New Section. 39-968 is amended as follows; Client assessment, referral and evaluation program; definitions; implementation; data entry form; requirements; duties of secretary-of-aging-social and rehabilitation services; long-term care resource information; rules and regulations; voluntary oversight council state independent living council of Kansas; resident assessment instrument; annual report. (a) To achieve a quality of life for Kansans with long-term care needs in an environment of choice that maximizes independent living capabilities and recognizes diversity, this act establishes a program which is intended to encourage a wide array of quality, cost-effective and affordable long-term care choices. This program shall be known as client assessment, referral and evaluation (CARE). The purposes-of CARE are for data collection and individual assessment and referral to community-based services and appropriate placement in long-term care opportunities. facilities.

- (b) As used in this section:
- (1) "Assessment services" means evaluation of an individual's health and functional status to determine the need for long-term care services and to identify appropriate service options which meet these needs utilizing the client assessment, referral and evaluation (CARE) form.
- (2) "Health care data governing board" means the board created under K.S.A. 65-6803 and amendments thereto.
- (3) "Medical care facility" shall have the meaning ascribed to such term under K.S.A. 65-425 and amendments thereto.
- (4) "Nursing facility" shall have the meaning ascribed to such term under K.S.A. 39-923 and amendments thereto.
 - (5) "Secretary" means the secretary of aging, social and rehabilitation services.
- (6) "Resident Assessment Instrument" a comprehensive, accurate, standardized, reproducible assessment of each long term care facility resident's functional capabilities, which identifies necessary long term care needs.
- (7) "State independent living council of Kansas" a nonprofit, independent of any state agency, organization that is governed by a board of which are appointed by the governor representing individuals with a broad range of disabilities and are knowledgeable about center's for independent living, independent living philosophy and independent living services and programs. The council assesses the needs for services for Kansans with disabilities and advocates with decision makers, and develops a state plan.
- (8) "Center for independent living" means a not for profit consumer controlled, cross age, cross disability community based organization that provides services and advocacy to people with disabilities.
- (c) There is hereby established the client assessment, referral and evaluation (CARE) program. The CARE program shall be administered by the secretary of aging social and rehabilitation services and shall be implemented on a phased-in basis in accordance with the provisions of this section.
- (d) Prior to January 1, 1995, the health care data governing board shall adopt by rules and regulations a client assessment, referral and evaluation (CARE) data entry form. The purpose of this form is for data collection and referral services. Such form shall be concise and questions shall be limited to those necessary to carry out the stated purposes. The client assessment, referral and evaluation (CARE) data entry form shall

include, but not be limited to, the preadmission screening and annual resident review (PASARR) questions. Prior to the adoption of the client assessment, referral and evaluation (CARE) data entry form by the health care data governing board, the secretary of aging shall approve the form. The client assessment, referral and evaluation (CARE) data entry form shall be used by all persons providing assessment services.

- (e) (d)- (1) Prior to January 1, 1995, e Each individual prior to admission to a nursing facility as a resident of the facility shall receive assessment and referral services to be provided by the secretary of social and rehabilitation services except that such services shall be provided by a medical care facility to a patient of the medical care facility who is considering becoming a resident of a nursing facility upon discharge from the medical care facility.
- (2) On and after January 1, 1995, each individual prior to admission to a nursing facility as a resident of the facility shall receive assessment services to be provided by the secretary of aging social and rehabilitation services, with the assistance of area agencies on aging, centers for independent living, except (A) such assessment services shall be provided by a medical care facility to a patient of the medical care facility who is considering becoming a resident of a nursing facility upon discharge from the medical care facility and (B) as authorized by rules and regulations adopted by the secretary of aging social and rehabilitation services pursuant to subsection (i).
- (3) The provisions of this subsection (e) shall not apply to any individual exempted from preadmission screening and annual resident review under 42 code of federal regulations 483.106.
- (4) Each individual at least annually shall be provided an assessment utilizing a Resident Assessment Instrument as per 42 CFR 483.20 (h)--(F 278) CIL CARE assessors shall complete Section Q of the RAI, which shall contain addition state required O3. which reads;

a) How long have you indica	ated a preference to return to the community?
Date/Length of Time:	
b) Have you been provided v	with information and resource materials to
obtain assistance with movin	ng back into the community?
Yes No	·
c) Were you provided use of	a phone and/or other resources at the facility
in order to obtain assistance	with moving back into the community?
Yes; What:	No
d) Would you like a referral	today in order to obtain assistance with
moving back into the commu	unity?
Yes No	·
e) Signature of non-facility/(CARE assessor:

- (f) (e) The secretary of aging social and rehabilitation services shall cooperate with the area agencies on aging centers for independent living providing assessment services under this section.
- (g) (f) The secretary of aging social and rehabilitation services shall assure that each area agency on aging center for independent living shall compile comprehensive resource information for use by individuals and agencies related to long-term care resources including all area offices of the department of social and rehabilitation services and local

health departments. This information shall include, but not be limited to, resources available to assist persons to choose alternatives to institutional care.

