

AMENDED IN SENATE AUGUST 4, 2008

AMENDED IN SENATE JUNE 19, 2008

AMENDED IN SENATE MAY 19, 2008

AMENDED IN ASSEMBLY JANUARY 9, 2008

AMENDED IN ASSEMBLY APRIL 9, 2007

CALIFORNIA LEGISLATURE—2007—08 REGULAR SESSION

ASSEMBLY BILL

No. 572

Introduced by Assembly Member Berg

February 21, 2007

An act to amend Sections 1570.2, 1570.7, 1570.9, 1572, 1574.5, and 1578.1 of the Health and Safety Code, and to amend Sections 14521, 14526.1, 14528.1, 14550, and 14550.5 of, and to add Section 14553.1 to, the Welfare and Institutions Code, relating to adult day health care.

LEGISLATIVE COUNSEL'S DIGEST

AB 572, as amended, Berg. Adult day health care services.

The California Adult Day Health Care Act provides for the licensure and regulation of adult day health centers, with administrative responsibility for this program shared between the State Department of Public Health, *the State Department of Health Care Services*, and the California Department of Aging pursuant to an interagency agreement. The Adult Day Health Medi-Cal Law establishes adult day health care services as a Medi-Cal benefit for Medi-Cal beneficiaries who meet certain criteria.

~~Existing law requires all adult day health care centers to maintain compliance with licensing and certification requirements, and provides~~

~~that these requirements shall not prohibit program flexibility for the use of alternate concepts, as described, or pilot projects, provided these alternatives or pilot projects are carried out in accordance with certain guidelines, and that the adult day health care center receives written approval from the department.~~

~~The bill would require the department to provide written notice to the adult day health care center, within 30 calendar days of receiving the request to use an alternative or pilot project, informing the center of, and the reasons for, the department's decision. The bill would provide that the request shall be deemed approved if the department fails to respond to the request within 30 calendar days, except as specified. The bill would also authorize the department to rescind any request that is deemed approved after the 30-calendar-day period has lapsed, and would require the department to provide the requester with written notification of its determination of, and the reasons for, the rescission.~~

Existing law requires the interagency agreement to, among other things, specify that the California Department of Aging is responsible for making recommendations to the department regarding licensure, as specified. Existing law also requires the interagency agreement to specify that the department shall delegate to the California Department of Aging the responsibility of performing the financial reviews and the resolution of audit appeals that are necessary to ensure the program integrity.

This bill would eliminate the requirement that the interagency agreement contain the above statements.

~~The bill would also impose new qualification requirements on specified adult day health care center employees, and would require all adult day health care centers to provide for various vacancy policies and procedures, as provided.~~

Existing law provides that if an adult day health care center licensee provides adult day care or adult day support center services, the adult day health care license shall be the only license required to provide these additional services.

This bill would revise this provision to, instead, apply to an adult day health care center licensee that provides adult day program ~~or Alzheimer's day care resource center~~ services.

The bill would also provide that an adult day health care center licensee shall not be required to meet the licensing and certification *staffing* requirements of the adult day health care center program during

extended hours, as defined, if the center operates an adult day program, or Alzheimer's day care resource center, or both defined.

Under existing law, participation in an adult day health care program requires prior authorization by the State Department of Health Care Services. Existing law allows initial and subsequent treatment authorization requests to be granted for up to 6 calendar months.

Existing law requires that treatment authorization requests be initiated by the adult day health care center. Existing law requires the adult day health care center, every 6 months, to initiate a request for an updated history and physical form from the participant's personal health care provider using a standard update form developed by the department.

This bill would, instead, require the adult day care center, not less than every 6 months, to initiate a request for updated medication and medical information. The bill would eliminate the requirement that the department develop a standard update form.

Existing law requires that adult day health care centers offer specified care services to each participant during each day of the participant's attendance at the center, including at least one meal per day, as prescribed.

This bill would specify that the meal must be provided unless the participant declines the meal or medical contraindications exist, *as documented in the participant's health record*, that prohibit the ingestion of the meal.

Existing law also requires that an adult day health care center provide transportation services to and from the homes of participants.

This bill would provide that these services may *only* exceed one hour; ~~unless medically contraindicated~~, *when necessary, provided that no medical contraindications exist, as documented in the participant's health record*, in order to ensure regular and planned attendance at the adult day health care center.

~~The act also requires that adult day health care centers have written procedures for dealing with emergency situations, including specified information.~~

This bill would require that adult day health care centers have both written policies and procedures for dealing with natural disaster and emergency situations.

