Amendment No. 744

Senate A	mendment to A	Assembly Bill No. 252 F	irst Reprint	(BDR 39-656)		
Proposed by: Senate Committee on Health and Human Services						
Amends:	Summary: No	Title: Yes Preamble: No	Joint Sponsorship: No	Digest: Yes		

ASSEMBLY	'AC'	TION	Initial and Date	SENATE ACTIO	ON I	nitial and Date
Adopted		Lost	1	Adopted	Lost]
Concurred In		Not		Concurred In	Not]
Receded		Not		Receded	Not]

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of <u>green bold underlining</u> is language proposed to be added in this amendment; (3) <u>red strikethrough</u> is deleted language in the original bill; (4) <u>purple double strikethrough</u> is language proposed to be deleted in this amendment; (5) <u>orange double underlining</u> is deleted language in the original bill proposed to be retained in this amendment.

EWR/RBL : Date: 5/20/2019

A.B. No. 252—Revises provisions relating to providers of community-based living arrangement services. (BDR 39-656)

ASSEMBLY BILL No. 252—ASSEMBLYMEN BENITEZ-THOMPSON, CARLTON; ASSEFA, CARRILLO AND WHEELER

MARCH	13,	20	19

JOINT SPONSORS: SENATORS KIECKHEFER AND PARKS

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to providers of community-based living arrangement services. (BDR 39-656)

FISCAL NOTE: Effect on Local Government: May have Fiscal Impact.

Effect on the State: Yes.

EXPLANATION - Matter in bolded italics is new; matter between brackets fomitted material; is material to be omitted.

AN ACT relating to mental health; revising the scope of community-based living arrangement services; imposing certain requirements relating to the operation of a provider of community-based living arrangement services; requiring a provider of community-based living arrangement services to reimburse the Division of Public and Behavioral Health of the Department of Health and Human Services for certain overpayments to the provider; revising requirements concerning the issuance or renewal of a feetificate license to provide community-based living arrangement services; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law defines the term "community-based living arrangement services" to mean flexible, individualized services that are provided in the home, for compensation, to persons with mental illness or persons with developmental disabilities and designed and coordinated to assist such persons in maximizing their independence. (NRS 433.605) Existing law requires a provider of community-based living arrangement services to be certified by the Division of Public and Behavioral Health of the Department of Health and Human Services. (NRS 433.607) Existing law defines the term "supported living arrangement services" to refer to the same type of services provided to persons with intellectual or developmental disabilities. (NRS 435.3315) Existing law requires a provider of supported living arrangement services to be certified by the Aging and Disability Services Division of the Department. (NRS 435.332) Assembly Bill No. 131, enacted during the current legislative session, makes various changes concerning community-based living arrangement services, including repealing the provisions governing community-based living arrangement services in chapter 433 of NRS and moving them instead to chapter 449 of NRS. Instead of requiring providers of such services to obtain a certificate, Assembly Bill No. 131 requires the providers to obtain a license from the Division pursuant to chapter 449 of NRS. (Chapter 51, Statutes of Nevada 2019) For that reason, sections 10-13 of this bill were added to chapter 449 of

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NRS. Various other changes are made in this bill to conform to the provisions of Assembly Bill No. 131. Section 7 of this bill removes the reference to persons with developmental disabilities from the definition of the term "community-based living arrangement services," thereby prohibiting the holder of a certificate to provide such services from serving persons with a primary diagnosis of developmental disability unless the holder also holds a certificate to provide supported living arrangement services. Section 7.5 of this bill authorizes the holder of a certificate to provide community-based living arrangement services to serve any person with a primary diagnosis of a mental illness, including a person who has a secondary diagnosis other than a mental illness. These sections are repealed in section 16 of Assembly Bill No. 131, effective January 1, 2020. Therefore, the substantive provisions of section 7.5 are added to section 11 of this bill to ensure those provisions are not repealed.

