1	ENGROSSED HOUSE AMENDMENT TO
2	ENGROSSED SENATE BILL NO. 804 By: Pugh of the Senate
3	and
4	Stinson of the House
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7	An Act relating to long-term care; amending 63 O.S. 2021, Section 1-890.3, which relates to rules
8	promulgated under the Continuum of Care and Assisted Living Act; directing promulgation of specified
9	rules; updating statutory language; requiring assisted living centers to establish internal quality
10	assurance committee; specifying committee duties and membership composition; providing for codification;
11	and providing an effective date.
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16	AUTHOR: Add the following House Coauthor: Pittman
17	AMENDMENT NO. 1. Strike the title, enacting clause, and entire bill and insert:
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20	"An Act relating to long-term care; amending 63 O.S. 2021, Section 1-890.3, which relates to rules
21	promulgated under the Continuum of Care and Assisted
22	Living Act; directing promulgation of specified rules; updating statutory language; requiring
23	assisted living centers to establish internal quality assurance committee; specifying committee duties and
24	membership composition; providing for codification; and providing an effective date.

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3	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
4	SECTION 1. AMENDATORY 63 O.S. 2021, Section 1-890.3, is
5	amended to read as follows:
6	Section 1-890.3. A. The State Board Commissioner of Health
7	shall promulgate rules necessary to implement the provisions of the
8	Continuum of Care and Assisted Living Act. Such rules shall
9	include, but shall not be limited to:
10	1. A uniform comprehensive resident screening instrument to
11	measure the needs and capabilities of residents in all settings and
12	to determine appropriate placements of residents;
13	2. Physical plant requirements meeting construction and life
14	safety codes, with provisions accommodating resident privacy and
15	independence in assisted living centers and in assisted living
16	components of continuum of care facilities based on the variable
17	capabilities of residents;
18	3. Staffing levels responsive to the variable needs of
19	residents, with provisions for sharing of staff between components
20	in a continuum of care facility;
21	4. Minimum standards for resident care including, but not
22	limited to, standards pertaining to medical care and administration
23	of medications. Standards pertaining to medication administration
24	

ENGR. H. A. to ENGR. S. B. NO. 804

1 shall, at a minimum, require the assisted living center or continuum
2 of care facility to:

3	a. provide or arrange qualified staff to administer
4	medications based on the needs of residents,
5	b. follow medication administration orders from a
6	qualified health care provider,
7	c. ensure that medications are reviewed monthly by a
8	Registered Nurse or pharmacist and quarterly by a
9	consultant pharmacist,
10	d. maintain medication administration records and
11	document all medication administration in such
12	records, and
13	e. have medication storage and disposal policies;
14	5. Standards for measuring quality outcomes for residents;
15	$\frac{5}{5}$ <u>6.</u> Provisions for individualized services chosen by and
16	designed for each resident;
17	<del>6.</del> <u>7.</u> Provisions to prohibit facility staff from disclosing a
18	resident's financial information to third parties without written
19	consent of the resident or the designated representative of the
20	resident;
21	$\frac{7}{2}$ 8. Procedures for inspections and investigations of licensed
22	entities to ensure compliance with the Continuum of Care and
23	Assisted Living Act and rules promulgated by the Board Commissioner;
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ENGR. H. A. to ENGR. S. B. NO. 804

8. 9. Enumeration of resident rights and responsibilities to be
observed by each facility and its staff. Such resident rights shall
include the freedom of choice regarding any personal attending
physicians and all other providers of medical services and supplies,
providing that the minimum standards are met by the provider
pursuant to the Continuum of Care and Assisted Living Act, without a
financial penalty or fee charged by the assisted living center;

9 9. 10. Provisions for a surety bond or deposit from each applicant in an amount sufficient to guarantee that obligations to residents will be performed, with provisions for reduction or waiver of the surety bond or deposit when the assets of the applicant or its contracts with other persons are sufficient to reasonably ensure the performance of its obligations;