Vote: majority. Appropriation: no. Fiscal committee: yes.

State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1570.2 of the Health and Safety Code is
2 amended to read:

3 1570.2. The Legislature hereby finds and declares that there
4 exists a pattern of overutilization of long-term institutional care
5 for elderly persons or ~~individuals~~ *adults* with disabilities, and that
6 there is an urgent need to establish and to continue a
7 community-based system of quality adult day health care which
8 will enable elderly persons or ~~individuals~~ *adults* with disabilities
9 to maintain maximum independence. While recognizing that there
10 continues to be a substantial need for facilities providing custodial
11 care, overreliance on this type of care has proven to be a costly
12 panacea in both financial and human terms, often traumatic, and
13 destructive of continuing family relationships and the capacity for
14 independent living.

15 It is, therefore, the intent of the Legislature in enacting this
16 chapter and related provisions to provide for the development of
17 policies and programs that will accomplish the following:

18 (a) Ensure that elderly persons and ~~individuals~~ *adults* with
19 disabilities are not institutionalized inappropriately or prematurely.

20 (b) Provide a viable alternative to institutionalization for those
21 elderly persons and ~~individuals~~ *adults* with disabilities who are
22 capable of living at home with the aid of appropriate health care
23 or rehabilitative and social services.

24 (c) Establish adult day health centers in the community for this
25 purpose, that will be easily accessible to all participants, including
26 economically disadvantaged elderly persons and ~~individuals~~ *adults*
27 with disabilities, and that will provide outpatient health,
28 rehabilitative, and social services necessary to permit the
29 participants to maintain personal independence and lead meaningful
30 lives.

31 (d) Include the services of adult day health centers as a benefit
32 under the Medi-Cal Act, that shall be an initial and integral part
33 in the development of an overall plan for a coordinated,
34 comprehensive continuum of optional long-term care services
35 based upon appropriate need.

36 (e) Establish a rural alternative adult day health care program
37 designed to meet the special needs and requirements of rural areas

1 to enable the implementation of subdivisions (a) through (d),
2 inclusive, for all Californians in need of those services.

3 (f) Ensure that all laws, regulations, and procedures governing
4 adult day health care be enforced equitably regardless of
5 organizational sponsorship and that all program flexibility
6 provisions be administered equitably.

7 SEC. 2. Section 1570.7 of the Health and Safety Code is
8 amended to read:

9 1570.7. As used in this chapter and in any regulations
10 promulgated thereunder:

11 (a) “Adult day health care” means an organized day program
12 of therapeutic, social, and skilled nursing health activities and
13 services provided pursuant to this chapter to elderly persons or
14 ~~individuals~~ *adults* with disabilities with functional impairments,
15 either physical or mental, for the purpose of restoring or
16 maintaining optimal capacity for self-care. Provided on a short-term
17 basis, adult day health care serves as a transition from a health
18 facility or home health program to personal independence. Provided
19 on a long-term basis, it serves as an alternative to
20 institutionalization in a long-term health care facility when 24-hour
21 skilled nursing care is not medically necessary or viewed as
22 desirable by the recipient or his or her family.

23 (b) “Adult day health center” or “adult day health care center”
24 means a licensed and certified facility that provides adult day health
25 care.

26 (c) “Core staff” includes the positions of program director,
27 registered nurse, social worker, activity director, and program aide.

28 (d) “Department” or “state department” means the State
29 Department of Public Health.

30 (e) “Director” means the Director of Public Health.

31 (f) “Elderly” or “older person” means a person 55 years of age
32 or older, but also includes other adults who are chronically ill or
33 impaired and who would benefit from adult day health care.

34 (g) “Extended hours” means those hours of operation prior to
35 or following the adult day health care program hours of service,
36 as designated by the adult day health care center in its plan of
37 operation, during which the adult day health care center may
38 operate an adult day program, or an Alzheimer’s day care resource
39 center, or both.

1 (h) “Hours of service” means the program hours defined and
 2 posted by the adult day health care center for the provision of ~~core~~
 3 *adult day health care* services, pursuant to Section 14550.5 of the
 4 Welfare and Institutions Code, which shall be no less than four
 5 hours, *excluding transportation*.

6 (i) “Individual plan of care” means a plan designed to provide
 7 recipients of adult day health care with appropriate treatment in
 8 accordance with the assessed needs of each individual.

