
By: **Delegates Hammen, Klausmeier, Boutin, Nathan-Pulliam, and Guns**
Guns, Stern, Morhaim, Frush, Hubbard, Elliott, Schisler, Sher, Redmer,
Mohorovic, Cane, Oaks, and Stull

Introduced and read first time: February 10, 2000
Assigned to: Environmental Matters

Committee Report: Favorable with amendments
House action: Adopted
Read second time: March 21, 2000

CHAPTER _____

1 AN ACT concerning

2 **Nursing Homes - Quality Assurance**

3 FOR the purpose of requiring a nursing home, ~~as a condition of licensure by a certain~~
4 date, to establish and implement a quality assurance program that meets
5 certain requirements and is approved by the Department of Health and Mental
6 Hygiene; requiring a nursing home to ~~employ a quality assurance nurse~~
7 designate a qualified individual to manage and monitor the quality of care in
8 the nursing home ~~and a medical director~~; requiring the designation of a medical
9 director; requiring a nursing home to establish a Quality Assurance Committee
10 that must review and approve annually a quality assurance plan; defining
11 certain terms; requiring the Secretary of Health and Mental Hygiene, in
12 consultation with certain entities, to define the role of the medical director for a
13 nursing home; prohibiting the Secretary of Health and Mental Hygiene from
14 requiring the disclosure of certain records and reports; authorizing the
15 Department of Health and Mental Hygiene to impose certain sanctions under
16 certain circumstances; requiring each nursing home to display certain notice;
17 requiring the Secretary of Health and Mental Hygiene to adopt regulations that
18 will provide for medical staff accountability; requiring the Secretary of Health
19 and Mental Hygiene to create a technical assistance unit; authorizing the
20 Secretary of Health and Mental Hygiene to partially reimburse a nursing home
21 for installing certain automated health systems; authorizing the Secretary of
22 Health and Mental Hygiene to adopt certain regulations; requiring a nursing
23 home to give notice and establish certain procedures ~~in the event of injury,~~
24 ~~closure, or loss of funds~~ under certain circumstances; and generally relating to
25 quality assurance in nursing homes.

1 BY repealing and reenacting, with amendments,
 2 Article - Health - General
 3 Section 19-1401 through 19-1403 and 19-1405 through 19-1409 to be under
 4 the amended subtitle "Subtitle 14. Nursing Homes"
 5 Annotated Code of Maryland
 6 (1996 Replacement Volume and 1999 Supplement)

7 BY repealing and reenacting, without amendments,
 8 Article - Health - General
 9 Section 19-1404
 10 Annotated Code of Maryland
 11 (1996 Replacement Volume and 1999 Supplement)

12 BY adding to
 13 Article - Health - General
 14 Section 19-1410 through 19-1415
 15 Annotated Code of Maryland
 16 (1996 Replacement Volume and 1999 Supplement)

17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
 18 MARYLAND, That the Laws of Maryland read as follows:

19 **Article - Health - General**

20 Subtitle 14. Nursing Homes [- Civil Money Penalties].

21 19-1401.

22 (a) In this subtitle, the following words have the meanings indicated.

23 (B) "ACTUAL HARM DEFICIENCY" MEANS A CONDITION EXISTING IN A
 24 NURSING HOME OR AN ACTION OR INACTION BY THE NURSING HOME STAFF THAT
 25 HAS CAUSED PHYSICAL OR EMOTIONAL INJURY OR IMPAIRMENT TO A RESIDENT.

26 (C) "CONCURRENT REVIEW" MEANS A DAILY REVIEW OF EACH RESIDENT BY A
 27 LICENSED NURSE THAT EVALUATES INDICATORS AND DATA SUCH AS MEDICATION
 28 ADMINISTRATION, LABORATORY VALUES, DEHYDRATION AND MALNUTRITION,
 29 NUTRITIONAL STATUS AND WEIGHT LOSS OR GAIN, SKIN BREAKDOWN, ACCIDENTS
 30 AND INJURIES, CHANGES IN MENTAL OR PSYCHOLOGICAL STATUS, AND OVERALL
 31 CARE OF THE RESIDENT.