Section [2 of this bill] 11 also requires a person employed by a provider of community-based living arrangement services for the purpose of supervising or providing support to recipients of services to be [proficient in the language spoken by a majority of] able to communicate with the recipients to whom he or she provides services. Section [2] 11 also prohibits a child under 18 years of age from residing in a [home] building operated by a provider in which services are provided. Section [2] 11 also requires a provider of community-based living arrangement services to provide each recipient of services with access to licensed professionals who are qualified to provide supportive and habilitative services. Section [2] 11 additionally requires a provider of community-based living arrangement services to post prominently in any [home] building operated by the provider in which services are provided a sign with the telephone number for making a complaint to the Division of Public and Behavioral Health.

Section [3] 12 of this bill requires the Division to establish an individualized plan for each recipient of community-based living arrangement services provided pursuant to a contract with the Division. Sections [3] 12 and [10] 22 of this bill require a provider of community-based living arrangement services to reimburse the Division for any overpayment pursuant to such a contract for a bill submitted to the Division on or after January 1, 2017. Section [5] 13 of this bill prohibits the Division from renewing the [certificate] license of a provider who has failed to provide such a reimbursement or make certain corrections required by the Division.

Section [8] 16 of this bill requires the State Board of Health to adopt regulations prescribing required training and continuing education for an operator of a provider of community-based living arrangement services and certain employees of such a provider. Section [8] 16 also requires an applicant for a [certificate] license to take certain actions to ensure that, if the applicant becomes insolvent, recipients of services from the applicant would continue to receive such services for 2 months at the expense of the applicant.

Existing law [authorizes] requires the Division to investigate [the qualifications of personnel, methods of operation, policies and purposes of] an applicant for a [certificate. (NRS 433.613)] license before issuing the license. (NRS 449.080) Section [9] 17 of this bill requires the Division_, [to: (1) conduct such an investigation before issuing a certificate; and (2)] as part of the investigation, to inspect any [home] building operated by the applicant which the applicant proposes to provide services. Sections 14, 15 and 18-21 of this bill make conforming changes.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. [Chapter 433 of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 5, inclusive, of this act.] (Deleted by amendment.)

Sec. 2. [1. Each person employed by a provider of services to supervise or provide support to recipients of services must demonstrate verbal and written proficiency in the language spoken by a majority of the recipients to whom he or she is to provide services.

2. A child under 18 years of age must not reside in a home operated by a provider of services in which services are provided. 3 3. A provider of services shall: 4 5 6

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- (a) Provide each recipient of services with access to licensed professionals who are qualified to provide supportive and habilitative services that are appropriate for the recipient: and
- (b) Post prominently in any home operated by the provider in which services are provided a sign with the telephone number that may be used to make a complaint to the Division concerning the provider.] (Deleted by amendment.)
- Sec. 3. [1. The Division shall establish, for each recipient of services whose services are provided pursuant to a contract between the provider and the Division, an individualized plan for the provision of services. The individualized plan must include, without limitation:
- (a) A description of the case management services that must be provided to the recipient and a designation of the entity responsible for providing those
- (b) The hours during which the provider of services must provide supervision and support to the recipient.
- 2. A contract between the Division and a provider of services for the provision of services must include a provision requiring the provider to comply with an individualized plan for each recipient established pursuant to subsection
- 3. If the Division determines that it has paid the holder of a certificate with which the Division has entered into a contract an amount that exceeds the amount required by the contract, the holder shall reimburse the amount of the *overpayment to the Division.*] (Deleted by amendment.)
 - Sec. 4. (Deleted by amendment.)
 - Sec. 5. [The Division shall not renew a certificate if:
- 1. The provider of services has refused or failed to reimburse any everpayment for services as required pursuant to subsection 3 of section 3 of this act; or
- The holder of the certificate has failed to correct any practice required by the Division to comply with state law or regulations or the requirements of a contract between the holder and the Division. (Deleted by amendment.)
 - Sec. 6. [NRS 433.601 is hereby amended to read as follows:
- 433.601 As used in NRS 433.601 to 433.621, inclusive, and sections 2 to 5. inclusive, of this act, unless the context otherwise requires, the words and terms defined in NRS 433,603 and 433,605 have the meanings ascribed to them in those Sec. 7. NRS 433.605 is hereby
 - NRS 433.605 is hereby amended to read as follows:
- "Community-based living arrangement services" or "services" means flexible, individualized services, including, without limitation, training and habilitation services, that are:
- 1. Provided in the home, for compensation, to persons with mental illness for persons with developmental disabilities who are served by the Division or any other entity; and
- 2. Designed and coordinated to assist such persons in maximizing their independence.
 - **Sec. 7.5.** NRS 433.607 is hereby amended to read as follows:
- 433.607 1. Except as otherwise provided in subsection 2, a person, government or governmental agency shall not provide services without first obtaining a certificate from the Division.