9 (j) “License” means a basic permit to operate an adult day health
 10 care center. With respect to a health facility licensed pursuant to
 11 Chapter 2 (commencing with Section 1250), “license” means a
 12 special permit, as defined by Section 1251.5, empowering the
 13 health facility to provide adult day health care services.

14 (k) “Long-term absence” or “long-term vacancy” means an
 15 absence or vacancy lasting, or likely to last, more than one month.
 16 An adult day health care center’s policies and procedures shall be
 17 specific regarding coverage in the situation for long-term absences
 18 or vacancies.

19 (l) “Maintenance program” means procedures and exercises
 20 that are provided to a participant, pursuant to Section 1580, in
 21 order to generally maintain existing function. These procedures
 22 and exercises are planned by a licensed or certified therapist and
 23 are provided by a person who has been trained by a licensed or
 24 certified therapist and who is directly supervised by a nurse or by
 25 a licensed or certified therapist.

26 (m) “Program director” ~~means~~ *shall be* a person with ~~all both~~
 27 of the following:

28 ~~(1) Subject to paragraph (3), a bachelor’s degree, state license,~~
 29 ~~certification, or registration in one of the following disciplines:~~

- 30 ~~(A) Nursing.~~
- 31 ~~(B) Social work.~~
- 32 ~~(C) Psychology.~~
- 33 ~~(D) Recreation.~~
- 34 ~~(E) Occupational therapy.~~
- 35 ~~(F) Physical therapy.~~
- 36 ~~(G) Speech therapy.~~
- 37 ~~(H) Gerontology.~~
- 38 ~~(I) Health administration.~~
- 39 ~~(J) Rehabilitation counseling.~~
- 40 ~~(K) Public health.~~

1 (1) *One of the following backgrounds:*

2 (A) *A person with a bachelor's degree and a minimum of two*
3 *years of experience in a management, supervisory, or*
4 *administrative position.*

5 (B) *A person with a master's degree and a minimum of one year*
6 *of experience in a management, supervisory, or administrative*
7 *position.*

8 (C) *A registered nurse with a minimum of two years experience*
9 *in a management, supervisory, or administrative position.*

10 (2) *Appropriate skills, knowledge, and abilities related to the*
11 *health, and mental, cognitive, and social needs of the participant*
12 *group being served by the adult day health center.*

13 ~~(3) Two years of related experience in an aging, health, or social~~
14 ~~service program serving the participant population may be~~
15 ~~substituted for the educational requirement.~~

16 (n) *“Restorative therapy” means physical, occupational, and*
17 *speech therapy, and psychiatric and psychological services that*
18 *are planned and provided by a licensed or certified therapist. The*
19 *therapy and services may also be provided by an assistant or aide*
20 *under the appropriate supervision of a licensed therapist, as*
21 *determined by the licensed therapist. The therapy and services are*
22 *provided to restore function, when there is an expectation that the*
23 *condition will improve significantly in a reasonable period of time,*
24 *as determined by the multidisciplinary assessment team.*

25 (o) *“Short-term absence” or “short-term vacancy” means an*
26 *absence or vacancy lasting one month or less, and includes sick*
27 *leave and vacations. An adult day health care center shall ensure*
28 *that appropriate staff is designated to serve in these positions during*
29 *the short-term absence or vacancy and that the center's policies*
30 *and procedures are specific regarding coverage of short-term*
31 *absences or vacancies.*

32 (p) *“Social worker” means a person holding shall be a person*
33 *who meets one of the following:*

34 (1) *The person holds a master's degree in social work from an*
35 *accredited school of social work, or work.*

36 (2) *The person holds a master's degree in psychology or*
37 *gerontology, a person who, gerontology, or counseling from an*
38 *accredited school and has one year of experience providing social*
39 *services in one or more of the fields of aging, health, or long-term*
40 *care services.*

1 (3) *The person* is licensed by the California Board of Behavioral
2 *Sciences, or a person holding sciences.*

3 (4) *The person holds* a bachelor's degree in social work ~~with~~
4 ~~two years experience in a related field, and who is under the~~
5 ~~supervision, at least two hours per month, of a licensed~~
6 ~~psychologist, licensed clinical social worker, or an advanced~~
7 ~~practice mental health registered nurse.~~ *from an accredited school*
8 *with two years of experience providing social services in one or*
9 *more of the fields of aging, health, or long-term care services.*

10 SEC. 3. Section 1570.9 of the Health and Safety Code is
11 amended to read:

12 1570.9. In the event of conflict between the provisions of this
13 chapter and the provisions of Chapter 1 (commencing with Section
14 1200), Chapter 2 (commencing with Section 1250), or Chapter 3
15 (commencing with Section 1500) of this division, this chapter shall
16 be deemed controlling. Except as provided in Section 1507, no
17 facility which provides a specialized program of both medical and
18 nonmedical care for the elderly or ~~individuals~~ *adults* with
19 disabilities on an outpatient basis shall be licensed as a health
20 facility, clinic, or community care facility under this division, but
21 shall be subject to licensure exclusively in accordance with the
22 provisions of this chapter.

