2025 -- H 6109

LC002251

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2025

AN ACT

RELATING TO HEALTH AND SAFETY -- CONTINUING CARE PROVIDER REGISTRATION AND DISCLOSURE

Introduced By: Representatives Solomon, and Casey

Date Introduced: March 19, 2025

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Sections 23-59-1, 23-59-2, 23-59-3, 23-59-4, 23-59-6, 23-59-7, 23-59-11 and

23-59-12 of the General Laws in Chapter 23-59 entitled "Continuing Care Provider Registration

and Disclosure" are hereby amended to read as follows:

23-59-1. Definitions.

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As used in this chapter:

6 (1) "Continuing care" means providing or committing to provide board, lodging, and

nursing services to an individual, other than an individual related by blood or marriage: (i) pursuant

8 to an agreement effective for the life of the individual or for a period in excess of one year, including

9 mutually terminable contracts, and (ii) in consideration of the payment of an entrance fee and/or

10 periodic charges. A contract shall be deemed to be one offering nursing services, irrespective of

whether such services are provided under the contract, if nursing services are offered to the resident

entering the contract either at the facility in question or continuing care at home program or

pursuant to arrangement specifically offered to residents of the facility or participants of a

14 continuing care at home program.

15 (2) "Continuing care at home program" means a membership-based program that provides

16 participants with a comprehensive package of support services designed to enable older adults to

17 live independently in their homes while ensuring access to higher levels of care if needed. Such

services may include, but are not limited to, home care, adult day services, assisted living, and

1	skilled nursing facility care. Participants in a continuing care at home program shall be required to
2	pay an entrance fee and subsequent monthly fees for the provision of services.
3	(2)(3) "Department" means the Rhode Island state department of health.
4	(3)(4) "Entrance fee" means an initial or deferred transfer to a provider of a sum of money
5	or other property made or promised to be made in advance or at some future time as full or partial
6	consideration for acceptance of a specified individual as a resident in a facility or participant in a
7	continuing care at home program. A fee which is less than the sum of the regular periodic charges
8	for one year of residency shall not be considered to be an entrance fee.
9	(4)(5) "Facility" means the place or places in which a person undertakes to provide
10	continuing care to an individual.
11	(5)(6) "Provider" means any person, corporation, partnership, or other entity that provides
12	or offers to provide continuing care to any individual in an existing or proposed facility in this state
13	or in the individual's home through a continuing care at home program. Two or more related
14	individuals, corporations, partnerships, or other entities may be treated as a single provider if they
15	cooperate in offering services to the residents of a facility or to participants of continuing care at
16	home programs.
17	(6)(7) "Resident" means an individual entitled to receive continuing care in a facility or at
18	home through a continuing care at home program.
19	(7)(8) "Solicit" means all actions of a provider or the provider's agent in seeking to have
20	individuals enter into continuing care agreement by any means such as, but not limited to, personal,
21	telephone, or mail communication or any other communication directed to and received by an
22	individual, and any advertisements in any media distributed or communicated by any means to
23	individuals.
24	23-59-2. Registration.
25	(a) Except as provided in § 23-59-13, no provider shall engage in the business of providing
26	or offering to provide continuing care at a facility or at a participant's home through a continuing
27	care at home program in this state unless the provider has registered with the department with
28	respect to the facility or continuing care at home program.
29	(b) A registration statement shall be filed with the department by the provider on forms
30	prescribed by the department and shall include:
31	(1) All information required by the department pursuant to its enforcement of this chapter;
32	and
33	(2) The initial disclosure statement required by § 23-59-3.
34	(c) Registration shall be deemed complete if the department has not notified the provider

1	of incompleteness within finiety (90) days of the fifting.
2	23-59-3. Disclosure statement.
3	(a) The disclosure statement of each facility or continuing care at home program shall
4	contain all of the following information unless the information is contained in the continuing care
5	contract and a copy of that contract is attached to and made a part of the initial disclosure statement:
6	(1) The name and business address of the provider and a statement of whether the provider
7	is a partnership, foundation, association, corporation, or other type of business or legal entity.
8	(2) Full information regarding ownership of the property on which the facility or continuing
9	care at home program is or will be operated and of the buildings in which it is or will be operated.
0	(3) The names and business addresses of the officers, directors, trustees, managing or
1	general partners, and any person having a ten percent (10%) or greater equity or beneficial interest
2	in the provider, and a description of that person's interest in or occupation with the provider.
.3	(4) For the provider, any person named in response to subsection (a)(3), or the proposed
4	management, if the facility or continuing care at home program will be managed on a day-to-day
.5	basis by a person other than an individual directly employed by the provider:
6	(i) A description of any business experience in the operation or management of similar
.7	facilities or continuing care at home program.
.8	(ii) The name and address of any professional service, firm, association, foundation, trust,
9	partnership, or corporation or any other business or legal entity in which the person has, or which
20	has in the person, a ten percent (10%) or greater interest and which it is presently intended will or
21	may provide goods, leases, or services to the provider of a value of five hundred dollars (\$500) or
22	more, within any year, including:
23	(A) A description of the goods, leases, or services and the probable or anticipated cost
24	thereof to the provider;
25	(B) The process by which the contract was awarded;
26	(C) Any additional offers that were received; and
27	(D) Any additional information requested by the department detailing how and why a
28	contract was awarded.
29	(iii) A description of any matter in which the person:
80	(A) Has been convicted of a felony or pleaded nolo contendere to a felony charge, or been
81	held liable or enjoined in a civil action by final judgment if the felony or civil action involved fraud
32	embezzlement, fraudulent conversion, or misappropriation of property; or
3	(B) Is subject to an injunctive order of a court of record, or within the past five (5) years
34	had any state or federal license or permit suspended or revoked as a result of an action brought by