32 [(b)] ~~(c)~~ (d) "Deficiency" [shall mean any failure of a nursing facility to
 33 meet the requirements of this subtitle or any rule or regulation that the Secretary
 34 adopts under this subtitle, and, in the case of a nursing facility that participates in
 35 the Maryland Medicaid Program under Title 15 of this article as a nursing facility,
 36 any failure to meet the requirements of § 1919(b), (c), or (d) of the federal Social
 37 Security Act (42 U.S.C. § 1396R(b), (c), or (d)), that is serious or life threatening]

1 MEANS A CONDITION EXISTING IN A NURSING HOME OR AN ACTION OR INACTION BY
 2 THE NURSING HOME STAFF THAT RESULTS IN POTENTIAL FOR HARM, ACTUAL HARM,
 3 OR A SERIOUS AND IMMEDIATE THREAT TO ONE OR MORE RESIDENTS.

4 [(c) "Life threatening" shall mean a condition existing in a nursing facility that
 5 presents an imminent danger of health or serious mental or physical harm to the
 6 residents of the nursing facility and must be remedied immediately to insure their
 7 health, safety, and welfare.]

8 ~~(C)~~ (E) "Nursing [facility] HOME" means a facility (other than a facility
 9 offering domiciliary or personal care as defined in Subtitle 3 of this title) which offers
 10 nonacute inpatient care to patients suffering from a disease, CHRONIC ILLNESS,
 11 condition, disability of advanced age, or terminal disease requiring maximal nursing
 12 care without continuous hospital services and who require medical services and
 13 nursing services rendered by or under the supervision of a licensed nurse together
 14 with convalescent [services], restorative [services], or rehabilitative services.

15 ~~(E)~~ (F) "ONGOING PATTERN" MEANS THE RECURRENCE OF DEFICIENCIES
 16 AFTER TWO CONSECUTIVE SITE VISITS AS A RESULT OF ANNUAL SURVEYS,
 17 FOLLOW-UP VISITS, UNSCHEDULED VISITS, OR COMPLAINT INVESTIGATIONS.

18 ~~(F)~~ (G) "POTENTIAL FOR HARM DEFICIENCY" MEANS A CONDITION
 19 EXISTING IN A NURSING HOME OR AN ACTION OR INACTION BY THE NURSING HOME
 20 STAFF THAT RESULTS IN MINIMAL DISCOMFORT TO A RESIDENT OR HAS THE
 21 POTENTIAL TO CAUSE ACTUAL HARM TO A RESIDENT.

22 [(e) "Serious" means a condition existing in a nursing facility that does not
 23 constitute a life threatening, health, or fire safety deficiency, but which is a violation
 24 of departmental regulations and is likely to endanger the health, life, or safety of
 25 patients.]

26 ~~(G)~~ (H) "SERIOUS IMMEDIATE THREAT" MEANS A SITUATION IN WHICH
 27 IMMEDIATE CORRECTIVE ACTION IS NECESSARY BECAUSE A NURSING HOME'S
 28 NONCOMPLIANCE WITH ONE OR MORE STATE REGULATIONS HAS CAUSED OR IS
 29 LIKELY TO CAUSE SERIOUS INJURY, HARM, IMPAIRMENT, OR DEATH TO A RESIDENT
 30 RECEIVING CARE IN THE NURSING HOME.

31 ~~(H)~~ (I) "SUSTAINED COMPLIANCE" MEANS A PERIOD OF 30 DAYS
 32 FOLLOWING THE DATE OF NOTICE OF CORRECTIVE ACTION WITH NO DEFICIENCIES.

33 19-1402.

34 (a) A civil money penalty may be imposed when there is clear and convincing
 35 evidence of an ongoing pattern of serious or life threatening deficiencies in a nursing
 36 [facility] HOME.