23 Review of the need and desirability of proposals for adult day
24 health centers shall be governed by the provisions of this chapter
25 and shall not be subject to review under Part 1.5 (commencing
26 with Section 437) of Division 1.

27 SEC. 4. *Section 1572 of the Health and Safety Code is amended*
28 *to read:*

29 1572. (a) The functions and duties of the State Department of
30 ~~Public Health Services~~ provided for under this chapter shall be
31 performed by the California Department of Aging commencing
32 on the date those functions are transferred from the State
33 Department of ~~Public Health Services~~ to the California Department
34 of Aging. The authority, functions, and responsibility for the
35 administration of the adult day health care program by the
36 California Department of Aging and the State Department of ~~Public~~
37 ~~Health Services~~ shall be defined in an interagency agreement
38 between the two departments *and the State Department of Health*
39 *Care Services* that specifies how the departments will work
40 together.

1 (b) The interagency agreement shall specify that the California
2 Department of Aging is designated by the department as the agency
3 responsible for community long-term care programs. At a
4 minimum, the interagency agreement shall clarify each
5 department's responsibilities on issues involving licensure and
6 certification of adult day health care providers, payment of adult
7 day health care claims, prior authorization of services,
8 promulgation of regulations, and development of adult day health
9 care Medi-Cal rates. ~~In addition, this agreement shall specify that~~
10 ~~the California Department of Aging is responsible for making~~
11 ~~recommendations to the department regarding licensure as specified~~
12 ~~in subdivision (e). The interagency agreement shall specify that~~
13 ~~the department shall delegate to the California Department of~~
14 ~~Aging the responsibility of performing the financial reviews and~~
15 ~~the resolution of audit appeals that are necessary to ensure program~~
16 ~~integrity. The agreement shall specify that the financial reviews~~
17 ~~shall be performed only to the extent that resources are budgeted~~
18 ~~for this purpose.~~ This agreement shall also include provisions
19 whereby the department and the California Department of Aging
20 shall collaborate in the development and implementation of health
21 programs and services for older persons and functionally impaired
22 adults.

23 (c) The Director of the California Department of Aging shall
24 make recommendations regarding licensure to the Licensing and
25 Certification Division in the State Department of *Public Health*
26 *Services*. The recommendation shall be based on all of the
27 following criteria:

28 (1) An evaluation of the ability of the applicant to provide adult
29 day health care in accordance with the requirements of this chapter
30 and regulations adopted hereunder.

31 (2) Other criteria that the director deems necessary to protect
32 public health and safety.

33 ~~SEC. 4.~~

34 *SEC. 5.* Section 1574.5 of the Health and Safety Code is
35 amended to read:

36 1574.5. (a) All adult day health care centers shall maintain
37 compliance with licensing and certification requirements. These
38 requirements shall not prohibit program flexibility for the use of
39 alternate concepts, methods, procedures, techniques, equipment,
40 number and qualifications of personnel, or the conducting of pilot

1 projects, if these alternatives or pilot projects are carried out with
2 provisions for safe and adequate care and with the prior written
3 approval of the state department. This approval shall provide for
4 the terms and conditions under which permission to use an
5 alternative or pilot program is granted. Particular attention shall
6 be given to encourage the development of models appropriate to
7 rural areas. The department ~~shall~~ *may* allow the substitution of
8 work experience for academic requirements for the position of
9 administrator, program director, social worker, or activity
10 administrator or activity coordinator.

11 (b) The applicant or licensee may submit a written request to
12 the department for program flexibility, and shall submit with the
13 request substantiating evidence supporting the request.

14 (c) Any approval by the department granted under this section,
15 or a true copy thereof, shall be posted immediately adjacent to the
16 center's license.

