REFERENCE TITLE: DHS; licensure; group homes

State of Arizona House of Representatives Fifty-sixth Legislature First Regular Session 2023

HB 2166

Introduced by Representative Dunn: Senator Fernandez

AN ACT

AMENDING SECTIONS 36-401, 36-421 AND 36-424, ARIZONA REVISED STATUTES; AMENDING TITLE 36, CHAPTER 4, ARTICLE 2, ARIZONA REVISED STATUTES, BY ADDING SECTION 36-425.09; AMENDING SECTIONS 36-551 AND 36-557, ARIZONA REVISED STATUTES; RELATING TO DEVELOPMENTAL DISABILITIES.

(TEXT OF BILL BEGINS ON NEXT PAGE)

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Be it enacted by the Legislature of the State of Arizona:

Section 1. Section 36-401, Arizona Revised Statutes, is amended to read:

36-401. <u>Definitions</u>; adult foster care

- A. In this chapter, unless the context otherwise requires:
- 1. "Accredited health care institution" means a health care institution, other than a hospital, that is currently accredited by a nationally recognized accreditation organization.
- 2. "Accredited hospital" means a hospital that is currently accredited by a nationally recognized organization on hospital accreditation.
- 3. "Adult behavioral health therapeutic home" means a residence for individuals who are at least eighteen years of age, have behavioral health issues and need behavioral health services that does all of the following for those individuals:
 - (a) Provides room and board.
 - (b) Assists in acquiring daily living skills.
 - (c) Coordinates transportation to scheduled appointments.
 - (d) Monitors behaviors.
 - (e) Assists in the self-administration of medication.
 - (f) Provides feedback to case managers related to behavior.
- 4. "Adult day health care facility" means a facility that provides adult day health services during a portion of a continuous twenty-four-hour period for compensation on a regular basis for five or more adults who are not related to the proprietor.
- 5. "Adult day health services" means a program that provides planned care supervision and activities, personal care, personal living skills training, meals and health monitoring in a group setting during a portion of a continuous twenty-four-hour period. Adult day health services may also include preventive, therapeutic and restorative health-related services that do not include behavioral health services.
- 6. "Adult foster care home" means a residential setting that provides room and board and adult foster care services for at least one and not more than four adults who are participants in the Arizona long-term care system pursuant to chapter 29, article 2 of this title or contracts for services with the United States department of veterans affairs and in which the sponsor or the manager resides with the residents and integrates the residents who are receiving adult foster care into that person's family.
- 7. "Adult foster care services" means supervision, assistance with eating, bathing, toileting, dressing, self-medication and other routines of daily living or services authorized by rules adopted pursuant to section 36-405 and section 36-2939, subsection C.
- 8. "Assisted living center" means an assisted living facility that provides resident rooms or residential units to eleven or more residents.

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- 9. "Assisted living facility" means a residential care institution, including an adult foster care home, that provides or contracts to provide supervisory care services, personal care services or directed care services on a continuous basis.
- 10. "Assisted living home" means an assisted living facility that provides resident rooms to ten or fewer residents.
- 11. "Behavioral health services" means services that pertain to mental health and substance use disorders and that are either:
- (a) Performed by or under the supervision of a professional who is licensed pursuant to title 32 and whose scope of practice allows the professional to provide these services.
- (b) Performed on behalf of patients by behavioral health staff as prescribed by rule.
- 12. "BEHAVIORAL-SUPPORTED GROUP HOME" MEANS A HEALTH CARE INSTITUTION THAT MEETS ALL OF THE FOLLOWING:
- (a) IS A COMMUNITY RESIDENTIAL SETTING AS DEFINED IN SECTION 36-551 FOR NOT MORE THAN SIX PERSONS WITH DEVELOPMENTAL DISABILITIES.
- (b) IS OPERATED BY A SERVICE PROVIDER UNDER CONTRACT WITH THE DEPARTMENT OF ECONOMIC SECURITY.
- (c) PROVIDES ROOM AND BOARD, DAILY HABILITATION, ASSISTANCE IN SELF-ADMINISTERING MEDICATION AND MEDICATION ADMINISTRATION AND BEHAVIORAL HEALTH SERVICES FOR CLIENTS AS DEFINED IN SECTION 36-551 WITH DUAL DISORDERS, INCLUDING PSYCHIATRIC DISORDERS AND DEVELOPMENTAL DISABILITIES, WHO ENGAGE IN BEHAVIORS THAT ARE DISRUPTIVE, SOCIALLY INAPPROPRIATE OR HARMFUL OR DANGEROUS TO SELF OR OTHERS, THAT INTERFERE WITH FUNCTIONING AND QUALITY OF LIFE OR THAT MAY CAUSE DESTRUCTION OF PROPERTY.
- $\frac{12.}{13.}$ "Construction" means building, erecting, fabricating or installing a health care institution.
- $\frac{13.}{14.}$ "Continuous" means available at all times without cessation, break or interruption.
 - 14. 15. "Controlling person" means a person who:
- (a) Through ownership, has the power to vote at least ten percent of the outstanding voting securities.
- (b) If the applicant or licensee is a partnership, is the general partner or a limited partner who holds at least ten percent of the voting rights of the partnership.
- (c) If the applicant or licensee is a corporation, an association or a limited liability company, is the president, the chief executive officer, the incorporator or any person who owns or controls at least ten percent of the voting securities. For the purposes of this subdivision, corporation does not include nonprofit corporations.
- (d) Holds a beneficial interest in ten percent or more of the liabilities of the applicant or the licensee.
 - 15. 16. "Department" means the department of health services.

