



General Assembly

February Session, 2008

Raised Bill No. 5126

LCO No. 1431

01431_____AGE

Referred to Committee on Select Committee on Aging

Introduced by:
(AGE)

**AN ACT CONCERNING THE APPLICABILITY OF MANAGED
RESIDENTIAL COMMUNITIES REGULATION TO CONTINUING CARE
FACILITIES.**

Be it enacted by the Senate and House of Representatives in General
Assembly convened:

1 Section 1. Section 19a-693 of the 2008 supplement to the general
2 statutes is amended by adding subdivisions (8) and (9) as follows
3 (*Effective October 1, 2008*):

4 (NEW) (8) "Continuing care contract" has the same meaning as
5 provided in subsection (a) of section 17b-520; and

6 (NEW) (9) "Continuing care facility" means the place in which a
7 provider undertakes to furnish shelter or care to a person pursuant to a
8 continuing care contract.

9 Sec. 2. Section 19a-694 of the 2008 supplement to the general statutes
10 is repealed and the following is substituted in lieu thereof (*Effective*
11 *October 1, 2008*):

12 (a) All managed residential communities operating in the state shall:

13 (1) Provide a written residency agreement to each resident in
14 accordance with section 19a-700 of the 2008 supplement to the general
15 statutes, as amended by this act;

16 (2) Afford residents the ability to access services provided by an
17 assisted living services agency. Such services shall be provided in
18 accordance with a service plan developed in accordance with section
19 19a-699 of the 2008 supplement to the general statutes;

20 (3) Upon the request of a resident, arrange, in conjunction with the
21 assisted living services agency, for the provision of ancillary medical
22 services on behalf of a resident, including physician and dental
23 services, pharmacy services, restorative physical therapies, podiatry
24 services, hospice care and home health agency services, provided the
25 ancillary medical services are not administered by employees of the
26 managed residential community, unless the resident chooses to receive
27 such services;

28 (4) Provide a formally established security program for the
29 protection and safety of residents that is designed to protect residents
30 from intruders;

31 (5) Afford residents, other than residents of a continuing care
32 facility, the rights and privileges guaranteed under title 47a;

33 (6) Afford residents of continuing care facilities the rights and
34 privileges guaranteed under chapter 319hh;

35 [(6)] (7) Comply with the provisions of subsection (c) of section 19-
36 13-D105 of the regulations of Connecticut state agencies; and

37 [(7)] (8) Be subject to oversight and regulation by the Department of
38 Public Health.

39 (b) No managed residential community shall control or manage the
40 financial affairs or personal property of any resident.

41 Sec. 3. Section 19a-697 of the 2008 supplement to the general statutes
42 is repealed and the following is substituted in lieu thereof (*Effective*
43 *October 1, 2008*):

44 (a) A managed residential community shall have a written bill of
45 rights that prescribes the rights afforded to each resident. A designated
46 staff person from the managed residential community shall provide
47 and explain the bill of rights to the resident at the time that such
48 resident enters into a residency agreement at the managed residential
49 community or, in the case of a resident who enters into a continuing
50 care contract at a continuing care facility classified as a managed
51 residential community, at the time that such resident is admitted to
52 services by a licensed assisted living services agency. The bill of rights
53 shall include, but not be limited to, that each resident has the right to:

54 (1) Live in a clean, safe and habitable private residential unit;

55 (2) Be treated with consideration, respect and due recognition of
56 personal dignity, individuality and the need for privacy;

57 (3) Privacy within a private residential unit, subject to rules of the
58 managed residential community reasonably designed to promote the
59 health, safety and welfare of the resident;

60 (4) Retain and use one's own personal property within a private
61 residential unit so as to maintain individuality and personal dignity
62 provided the use of personal property does not infringe on the rights
63 of other residents or threaten the health, safety and welfare of other
64 residents;

65 (5) Private communications, including receiving and sending
66 unopened correspondence, telephone access and visiting with persons
67 of one's choice;

68 (6) Freedom to participate in and benefit from community services
69 and activities so as to achieve the highest possible level of
70 independence, autonomy and interaction within the community;

71 (7) Directly engage or contract with licensed health care
72 professionals and providers of one's choice to obtain necessary health
73 care services in one's private residential unit, or such other space in the
74 managed residential community as may be made available to residents
75 for such purposes;

76 (8) Manage one's own financial affairs;

77 (9) Exercise civil and religious liberties;

78 (10) Present grievances and recommend changes in policies,
79 procedures and services to the manager or staff of the managed
80 residential community, government officials or any other person
81 without restraint, interference, coercion, discrimination or reprisal
82 from the managed residential community, including access to
83 representatives of the department or the Office of the Long-Term Care
84 Ombudsman;

85 (11) Upon request, obtain from the managed residential community
86 the name of the service coordinator or any other persons responsible
87 for resident care or the coordination of resident care;