17 ~~(d) (1) The department shall provide written notification to the
18 adult day health care center within 30 calendar days from the day
19 that a request for flexibility, as described in subdivision (a), is
20 received. The notification shall include the department's
21 determination of, and reasons for, approval or disapproval of the
22 request.~~

23 ~~(2) (A) Except for a flexibility request pertaining to core
24 services, as described in Section 14550.5 of the Welfare and
25 Institutions Code, or medical or nursing services, as specified in
26 Section 14550 of the welfare and Institutions Code, the flexibility
27 request shall be deemed to be approved if the department fails to
28 respond within 30 calendar days.~~

29 ~~(B) The department, as it deems necessary, may rescind a
30 flexibility request that is deemed approved in accordance with
31 subparagraph (A) at any time after the 30-calendar-day period has
32 lapsed. Upon making its determination to rescind a flexibility
33 request, the department shall provide written notice to the adult
34 day health care center that submitted the request. The notice shall
35 include the department's determination of, and the reasons for, the
36 rescission.~~

37 *SEC. 6. Section 1578.1 of the Health and Safety Code is*
38 *amended to read:*

39 1578.1. (a) Notwithstanding subdivisions (b) and (c) of Section
40 1570.7 or any other provision of law, if an adult day health care

1 center licensee also provides adult day care or adult day support
 2 center program services, the adult day health care license shall be
 3 the only license required to provide these additional services. Costs
 4 shall be allocated among the programs in accordance with generally
 5 accepted accounting practices.

6 (b) The department, unless otherwise specified by the
 7 interagency agreement entered into pursuant to Section 1572 shall
 8 evaluate the adult day care or adult day support center program
 9 services provided for in subdivision (a) for quality of care and
 10 compliance with program requirements, concurrent with
 11 inspections of the adult day health care facility, using a single
 12 survey process.

13 (c) *An adult day health care center licensee shall not be required*
 14 *to meet the licensing and certification staffing requirements of the*
 15 *adult day health care center program during extended hours, as*
 16 *defined in subdivision (g) of Section 1570.7.*

17 (e)

18 (d) The department and the California Department of Aging
 19 shall jointly develop and adopt regulations pursuant to Section
 20 1580 for the provision of different levels of care under the single
 21 adult day health care license.

22 ~~SEC. 5.~~

23 *SEC. 7.* Section 14521 of the Welfare and Institutions Code is
 24 amended to read:

25 14521. It is the intent of the Legislature in enacting this chapter
 26 to establish adult day health care as a Medi-Cal benefit and allow
 27 persons eligible to receive the benefits under Chapter 7
 28 (commencing with Section 14000) of this part, and who have
 29 medical or psychiatric impairments, to receive adult day health
 30 care services. It is the intent of the Legislature in authorizing this
 31 Medi-Cal benefit to establish and continue a community-based
 32 system of quality adult day health care services that will accomplish
 33 all of the following:

34 (1)

35 (a) Ensure that elderly persons and individuals with disabilities
 36 will not be institutionalized prematurely and inappropriately.

37 (2)

38 (b) Provide appropriate health and social services designed to
 39 maintain elderly persons in their own communities.

40 (3)

1 (c) Establish adult day health care centers in locations easily
2 accessible to persons who are economically disadvantaged.

3 ~~(4)~~

4 (d) Encourage the establishment of rural alternative adult day
5 health care centers that are designed to make adult day health care
6 accessible to elderly persons and individuals with disabilities living
7 in rural areas.

8 ~~SEC. 6. Section 1578.1 of the Health and Safety Code is~~
9 ~~amended to read:~~

10 ~~1578.1. (a) Notwithstanding subdivisions (b) and (c) of~~
11 ~~Section 1570.7 or any other provision of law, if an adult day health~~
12 ~~care center licensee also provides adult day program or Alzheimer's~~
13 ~~day care resource center services, the adult day health care license~~
14 ~~shall be the only license required to provide these additional~~
15 ~~services. Costs shall be allocated among the programs in~~
16 ~~accordance with generally accepted accounting practices.~~

17 ~~(b) The department, unless otherwise specified by the~~
18 ~~interagency agreement entered into pursuant to Section 1572 shall~~
19 ~~evaluate the program services provided for in subdivision (a) for~~
20 ~~quality of care and compliance with program requirements,~~
21 ~~concurrent with inspections of the adult day health care facility,~~
22 ~~using a single survey process.~~

23 ~~(c) An adult day health care center licensee shall not be required~~
24 ~~to meet the licensing and certification requirements of the adult~~
25 ~~day health care center program during extended hours, as defined~~
26 ~~in subdivision (h) of Section 1507.7, during which the center~~
27 ~~operates an adult day program or an Alzheimer's day care resource~~
28 ~~center, or both.~~