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17. "DEVELOPMENTAL DISABILITY" HAS THE SAME MEANING PRESCRIBED IN SECTION 36-551.
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16. 18. "Directed care services" means programs and services, including supervisory and personal care services, that are provided to persons who are incapable of recognizing danger, summoning assistance, expressing need or making basic care decisions.

17. 19. "Direction" means authoritative policy or procedural guidance to accomplish a function or activity.

18. 20. "Director" means the director of the department.

 $\frac{19.}{10.}$ 21. "Facilities" means buildings that are used by a health care institution for providing any of the types of services as defined in this chapter.

20. "Freestanding urgent care center":

- (a) Means an outpatient treatment center that, regardless of its posted or advertised name, meets any of the following requirements:
- (i) Is open twenty-four hours a day, excluding at its option weekends or certain holidays, but is not licensed as a hospital.
- (ii) Claims to provide unscheduled medical services that are not otherwise routinely available in primary care physician offices.
- (iii) By its posted or advertised name, gives the impression to the public that it provides medical care for urgent, immediate or emergency conditions.
- (iv) Routinely provides ongoing unscheduled medical services for more than eight consecutive hours for an individual patient.
 - (b) Does not include the following:
- (i) A medical facility that is licensed under a hospital's license and that uses the hospital's medical provider number.
- (ii) A qualifying community health center pursuant to section 36-2907.06.
- (iii) Any other health care institution licensed pursuant to this chapter.
- (iv) A physician's office that offers extended hours or same-day appointments to existing and new patients and that does not meet the requirements of subdivision (a), item (i), (iii) or (iv) of this paragraph.
- 21. 23. "Governing authority" means the individual, agency, partners, owner, group or corporation, whether appointed, elected or otherwise designated, in which the ultimate responsibility and authority for the conduct of the health care institution are vested. For the purposes of this paragraph, "owner" means a person who has an ownership interest of at least fifty-one percent of a health care institution.
 - 24. "GROUP HOME" HAS THE SAME MEANING PRESCRIBED IN SECTION 36-551.
- 25. "HABILITATION" HAS THE SAME MEANING PRESCRIBED IN SECTION 36-551.

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22. 26. "Health care institution" means every place, institution, building or agency, whether organized for profit or not, that provides facilities with medical services, nursing services, behavioral health services, health screening services, other health-related services, supervisory care services, personal care services or directed care services and includes home health agencies as defined in section 36-151, outdoor behavioral health care programs and hospice service agencies.

23. 27. "Health-related services" means services, other than medical, that pertain to general supervision, protective, preventive and personal care services, supervisory care services or directed care services.

24. 28. "Health screening services" means the acquisition, analysis and delivery of health-related data of individuals to aid in determining the need for medical services.

 $\frac{25.}{100}$ 29. "Hospice" means a hospice service agency or the provision of hospice services in an inpatient facility.

 $\frac{26.}{30.}$ "Hospice service" means a program of palliative and supportive care for terminally ill persons and their families or caregivers.

27. 31. "Hospice service agency" means an agency or organization, or a subdivision of that agency or organization, that provides hospice services at the place of residence of its clients.

28. 32. "Inpatient beds" or "resident beds" means accommodations with supporting services, such as food, laundry and housekeeping, for patients or residents who generally stay in excess of twenty-four hours.

 $\frac{29.}{33}$. "Intermediate care facility for individuals with intellectual disabilities" has the same meaning prescribed in section 36-551.

30. 34. "Licensed capacity" means the total number of persons for whom the health care institution is authorized by the department to provide services as required pursuant to this chapter if the person is expected to stay in the health care institution for more than twenty-four hours. For a hospital, licensed capacity means only those beds specified on the hospital license.

31. 35. "Medical services" means the services that pertain to medical care and that are performed at the direction of a physician on behalf of patients by physicians, dentists, nurses and other professional and technical personnel.

 $\frac{32.}{36.}$ "Modification" means the substantial improvement, enlargement, reduction or alteration of or other change in a health care institution.

33. "Nonproprietary institution" means any health care institution that is organized and operated exclusively for charitable purposes, no part of the net earnings of which inures to the benefit of

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 any private shareholder or individual, or that is operated by the state or any political subdivision of the state.

34. 38. "Nursing care institution" means a health care institution that provides inpatient beds or resident beds and nursing services to persons who need continuous nursing services but who do not require hospital care or direct daily care from a physician.

35. 39. "Nursing services" means those services that pertain to the curative, restorative and preventive aspects of nursing care and that are performed at the direction of a physician by or under the supervision of a registered nurse licensed in this state.

36. 40. "Nursing-supported group home" means a health care institution that is a community residential setting as defined in section 36-551 for not more than six persons with developmental disabilities, that is operated by a service provider under contract with the department of economic security and that provides room and board, daily habilitation and continuous nursing support and intervention.

37. 41. "Organized medical staff" means a formal organization of physicians, and dentists if appropriate, with the delegated authority and responsibility to maintain proper standards of medical care and to plan for continued betterment of that care.