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employment by the holder.

Sec. 9. NRS 433.613 is hereby amended to read as follows: 1. The Division [may:

2. The Division may:

the holder of a certificate may provide services within the scope of his or her 3. The holder of a certificate to provide community-based living arrangement services may provide such services to any person with a primary

2. A natural person who has not been issued a certificate but is employed by

diagnosis of a mental illness, including, without limitation, such a person who has a secondary diagnosis other than a mental illness. Such a secondary diagnosis may include, without limitation, a secondary diagnosis of an intellectual disability or developmental disability. Sec. 8. [NRS 433.609 is hereby amended to read as follows:

433.609 1. The State Board of Health shall adopt regulations governing services, including, without limitation, regulations that set forth:

(a) Standards for the provision of quality care by a provider of services . [;]

(b) Requirements for the issuance and renewal of a certificate. [; and] Such regulations must:

(1) Except as otherwise provided in subparagraph (2), require a natural person responsible for the operation of a provider of services and each employee of a provider of services who supervises or provides support to recipients of services to complete training concerning the provision of services to persons with mental illness and continuing education concerning the particular population served by the provider:

(2) Exempt a person licensed or certified pursuant to title 54 of NRS from the requirements prescribed pursuant to subparagraph (1) if the Board determines that the person is required to receive training and continuing education substantially equivalent to that prescribed pursuant to that subparagraph;

(3) Require a natural person responsible for the operation of a provider of services to receive training concerning the provisions of title 53 of NRS applicable to the provision of services; and

(1) Require an applicant for a certificate to post a surety bond in an amount equal to the operating expenses of the applicant for 2 months, place that amount in escrew or take another action prescribed by the Division to ensure that, if the applicant becomes insolvent, recipients of services from the applicant may continue to receive services for 2 months at the expense of the applicant.

(c) The rights of consumers of services, in addition to those prescribed in this chapter, including, without limitation, the right of a consumer to file a complaint against a provider of services and the procedure for filing such a complaint.

The State Board of Health may, by regulation, prescribe a fee for-

(a) The issuance of a certificate; and (b) The renewal of a certificate.

3. Any fee prescribed pursuant to subsection 2 must be calculated to produce the revenue estimated to cover the costs related to the issuance and renewal of certificates, but in no case may the fee for the issuance or renewal of a certificate exceed the actual cost to the Division of issuing or renewing the certificate, as applicable.] (Deleted by amendment.)

1. Upon receipt of an application for] shall, before issuing a certificate, conduct an investigation into the qualifications of the personnel, methods of operation, policies and purposes of the applicant . [;] Such an investigation must include, without limitation, an inspection of any home operated by the applicant

in which the applicant proposes to provide services.