29 ~~(d) The department and the California Department of Aging~~
30 ~~shall jointly develop and adopt regulations pursuant to Section~~
31 ~~1580 for the provision of different levels of care under the single~~
32 ~~adult day health care license.~~

33 ~~SEC. 8. Section 14526.1 of the Welfare and Institutions Code~~
34 ~~is amended to read:~~

35 ~~14526.1. (a) Initial and subsequent treatment authorization~~
36 ~~requests may be granted for up to six calendar months.~~

37 ~~(b) Treatment authorization requests shall be initiated by the~~
38 ~~adult day health care center, and shall include all of the following:~~

39 ~~(1) The signature page of the history and physical form that~~
40 ~~shall serve to document the request for adult day health care~~

1 services. A complete history and physical form, including a request
2 for adult day health care services signed by the participant's
3 personal health care provider, shall be maintained in the
4 participant's health record. ~~This~~ *The data elements required in the*
5 history and physical form shall be developed by the department
6 and published in the inpatient/outpatient provider manual. The
7 department shall develop ~~this form~~ *these data elements* jointly
8 with the statewide association representing adult day health care
9 providers.

10 (2) The participant's individual plan of care, pursuant to Section
11 54211 of Title 22 of the California Code of Regulations.

12 (c) ~~Every~~ *Not less than every* six months, the adult day health
13 care center shall initiate a request for ~~an updated history and~~
14 ~~physical form~~ *updated medication and medical information* from
15 the participant's personal health care provider ~~using a standard~~
16 ~~update form that shall be maintained in the participant's health~~
17 ~~record. This update form shall be developed by the department for~~
18 ~~that use and shall be published in the inpatient/outpatient provider~~
19 ~~manual. The department shall develop this form jointly with the~~
20 ~~statewide association representing adult day health care or~~
21 providers.

22 (d) Authorization or reauthorization of an adult day health care
23 treatment authorization request shall be granted only if the
24 participant meets all of the following medical necessity criteria:

25 (1) The participant has one or more chronic or post acute
26 medical, cognitive, or mental health conditions that are ~~identified~~
27 ~~by the participant's personal health care provider as requiring one~~
28 ~~or more of the following~~, *documented in the participant's health*
29 *record and require treatment, monitoring, or intervention* without
30 which the participant's condition will likely deteriorate and require
31 emergency department visits, hospitalization, or other
32 ~~institutionalization~~; *institutionalization*.

33 (A) ~~Monitoring~~.

34 (B) ~~Treatment~~.

35 (C) ~~Intervention~~.

36 (2) ~~The participant has a~~ *participant's* condition or conditions
37 ~~resulting~~ *result* in both of the following:

38 (A) Limitations in the performance of two or more activities of
39 daily living or instrumental activities of daily living, as those terms
40 are defined in Section 14522.3, or one or more from each category.

1 (B) A need for assistance or supervision in performing the
 2 activities identified in subparagraph (A) as related to the condition
 3 or conditions specified in paragraph (1) of subdivision (d). ~~That~~
 4 ~~assistance or supervision shall be in addition to any other nonadult~~
 5 ~~day health care support the participant is currently receiving in his~~
 6 ~~or her place of residence.~~

7 (3) The participant’s network of non-adult day health care center
 8 supports is insufficient to maintain the individual in the community,
 9 demonstrated by at least one of the following:

10 (A) The participant lives alone and has no family or caregivers
 11 available to provide sufficient and necessary care or supervision.

12 (B) The participant resides with one or more related or unrelated
 13 individuals, but they are unwilling or unable to provide sufficient
 14 and necessary care or supervision to the participant.

15 (C) The participant has family or caregivers available, but those
 16 individuals require respite in order to continue providing sufficient
 17 and necessary care or supervision to the participant.

18 (4) A high potential exists for the deterioration of the
 19 participant’s medical, cognitive, or mental health condition or
 20 conditions in a manner likely to result in emergency department
 21 visits, hospitalization, or other institutionalization if adult day
 22 health care services are not provided.

23 (5) The participant’s condition or conditions require
 24 *individualized* adult day health care services specified in
 25 subdivisions (a) to (d), inclusive, of Section 14550.5, on each day
 26 of attendance, that are ~~individualized~~ *needed in addition to any*
 27 *other health care support the participant is currently receiving in*
 28 *his or her place of residence* and designed to maintain the ability
 29 of the participant to remain in the community and avoid emergency
 30 department visits, hospitalizations, or other institutionalization.