38. 42. "Outdoor behavioral health care program" means an agency that provides behavioral health services in an outdoor environment as an alternative to behavioral health services that are provided in a health care institution with facilities. Outdoor behavioral health care programs do not include:

- (a) Programs, facilities or activities that are operated by a government entity or that are licensed by the department as a child care program pursuant to chapter 7.1 of this title.
- (b) Outdoor activities for youth that are designated to be primarily recreational and that are organized by church groups, scouting organizations or similar groups.
- (c) Outdoor youth programs that are licensed by the department of economic security.

39. 43. "Personal care services" means assistance with activities of daily living that can be performed by persons without professional skills or professional training and includes the coordination or provision of intermittent nursing services and the administration of medications and treatments by a nurse who is licensed pursuant to title 32, chapter 15 or as otherwise provided by law.

40. 44. "Physician" means any person who is licensed pursuant to title 32, chapter 13 or 17.

41. 45. "Recidivism reduction services" means services that are delivered by an adult residential care institution to its residents to encourage lawful behavior and to discourage or prevent residents who are suspected of, charged with or convicted of one or more criminal offenses,

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 or whose mental health and substance use can be reasonably expected to place them at risk for the future threat of prosecution, diversion or incarceration, from engaging in future unlawful behavior.

42. 46. "Recidivism reduction staff" means a person who provides recidivism reduction services.

43. 47. "Residential care institution" means a health care institution other than a hospital or a nursing care institution that provides resident beds or residential units, supervisory care services, personal care services, behavioral health services, directed care services or health-related services for persons who do not need continuous nursing services.

44. 48. "Residential unit" means a private apartment, unless otherwise requested by a resident, that includes a living and sleeping space, kitchen area, private bathroom and storage area.

45. 49. "Respite care services" means services that are provided by a licensed health care institution to persons who are otherwise cared for in foster homes and in private homes to provide an interval of rest or relief of not more than thirty days to operators of foster homes or to family members.

46. 50. "Substantial compliance" means that the nature or number of violations revealed by any type of inspection or investigation of a health care institution does not pose a direct risk to the life, health or safety of patients or residents.

47. 51. "Supervision" means directly overseeing and inspecting the act of accomplishing a function or activity.

48. 52. "Supervisory care services" means general supervision, including daily awareness of resident functioning and continuing needs, the ability to intervene in a crisis and assistance in self-administering prescribed medications.

49.53. "Temporary license" means a license that is issued by the department to operate a class or subclass of a health care institution at a specific location and that is valid until an initial licensing inspection.

50. 54. "Unscheduled medical services" means medically necessary periodic health care services that are unanticipated or cannot reasonably be anticipated and that require medical evaluation or treatment before the next business day.

B. If there are fewer than four Arizona long-term care system participants receiving adult foster care in an adult foster care home, nonparticipating adults may receive other types of services that are authorized by law to be provided in the adult foster care home as long as the number of adults served, including the Arizona long-term care system participants, does not exceed four.

C. Nursing care services may be provided by the adult foster care licensee if the licensee is a nurse who is licensed pursuant to title 32,

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chapter 15 and the services are limited to those allowed pursuant to law. The licensee shall keep a record of nursing services rendered.

Sec. 2. Section 36-421, Arizona Revised Statutes, is amended to read:

36-421. <u>Construction or modification of a health care</u> institution

- A. A license application for a health care institution shall include, on a form provided by the department, a notarized attestation from an architect registered pursuant to title 32, chapter 1 that verifies the architectural plans and specifications meet or exceed standards adopted by the department. These plans and specifications shall meet the minimum standards for licensure within the class or subclass of health care institution for which it is intended. The application shall include the name and address of each owner and lessee of any agricultural land that is regulated pursuant to section 3-365.
- B. Construction or modification of a licensed health care institution shall meet the minimum standards for licensure within the class or subclass of health care institution for which it is intended.
- C. An applicant shall comply with all state statutes and rules and local codes and ordinances required for the health care institution's construction.
- D. A health care institution or its facility shall not be licensed if it is located on property that is less than four hundred feet from agricultural land that is regulated pursuant to section 3-365, except that the owner of the agricultural land may agree to comply with the buffer zone requirements of section 3-365. If the owner agrees in writing to comply with the buffer zone requirements and records the agreement in the office of the county recorder as a restrictive covenant running with the title to the land, the health care institution or facility may be licensed and located within the affected buffer zone. The agreement may include any stipulations regarding the health care institution or facility, including conditions for future expansion of the health care institution or facility and changes in the operational status of the health care institution or facility that will result in a breach of the agreement. This subsection does not apply to the issuance of a license for a health care institution located in the same location for which a health care institution license was previously issued.
- E. Notwithstanding any law to the contrary, a health care institution that was licensed as a level 1 psychiatric acute behavioral health facility-inpatient facility as of January 1, 2012 and that is not certified under title XIX of the social security act shall be licensed as a hospital and is not required to comply with the physical plant standards for a general hospital, rural general hospital or special hospital prescribed by the department.