- a governmental agency or department, arising out of or relating to business activity or health care,
- 2 including without limitation actions affecting a license to operate a foster care facility, nursing
- 3 home, retirement home, home for the aged, or facility or continuing care at home program
- 4 registered under this chapter or similar laws in another state; or
 - (C) Is currently the subject of any state or federal prosecution or administrative investigation involving allegations of fraud, embezzlement, fraudulent conversion, or misappropriation of property.
 - (5) A statement as to:

- 9 (i) Whether the provider is or ever has been affiliated with a religious, charitable, or other 10 nonprofit organization, the nature of any such affiliation, and the extent to which the affiliate 11 organization is or will be responsible for the financial and contractual obligations of the provider; 12 and
 - (ii) Any provision of the federal Internal Revenue Code, 26 U.S.C. § 1 et seq., under which the provider is exempt from the payment of income tax.
 - (6) The location and description of the real property of the facility, existing or proposed, and to the extent proposed, the estimated completion date or dates of improvements, whether or not construction has begun and the contingencies under which construction may be deferred.
 - (7) The services provided or proposed to be provided under continuing care contracts, including the extent to which medical care is furnished or is available pursuant to any arrangement. The disclosure statement shall clearly state which services are included in basic continuing care contracts and which services are made available by the provider at extra charge.
 - (8) A description of all fees required of residents, including any entrance fees and periodic charges. The description shall include: (i) a description of all proposed uses of any funds or property required to be transferred to the provider or any other person prior to the resident's occupancy of the facility and of any entrance fee, (ii) whether provisions exist for the escrowing and return of any such funds, property, or entrance fee and the manner and any conditions of return, and (iii) the manner by which the provider may adjust periodic charges or other recurring fees and any limitations on such adjustments. If the facility is already in operation, or if the provider operates one or more similar facilities within this state, there shall be included tables showing the frequency and average dollar amount of each increase in periodic rates at each facility for the previous five (5) years or such shorter period that the facility has been operated by the provider.
 - (9) Any provisions that have been made or will be made to provide reserve funding or security to enable the provider to fully perform its obligations under continuing care contracts, including the establishment of escrow accounts, trusts, or reserve funds, together with the manner

1 in which such funds will be invested and the names and experience of persons who will make the 2 investment decisions. 3 (10) Certified financial statements of the provider, including: (i) a balance sheet as of the 4 end of the two (2) most recent fiscal years and (ii) income statements of the provider for the two 5 (2) most recent fiscal years or such shorter period that the provider has been in existence. 6 (11) A pro forma income statement for the current fiscal year. 7 (12) If the operation of the facility or continuing care at home program has not yet 8 commenced, a statement of the anticipated source and application of the funds used or to be used 9 in the purchase or construction of the facility or continuing care at home program, including: 10 (i) An estimate of the cost of purchasing or constructing and equipping the facility 11 including such related costs as financing expense, legal expense, land costs, occupancy 12 development costs, and all other similar costs that the provider expects to incur or become obligated 13 for prior to the commencement of operations. 14 (ii) A description of any mortgage loan or other long-term financing intended to be used 15 for any purpose in the financing of the facility or continuing care at home program and of the 16 anticipated terms and costs of the financing, including without limitation all payments of the 17 proceeds of the financing to the provider, management, or any related person. (iii) An estimate of the percentage of entrance fees that will be used or pledged for the 18 19 construction or purchase of the facility or continuing care at home program, as security for long-20 term financing or for any other use in connection with the commencement of operation of the 21 facility or continuing care at home program. 22 (iv) An estimate of the total entrance fees to be received from or on behalf of residents at 23 or prior to commencement of operation of the facility or continuing care at home program. 24 (v) An estimate of the funds, if any, which are anticipated to be necessary to fund start-up 25 losses and provide reserve funds to assure full performance of the obligations of the provider under 26 continuing care contracts. 27 (vi) A projection of estimated income from fees and charges other than entrance fees, 28 showing individual rates presently anticipated to be charged and including a description of the 29 assumptions used for calculating the estimated occupancy rate of the facility and the effect on the 30 income of the facility of any government subsidies for health care services to be provided pursuant 31 to the continuing care contracts. 32 (vii) A projection of estimated operating expenses of the facility or continuing care at home 33 program, including (i) a description of the assumptions used in calculating any expenses and

separate allowances for the replacement of equipment and furnishings and anticipated major