31 (e) Reauthorization of an adult day health care treatment
 32 authorization request shall be granted when the criteria specified
 33 in subdivision (d) have been met and the participant’s condition
 34 would likely deteriorate if the adult day health care services were
 35 denied.

36 *SEC. 9. Section 14528.1 of the Welfare and Institutions Code*
 37 *is amended to read:*

38 14528.1. (a) The personal health care provider, as defined in
 39 Section 14552.3, shall have and retain responsibility for the
 40 participant’s *medical* care.

1 (b) If the participant does not have a personal health care
2 provider during the initial assessment process to determine
3 eligibility for adult day health care, the adult day health care center
4 staff physician may conduct the initial history and physical for the
5 participant.

6 (c) The adult day health care center shall make all reasonable
7 efforts to assist the participant in establishing a relationship with
8 a personal health care provider.

9 (d) If the adult day health care center is unable to locate a
10 personal health care provider for the participant, or if the participant
11 refuses to establish a relationship with a personal health care
12 provider, the adult day health care center shall do both of the
13 following:

14 (1) Document the lack of personal health care provider
15 relationship in the participant's health record.

16 (2) Continue to document all efforts taken to assist the
17 participant in establishing a relationship with a personal health
18 care provider.

19 (e) (1) A personal physician for one or more of an adult day
20 health care center's enrolled participants may serve as the adult
21 day health care staff physician.

22 (2) When a personal physician serves as the staff physician, the
23 physician shall have a personal care services arrangement with the
24 adult day health care center that meets the criteria set forth in
25 Section 1395nn(e)(3)(A) of Title 42 of the United States Code.

26 (3) A personal care physician, an adult day health care staff
27 physician, or an immediate family member of the personal care
28 physician or adult day health care staff physician, shall comply
29 with ownership interest restrictions as provided under Section
30 654.2 of the Business and Professions Code.

31 ~~SEC. 7.~~

32 *SEC. 10.* Section 14550 of the Welfare and Institutions Code
33 is amended to read:

34 14550. Adult day health care centers shall offer, and shall
35 provide directly on the premises, at least the following services:

36 (a) Rehabilitation services, including the following:

37 (1) Occupational therapy as an adjunct to treatment designed
38 to restore impaired function of patients with physical or mental
39 limitations.

40 (2) Physical therapy appropriate to meet the needs of the patient.

- 1 (3) Speech therapy for participants with speech or language
2 disorders.
- 3 (b) Medical services supervised by either the participant’s
4 personal physician or a staff physician, or both, which emphasize
5 prevention treatment, rehabilitation, and continuity of care and
6 also provide for maintenance of adequate medical records. To the
7 extent otherwise permitted by law, medical services may be
8 provided by nurse practitioners, as defined in Section 2835 of the
9 Business and Professions Code, operating within the existing scope
10 of practice, or under standardized procedures pursuant to Section
11 2725 of the Business and Professions Code, or by registered nurses
12 practicing under standardized procedures pursuant to Section 2725
13 of the Business and Professions Code.
- 14 (c) Nursing services, including the following:
 - 15 (1) Nursing services rendered by a professional nursing staff,
16 who periodically evaluate the particular nursing needs of each
17 participant and provide the care and treatment that is indicated.
 - 18 (2) Self-care services oriented toward activities of daily living
19 and personal hygiene, such as toileting, bathing, and grooming.
- 20 (d) Nutrition services, including the following:
 - 21 (1) The program shall provide a minimum of one meal per day
22 which is of suitable quality and quantity as to supply at least
23 one-third of the daily nutritional requirement, unless the participant
24 declines the meal or medical contraindications exist, *as documented*
25 *in the participant’s health record*, that prohibit the ingestion of
26 the meal at the adult day health care center. Additionally, special
27 diets and supplemental feedings shall be available if indicated.
 - 28 (2) Dietary counseling and nutrition education for the participant
29 and his or her family shall be a required adjunct of such service.
30 Dietary counseling and nutrition education may be provided by a
31 professional registered nurse, unless the participant is receiving a
32 special diet prescribed by a physician, or a nurse determines that
33 the services of a registered dietician are necessary.
- 34 (e) Psychiatric or psychological services which include
35 consultation and individual assessment by a psychiatrist, clinical
36 psychologist, or a psychiatric social worker, when indicated, and
37 group or individual treatment for persons with diagnosed mental,
38 emotional, or behavioral problems.