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- (a) Upon receipt of a complaint against a provider of services, except for a complaint concerning the cost of services, conduct an investigation into qualifications of the personnel, methods of operation, policies, procedures and records of the provider of services:
- [3.] (b) Employ such professional, technical and elerical assistance as it deems necessary to carry out the provisions of NRS 433.601 to 433.621, inclusive [:], and sections 2 to 5, inclusive, of this act; and
- [4.] (c) Enter into such agreements with public and private agencies as it deems necessary for the provision of services.] (Deleted by amendment.)
- Sec. 10. Chapter 449 of NRS is hereby amended by adding thereto the provisions set forth as sections 11, 12 and 13 of this act.
- 1. The holder of a license to provide community-based living arrangement services may provide such services to any person with a primary diagnosis of a mental illness, including, without limitation, such a person who has a secondary diagnosis other than a mental illness. Such a secondary diagnosis may include, without limitation, a secondary diagnosis of an intellectual disability or developmental disability.
- Each person employed by a provider of community-based living arrangement services to supervise or provide support to recipients of such services must be able to communicate with the recipients to whom he or she is to provide services.
- 3. A child under 18 years of age must not reside in a building operated by a provider of community-based living arrangement services in which communitybased living arrangement services are provided.
 - 4. A provider of community-based living arrangement services shall:
- (a) Provide each recipient of community-based living arrangement services with access to licensed professionals who are qualified to provide supportive and habilitative services that are appropriate for the recipient; and
- (b) Post prominently in any building operated by the provider of communitybased living arrangement services in which community-based living arrangement services are provided a sign with the telephone number that may be used to make a complaint to the Division concerning the provider.
- Sec. 12. 1. The Division shall establish, for each recipient of communitybased living arrangement services to whom services are provided pursuant to a contract between the provider and the Division, an individualized plan for the provision of community-based living arrangement services. The individualized plan must include, without limitation:
- (a) A description of the case management services that must be provided to the recipient and a designation of the entity responsible for providing those services; and
- (b) The hours during which the provider of community-based living arrangement services must provide supervision and support to the recipient.
- 2. A contract between the Division and a provider of community-based living arrangement services for the provision of such services must include a provision requiring the provider to comply with the individualized plan for each recipient established pursuant to subsection 1.
- 3. If the Division determines that it has paid the holder of a license to provide community-based living arrangement services with which the Division has entered into a contract an amount that exceeds the amount required by the contract, the holder shall reimburse the amount of the overpayment to the Division.
- Sec. 13. The Division shall not renew a license to provide community-based living arrangement services if:

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2. The holder of the license has failed to correct any practice required by the Division to comply with state law or regulations or the requirements of a contract between the holder and the Division.

Sec. 14. NRS 449.029 is hereby amended to read as follows:

449.029 As used in NRS 449.029 to 449.240, inclusive, <u>and sections 11, 12 and 13 of this act</u>, unless the context otherwise requires, "medical facility" has the meaning ascribed to it in NRS 449.0151 and includes a program of hospice care described in NRS 449.196.

Sec. 15. NRS 449.0301 is hereby amended to read as follows:

449.0301 The provisions of NRS 449.029 to 449.2428, inclusive, <u>and</u>

sections 11, 12 and 13 of this act do not apply to:

- 1. Any facility conducted by and for the adherents of any church or religious denomination for the purpose of providing facilities for the care and treatment of the sick who depend solely upon spiritual means through prayer for healing in the practice of the religion of the church or denomination, except that such a facility shall comply with all regulations relative to sanitation and safety applicable to other facilities of a similar category.
 - 2. Foster homes as defined in NRS 424.014.
- 3. Any medical facility, facility for the dependent or facility which is otherwise required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed that is operated and maintained by the United States Government or an agency thereof.

Sec. 16. NRS 449.0302 is hereby amended to read as follows:

449.0302 1. The Board shall adopt:

- (a) Licensing standards for each class of medical facility or facility for the dependent covered by NRS 449.029 to 449.2428, inclusive, <u>and sections 11, 12</u> and 13 of this act and for programs of hospice care.
 - (b) Regulations governing the licensing of such facilities and programs.
- (c) Regulations governing the procedure and standards for granting an extension of the time for which a natural person may provide certain care in his or her home without being considered a residential facility for groups pursuant to NRS 449.017. The regulations must require that such grants are effective only if made in writing.
- (d) Regulations establishing a procedure for the indemnification by the Division, from the amount of any surety bond or other obligation filed or deposited by a facility for refractive surgery pursuant to NRS 449.068 or 449.069, of a patient of the facility who has sustained any damages as a result of the bankruptcy of or any breach of contract by the facility.
- (e) Any other regulations as it deems necessary or convenient to carry out the provisions of NRS 449.029 to 449.2428, inclusive [1], and sections 11, 12 and 13 of this act.
- 2. The Board shall adopt separate regulations governing the licensing and operation of:
 - (a) Facilities for the care of adults during the day; and
 - (b) Residential facilities for groups,
- → which provide care to persons with Alzheimer's disease.
 - 3. The Board shall adopt separate regulations for:
- (a) The licensure of rural hospitals which take into consideration the unique problems of operating such a facility in a rural area.