37 (b) In determining whether a civil money penalty is to be imposed, the
 38 Secretary shall consider, pursuant to guidelines set forth in regulations promulgated
 39 by the Secretary, the following factors:

1 (1) The number, nature, and seriousness of the deficiencies;

2 (2) The extent to which the deficiency or deficiencies are part of an
3 ongoing pattern during the preceding 24 months;

4 (3) The degree of risk to the health, life, or safety of the residents of the
5 nursing [facility] HOME caused by the deficiency or deficiencies;

6 (4) The efforts made by, and the ability of, the nursing [facility] HOME to
7 correct the deficiency or deficiencies; and

8 (5) Such other factors as justice may require.

9 (c) Upon determination by the Department that an ongoing pattern of serious
10 or life threatening deficiencies exists, the Department shall notify the nursing
11 [facility] HOME that:

12 (1) Unless corrective action taken pursuant to § 19-1403 is substantially
13 completed, a civil money penalty will be imposed; or

14 (2) An order imposing a civil money penalty will be issued, pursuant to §
15 19-1404 which shall include a list of all deficiencies and notice that a civil money
16 penalty may be imposed until the time that the cited deficiencies have been rectified.
17 19-1403.

18 (a) If the Secretary issues a notice pursuant to § 19-1402(c)(1), that notice
19 shall provide:

20 (1) The time in which a plan of correction acceptable to the Department
21 is to be submitted;

22 (2) The time in which the identified deficiency or deficiencies must be
23 substantially corrected; and

24 (3) That failure to submit an acceptable plan of correction pursuant to
25 paragraph (1) of this subsection or to substantially correct the identified deficiency or
26 deficiencies pursuant to paragraph (2) of this subsection may result in an order
27 imposing a civil money penalty pursuant to § 19-1404.

28 (b) At the expiration of the time set forth in subsection (a)(2) of this section,
29 the Department shall schedule a reinspection of the nursing [facility] HOME to
30 determine whether the deficiency or deficiencies have been substantially corrected.

31 (c) Following the reinspection the Department may:

32 (1) Extend the time frame in which the deficiency must be corrected; or

33 (2) Propose the imposition of a civil money penalty pursuant to §
34 19-1404.

1 19-1404.

2 (a) If a civil money penalty is proposed, the Secretary shall issue an order
3 which shall state the basis on which the order is made, the deficiency or deficiencies
4 on which the order is based, the amount of civil money penalties to be imposed, and
5 the manner in which the amount of civil money penalties imposed was calculated.

6 (b) An order issued pursuant to subsection (a) of this section shall be void
7 unless issued within 60 days of the later of:

8 (1) The inspection at which the deficiency is identified;

9 (2) The date identified in § 19-1403(a)(2); or

10 (3) The date identified in § 19-1403(c)(1).

11 19-1405.

12 (a) A civil money penalty imposed under this subtitle:

13 (1) May not exceed a total of \$5,000 per day in which serious or life
14 threatening deficiencies exist; and

15 (2) May not exceed \$50,000 in total.

16 (b) In setting the amount of a civil money penalty under this section, the
17 Secretary shall consider, pursuant to guidelines set forth in regulations promulgated
18 by the Secretary, the following factors:

19 (1) The number, nature, and seriousness of the deficiencies;

20 (2) The degree of risk to the health, life, or safety of the residents of the
21 nursing [facility] HOME caused by the deficiency or deficiencies;

22 (3) The efforts made by the nursing [facility] HOME to correct the
23 deficiency or deficiencies;

24 (4) Whether the amount of the proposed civil money penalty will
25 jeopardize the financial ability of the nursing [facility] HOME to continue operating
26 as a nursing [facility] HOME; and

27 (5) Such other factors as justice may require.

28 19-1406.