1 (f) Social work services to participants and their families to help
2 with personal, family, and adjustment problems that interfere with
3 the effectiveness of treatment.

4 (g) Planned recreational and social activities suited to the needs
5 of the participants and designed to encourage physical exercise,
6 to prevent deterioration, and to stimulate social interaction.

7 (h) Transportation service for participants, when needed, to and
8 from their homes utilizing specially equipped vehicles to
9 accommodate ~~participants with severe physical disabilities that~~
10 ~~limit their mobility~~ *participants' needs*. The transportation service
11 ~~may exceed one hour, unless medically contraindicated, in order~~
12 ~~to ensure regular~~ *only exceed one hour when necessary, provided*
13 *that no medical contraindications exist, as documented in the*
14 *participant's health record, in order to ensure regular* and planned
15 attendance at the adult day health care center.

16 (i) Written policies and procedures for dealing with natural
17 disaster and emergency situations.

18 ~~SEC. 8.~~

19 *SEC. 11.* Section 14550.5 of the Welfare and Institutions Code
20 is amended to read:

21 14550.5. Adult day health care centers shall offer, and provide
22 directly on the premises, in accordance with the participant's
23 individual plan of care, and subject to authorization pursuant to
24 Section 14526, the following core services to each participant
25 during each day of the participant's attendance at the center:

26 (a) One or more of the following professional nursing services:

27 (1) Observation, assessment, and monitoring of the participant's
28 general health status and changes in his or her condition, risk
29 factors, and the participant's specific medical, cognitive, or mental
30 health condition or conditions upon which admission to the adult
31 day health care center was based.

32 (2) Monitoring and assessment of the participant's medication
33 regimen, administration and recording of the participant's
34 prescribed medications, and intervention, as needed, based upon
35 the assessment and the participant's reactions to his or her
36 medications.

37 (3) Oral or written communication with the participant's
38 personal health care provider, other qualified health care or social
39 service provider, or the participant's family or other caregiver,

1 regarding changes in the participant’s condition, signs, or
2 symptoms.

3 (4) Supervision of the provision of personal care services for
4 the participant, and assistance, as needed.

5 (5) Provision of skilled nursing care and intervention, within
6 scope of practice, to participants, as needed, based upon an
7 assessment of the participant, his or her ability to provide self-care
8 while at the adult day health care center, and any health care
9 provider orders.

10 (b) One or both of the following core personal care services or
11 social services:

12 (1) One or both of the following personal care services:

13 (A) Supervision of, or assistance with, activities of daily living
14 or instrumental activities of daily living.

15 (B) Protective group supervision and interventions to assure
16 participant safety and to minimize the risk of injury, accident,
17 inappropriate behavior, or wandering.

18 (2) One or more of the following social services provided by
19 the adult day health care center social worker or social worker
20 assistant:

21 (A) Observation, assessment, and monitoring of the participant’s
22 psychosocial status.

23 (B) Group work to address psychosocial issues.

24 (C) Care coordination.

25 (c) At least one of the following therapeutic activities provided
26 by the adult day health care center activity coordinator or other
27 trained adult day health care center personnel:

28 (1) Group or individual activities to enhance the social, physical,
29 or cognitive functioning of the participant.

30 (2) Facilitated participation in group or individual activities for
31 those participants whose frailty or cognitive functioning level
32 precludes them from active participation in scheduled activities.

33 (d) One meal per day of attendance, in accordance with Section
34 54331 of Title 22 of the California Code of Regulations, unless
35 the participant declines the meal or medical contraindications exist,
36 *as documented in the participant’s health record*, that prohibit the
37 ingestion of the meal.

38 *SEC. 12. Section 14553.1 is added to the Welfare and*
39 *Institutions Code, to read:*

1 14553.1. *The adult day health care center's policies and*
2 *procedures shall include provisions for the following:*

3 (a) *Designating the staff who will serve in the required positions*
4 *during a short-term absence or short-term vacancy, as defined in*
5 *subdivision (o) of Section 1570.7 of the Health and Safety Code,*
6 *of required staff.*

7 (b) *Providing coverage for required staff in the event of a*
8 *long-term absence or long-term vacancy, as defined in subdivision*
9 *(k) of Section 1570.7 of the Health and Safety Code.*

10 (c) *Ensuring continuity of care for participants during staff*
11 *absences.*

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