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- (b) The licensure of facilities for refractive surgery which take into consideration the unique factors of operating such a facility.
- (c) The licensure of mobile units which take into consideration the unique factors of operating a facility that is not in a fixed location.
- 4. The Board shall require that the practices and policies of each medical facility or facility for the dependent provide adequately for the protection of the health, safety and physical, moral and mental well-being of each person accommodated in the facility.
- 5. In addition to the training requirements prescribed pursuant to NRS 449.093, the Board shall establish minimum qualifications for administrators and employees of residential facilities for groups. In establishing the qualifications, the Board shall consider the related standards set by nationally recognized organizations which accredit such facilities.
- 6. The Board shall adopt separate regulations regarding the assistance which may be given pursuant to NRS 453.375 and 454.213 to an ultimate user of controlled substances or dangerous drugs by employees of residential facilities for groups. The regulations must require at least the following conditions before such assistance may be given:
- (a) The ultimate user's physical and mental condition is stable and is following a predictable course.
- (b) The amount of the medication prescribed is at a maintenance level and does not require a daily assessment.
- (c) A written plan of care by a physician or registered nurse has been established that:
- (1) Addresses possession and assistance in the administration of the medication; and
- (2) Includes a plan, which has been prepared under the supervision of a registered nurse or licensed pharmacist, for emergency intervention if an adverse condition results.
- (d) Except as otherwise authorized by the regulations adopted pursuant to NRS 449.0304, the prescribed medication is not administered by injection or intravenously.
- (e) The employee has successfully completed training and examination approved by the Division regarding the authorized manner of assistance.
- 7. The Board shall adopt separate regulations governing the licensing and operation of residential facilities for groups which provide assisted living services. The Board shall not allow the licensing of a facility as a residential facility for groups which provides assisted living services and a residential facility for groups shall not claim that it provides "assisted living services" unless:
- (a) Before authorizing a person to move into the facility, the facility makes a full written disclosure to the person regarding what services of personalized care will be available to the person and the amount that will be charged for those services throughout the resident's stay at the facility.
 - (b) The residents of the facility reside in their own living units which:
 - (1) Except as otherwise provided in subsection 8, contain toilet facilities;
 - (2) Contain a sleeping area or bedroom; and
 - (3) Are shared with another occupant only upon consent of both occupants.
- (c) The facility provides personalized care to the residents of the facility and the general approach to operating the facility incorporates these core principles:
- (1) The facility is designed to create a residential environment that actively supports and promotes each resident's quality of life and right to privacy;