29 (a) The nursing [facility] HOME shall provide written notice to the
30 Department when the deficiency or deficiencies identified in the notice issued
31 pursuant to § 19-1404 are substantially corrected.

32 (b) The calculation of the amount of the civil money penalty will stop as of the
33 date the notice in subsection (a) of this section is received by the Department.

1 (c) The Department shall schedule and conduct a reinspection of the nursing
2 [facility] HOME within 24 hours of its receipt of the notice pursuant to subsection (a)
3 of this section.

4 (d) If, following the reinspection, the Department determines that the
5 deficiency or deficiencies have not been substantially corrected, the [facility's]
6 HOME'S notice under subsection (a) of this section shall be invalid and the civil money
7 penalty imposed under § 19-1405(a) shall remain in effect.

8 19-1407.

9 (a) The nursing [facility] HOME shall have the right to appeal from the order
10 within 30 days from the receipt of the order.

11 (b) The appeal shall be heard by the Hearings Office of the Department, which
12 shall render the final agency decision for purposes of judicial review.

13 (c) Imposition of the civil money penalty shall be stayed until the final
14 decision is issued pursuant to subsection (m) of this section.

15 (d) A hearing on the appeal shall be held within 10 working days of the
16 request for hearing.

17 (e) The parties to the hearing shall be the aggrieved nursing [facility] HOME
18 and the Secretary.

19 (f) The parties are entitled to be represented by counsel.

20 (g) The Hearings Office may permit or modify a timely request by the nursing
21 [facility] HOME for prehearing discovery.

22 (h) The Hearings Office, upon its own motion or upon motion of either party,
23 may subpoena any person or evidence, administer oaths, and take depositions and
24 other testimony.

25 (i) The Hearings Office shall inquire fully into all of the matters at issue and
26 shall receive into evidence the testimony of witnesses and any documents which are
27 relevant and material to such matters.

28 (j) The parties shall have the right to present evidence and testimony and to
29 cross-examine that presented by the opposing party.

30 (k) The purpose of the hearing is to consider and render a decision on the
31 following matters:

32 (1) The existence of a deficiency or deficiencies; and

33 (2) The amount of the civil money penalty.

1 (l) (1) The Secretary has the burden of proof with respect to the basis for
2 imposition of the civil money penalty under § 19-1402 and the amount of the civil
3 money penalty under § 19-1405.

4 (2) The Secretary must meet his burden of proof by clear and convincing
5 evidence.

6 (m) A decision shall be rendered by the Hearings Office within 7 days of the
7 hearing. The decision shall be the final agency decision of the Department, subject to
8 judicial appeal.

9 19-1408.

10 (a) A nursing [facility] HOME subject to a civil money penalty shall have the
11 right to appeal a decision of the Hearings Office upholding the finding of a deficiency
12 or deficiencies or the imposition of a civil money penalty.

13 (b) Such appeal shall be filed within 30 days of the action to be appealed.

14 (c) The appeal under subsection (b) of this section shall be taken directly to
15 the circuit court of the jurisdiction in which the nursing [facility] HOME is located.

16 19-1409.

17 (a) All civil money penalties imposed under this subtitle shall be placed in an
18 interest bearing account during any judicial appeal under § 19-1408.

19 (b) If the civil money penalty is reversed as a result of an appeal filed by the
20 nursing [facility] HOME, the amount of the civil money penalty, with interest, shall
21 be returned to the nursing [facility] HOME within 14 days of the reversal.

22 (c) If the civil money penalty is not appealed or if it is upheld following an
23 appeal, the amount of the penalty imposed, together with any accrued interest shall
24 be placed in a fund to be established by the Secretary and shall be applied exclusively
25 for the protection of the health or property of residents of nursing [facilities] HOMES
26 that have been found to have deficiencies, including payment for the costs of
27 relocation of residents to other [facilities] HOMES, maintenance or operation of a
28 nursing [facility] HOME pending correction of deficiencies or closure, and
29 reimbursement of residents for personal funds lost.

