

Periodic Rules Review and Expiration of Existing Rules
 Subchapter 13F – Licensing of Adult Care Homes of Seven or More Beds
 Public Comments and Agency Response to Comments

Rule Citation & Title	Date	Commenter	Comment	Agency Response
1) 10A NCAC 13F .0201 – Definitions	5/23/17	Erin Glendening, DHSR erin.glendening@dhhs.nc.gov	This is a test of the system.	<p>This rule was determined as Necessary Without Substantive Public Interest.</p> <p>The comment is about the test of the electronic comment reporting system.</p> <p>The Agency will not change the determination of this rule.</p>
2) 10A NCAC 13F .0207 – Change of Licensee	5/30/17		When NC DHSR grants the change in licensee, the local Department of Social Services shall be notified immediately, receiving the copy of the new license, with the effective date of the license. This has not been happening and has caused local issues in determining who has care and responsibility of the residents in the transition process. Notification needs to happen prior to 12 noon so if consultation is needed with NC DHSR, contact can be made.	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
3) 10A NCAC 13F .0214 – Suspension of Admissions	5/26/17	Belinda Wilson, bwilson777@msn.com	This rule should not be a reference rule but actually promulgated from Sub chapter 13F	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Agreed that rule should not be cross-referenced but stand alone with 13F codification.</p> <p>The agency will not change the determination of this rule.</p>
4) 10A NCAC 13F .0302 – Design and Construction	5/26/17		If a facility is an existing and operating nursing home but wishes to be licensed for the first time as an adult care home, must the facility be brought up to current building codes?	<p>This rule was determined as Necessary With Substantive Public Interest.</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
				<p>This comment is related to the application of current and past editions of the North Carolina State Building Codes (NCSBC), which is not within the jurisdiction of the Agency. The authority for the NCSBC is the local code enforcement official or the North Carolina Department of Insurance. Therefore, this rule cannot be changed to specify, which version of the NCSBC is applicable when a nursing home is converted to an adult care home. However, there are other technical changes not related to this comment that must be made to this rule.</p> <p>The Agency will not change the determination of this rule.</p>
5) 10A NCAC 13F .0305 – Physical Environment	6/19/17	5a) Chris Parker, Vienna Village, Inc. chris@viennavillage.com	10A NCAC 13F .0305 PHYSICAL ENVIRONMENT Current: '(m)(3)Outdoor walkways and drives shall be illuminated by no less than five foot candles of light at ground level.' Proposed change: '(m)(3)Emergency egress including direct walkways to parking areas shall be illuminated by no less than five foot candles of light at ground level.'	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>This comment is related to requiring a foot-candle illumination level only at specific outdoor walkways and driveways used to access the public way (a safe location outside of the building for building occupants). This comment will be evaluated and taken into consideration when this rule is revised.</p> <p>The Agency will not change the determination of this rule.</p>
	7/11/17	5b) Frances Messer, NC Assisted Living Association frances@ncala.org	Nonskid surfacing or strips shall be installed in showers and bath areas	This rule was determined as Necessary With Substantive Public Interest.