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- (2) The facility is committed to offering high-quality supportive services that are developed by the facility in collaboration with the resident to meet the resident's individual needs;
- (3) The facility provides a variety of creative and innovative services that emphasize the particular needs of each individual resident and the resident's personal choice of lifestyle;
- (4) The operation of the facility and its interaction with its residents supports, to the maximum extent possible, each resident's need for autonomy and the right to make decisions regarding his or her own life;
- (5) The operation of the facility is designed to foster a social climate that allows the resident to develop and maintain personal relationships with fellow residents and with persons in the general community;
- (6) The facility is designed to minimize and is operated in a manner which minimizes the need for its residents to move out of the facility as their respective physical and mental conditions change over time; and
- (7) The facility is operated in such a manner as to foster a culture that provides a high-quality environment for the residents, their families, the staff, any volunteers and the community at large.
- The Division may grant an exception from the requirement of subparagraph (1) of paragraph (b) of subsection 7 to a facility which is licensed as a residential facility for groups on or before July 1, 2005, and which is authorized to have 10 or fewer beds and was originally constructed as a single-family dwelling if the Division finds that:
- (a) Strict application of that requirement would result in economic hardship to the facility requesting the exception; and
 - (b) The exception, if granted, would not:
- (1) Cause substantial detriment to the health or welfare of any resident of the facility;
 - (2) Result in more than two residents sharing a toilet facility; or
 - (3) Otherwise impair substantially the purpose of that requirement.
- The Board shall, if it determines necessary, adopt regulations and requirements to ensure that each residential facility for groups and its staff are prepared to respond to an emergency, including, without limitation:
- (a) The adoption of plans to respond to a natural disaster and other types of emergency situations, including, without limitation, an emergency involving fire;
- (b) The adoption of plans to provide for the evacuation of a residential facility for groups in an emergency, including, without limitation, plans to ensure that nonambulatory patients may be evacuated;
- (c) Educating the residents of residential facilities for groups concerning the plans adopted pursuant to paragraphs (a) and (b); and
- (d) Posting the plans or a summary of the plans adopted pursuant to paragraphs (a) and (b) in a conspicuous place in each residential facility for groups.
- 10. The regulations governing the licensing and operation of facilities for transitional living for released offenders must provide for the licensure of at least three different types of facilities, including, without limitation:
 - (a) Facilities that only provide a housing and living environment;
- (b) Facilities that provide or arrange for the provision of supportive services for residents of the facility to assist the residents with reintegration into the community, in addition to providing a housing and living environment; and
- (c) Facilities that provide or arrange for the provision of alcohol and drug abuse programs, in addition to providing a housing and living environment and providing or arranging for the provision of other supportive services.

→ The regulations must provide that if a facility was originally constructed as a single-family dwelling, the facility must not be authorized for more than eight beds.

11. The Board shall adopt regulations applicable to providers of community-based living arrangement services which:

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(a) Except as otherwise provided in paragraph (b), require a natural person responsible for the operation of a provider of community-based living arrangement services and each employee of a provider of community-based living arrangement services who supervises or provides support to recipients of community-based living arrangement services to complete training concerning the provision of community-based living arrangement services to persons with mental illness and continuing education concerning the particular population served by the provider;

(b) Exempt a person licensed or certified pursuant to title 54 of NRS from the requirements prescribed pursuant to paragraph (a) if the Board determines that the person is required to receive training and continuing education

substantially equivalent to that prescribed pursuant to that paragraph;

(c) Require a natural person responsible for the operation of a provider of community-based living arrangement services to receive training concerning the provisions of title 53 of NRS applicable to the provision of community-based living arrangement services; and

- (d) Require an applicant for a license to provide community-based living arrangement services to post a surety bond in an amount equal to the operating expenses of the applicant for 2 months, place that amount in escrow or take another action prescribed by the Division to ensure that, if the applicant becomes insolvent, recipients of community-based living arrangement services from the applicant may continue to receive community-based living arrangement services for 2 months at the expense of the applicant.
- 12. As used in this section, "living unit" means an individual private accommodation designated for a resident within the facility.
 - Sec. 17. NRS 449.080 is hereby amended to read as follows:
 - 1. If, after investigation, the Division finds that the: (a) Applicant is in full compliance with the provisions of NRS 449.029 to
- 449.2428, inclusive [13], and sections 11, 12 and 13 of this act;
- (b) Applicant is in substantial compliance with the standards and regulations adopted by the Board;
- (c) Applicant, if he or she has undertaken a project for which approval is required pursuant to NRS 439A.100, has obtained the approval of the Director of the Department of Health and Human Services; and
 - (d) Facility conforms to the applicable zoning regulations,
- → the Division shall issue the license to the applicant.
- 2. Any investigation of an applicant for a license to provide communitybased living arrangement services conducted pursuant to subsection 1 must include, without limitation, an inspection of any building operated by the applicant in which the applicant proposes to provide community-based living arrangement services.
- 3. A license applies only to the person to whom it is issued, is valid only for the premises described in the license and is not transferable.
 - NRS 449.089 is hereby amended to read as follows: Sec. 18.
- 1. Each license issued pursuant to NRS 449.029 to 449.2428, 449.089 inclusive, and sections 11, 12 and 13 of this act expires on December 31 following its issuance and is renewable for 1 year upon reapplication and payment of all fees required pursuant to NRS 449.050 unless the Division finds, after an investigation, that the facility has not:

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 adopted by the Board;
(b) Obtained the approval of the Director of the Department of Health and Human Services before undertaking a project, if such approval is required by NRS 439A.100; or

(a) Satisfactorily complied with the provisions of NRS 449.029 to 449.2428,

inclusive, and sections 11, 12 and 13 of this act or the standards and regulations

(c) Conformed to all applicable local zoning regulations.

- 2. Each reapplication for an agency to provide personal care services in the home, an agency to provide nursing in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a hospital described in 42 U.S.C. § 1395ww(d)(1)(B)(iv) which accepts payment through Medicare, a psychiatric hospital that provides inpatient services to children, a psychiatric residential treatment facility, a residential facility for groups, a program of hospice care, a home for individual residential care, a facility for the care of adults during the day, a facility for hospice care, a nursing pool, a peer support recovery organization, the distinct part of a hospital which meets the requirements of a skilled nursing facility or nursing facility pursuant to 42 C.F.R. § 483.5, a hospital that provides swing-bed services as described in 42 C.F.R. § 482.58 or, if residential services are provided to children, a medical facility or facility for the treatment of abuse of alcohol or drugs must include, without limitation, a statement that the facility, hospital, agency, program, pool, organization or home is in compliance with the provisions of NRS 449.115 to 449.125, inclusive, and 449.174.
- 3. Each reapplication for an agency to provide personal care services in the home, a community health worker pool, a facility for intermediate care, a facility for skilled nursing, a facility for the care of adults during the day, a peer support recovery organization, a residential facility for groups or a home for individual residential care must include, without limitation, a statement that the holder of the license to operate, and the administrator or other person in charge and employees of, the facility, agency, pool, organization or home are in compliance with the provisions of NRS 449.093.

Sec. 19. NRS 449.160 is hereby amended to read as follows:

- 449.160 1. The Division may deny an application for a license or may suspend or revoke any license issued under the provisions of NRS 449.029 to 449.2428, inclusive, *and sections 11, 12 and 13 of this act* upon any of the following grounds:
- (a) Violation by the applicant or the licensee of any of the provisions of NRS 439B.410 or 449.029 to 449.245, inclusive, *and sections 11, 12 and 13 of this act*, or of any other law of this State or of the standards, rules and regulations adopted thereunder.
 - (b) Aiding, abetting or permitting the commission of any illegal act.
- (c) Conduct inimical to the public health, morals, welfare and safety of the people of the State of Nevada in the maintenance and operation of the premises for which a license is issued.
- (d) Conduct or practice detrimental to the health or safety of the occupants or employees of the facility.
- (e) Failure of the applicant to obtain written approval from the Director of the Department of Health and Human Services as required by NRS 439A.100 or as provided in any regulation adopted pursuant to NRS 449.001 to 449.430, inclusive, and sections 11, 12 and 13 of this act and 449.435 to 449.531, inclusive, and chapter 449A of NRS if such approval is required.
 - (f) Failure to comply with the provisions of NRS 449.2486.

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- licensee that operates the facility, or an agent or employee of the licensee:
 (a) Is convicted of violating any of the provisions of NRS 202.470;
- (b) Is ordered to but fails to abate a nuisance pursuant to NRS 244.360, 244.3603 or 268.4124; or

license to operate a facility for the dependent if, with respect to that facility, the