- (h) (g) Nursing facilities and medical care facilities shall make available information referenced in subsection (g) to each person seeking admission or upon discharge as appropriate. Any person licensed to practice the healing arts as defined in K.S.A. 65-2802 and amendments thereto shall make the same resource information available to any person identified as seeking or needing long-term care. Each senior center and each area agency on aging shall make available such information.
- (i) (h) The secretary shall adopt rules and regulations to govern such matters as the secretary deems necessary for the administration of this act.
- (j) (i)(1) There is hereby established an eleven-member voluntary oversight council which shall meet monthly prior to July 1, 1995, for the purpose of assisting the secretary of aging in restructuring the assessment and referral program in a manner consistent with this act and shall meet quarterly thereafter for the purpose of monitoring and advising the secretary regarding the CARE program. The council shall be advisory only, except that the secretary of aging shall file with the council each six months the secretary's response to council comments or recommendations.
- (2) The secretary of aging shall appoint two representatives of hospitals, two representatives of nursing facilities, two consumers and two representatives of providers of home and community-based services. The secretary of health and environment and the secretary of social and rehabilitation services, or their designee, shall be members of the council in addition to the eight appointed members. The secretary of aging shall serve as chairperson of the council. The appointive members of the council shall serve at the pleasure of their appointing authority. Members of the voluntary oversight council shall not be paid compensation, subsistence allowances, mileage or other expenses as otherwise may be authorized by law for attending meetings, or subcommittee meetings, of the council.
- (i): The state independent living council of Kansas, board shall assume responsibility for advising the secretary on issues concerning the CARE services.
- (k) (j) The secretary of aging—social and rehabilitation services-shall report to the governor and to the legislature on or before December 31, 1995, and each year thereafter on or before such date, an analysis of the information collected under this section. In addition, the secretary of aging—social and rehabilitation services-shall provide data from the CARE data forms to the health care data governing board—statewide independent living council of Kansas. Such data shall be provided in such a manner so as not to identify individuals.

New Section. Establishing a long-term care bill of rights; concerning older and disabled Kansans; relating to appropriate long-term care for the elderly and disabled in Kansas; prescribing long-term care principles for future policy development.

WHEREAS, The demand for long-term care services and home and community-based services in Kansas will continue to grow greatly in coming years; and

WHEREAS, People of all ages with disabilities and older persons in Kansas need access to a comprehensive array of long-term care services that includes institutional and home and community-based services; and

WHEREAS, The cost of providing long-term care in Kansas is increasing rapidly, with a disproportionate share of state funds allocated to providing institutional care; and

WHEREAS, Waiting lists to access needed home and community-based services, where Kansans of all ages want to receive services, continue to grow; and

WHEREAS, The vast majority of disabled persons of all ages and seniors want to live their lives with dignity, freedom and independence and want to be able to choose appropriate levels and kinds of care, when needed: Now, therefore,

- (a) The state of Kansas finds and declares that, in keeping with the traditional concept of the inherent dignity of the individual in our democratic society, the older and disabled individuals are entitled to enjoy their life in health, honor and dignity; that funding for long-term care and home and community-based services is a priority; and that future state policy development shall be guided by the following principles:
 - (1) The state of Kansas shall strive to provide a comprehensive, integrated long-term care system that is responsive to the varied long-term care needs of Kansans of any age or economic status;
 - (2) public policy related to long-term care should stress the individual's choice, autonomy, self-determination and privacy;
 - (3) the elderly and disabled Kansans shall receive the necessary care and services at the least cost and in the least confining setting;
 - (4) public funding for long-term care shall afford Kansans throughout the state the choice of a broad array of home and community-based services;
 - (5) public funding shall improve access to and stress options geared to maximum choice to independence in a community setting;
 - (6) long-term care system eligibility requirements and reimbursements shall create incentives to serve people in the most appropriate care setting of their choice;
 - (7) home and community-based care services shall be expanded and improved to support and complement the services provided by informal caregivers;
 - (8) consumers should have meaningful information about their care choices, as well as the quality of care provided by providers of all kinds, for their decision making; and
 - (9) the system should have a strong advocacy and oversight system to help those in need.
- (b) In carrying out the principles stated in subsection (a), the state of Kansas shall:
 - (1) Designate the departments of Social and Rehabilitation Services and Aging and the State Medicaid agency to coordinate the effective provision of long-term care and home and community-based services to older and disabled Kansans to ensure

that long-term care and home and community-based services are readily available to the greatest number of persons over the widest geographic area; and

- (2) Create a cost-effective and efficient long-term care system for the future and assures:
 - (A) Maximum choice for each individual; and
 - (B) Balanced use of financial resources to insure access to quality care in the home and in the community; and
 - (C) SRS, KDOA and representatives of consumers shall have the responsibility to continuously develop an array of long-term care services geared to the needs and desires of elderly and disabled Kansans.
 - (D) SRS and KDOA shall make a combined report to the Governor and the Legislature as to the progress of implementing the provisions of this resolution.
- (c) This Act shall be known and may be cited as the Kansas Long-Term Care Bill of Rights.