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1	structural repairs of additions and (ii) an estimate of the percentage of occupancy required for
2	continued operation of the facility or continuing care at home program.
3	(viii) Identification of any assets pledged as collateral for any purpose.
4	(ix) An estimate of annual payments of principal and interest required by the mortgage loan
5	or other long-term financing.
6	(13) A description of the provider's criteria for admission of new residents.
7	(14) A description of the provider's policies regarding access to the facility or continuing
8	care at home program and its services for nonresidents.
9	(15) Any other material information concerning the facility or continuing care at home
10	program or the provider that may be required by the department or included by the provider.
11	(b) The disclosure statement shall state on its cover that the filing of the disclosure
12	statement with the department does not constitute approval, recommendation, or endorsement of
13	the facility by the department.
14	(c) A copy of the standard form or forms for continuing care contracts used by the provider
15	shall be attached as an exhibit to each disclosure statement.
16	(d) If the department determines that the disclosure statement does not comply with the
17	provisions of this chapter, it shall have the right to take action pursuant to § 23-59-16.
18	23-59-4. Availability of disclosure statement to prospective residents.
19	At least three (3) days prior to the execution of a continuing care contract or the transfer of
20	any money or other property to a provider by or on behalf of a prospective resident, whichever first
21	occurs, the provider shall deliver to the person with whom the contract is to be entered into a copy
22	of a disclosure statement with respect to the facility or continuing care at home program in question
23	meeting all requirements of this chapter as of the date of its delivery.
24	23-59-6. Resident's contract.
25	(a) In addition to other provisions considered proper to effect the purpose of any continuing
26	care contract, each contract executed on or after June 18, 1987 shall:
27	(1) Provide for the continuing care of only one resident, or for two (2) or more persons
28	occupying space designed for multiple occupancy, under appropriate rules established by the
29	provider.
30	(2) Show the value of all property transferred, including donations, subscriptions, fees, and
31	any other amounts paid or payable by, or on behalf of, the resident or residents.
32	(3) Specify all services which are to be provided by the provider to each resident including,
33	in detail, all items that each resident will receive and whether the items will be provided for a
34	designated time period or for life and the estimated current monthly cost to the provider for

1	providing the care. Such items may include, but are not limited to, food, shelter, nursing care, drugs,
2	burial, and incidentals.
3	(4) Describe the physical and mental health and financial conditions, if any, upon which
4	the provider may require the resident to relinquish his or her space in the designated facility or
5	continuing care at home program.
6	(5) Describe the physical and mental health and financial conditions required for a person
7	to continue as a resident of the facility or continuing care at home program.
8	(6) Describe the circumstances under which the resident will be permitted to remain in the
9	facility or continuing care at home program in the event of financial difficulties of the resident.
10	(7) State:
11	(i) The current fees that would be charged if the resident marries while at the designated
12	facility or continuing care at home program;
13	(ii) The terms concerning the entry of a spouse to the facility or continuing care at home
14	program; and
15	(iii) The consequences if the spouse does not meet the requirements for entry.
16	(8) Provide that the provider shall not cancel any continuing care contract with any resident
17	without good cause. Good cause shall be limited to:
18	(i) Proof that the resident is a danger to himself, herself, or others;
19	(ii) Nonpayment by the resident of a monthly or periodic fee;
20	(iii) Repeated conduct by the resident that interferes with other residents' quiet enjoyment
21	of the facility; or
22	(iv) Persistent refusal to comply with reasonable written rules and regulations of the
23	facility. If a provider seeks to cancel a contract and terminate a resident's occupancy within a
24	facility or participation in a continuing care at home program, the provider shall give the resident
25	written notice of, and a reasonable opportunity to cure within a reasonable period, whatever conduct
26	is alleged to warrant the cancellation of the agreement. Nothing herein shall operate to relieve the
27	provider from duties under chapter 18 of title 34 when seeking to terminate a resident's occupancy.
28	(9) Provide in clear and understandable language, in print no smaller than the largest type
29	used in the body of the contract, the terms governing the refund of any portion of the entrance fee
30	and the terms under which entrance fees can be used by the provider.
31	(10) State the terms under which a contract is cancelled by the death of the resident. The
32	contract may contain a provision to the effect that, upon the death of the resident, the money paid
33	for the continuing care of the deceased resident shall be considered earned and become the property
34	of the provider. When more than one individual shares a residential unit, the contract shall set forth

the effect that the death of one resident will have on the agreement between the other resident or residents and the provider.

