather than a subscription model.

BELTCA does not have jurisdiction over facilities or chapter 449 of the NRS or NAC. However, BELTCA's current regulation found at NAC 654.210(f), (g), and (h) and the newly amended NRS 654.190 are still applicable to Administrators."



Summary: Revises requirements for the involuntary discharge of a resident from a residential facility for groups

### REPRESENTING A RESIDENT

• The owner, agent or employee of a residential facility for groups or a provider of health care must not serve as the representative of a resident... unless the owner, agent, employee or provider is related to the resident...



- Must be titled, "Service Delivery Contract for Residential Facility for Groups
- Be printed in at least 12 pt. type
- Must include the following information:
  - The name, physical address and mailing address, if different, of the residential facility for groups;
- The name and mailing address of every person, partnership, association or corporation which establishes, conducts, manages or operates the residential facility for groups;
- The name and address of at least one person who is authorized to accept service on behalf of the parties described in paragraph (b);
- A telephone number or the address of the Internet website of:



- The Division that the resident or a representative of the resident may use to verify the status of the license of the residential facility for groups; and
- Each licensing board or other regulatory body that has issued a license to a provider of health care or other person required to be licensed who provides services to residents at the residential facility for groups that the resident or a representative of the resident may use to verify the status of the license of the....

- .... provider of health care or other person;
- The duration of the contract;
- The manner in which the contract may be modified, amended or terminated;
- The base rate to be paid by the resident and a description of the services to be provided as part of the base rate;
- A fee schedule outlining the cost of any additional services;



- Any additional fee to be paid by the resident pursuant to the fee schedule and a description of any additional services to be provided as part of that fee, either directly by the residential facility for groups or by a third-party provider of services under contract with the facility;
- A statement affirming the freedom of the resident to receive services from a provider of services with whom the residential facility for groups does not have a contractual arrangement,...

- ...which may also disclaim liability on the part of the residential facility for groups for any such services;
- The procedures and requirements for billing and payment under the contract;
- A statement detailing the criteria and procedures for admission, management of risk and termination of residency;



# REQUIREMENTS FOR RESIDENT CONTRACT

- The obligations of the resident in order to maintain residency and receive services, including, without limitation, compliance with the annual physical examination and assessment required by NRS 449.1845;
- A description of the process of the residential facility for groups for resolving the complaints of residents and contact information for the Aging and Disability Services Division and the Division of Public and Behavioral Health of the Department of Health and Human Services;
- The name and mailing address of any representative of the resident, if applicable; and



# SB 298 – REVISES INVOLUNTARY DISCHARGE REQUIREMENTS IN ASSISTED LIVING FACILITIES

### Contact information for:

- The State Long-Term Care
   Ombudsman appointed pursuant to NRS 427A.125;
- The Nevada Disability Advocacy and Law Center, or its successor organization; or
- Other resources for legal aid or mental health assistance, as appropriate.



# Transfer or Involuntary Discharge should not happen <u>except</u> where:

- The <u>health of the resident has improved</u> sufficiently such that the resident no longer needs the services provided by the residential facility for groups;
- <u>The health or safety of any person</u> in the residential facility for groups is <u>endangered</u>;
- The <u>resident has failed</u>, after notice has been provided pursuant to subsection 2, <u>to pay for contracted charges</u> for a residency at or a service provided by the residential facility for groups;
- The services available to the resident at the residential facility for groups are <u>no</u> <u>longer adequate</u> to meet the needs of the resident, as determined using information from the annual physical examination and assessment conducted pursuant to NRS 449.1845; or
- The residential facility for groups ceases to operate.



### NOTICE OF DISCHARGE – FAILURE TO PAY

- 30 days before notice to discharge for failure to pay contracted charges a facility must:
  - Notify the resident and any representative of the resident in writing of the delinquency.
  - The facility shall allow the resident or his or her representative, as applicable, at least **15 days** after such notice is provided to cure the delinquency.



### SHOW ATTEMPTS TO RESOLVE ISSUE

- A residential facility for groups <u>shall attempt to resolve</u> with the resident or the representative of the resident, if applicable, <u>any circumstances</u> that, if not remedied, have the potential to result in an involuntary discharge of the resident.
- The facility <u>shall document</u> any such attempt in the file of the resident.
- All attempts at resolution pursuant to this subsection <u>must</u> occur before the resident is discharged but may occur before or after the provision of notice pursuant to NRS 449A.114.



- A <u>residential facility for groups is not required</u> to comply with the requirements of this subsection in an emergency.
  - What is an "emergency" circumstances where there is an imminent danger of death or serious physical harm to a resident.
  - In other words, you don't need to attempt to resolve issues that result in imminent danger to residents or staff
- A residential facility for groups shall not transfer or involuntarily discharge a resident if such transfer or discharge presents an imminent danger of death to the resident.



- Written notice of the intent of a residential facility for groups to discharge a resident provided pursuant to NRS 449A.114 must, in addition to the persons described in that section, be provided to the representative of the patient, where applicable, and must include, without limitation:
  - The reason for the proposed discharge; and
  - The date of the proposed discharge.



- Written notice of the intent of a residential facility for groups to discharge a resident pursuant to NRS 449A.114 must be provided to a resident in a language that the resident or the representative of the resident, if applicable, is capable of reading.
- If the written notice is not provided in such a language, the facility must provide a translator who has been trained to assist the resident or the representative of the resident, if applicable, in the appeal process.



• A residential facility for groups shall provide to a resident or a representative of the resident written notice of the location of the discharge of the resident not later than **10 days** after providing written notice of the proposed intent to discharge the resident pursuant to NRS 449A.114.



### **BEFORE DISCHARGING A RESIDENT**

- A residential facility for groups shall offer assistance to the resident and any representative of the resident concerning the discharge and relocation of the resident.
- Such assistance must include, without limitation, information on available alternative placements.



- A residential facility for groups shall involve a resident and his or her representative, if applicable, in planning the relocation of the resident and allow the resident or his or her representative to choose among the available alternative placements (except in emergency).
- Any emergency placement must be temporary and must terminate when the resident or his or her representative is able to offer input on the final decision concerning the placement of the resident.
- A residential facility for groups shall not require a resident to remain in a temporary or permanent placement.



• In nonemergency situations, and where possible in an emergency, a residential facility for groups that transfers or discharges a resident shall, in consultation with the resident and his or her representative, if applicable, design and implement a transition plan in advance of the transfer or discharge.



- A residential facility for groups is **NOT** in violation of this section or subject to disciplinary action if:
  - A resident returns to the facility after an emergency transfer or discharge; and
  - The emergency transfer or discharge was necessary to address health care needs of the resident which are outside the scope of care that the facility is legally authorized to provide.

Effective January 1, 2024.



## **DISCHARGES IN NURSING FACILITIES**

- These provisions remain unchanged
- The Ombudsman must be notified in a timely manner
- Residents may be discharged due to change in condition (improved or decline)
- Residents may be discharged for failure to pay, with proper notice, if a safe discharge can be arranged
- If a resident is a danger to himself or others, he may be discharged to a higher level of care
- If a resident fails to follow the rules or expectations of the facility he may be discharged with proper warning and notice, so long as a safe discharge plan can be arranged