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- F. An adult behavioral health therapeutic home is not required to comply with the building codes or zoning standards for a health care institution prescribed by the department.
- G. The Arizona pioneers' home is not required to comply with subsection A of this section and the physical plant standards for a health care institution prescribed by the department.
- H. A nursing-supported group home, is A GROUP HOME AND A BEHAVIORAL-SUPPORTED GROUP HOME ARE not required to comply with the zoning standards for a health care institution prescribed by the department.
- I. For the purposes of this section, health care institution does not include a home health agency or a hospice service agency.
- Sec. 3. Section 36-424, Arizona Revised Statutes, is amended to read:
 - 36-424. <u>Inspections: suspension or revocation of license: report to board of examiners of nursing care institution administrators and assisted living facility managers</u>
- A. Except as provided in subsection B of this section, the director shall inspect the premises of the health care institution and investigate the character and other qualifications of the applicant to ascertain whether the applicant and the health care institution are in substantial compliance with the requirements of this chapter and the rules established pursuant to this chapter. The director may prescribe rules regarding department background investigations into an applicant's character and qualifications.
- B. The director may accept proof that a health care institution is an accredited hospital or is an accredited health care institution in lieu of all compliance inspections required by this chapter if the director receives a copy of the institution's accreditation report for the licensure period and the institution is accredited by an independent, nonprofit accrediting organization approved by the secretary of the United States department of health and human services. If the health care institution's accreditation report is not valid for the entire licensure period, the department may conduct a compliance inspection of the health care institution during the time period the department does not have a valid accreditation report for the health care institution. For the purposes of this subsection, each licensed premises of a health care institution must have its own accreditation report. The director may not accept an accreditation report in lieu of a compliance inspection of:
- 1. An intermediate care facility for individuals with intellectual disabilities.
- 2. A BEHAVIORAL-SUPPORTED GROUP HOME, A GROUP HOME OR A NURSING-SUPPORTED GROUP HOME.
- $\frac{2}{3}$. A health care institution if the health care institution has been subject to an enforcement action pursuant to section 36-427 or

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36-431.01 within the year preceding the annual licensing fee anniversary date.

- C. On a determination by the director that there is reasonable cause to believe a health care institution is not adhering to the licensing requirements of this chapter, the director and any duly designated employee or agent of the director, including county health representatives and county or municipal fire inspectors, consistent with standard medical practices, may enter on and into the premises of any health care institution that is licensed or required to be licensed pursuant to this chapter at any reasonable time for the purpose of determining the state of compliance with this chapter, the rules adopted pursuant to this chapter and local fire ordinances or rules. Any application for licensure under this chapter constitutes permission for and complete acquiescence in any entry or inspection of the premises during the pendency of the application and, if licensed, during the term of the license. If an inspection reveals that the health care institution is not adhering to the licensing requirements established pursuant to this chapter, the director may take action authorized by this chapter. Any health care institution, including an accredited hospital, whose license has been suspended or revoked in accordance with this section is subject to inspection on application for relicensure or reinstatement of license.
- D. The director shall immediately report to the board of examiners of nursing care institution administrators and assisted living facility managers information identifying that a nursing care institution administrator's conduct may be grounds for disciplinary action pursuant to section 36-446.07.

Sec. 4. Title 36, chapter 4, article 2, Arizona Revised Statutes, is amended by adding section 36-425.09, to read:

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36-425.09. <u>Behavioral-supported group homes; group homes;</u> <u>licensure; rules; definitions</u>
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- A. BEGINNING JULY 1, 2024, BEHAVIORAL-SUPPORTED GROUP HOMES AND GROUP HOMES THAT ARE OPERATED IN THIS STATE BY A SERVICE PROVIDER AND THAT ARE UNDER CONTRACT WITH THE DEPARTMENT OF ECONOMIC SECURITY SHALL BE LICENSED PURSUANT TO THIS CHAPTER.
- B. THE DIRECTOR SHALL ADOPT ANY RULES NECESSARY REGARDING BEHAVIORAL-SUPPORTED GROUP HOMES THAT INCLUDE AT LEAST THE FOLLOWING:
- 1. ENSURING THAT EACH CLIENT'S BEHAVIORAL TREATMENT PLAN IS DEVELOPED, INTEGRATED, COORDINATED AND MONITORED BY A CLINICAL PROFESSIONAL WHO, AT A MINIMUM:
- (a) HAS AT LEAST TWO YEARS OF EXPERIENCE WORKING DIRECTLY WITH PERSONS WITH DUAL DISORDERS, INCLUDING PSYCHIATRIC DISORDERS AND DEVELOPMENTAL DISABILITIES, WHO ENGAGE IN BEHAVIORS THAT ARE DISRUPTIVE, SOCIALLY INAPPROPRIATE OR HARMFUL OR DANGEROUS TO SELF OR OTHERS, THAT INTERFERE WITH FUNCTIONING AND QUALITY OF LIFE OR THAT MAY CAUSE DESTRUCTION OF PROPERTY.