30 19-1410.

31 (A) ~~IN ORDER TO QUALIFY FOR A LICENSE OR RENEWAL LICENSE BY~~
32 ~~JANUARY 1, 2001, A NURSING HOME SHALL DEVELOP AND IMPLEMENT A QUALITY~~
33 ~~ASSURANCE PROGRAM.~~

34 (B) (1) ~~BY SEPTEMBER 1, 2000, EACH NURSING HOME SHALL EMPLOY AT~~
35 ~~LEAST ONE FULL TIME QUALITY ASSURANCE NURSE WHOSE SOLE RESPONSIBILITY~~
36 ~~IS THE MANAGEMENT AND MONITORING OF QUALITY OF CARE IN THE NURSING~~

1 ~~HOME~~ DESIGNATE A QUALIFIED INDIVIDUAL TO COORDINATE AND MANAGE THE
2 NURSING HOME'S QUALITY ASSURANCE PROGRAM.

3 (2) EACH NURSING HOME SHALL ESTABLISH A QUALITY ASSURANCE
4 COMMITTEE AND SHALL INCLUDE AT LEAST THE FOLLOWING MEMBERS:

5 (I) THE NURSING HOME ADMINISTRATOR;

6 (II) THE DIRECTOR OF NURSING;

7 (III) THE MEDICAL DIRECTOR;

8 ~~(IV) THE OMBUDSMAN;~~

9 ~~(V) THE PRESIDENT OF THE RESIDENT'S COUNCIL; AND~~

10 ~~(VI) A FAMILY MEMBER.~~

11 (IV) A SOCIAL WORKER;

12 (V) A LICENSED DIETICIAN; AND

13 (VI) A GERIATRIC NURSING ASSISTANT.

14 (3) THE QUALITY ASSURANCE COMMITTEE SHALL:

15 (I) MEET AT LEAST MONTHLY;

16 (II) MAINTAIN RECORDS OF ALL QUALITY ASSURANCE ACTIVITIES;

17 ~~AND~~

18 (III) KEEP RECORDS OF COMMITTEE MEETINGS THAT SHALL BE
19 AVAILABLE TO THE DEPARTMENT DURING ANY ON-SITE VISIT; AND

20 (IV) PREPARE MONTHLY REPORTS THAT SHALL BE PRESENTED TO
21 THE OMBUDSMAN, THE RESIDENT'S COUNCIL, AND THE FAMILY COUNCIL.

22 (4) THE QUALITY ASSURANCE COMMITTEE FOR A NURSING HOME
23 SHALL REVIEW AND APPROVE ANNUALLY THE QUALITY ASSURANCE PLAN FOR THE
24 NURSING HOME.

25 (5) EACH NURSING HOME SHALL ESTABLISH A WRITTEN QUALITY
26 ASSURANCE PLAN THAT:

27 (I) INCLUDES PROCEDURES FOR CONCURRENT REVIEW FOR ALL
28 RESIDENTS;

29 (II) ~~INCLUDES CRITERIA FOR REVIEW, INCLUDING BUT NOT~~
30 ~~LIMITED TO, NURSING CARE, MEDICATION ADMINISTRATION, UNPLANNED WEIGHT~~
31 ~~LOSS, DECUBITUS ULCERS, FALLS, ACCIDENTS, UNEXPLAINED HOSPITAL VISITS OR~~
32 ~~ADMISSIONS OF RESIDENTS, AND INCIDENT REPORTS~~ PROVIDES CRITERIA THAT

1 ROUTINELY MONITORS NURSING CARE INCLUDING MEDICATION ADMINISTRATION,
2 PREVENTION OF DECUBITUS ULCERS, DEHYDRATION AND MALNUTRITION,
3 NUTRITIONAL STATUS AND WEIGHT LOSS OR GAIN, ACCIDENTS AND INJURIES,
4 UNEXPECTED DEATHS, CHANGES IN MENTAL OR PSYCHOLOGICAL STATUS, AND ANY
5 OTHER DATA NECESSARY TO MONITOR QUALITY OF CARE;

6 (III) INCLUDES METHODS TO IDENTIFY AND CORRECT PROBLEMS;
7 AND

8 (IV) IS READILY AVAILABLE TO NURSING HOME RESIDENTS AND
9 THEIR FAMILIES, GUARDIANS, OR SURROGATE DECISION MAKERS.