14 10. <u>11.</u> Provisions for the development of a consumer guide or 15 similar resource to be posted on the Internet website of the State 16 Department of Health to assist individuals and families in 17 understanding the services provided by assisted living centers and 18 to compare and select a facility; and

19 <u>11. 12.</u> Provisions for posting results of routine inspections 20 and any complaint investigations of each assisted living center on 21 the Internet website of the Department. Such information shall be 22 regularly updated to include the facility's plan of correction and 23 to indicate when a violation of a licensing regulation was corrected 24 by the facility; and

ENGR. H. A. to ENGR. S. B. NO. 804

1 <u>13. Provisions requiring execution of a plan of care and a</u> 2 <u>resident service contract with the resident or resident's</u> 3 representative.

B. The nursing care service of a continuum of care facility
shall be subject to the requirements, procedures and remedies set
out in the Nursing Home Care Act, including provisions relating to
resident rights.

8 C. The adult day care component of a continuum of care facility 9 shall be subject to requirements and procedures specified under the 10 Adult Day Care Act.

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-890.9 of Title 63, unless there is created a duplication in numbering, reads as follows:

14 A. Each assisted living center shall establish and maintain an 15 internal quality assurance committee that meets at least quarterly. 16 The committee shall:

17 1. Monitor trends and incidents;

18 2. Monitor customer satisfaction measures;

19 3. Document quality assurance efforts and outcomes;

Recommend internal policies on resident care including, but
 not limited to, policies on administration of medications; and

22 5. Perform such other duties or functions as directed by the
23 State Commissioner of Health through rule.

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ENGR. H. A. to ENGR. S. B. NO. 804

1	B. The quality assurance committee shall include at least the
2	following:
3	1. A Registered Nurse or physician if a medical problem is to
4	be monitored or investigated;
5	2. The assisted living center administrator;
6	3. A direct care staff person or a staff person who has
7	responsibility for administration of medications;
8	4. A pharmacist consultant if a medication problem is to be
9	monitored or investigated; and
10	5. A person who has an ownership stake in the assisted living
11	center, or his or her designee.
12	SECTION 3. This act shall become effective November 1, 2025."
13	Passed the House of Representatives the 7th day of May, 2025.
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16	Presiding Officer of the House of Representatives
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18	Passed the Senate the day of, 2025.
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21	Presiding Officer of the Senate
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1	ENGROSSED SENATE BILL NO. 804 By: Pugh of the Senate
2	
3	and
4	Stinson of the House
5	
6	An Act relating to long-term care; amending 63 O.S.
7	2021, Section 1-890.3, which relates to rules promulgated under the Continuum of Care and Assisted
8	Living Act; directing promulgation of specified rules; updating statutory language; requiring
9	assisted living centers to establish internal quality assurance committee; specifying committee duties and
10	membership composition; providing for codification; and providing an effective date.
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13	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
14	SECTION 4. AMENDATORY 63 O.S. 2021, Section 1-890.3, is
15	amended to read as follows:
16	Section 1-890.3. A. The State <del>Board</del> <u>Commissioner</u> of Health
17	shall promulgate rules necessary to implement the provisions of the
18	Continuum of Care and Assisted Living Act. Such rules shall
19	include, but shall not be limited to:
20	1. A uniform comprehensive resident screening instrument to
21	measure the needs and capabilities of residents in all settings and
22	to determine appropriate placements of residents;
23	2. Physical plant requirements meeting construction and life
24	safety codes, with provisions accommodating resident privacy and

1 independence in assisted living centers and in assisted living 2 components of continuum of care facilities based on the variable 3 capabilities of residents;

3. Staffing levels responsive to the variable needs of
residents, with provisions for sharing of staff between components
in a continuum of care facility;

Minimum standards for resident care including, but not
limited to, standards pertaining to medical care and administration
of medications. Standards pertaining to medication administration
shall, at a minimum, require the assisted living center or continuum
of care facility to:

- 12a.provide or arrange qualified staff to administer13medications based on the needs of residents,
- 14 <u>b.</u> <u>follow medication administration orders from a</u>
   15 qualified health care provider,
- 16 <u>c.</u> <u>ensure that medications are reviewed monthly by a</u> 17 <u>Registered Nurse or pharmacist and quarterly by a</u> 18 consultant pharmacist,
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   d.
   maintain medication administration records and

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   document all medication administration in such

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   records, and
- <u>e.</u> <u>have medication storage and disposal policies;</u>
   <u>5.</u> Standards for measuring quality outcomes for residents;
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1 <u>5. 6.</u> Provisions for individualized services chosen by and 2 designed for each resident;

3 6. 7. Provisions to prohibit facility staff from disclosing a
4 resident's financial information to third parties without written
5 consent of the resident or the designated representative of the
6 resident;

7. 8. Procedures for inspections and investigations of licensed 7 entities to ensure compliance with the Continuum of Care and 8 9 Assisted Living Act and rules promulgated by the Board Commissioner; 8. 9. Enumeration of resident rights and responsibilities to be 10 observed by each facility and its staff. Such resident rights shall 11 12 include the freedom of choice regarding any personal attending physicians and all other providers of medical services and supplies 13 without a financial penalty or fee charged by the assisted living 14 15 center;

9. <u>10.</u> Provisions for a surety bond or deposit from each applicant in an amount sufficient to guarantee that obligations to residents will be performed, with provisions for reduction or waiver of the surety bond or deposit when the assets of the applicant or its contracts with other persons are sufficient to reasonably ensure the performance of its obligations;

22 10. <u>11.</u> Provisions for the development of a consumer guide or 23 similar resource to be posted on the Internet website of the State 24 Department of Health to assist individuals and families in

ENGR. S. B. NO. 804

understanding the services provided by assisted living centers and
 to compare and select a facility; and

3 11. 12. Provisions for posting results of routine inspections 4 and any complaint investigations of each assisted living center on 5 the Internet website of the Department. Such information shall be 6 regularly updated to include the facility's plan of correction and 7 to indicate when a violation of a licensing regulation was corrected 8 by the facility; and

9 <u>13. Provisions requiring execution of a plan of care and a</u> 10 <u>resident service contract with the resident or resident's</u> 11 representative.

B. The nursing care service of a continuum of care facility shall be subject to the requirements, procedures and remedies set out in the Nursing Home Care Act, including provisions relating to resident rights.

16 C. The adult day care component of a continuum of care facility 17 shall be subject to requirements and procedures specified under the 18 Adult Day Care Act.

19 SECTION 5. NEW LAW A new section of law to be codified 20 in the Oklahoma Statutes as Section 1-890.9 of Title 63, unless 21 there is created a duplication in numbering, reads as follows:

A. Each assisted living center shall establish and maintain an
internal quality assurance committee that meets at least quarterly.
The committee shall:

ENGR. S. B. NO. 804

1 1. Monitor trends and incidents; Monitor customer satisfaction measures; 2 2. Document quality assurance efforts and outcomes; 3 3. 4. Recommend internal policies on resident care including, but 4 5 not limited to, policies on administration of medications; and 5. Perform such other duties or functions as directed by the 6 State Commissioner of Health through rule. 7 The quality assurance committee shall include at least the 8 Β. 9 following: 1. A Registered Nurse or physician if a medical problem is to 10 be monitored or investigated; 11 The assisted living center administrator; 12 2. 13 3. A direct care staff person or a staff person who has responsibility for administration of medications; 14 4. A pharmacist consultant if a medication problem is to be 15 monitored or investigated; and 16 5. A person who has an ownership stake in the assisted living 17 center, or his or her designee. 18 SECTION 6. This act shall become effective November 1, 2025. 19 20 21 22 23 24

1	Passed the Senate the 26th day of March, 2025.
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4	Presiding Officer of the Senate
5	Passed the House of Representatives the day of,
6	2025.
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8	Presiding Officer of the House
9	of Representatives
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