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- (b) HAS SPECIALIZED TRAINING IN APPLYING BEHAVIORAL INTERVENTIONS, INCLUDING APPLIED BEHAVIOR ANALYSIS AND POSITIVE BEHAVIORAL SUPPORTS.
 - (c) HOLDS AT LEAST A MASTER'S DEGREE IN ANY OF THE FOLLOWING PROFESSIONAL CATEGORIES:
 - (i) OCCUPATIONAL THERAPY.
 - (ii) PHYSICAL THERAPY.
 - (iii) PSYCHOLOGY.
 - (iv) SOCIAL WORK.
 - (v) SPEECH AND LANGUAGE PATHOLOGY.
 - (vi) BEHAVIOR ANALYSIS.
 - (vii) A SIMILAR HUMAN SERVICE DEGREE SUCH AS SOCIOLOGY, SPECIAL EDUCATION OR REHABILITATION COUNSELING.
 - 2. REQUIRING THAT THE DIRECT CARE STAFF IN A BEHAVIORAL-SUPPORTED GROUP HOME, AT A MINIMUM, HAVE BOTH:
 - (a) AT LEAST ONE YEAR OF EXPERIENCE WORKING DIRECTLY WITH PERSONS WITH DUAL DISORDERS, INCLUDING PSYCHIATRIC DISORDERS AND DEVELOPMENTAL DISABILITIES, WHO ENGAGE IN BEHAVIORS THAT ARE DISRUPTIVE, SOCIALLY INAPPROPRIATE OR HARMFUL OR DANGEROUS TO SELF OR OTHERS, THAT INTERFERE WITH FUNCTIONING AND QUALITY OF LIFE OR THAT MAY CAUSE DESTRUCTION OF PROPERTY.
 - (b) SPECIALIZED TRAINING IN APPLIED BEHAVIOR ANALYSIS AND POSITIVE BEHAVIORAL SUPPORTS.
 - 3. ENSURING THAT EACH CLIENT HAS AN INTEGRATED TREATMENT PLAN. EACH CLIENT SHALL HAVE A FUNCTIONAL BEHAVIORAL ASSESSMENT COMPLETED BY A QUALIFIED CLINICAL PROFESSIONAL WHO MEETS THE QUALIFICATIONS PRESCRIBED IN PARAGRAPH 1 OF THIS SUBSECTION, IN CONSULTATION WITH A MULTIDISCIPLINARY TEAM THAT IS COMPOSED OF ALL INDIVIDUALS WORKING WITH THE CLIENT TO INCLUDE, IF APPROPRIATE, PSYCHIATRIC, MEDICAL, NURSING AND NUTRITION PROVIDERS, PHYSICAL, OCCUPATIONAL AND SPEECH THERAPISTS, EDUCATIONAL PERSONNEL, BEHAVIORAL HEALTH PROVIDERS, GROUP HOME DIRECT CARE STAFF, HOME HEALTH PERSONNEL, DAY PROGRAM STAFF, THE CLIENT AND THE CLIENT'S FAMILY OR GUARDIAN AND REPRESENTATIVES FROM THE DEPARTMENT OF ECONOMIC SECURITY, DIVISION OF DEVELOPMENTAL DISABILITIES. THE INTEGRATED TREATMENT PLAN SHALL BE REVIEWED BY THE ENTIRE MULTIDISCIPLINARY TEAM EVERY NINETY DAYS TO DETERMINE IF THE INTERVENTIONS IN THE PLAN ARE EFFECTIVE.
 - C. FOR THE PURPOSES OF THIS SECTION:
 - 1. "BEHAVIORAL TREATMENT PLAN" MEANS A DOCUMENT THAT STIPULATES GOALS TO TREAT, MANAGE, CONTROL OR EXTINGUISH PREDICTABLE AND CONTINUING BEHAVIORS OF THE CLIENT AND THAT IS ONE COMPONENT OF THE CLIENT'S INTEGRATED TREATMENT PLAN.
 - 2. "CLIENT" HAS THE SAME MEANING PRESCRIBED IN SECTION 36-551.
 - 3. "INTEGRATED TREATMENT PLAN" MEANS A DOCUMENT THAT COORDINATES ALL TREATMENT INTERVENTIONS THAT ADDRESS THE CLIENT'S PHYSICAL HEALTH AND BEHAVIORAL HEALTH NEEDS FOR THE PURPOSE OF ENSURING SEAMLESS, COORDINATED AND COMPREHENSIVE TREATMENT.

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 Sec. 5. Section 36-551, Arizona Revised Statutes, is amended to read:

36-551. Definitions

In this chapter, unless the context otherwise requires:

- 1. "Adaptive behavior" means the effectiveness or degree to which a person meets the standards of personal independence and social responsibility expected of the person's age and cultural group.
- 2. "Adult developmental home" means a residential setting in a family home in which the care, physical custody and supervision of the adult client are the responsibility, under a twenty-four-hour care model, of the licensee who, in that capacity, is not an employee of the division or of a service provider and the home provides the following services for a group of siblings or up to three adults with developmental disabilities:
 - (a) Room and board.
 - (b) Habilitation.
 - (c) Appropriate personal care.
 - (d) Appropriate supervision.
 - 3. "Adult household member":
- (a) Means a person who is at least eighteen years of age and who resides in an adult developmental home, child developmental home or other home and community based service setting for at least thirty days or who resides in the household throughout the year for more than a cumulative total of thirty days.
- (b) Does not include a person who is receiving developmental disabilities services from the department.
- 4. "Advisory council" means the developmental disabilities advisory council.
- 5. "Arizona training program facility" means a state-operated institution for clients of the department with developmental disabilities.
- 6. "Attributable to cognitive disability, epilepsy, cerebral palsy or autism" means that there is a causal relationship between the presence of an impairing condition and the developmental disability.
- 7. "Autism" means a condition characterized by severe disorders in communication and behavior resulting in limited ability to communicate, understand, learn and participate in social relationships.
- 8. "BEHAVIORAL-SUPPORTED GROUP HOME" HAS THE SAME MEANING PRESCRIBED IN SECTION 36-401.
- 8. 9. "Case management" means coordinating the assistance needed by persons with developmental disabilities and their families in order to ensure that persons with developmental disabilities attain their maximum potential for independence, productivity and integration into the community.
- 9. 10. "Case manager" means a person who coordinates the implementation of the individual program plan of goals, objectives and appropriate services for persons with developmental disabilities.