2. In addition to the provisions of subsection 1, the Division may revoke a

- (c) Is ordered by the appropriate governmental agency to correct a violation of a building, safety or health code or regulation but fails to correct the violation.
- 3. The Division shall maintain a log of any complaints that it receives relating to activities for which the Division may revoke the license to operate a facility for the dependent pursuant to subsection 2. The Division shall provide to a facility for the care of adults during the day:
- (a) A summary of a complaint against the facility if the investigation of the complaint by the Division either substantiates the complaint or is inconclusive;
 - (b) A report of any investigation conducted with respect to the complaint; and
 - (c) A report of any disciplinary action taken against the facility.
- → The facility shall make the information available to the public pursuant to NRS 449.2486.
- 4. On or before February 1 of each odd-numbered year, the Division shall submit to the Director of the Legislative Counsel Bureau a written report setting forth, for the previous biennium:
- (a) Any complaints included in the log maintained by the Division pursuant to subsection 3; and
 - (b) Any disciplinary actions taken by the Division pursuant to subsection 2.
 - Sec. 20. NRS 449.163 is hereby amended to read as follows:
- 449.163 1. In addition to the payment of the amount required by NRS 449.0308, if a medical facility, facility for the dependent or facility which is required by the regulations adopted by the Board pursuant to NRS 449.0303 to be licensed violates any provision related to its licensure, including any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, *and sections 11, 12 and 13 of this act* or any condition, standard or regulation adopted by the Board, the Division, in accordance with the regulations adopted pursuant to NRS 449.165, may:
- (a) Prohibit the facility from admitting any patient until it determines that the facility has corrected the violation;
- (b) Limit the occupancy of the facility to the number of beds occupied when the violation occurred, until it determines that the facility has corrected the violation;
- (c) If the license of the facility limits the occupancy of the facility and the facility has exceeded the approved occupancy, require the facility, at its own expense, to move patients to another facility that is licensed;
- (d) Impose an administrative penalty of not more than \$5,000 per day for each violation, together with interest thereon at a rate not to exceed 10 percent per annum; and
- (e) Appoint temporary management to oversee the operation of the facility and to ensure the health and safety of the patients of the facility, until:
- (1) It determines that the facility has corrected the violation and has management which is capable of ensuring continued compliance with the applicable statutes, conditions, standards and regulations; or
 - (2) Improvements are made to correct the violation.
- 2. If the facility fails to pay any administrative penalty imposed pursuant to paragraph (d) of subsection 1, the Division may:
- (a) Suspend the license of the facility until the administrative penalty is paid; and

(b) Collect court costs, reasonable attorney's fees and other costs incurred to
 collect the administrative penalty.
 The Division may require any facility that violates any provision of NRS

 3. The Division may require any facility that violates any provision of NRS 439B.410 or 449.029 to 449.2428, inclusive, <u>and sections 11, 12 and 13 of this act</u> or any condition, standard or regulation adopted by the Board to make any improvements processors to correct the violation.

improvements necessary to correct the violation.

4. Any money collected as administrative penalties pursuant to paragraph (d) of subsection 1 must be accounted for separately and used to administer and carry out the provisions of NRS 449.001 to 449.430, inclusive, and sections 11, 12 and 13 of this act, 449.435 to 449.530, inclusive, and 449.760 and chapter 449A of NRS to protect the health, safety, well-being and property of the patients and residents of facilities in accordance with applicable state and federal standards or for any other purpose authorized by the Legislature.

Sec. 21. NRS 449.240 is hereby amended to read as follows:

449.240 The district attorney of the county in which the facility is located shall, upon application by the Division, institute and conduct the prosecution of any action for violation of any provisions of NRS 449.029 to 449.245, inclusive [4], and sections 11. 12 and 13 of this act.

[Sec. 10.] Sec. 22. 1. The provisions of subsection 3 of section [3] 12 of this act and section [5] 13 of this act apply retroactively to any overpayment by the Division of Public and Behavioral Health of the Department of Health and Human Services pursuant to any bill submitted to the Division by a provider of community-based living arrangement services on or after January 1, 2017.

2. As used in this section, "community-based living arrangement services" has the meaning ascribed to it in NRS 433.605, as that section existed on [September 30.] December 31, 2019.

[Sec. 11.] Sec. 23. 1. This section and sections 7 and 7.5 of this act become effective upon passage and approval.

2. Sections [1 to 6,] 10 to 22, inclusive, [8, 9 and 10] of this act become effective on [October 1, 2019.] January 1, 2020.