88 (12) Confidential treatment of all records and communications to
89 the extent required by state and federal law;

90 (13) Have all reasonable requests responded to promptly and
91 adequately within the capacity of the managed residential community
92 and with due consideration given to the rights of other residents;

93 (14) Be fully advised of the relationship that the managed residential
94 community has with any assisted living services agency, health care
95 facility or educational institution to the extent that such relationship
96 relates to resident medical care or treatment and to receive an
97 explanation about the relationship;

98 (15) Receive a copy of any rules or regulations of the managed
99 residential community;

100 (16) Privacy when receiving medical treatment or other services
101 within the capacity of the managed residential community;

102 (17) Refuse care and treatment and participate in the planning for
103 the care and services the resident needs or receives, provided the
104 refusal of care and treatment may preclude the resident from being
105 able to continue to reside in the managed residential community; [and]

106 (18) [All] For residents, other than residents of a continuing care
107 facility, all rights and privileges afforded to tenants under title 47a; and

108 (19) For residents of a continuing care facility, all rights and
109 privileges afforded to residents under chapter 319hh.

110 (b) A managed residential community shall post in a prominent
111 place in the managed residential community the resident's bill of
112 rights, including those rights set forth in subsection (a) of this section.
113 The posting of the resident's bill of rights shall include contact
114 information for the Department of Public Health and the Office of the
115 State Long-Term Care Ombudsman, including the names, addresses
116 and telephone numbers of persons within such agencies who handle
117 questions, comments or complaints concerning managed residential
118 community.

119 Sec. 4. Section 19a-700 of the 2008 supplement to the general statutes
120 is repealed and the following is substituted in lieu thereof (*Effective*
121 *October 1, 2008*):

122 A managed residential community shall enter into a written
123 residency agreement with each resident that clearly sets forth the
124 rights and responsibilities of the resident and the managed residential
125 community, including the duties set forth in section 19a-562 of the 2008
126 supplement to the general statutes. The residency agreement shall be
127 set forth in plain language and printed in not less than fourteen-point
128 type. The residency agreement shall be signed by the managed
129 residential community's authorized agent and by the resident, or the

130 resident's legal representative, prior to the resident taking possession
131 of a private residential unit and shall include, at a minimum:

132 (1) An itemization of assisted living services, transportation
133 services, recreation services and any other services and goods, lodging
134 and meals to be provided on behalf of the resident by the managed
135 residential community;

136 (2) A full and fair disclosure of all charges, fees, expenses and costs
137 to be borne by the resident;

138 (3) A schedule of payments and disclosure of all late fees or
139 potential penalties;

140 (4) The grievance procedure with respect to enforcement of the
141 terms of the residency agreement;

142 (5) The managed residential community's covenant to comply with
143 all municipal, state and federal laws and regulations regarding
144 consumer protection and protection from financial exploitation;

145 (6) The managed residential community's covenant to afford
146 residents all rights and privileges afforded under title 47a or chapter
147 319hh, whichever is applicable;

148 (7) The conditions under which the agreement can be terminated by
149 either party;

150 (8) Full disclosure of the rights and responsibilities of the resident
151 and the managed residential community in situations involving
152 serious deterioration in the health of the resident, hospitalization of the
153 resident or death of the resident, including a provision that specifies
154 that in the event that a resident of the community dies, the estate or
155 family of such resident shall only be responsible for further payment to
156 the community for a period of time not to exceed fifteen days
157 following the date of death of such resident as long as the private
158 residential unit formerly occupied by the resident has been vacated;

159 and

160 (9) Any adopted rules of the managed residential community
 161 reasonably designed to promote the health, safety and welfare of
 162 residents.

163 Sec. 5. Subsection (h) of section 10a-178 of the general statutes is
 164 repealed and the following is substituted in lieu thereof (*Effective*
 165 *October 1, 2008*):

166 (h) "Nursing home" means any institution which is or will be
 167 eligible to be licensed as an institution under sections 19a-490 to 19a-
 168 503, inclusive, of the 2008 supplement to the general statutes or a
 169 facility which (1) provides chronic and convalescent nursing care, (2) is
 170 a rest home with nursing facilities, (3) provides health care facilities for
 171 the handicapped, (4) is a home for elderly persons or physically
 172 handicapped or mentally handicapped persons, or (5) is a continuing
 173 care facility registered with the Department of Social Services,
 174 pursuant to chapter [319f] 319hh.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2008</i>	19a-693
Sec. 2	<i>October 1, 2008</i>	19a-694
Sec. 3	<i>October 1, 2008</i>	19a-697
Sec. 4	<i>October 1, 2008</i>	19a-700
Sec. 5	<i>October 1, 2008</i>	10a-178(h)

Statement of Purpose:

To clarify the applicability of the provisions of chapter 386bb of the general statutes concerning managed residential communities to continuing care facilities.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]