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10. 11. "Cerebral palsy" means a permanently disabling condition resulting from damage to the developing brain that may occur before, after or during birth and that results in loss or impairment of control over voluntary muscles.

 $\frac{11.}{12.}$ "Child developmental certified home" means a regular foster home as defined in section 8-501 that is licensed pursuant to section 8-509 and that is certified by the department pursuant to section 36-593.01.

12. 13. "Child developmental home" means a residential setting in a family home in which the care and supervision of the child are the responsibility, under a twenty-four-hour care model, of the licensee who serves as the developmental home provider of the child in the home setting and who, in that capacity, is not an employee of the division or of a service provider and the home provides the following services for a group of siblings or up to three children with developmental disabilities:

- (a) Room and board.
- (b) Habilitation.
- (c) Appropriate personal care.
- (d) Appropriate supervision.

13. 14. "Client" means a person receiving developmental disabilities services from the department.

14. 15. "Cognitive disability" means a condition that involves subaverage general intellectual functioning, that exists concurrently with deficits in adaptive behavior manifested before the age of eighteen and that is sometimes referred to as intellectual disability.

15. 16. "Community residential setting":

- (a) Means a residential setting in which persons with developmental disabilities live and are provided with appropriate supervision by the service provider responsible for operating the residential setting.
- (b) Includes a child developmental home or an adult developmental home operated or contracted by the department or the department's contracted vendor, a group home operated or contracted by the department or a BEHAVIORAL-SUPPORTED GROUP HOME OR nursing-supported group home contracted by the department.

16. 17. "Consent" means voluntary informed consent. Consent is voluntary if not given as the result of coercion or undue influence. Consent is informed if the person giving the consent has been informed of and comprehends the nature, purpose, consequences, risks and benefits of the alternatives to the procedure, and has been informed and comprehends that withholding or withdrawing consent will not prejudice the future provision of care and services to the client. In cases of unusual or hazardous treatment procedures performed pursuant to section 36-561, subsection A, experimental research, organ transplantation and nontherapeutic surgery, consent is informed if, in addition to the

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foregoing, the person giving the consent has been informed of and comprehends the method to be used in the proposed procedure.

 $rac{17.}{18.}$ "Daily habilitation" means habilitation as defined in this section, except that the method of payment is for one unit per residential day.

- 18. "Department" means the department of economic security.
- 19. 20. "Developmental disability" means either a strongly demonstrated potential that a child who is under six years of age has a developmental disability or will develop a developmental disability, as determined by a test performed pursuant to section 36-694 or by other appropriate tests, or a severe, chronic disability that:
- (a) Is attributable to a cognitive disability, cerebral palsy, epilepsy, Down syndrome or autism.
 - (b) Is manifested before the age of eighteen.
 - (c) Is likely to continue indefinitely.
- (d) Results in substantial functional limitations in three or more of the following areas of major life activity:
 - (i) Self-care.
 - (ii) Receptive and expressive language.
 - (iii) Learning.
 - (iv) Mobility.
 - (v) Self-direction.
 - (vi) Capacity for independent living.
 - (vii) Economic self-sufficiency.
- (e) Reflects the need for a combination and sequence of individually planned or coordinated special, interdisciplinary or generic care, treatment or other services that are of lifelong or extended duration.
- $\frac{20.}{21.}$ "Director" means the director of the department of economic security.
- 21. 22. "Division" means the division of developmental disabilities in the department of economic security.
- 22. 23. "Down syndrome" means a genetic disorder caused when abnormal cell division results in extra genetic material from chromosome 21, affecting a person's cognitive and physical abilities and causing developmental issues.
- 23. 24. "Epilepsy" means a neurological condition characterized by abnormal electrical-chemical discharge in the brain. This discharge is manifested in various forms of physical activities called seizures.
 - 24. 25. "Group home":
- (a) Means A HEALTH CARE INSTITUTION THAT IS a community residential setting for not more than six persons with developmental disabilities that is operated by a service provider under contract with the department and that provides room and board and daily habilitation and other assessed

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 medically necessary services and supports to meet the needs of each person.

- (b) Does not include an adult developmental home, a child developmental home, A BEHAVIORAL-SUPPORTED GROUP HOME, a nursing-supported group home or an intermediate care facility for individuals with intellectual disabilities.
- 25. 26. "Guardian" means the person who, under court order, is appointed to fulfill the powers and duties prescribed in section 14-5312. Guardian does not include a guardian pursuant to section 14-5312.01.
- 26. 27. "Habilitation" means the process by which a person is assisted to acquire and maintain those life skills that enable the person to cope more effectively with personal and environmental demands and to raise the level of the person's physical, mental and social efficiency.
- 27. 28. "Indigent" means a person with a developmental disability whose estate or parent is unable to bear the full cost of maintaining or providing services for that person in a developmental disabilities program.
- 28. 29. "Individual program plan" means a written statement of services to be provided to a person with developmental disabilities, including habilitation goals and objectives, that is developed following initial placement evaluation and revised after periodic evaluations.
- 29. 30. "Intermediate care facility for individuals with intellectual disabilities" means a facility that primarily provides health and rehabilitative services to persons with developmental disabilities that are above the service level of room and board or supervisory care services or personal care services as defined in section 36-401.
- 30. 31. "Large group setting" means a setting that in addition to residential care provides support services such as therapy, recreation and transportation to seven or more persons with developmental disabilities who require intensive supervision.
- 31. 32. "Least restrictive alternative" means an available program or facility that fosters independent living, that is the least confining for the client's condition and that provides service and treatment in the least intrusive manner reasonably and humanely appropriate to the individual's needs.
- 32. 33. "Likely to continue indefinitely" means that the developmental disability has a reasonable likelihood of continuing for a protracted period of time or for life.
- 33. 34. "Manifested before the age of eighteen" means that the disability must be apparent and have a substantially limiting effect on a person's functioning before the age of eighteen.
- 34. 35. "Nursing-supported group home" has the same meaning prescribed in section 36-401.
- $\frac{35.}{36.}$ "Physician" means a person who is licensed to practice pursuant to title 32, chapter 13 or 17.