Rule Citation & Title	Date	Commenter	Comment	Agency Response
			<p>Recommend adding phrase 'according to manufacturer's recommendations'</p> <p>Rationale behind request for change: A new community was built in Durham County and had nonskid surfaces from the manufacturer and the Durham County DSS adult home specialist required the new community add sticky strips on top of the surface despite coating applied at manufacturer.</p>	<p>This comment will be evaluated and taken into consideration when this rule is revised.</p> <p>The Agency will not change the determination of this rule.</p>
	7/11/17	5c) Frances Messer, NCALA frances@ncala.org	<p>- Proposal 1 - In homes with at least one resident who is determined by a physician or primary care provider to be at risk for wandering, the home shall have in place a plan for alarming doors to alert staff and protect the individual from elopement. The plan shall incorporate all exits accessible to the individual. Any control panels in use for door alarms should be in areas accessible only by staff and should be of sufficient volume to be heard by staff.</p> <p>Proposal 2 - In homes with at least one resident who is determined by a physician or is otherwise known to disoriented to 'place' or determined to be a 'wanderer', each exit door accessible by residents shall be equipped with a sounding or alerting device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. A paging device with audible alerts to the staff pager is considered an acceptable device providing the location of the door activation is clearly noted. Frances asked Lauren to rewrite with alternative new technologies such as Wonder Guard, etc....Chris brought up what is the definition of elopement? All locked doors infringe on Resident Rights for those residents who do not need to be in a locked unit. Needs to be forward-thinking to include future widespread technologies such as GPS.</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>The first comment is not acceptable to the Agency because it allows a home to house a resident who wanders in the home before exit doors are alarmed, which may result in the resident leaving the home undetected by staff. Under existing rule 10A NCAC 14F .0301(7), a home may request an alternate means of temporarily keeping residents safe from elopement until exit doors are equipped with alarms. However, the second comment relates to the use of new technologies used nationally to safeguard wanderers in social and healthcare facilities. This comment will be evaluated and taken into consideration when this rule is revised.</p> <p>The Agency will not change the determination of this rule.</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
6) 10A NCAC 13F .0309 – Plan for Evacuation	5/26/17	6a) Catherine Goldman, Wake County Human Services Catherine.Goldman@wakegov.com	<p>10A NCAC 13F .0309 PLAN FOR EVACUATION (d) A written disaster plan, which has the written approval of or has been documented as submitted to the local emergency management agency and the local agency designated to coordinate special needs sheltering during disasters, shall be prepared and updated at least annually and shall be maintained in the facility.</p> <p>To Whom It May Concern, In having the privilege to work with Wake County Emergency Management, I have learned that they are the safety net for our licensed adult and family care homes without a specific and approved plan when having to implement disaster preparedness during extreme weather, and emergency events. Simply submitting a written disaster plan is largely the practice of these facilities, so the effectiveness of the plans all to often not addressed and approved. Therefore, I would like to see this rule rewritten to omit 'or has been documented as submitted to', so the effectiveness of these essential plans is required to be addressed. The written approval can be based on Standards accepted by Emergency Management, and monitored for compliance by the County Departments of Social Services.</p> <p>Respectfully submitted, Catherine Goldman, Wake County Human Services Adult Services Supervisor</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
	5/26/17	6b)	I would like to see the requirement of a generator or contract with a company to provide a generator in time of power outage of more than 10 hours	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>This comment will be evaluated and taken into consideration when this rule is revised.</p> <p>The Agency will not change the determination of this rule.</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
7) 10A NCAC 13F .0311 – Other Requirements	6/19/17	7a) Chris Parker, Vienna Village chris@viennavillage.com	<p>10A NCAC 13F .0311 OTHER REQUIREMENTS Current: '(h) In facilities licensed for 7-12 residents, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed.'</p> <p>Proposed: "(h) In facilities licensed for 7-12 residents, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed. The call system activator can either be hard wired (stationary) or wireless (mobile).'</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>This comment is related to allowing the use of a wireless resident call system in addition to a hardwired call system. This comment will be evaluated and taken into consideration when this rule is revised.</p> <p>The Agency will not change the determination of this rule.</p>
	6/19/17	7b) Chris Parker, Vienna Village chris@viennavillage.com	<p>10A NCAC 13F .0311 OTHER REQUIREMENTS Current: '(i) In newly licensed facilities without live-in staff, an electrically operated call system shall be provided connecting each resident bedroom to a staff station. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed.'</p> <p>Proposed change: '(i) In newly licensed facilities without live-in staff, an electrically operated call system shall be provided connecting each resident bedroom to a central monitoring station. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>This comment is related to allowing the use of a wireless resident call system in addition to a hardwired call system. This comment will be evaluated and taken into consideration when this rule is revised.</p> <p>The Agency will not change the determination of this rule.</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
			resident lying on the bed. The call system activator can either be hard wired (stationary) or wireless (mobile).'	