- (11) Provide for at least thirty (30) days' advance notice to the resident, before any change in fees, charges, or the scope of care or services may be effective, except for changes required by state or federal assistance programs.
- (12) Provide that charges for care paid in one lump sum shall not be increased or changed during the duration of the agreed upon care, except for changes required by state or federal assistance programs.
- (b) A resident shall have the right to rescind a continuing care contract, without penalty or forfeiture, within seven (7) days after making an initial deposit or executing the contract. A resident shall not be required to move into the facility designated in the contract before the expiration of that seven (7) day period.
- (c) If a resident dies before occupying the facility <u>or beginning the continuing care at home</u> <u>program</u>, or is precluded through illness, injury, or incapacity from becoming a resident under the terms of the continuing care contract, the contract is automatically rescinded, and the resident or his or her legal representative shall receive a full refund of all money paid to the provider, except those costs specifically incurred by the provider at the request of the resident and set forth in writing in a separate addendum, signed by both parties to the contract.
- (d) No standard continuing care contract form shall be used in this state until it has been submitted to the department. If the department determines that the contract does not comply with the provisions of this chapter, it shall have the right to take action pursuant to § 23-59-16 to prevent its use. The failure of the department to object to or disapprove of any contract shall not be evidence that the contract does or does not comply with the provisions of this chapter. However, individualized amendments to any standard form need not be filed with the department.

23-59-7. Sale or transfer of ownership or change in management.

- (a) No provider and no person or entity owning a provider shall sell or transfer, directly or indirectly, more than fifty percent (50%) of the ownership of the provider or of a continuing care facility or continuing care at home program without giving the department written notice of the intended sale or transfer at least thirty (30) days prior to the consummation of the sale or transfer. A series of sales or transfers to one person or entity, or one or more entities controlled by one person or entity, consummated within a six (6) month period that constitutes, in the aggregate, a sale or transfer of more than fifty percent (50%) of the ownership of a provider or of a continuing care facility or continuing care at home program shall be subject to the foregoing notice provisions.
 - (b) A provider or continuing care facility or continuing care at home program that shall

change its chief executive officer, or its management firm if managed under a contract with a third party, shall promptly notify the department and the residents of each change of chief executive officer or management firm.

23-59-11. Right of residents to organize — Meetings.

- (a) Residents shall have the right of self-organization. No retaliatory conduct shall be permitted against any resident for membership or participation in a residents' organization. The provider shall be required to provide to the organization a copy of all submissions to the department.
- (b) The board of directors, its designated representative, or other such governing body of a continuing care facility or continuing care at home program shall hold meetings at least quarterly with the residents or representatives elected by the residents of the continuing care facility or continuing care at home program for the purpose of free discussion of issues relating to the facility or continuing care at home program. Such issues may include income, expenditures, and financial matters as they apply to the facility or continuing care at home program and proposed changes in policies, programs, facilities, and services. Residents shall be entitled to seven (7) days' notice of each meeting.

23-59-12. Civil liability.

- (a) A person contracting with a provider for continuing care may terminate the continuing care contract, and the provider shall be liable to the person contracting for continuing care for repayment of all fees paid to the provider, facility, or person violating this chapter, together with interest thereon at the legal rate for judgments, court costs, and reasonable attorney's fees, less the reasonable value of care and lodging provided to the resident prior to the termination of the contract and for damages if after June 18, 1987 the provider or a person acting on the provider's behalf, with or without actual knowledge of the violation, entered into a contract with the person:
- (1) For continuing care at a facility <u>or continuing care at home program</u> which has not registered under this chapter;
- (2) Without having first provided to the person a disclosure statement meeting the requirements of this chapter and not omitting a material fact required to be stated therein or necessary in order to make the statements made therein not misleading, in light of the circumstances under which they are made; or
- 30 (3) If the contract does not meet the requirements of § 23-59-6.
- 31 (b) A person who willfully or recklessly aids or abets a provider in any act prohibited by 32 this section shall be liable as set out in subsection (a) of this section.
 - (c) The department shall have no jurisdiction to adjudicate controversies concerning continuing care contracts. A breach of contract shall not be deemed a violation of this chapter.

- 1 Termination of a contract pursuant to subsection (a) shall not preclude the resident's seeking any
- 2 other remedies available under any law.
- 3 SECTION 2. This act shall take effect upon passage.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO HEALTH AND SAFETY -- CONTINUING CARE PROVIDER REGISTRATION AND DISCLOSURE

This act would allow continuing care providers to provide care in an individual's home,

subject to the same disclosures and requirements as continuing care provided in a facility.

This act would take effect upon passage.

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