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36. 37. "Placement evaluation" means an interview and evaluation of a person with a developmental disability and a review of the person's prior medical and program histories to determine the appropriate developmental disability programs and services for the person and recommendations for specific program placements for the person.

37. 38. "Psychologist" means a person who is licensed pursuant to title 32, chapter 19.1.

38. "Respite services" means services that provide a short-term or long-term interval of rest or relief to the care provider of a person with a developmental disability.

39. 40. "Responsible person" means the parent or guardian of a minor with a developmental disability, the guardian of an adult with a developmental disability or an adult with a developmental disability who is a client or an applicant for whom no guardian has been appointed.

40. 41. "Service provider" means a person or agency that provides services to clients pursuant to a contract, service agreement or qualified vendor agreement with the division.

41. 42. "State operated service center" means a state owned or leased facility that is operated by the department and that provides temporary residential care and space for child and adult services that include respite care, crisis intervention and diagnostic evaluation.

42. 43. "Subaverage general intellectual functioning" means measured intelligence on standardized psychometric instruments of two or more standard deviations below the mean for the tests used.

43. 44. "Substantial functional limitation" means a limitation so severe that extraordinary assistance from other people, programs, services or mechanical devices is required to assist the person in performing appropriate major life activities.

. "Supervision" means the process by which the activities of an individual with developmental disabilities are directed, influenced or monitored.

Sec. 6. Section 36-557, Arizona Revised Statutes, is amended to read:

36-557. <u>Community developmental disability services; service providers</u>

A. The department may use state and federal monies that are appropriated or otherwise available to it for this purpose to assist in establishing and maintaining local developmental disability services by public or private nonprofit or profit agencies. The monies may be expended as professional fees for service, in contracts for advancement or reimbursement or in another appropriate manner and may be used for any purpose necessary to provide local developmental disability services. The monies may not be used for departmental salaries, care of persons with developmental disabilities by the department or any other purpose within

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the department, but may be used for consultation to the department in the interest of local programs.

- B. A local public or private nonprofit or profit agency providing or intending to provide community developmental disability services and desiring to contract with the department to furnish these services shall submit a program plan and budget to the department on the forms and in the manner required by the department. If the program meets departmental standards and is consistent with the state plan of the department and the individualized service program plan of the client, the department, notwithstanding the provisions of title 41, chapter 23, relating to procurement and including services pursuant to section 36-2943, may contract with that agency for required services on terms the department requires. The contracts shall provide that the provider of services is subject to a continuing program evaluation by the department through progress reports, expenditure reports, program audits or other appropriate evaluation techniques to ensure that the provider of service is in continued compliance with the terms of the contract and the department's community developmental disability service standards and requirements.
- C. Contracts between the department and a school district or districts are subject to approval by the department of education.
- D. This article does not make the department or the state responsible for funding programs beyond the limits of legislative appropriation for the programs. This article does not require a service provider to provide unreimbursed services to the department or its clients.
- E. Contracts to provide community developmental disability services shall require that:
- 1. The contractor is obligated to operate a program or service in strict accordance with the standards adopted for that program or service by the department.
- 2. If state funding is provided for a particular program the contractor, to the extent of positions available that are being purchased by the department, shall provide services to a client with a developmental disability who has been evaluated and placed by the department.
- 3. All contractors must carry liability insurance in amounts approved by the risk management division of the department of administration and file proof of insurance with the risk management division. The director may waive that requirement on a case-by-case basis on a finding that insurance for the program or service is not practicably available at affordable rates and that it is necessary that the program or service be provided by the contractor.
- 4. All clients enrolled in programs have all the same specified rights as they would have if enrolled in a program operated directly by the state.