10 (6) THE QUALITY ASSURANCE PLAN SHALL BE SUBMITTED TO THE
11 DEPARTMENT BY JANUARY 1, 2001, AND AT THE TIME OF LICENSE RENEWAL.

12 (7) THE NURSING HOME ADMINISTRATOR SHALL TAKE APPROPRIATE
13 REMEDIAL ACTIONS BASED ON THE RECOMMENDATIONS OF THE NURSING HOME'S
14 QUALITY ASSURANCE COMMITTEE.

15 (8) THE SECRETARY MAY NOT REQUIRE THE QUALITY ASSURANCE
16 COMMITTEE TO DISCLOSE THE RECORDS AND THE REPORTS PREPARED BY THE
17 COMMITTEE EXCEPT AS NECESSARY TO ASSURE COMPLIANCE WITH THE
18 REQUIREMENTS OF THIS SECTION.

19 (9) IF THE DEPARTMENT DETERMINES THAT A NURSING HOME IS NOT
20 IMPLEMENTING ITS QUALITY ASSURANCE PROGRAM EFFECTIVELY AND THAT
21 QUALITY ASSURANCE ACTIVITIES ARE INADEQUATE, THE DEPARTMENT MAY IMPOSE
22 APPROPRIATE SANCTIONS ON THE NURSING HOME TO IMPROVE QUALITY
23 ASSURANCE INCLUDING MANDATED EMPLOYMENT OF SPECIFIED QUALITY
24 ASSURANCE PERSONNEL.

25 (C) (1) EACH NURSING HOME SHALL DISPLAY ON EACH FLOOR OF THE
26 NURSING HOME A NOTICE THAT EXPLAINS THE CURRENT RATIO OF LICENSED
27 PERSONNEL TO RESIDENTS AND UNLICENSED PERSONNEL TO RESIDENTS.

28 (2) THE NOTICE SHALL BE:

29 (I) POSTED IN A LOCATION THAT IS VISIBLE AND ACCESSIBLE TO
30 RESIDENTS AND THEIR FAMILY OR GUARDIANS AND ANY POTENTIAL CONSUMERS;
31 AND

32 (II) ON A FORM PROVIDED BY THE DEPARTMENT.

33 19-1411.

34 (A) (1) ~~EMPLOY A~~ DESIGNATE A PHYSICIAN TO
35 SERVE AS MEDICAL DIRECTOR.

36 (2) THE MEDICAL DIRECTOR IS RESPONSIBLE FOR MONITORING
37 PHYSICIAN SERVICES AT THE NURSING HOME.

1 (3) THE MEDICAL DIRECTOR SHALL REPORT MONTHLY TO THE QUALITY
2 ASSURANCE COMMITTEE ON THE QUALITY OF MEDICAL CARE AT THE NURSING
3 HOME.

4 (B) THE SECRETARY, IN CONSULTATION WITH THE MEDICAL AND
5 CHIRURGICAL FACULTY, AND REPRESENTATIVES OF THE NURSING HOME INDUSTRY,
6 SHALL:

7 (1) ESTABLISH QUALIFICATIONS FOR THE MEDICAL DIRECTOR OF A
8 NURSING HOME OR ANYONE ACTING FOR THE MEDICAL DIRECTOR IN HIS OR HER
9 ABSENCE;

10 (2) DEFINE THE DUTIES OF THE MEDICAL DIRECTOR; AND

11 (3) ~~ADOPT REGULATIONS FOR THE MEDICAL STAFF OF NURSING HOMES~~
12 ATTENDING PHYSICIANS WHO TREAT RESIDENTS OF NURSING HOMES THAT WILL
13 PROVIDE FOR STAFF PHYSICIAN ACCOUNTABILITY.

14 19-1412.

15 (A) THE SECRETARY SHALL:

16 (1) ESTABLISH A TECHNICAL ASSISTANCE UNIT WITHIN THE
17 DEPARTMENT TO SUPPORT COMPLIANCE EFFORTS AND BEST PRACTICES; AND

18 (2) ESTABLISH A LIST OF APPROVED MEDICAL AUTOMATED SYSTEMS.

19 (B) THE SECRETARY MAY:

20 (1) PARTIALLY REIMBURSE A NURSING HOME FOR INSTALLATION OF
21 AUTOMATED SYSTEMS THAT HAVE BEEN APPROVED BY THE DEPARTMENT;

22 (2) DEVELOP GUIDELINES FOR REIMBURSEMENT; AND

23 (3) ADOPT REGULATIONS FOR THE IMPLEMENTATION OF THIS
24 SUBTITLE.

25 19-1413.

26 EACH NURSING HOME SHALL:

27 (1) ESTABLISH A PROCEDURE TO PROVIDE FOR THE SMOOTH AND
28 ORDERLY TRANSFER OF RESIDENTS IN THE EVENT OF CLOSURE;

29 ~~(2) PROVIDE A 30 DAY NOTICE TO RESIDENTS AND THEIR FAMILIES OR~~
30 ~~GUARDIANS WHEN THE NURSING HOME LEARNS OF THE PROBABLE CLOSURE OF~~
31 ~~THE HOME OR TERMINATION OF PUBLIC FUNDING TO THE HOME; AND~~

32 ~~(3) NOTIFY THE RESIDENT'S REPRESENTATIVE OR GUARDIAN OF ANY~~
33 ~~INJURY.~~

1 (2) PROVIDE A 30-DAY NOTICE TO RESIDENTS AND THEIR FAMILIES OR
2 GUARDIANS PRIOR TO CLOSURE OF THE NURSING HOME UNLESS DEPARTMENT
3 WAIVES THE NOTICE REQUIREMENT;

4 (3) PROVIDE A 15-DAY NOTICE TO RESIDENTS AND THEIR FAMILIES OR
5 GUARDIANS PRIOR TO TERMINATION OF PUBLIC FUNDING UNLESS THE
6 DEPARTMENT WAIVES THE NOTICE REQUIREMENT; AND

7 (4) IMMEDIATELY NOTIFY, IF KNOWN, A RESIDENT'S FAMILY OR
8 GUARDIAN OF:

9 (I) AN ACCIDENT INVOLVING THE RESIDENT WHICH RESULTS IN
10 INJURY AND HAS THE POTENTIAL FOR REQUIRING PHYSICIAN INTERVENTION;

11 (II) A SIGNIFICANT CHANGE IN THE RESIDENT'S PHYSICAL,
12 MENTAL, OR PSYCHOSOCIAL STATUS; OR

13 (III) A NEED TO ALTER THE RESIDENT'S TREATMENT
14 SIGNIFICANTLY.

15 19-1414.

16 THE DEPARTMENT MAY REVIEW FINANCIAL AND PERFORMANCE RECORDS OF
17 A POTENTIAL LICENSEE AN APPLICANT FOR A LICENSE OR MANAGEMENT FIRM
18 UNDER CONTRACT WITH AN APPLICANT FOR A LICENSE TO DETERMINE ABILITY OF
19 THE APPLICANT OR MANAGEMENT FIRM TO COMPLY WITH APPROPRIATE LAWS AND
20 REGULATIONS.

21 19-1415.

22 THIS SUBTITLE MAY BE CITED AS THE "MARYLAND NURSING HOME QUALITY
23 ASSURANCE ACT".

24 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
25 October 1, 2000.