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- 5. Except for emergency placement pursuant to section 36-560, subsection N, payment shall not be made based on program services provided to a client if a placement evaluation has not been made, and no individual program has been prepared and when, based on that placement evaluation, no recommendation has been made to enroll the client in the particular program service.
- F. This article does not require a contracted agency to provide unreimbursed services to the department or a client of the department.
- G. Contracts to purchase residential care services other than those community residential settings licensed pursuant to this chapter, in addition to other general requirements applicable to purchase of care contractors, shall:
- 1. Provide for mandatory inspection by the department every two years for facilities other than group homes.
- 2. Provide for mandatory monitoring by the department for health, safety, contractual and programmatic standards at least every six months, unless the department has granted deemed status to the service provider or the service provider received a score of at least ninety-five percent on the most recent monitoring visit. If the department has granted deemed status or awarded the service provider with a score of at least ninety-five percent on the most recent monitoring visit, the department shall monitor that service provider once each year. On a determination by the department that there is reasonable cause to believe a service provider is not adhering to the department's programmatic or contractual requirements, the department and any duly designated employee or agent of the department may enter on and into the premises at any reasonable time for the purpose of determining the service provider's state of compliance with the department's programmatic or contractual requirements.
- 3. Provide for mandatory investigation by the department in response to complaints within ten working days, except that in those instances that pose a danger to the client, the department shall conduct the investigation immediately. Health and safety complaints related to group homes shall be referred to the department of health services on receipt. The department of health services shall share all incident reports related to health and safety with the division of developmental disabilities.
- 4. Except for group homes licensed by the department of health services, specify the health and safety and sanitation codes and other codes or standards applicable to the facility or to the operation of the facility by the contractor other than group homes.
- 5. Provide for mandatory periodic reports to be filed by the provider contractor with the department with respect to the operation of the facility.

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- 6. Provide that the facility and the books and records of the facility and of the provider are subject to inspection at any time by employees of the department or designees of the department.
- 7. Provide that parents and guardians of persons with developmental disabilities residing at the facility, members of the developmental disabilities advisory council, and members of other recognized and ongoing advocacy groups for persons with developmental disabilities may inspect the facility at reasonable times.
- H. Contracts for the purchase of residential care services shall require a community residential setting to be licensed pursuant to this chapter other than group homes, BEHAVIORAL-SUPPORTED GROUP HOMES and nursing-supported group homes that are licensed by the department of health services.
- I. Contracts for the purchase of day program or employment services, in addition to the other general requirements applicable to the purchase of client services, must provide for mandatory monitoring by the department for health, safety, contractual, programmatic and quality assurance standards at least once every six months, unless the department has granted deemed status to the service provider. If the department has granted deemed status to the service provider, the department shall monitor that service provider once each year. The department and any duly designated employee or agent of the department may enter on or into the service provider's premises at any reasonable time for the purpose of determining the service provider's state of compliance with the department's programmatic, contractual and quality assurance requirements.
- J. The division shall ensure that all contracted developmental disabilities service providers rendering services pursuant to this chapter are reimbursed in accordance with title XIX of the social security act.
- K. Contracts for client services issued by the department shall include language outlining the provisions for a grievance and appeal procedure. The director shall provide notice to service providers not less than thirty days before the issuance of an amendment to a qualified vendor agreement. The decision of the director regarding qualified vendor agreement amendments may be appealed pursuant to title 41, chapter 6, article 10. The grievance process applicable to these contracts shall comply with title XIX requirements.
- L. As a condition of contracts with any developmental disabilities service provider, the director shall require terms that conform with state and federal laws, title XIX statutes and regulations and quality standards. The director shall further require contract terms that ensure performance by the provider of the provisions of each contract executed pursuant to this article.
- M. The division shall establish a rate structure that ensures an equitable funding basis for private nonprofit or for-profit agencies for services pursuant to subsection B of this section and section 36-2943. In

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each fiscal year, the division shall review and adjust the rate structure based on section 36-2959. A rate book shall be published and updated by the division to announce the rate structure that shall be incorporated by reference in contracts for client services.

- N. The division shall disclose to a service provider in the individual program plan, and in all meetings resulting from a response to a vendor call, any historical and behavioral information necessary for the service provider to be able to anticipate the client's future behaviors and needs, including summary information from the program review committee, unusual incident reports reviewed by the independent oversight committee and behavioral treatment plans. The division shall redact the client's identification from this information.
- O. Service providers are authorized to engage in the following activities in accordance with a client's individual program plan:
- 1. Administer medications, including assisting with the client's self-administration of medications.
 - 2. Log, store, remove and dispose of medications.
 - 3. Maintain medications and protocols for direct care.
- 4. Serve as the client's representative payee if requested by the client or the client's guardian and approved by the payer.
- P. The department may adopt rules establishing procedures for engaging in the activities listed in subsection 0 of this section.
- Q. To protect the health and safety of a client, a service provider must notify the division within twenty-four hours if an emergency situation exists in which the service provider is unable to meet the health or safety needs of the client.
- R. On notification of an emergency situation, the department shall hold an individual program plan meeting within fifteen days after notification to recommend any changes, including whether there is a need for temporary additional staffing to provide appropriate care for a client, and develop a plan within thirty days after notification to resolve the situation.
- S. Service providers shall develop and implement policies and procedures regarding the communication to responsible persons of a serious incident affecting a client who is living in a community residential setting within twenty-four hours after the serious incident occurs.

Sec. 7. Rulemaking exemption; department of health services; department of economic security

For the purposes of this act, the department of health services and the department of economic security are exempt from the rulemaking requirements of title 41, chapters 6 and 6.1, Arizona Revised Statutes, for eighteen months after the effective date of this act.

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Sec. 8. <u>Group home licenses: transfer: anniversary date:</u> delayed repeal

- A. Beginning July 1, 2024, the department of health services shall transfer all group home licenses to the appropriate subclass of health care institution license. For the purposes of licensure, a group home for individuals with developmental disabilities is considered a group home as defined in section 36-401, Arizona Revised Statutes, as amended by this act. A group home's initial licensure date or previous license expiration date that is before July 1, 2024 shall be considered the group home's anniversary date for health care institution licensing purposes.
 - B. This section is repealed from and after June 30, 2026.

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