	7/12/17	7c) Frances Messer, NCALE frances@ncala.org	There has been confusion in the past where DHSR Construction has mandated that the wireless call pendants do not meet this directive. They say that the system needs to be physically attached in the wall. This is outdated with the technology. Rule needs to be updated to include wireless systems.	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>This comment is related to allowing the use of a wireless resident call system in addition to a hardwired call system. This comment will be evaluated and taken into consideration when this rule is revised.</p> <p>The Agency will not change the determination of this rule.</p>
8) 10A NCAC 13F .0601 – Management of Facilities with a Capacity or Census of Seven to Thirty Residents	6/15/17	Roberta Schmidt-Beebe, Wake County Human Services Roberta.schmidt-beebe@wakegov.com	<p>I have seen repeated needs, deficiencies and violations related to minimum staffing required for personal care & supervision, since facilities and FCHs are admitting higher level acuity residents to the assisted living level (e.g. wheel chair-bound, dementias/Alzheimer’s, residents taking medications that affect balance, etc.). ACHs and FCHs only staff to the minimum, per the current Rule. The Rule fit past care circumstances, but our times and needs of residents have changed. I find that increasing the staffing (Rule) will afford residents greater protection and care.</p> <p>Thank you for considering,</p> <p>Roberta Schmidt-Beebe Wake County Human Services Adult & Community Services Senior Practitioner/Adult Home Specialist Tel: 919.212-7054 Fax: 919.212-9210</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
9) 10A NCAC 13F .0602 – Management of Facilities with a Capacity or	6/15/17	Roberta Schmidt-Beebe, Wake County Human Services Roberta.schmidt-beebe@wakegov.com	I have seen repeated needs, deficiencies and violations related to minimum staffing required for personal care & supervision, since facilities and FCHs are admitting higher level acuity residents to the assisted living level (e.g. wheel chair-bound, dementias/Alzheimer’s, residents	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
Census of 31 to 80 Residents			<p>taking medications that affect balance, etc.). ACHs and FCHs only staff to the minimum, per the current Rule. The Rule fit past care circumstances, but our times and needs of residents have changed. I find that increasing the staffing (Rule) will afford residents greater protection and care.</p> <p>Thank you for considering,</p> <p>Roberta Schmidt-Beebe Wake County Human Services Adult & Community Services Senior Practitioner/Adult Home Specialist Tel: 919.212-7054 Fax: 919.212-9210</p>	<p>following further study.</p> <p>The agency will not change the determination of this rule.</p>
10) 10A NCAC 13F .0603 – Management of Facilities with a Capacity or Census of 81 or More Residents	6/15/17	Roberta Schmidt-Beebe, Wake County Human Services Roberta.schmidt-beebe@wakegov.com	<p>I have seen repeated needs, deficiencies and violations related to minimum staffing required for personal care & supervision, since facilities and FCHs are admitting higher level acuity residents to the assisted living level (e.g. wheel chair-bound, dementias/Alzheimer’s, residents taking medications that affect balance, etc.). ACHs and FCHs only staff to the minimum, per the current Rule. The Rule fit past care circumstances, but our times and needs of residents have changed. I find that increasing the staffing (Rule) will afford residents greater protection and care.</p> <p>Thank you for considering,</p> <p>Roberta Schmidt-Beebe Wake County Human Services Adult & Community Services Senior Practitioner/Adult Home Specialist Tel: 919.212-7054 Fax: 919.212-9210</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
11) 10A NCAC 13F .0604 – Personal Care and Other Staffing	5/26/17	11a) Belinda Wilson , bwilson777@msn.com	(d) (1) & (2) These seem contradictory. Do you need one person on duty or two people?	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>The rule is not contradictory because, as stated, it requires that there always be one staff person on duty within the facility and one within 500 ft. of the home who is not</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
				<p>specified by rule as “on duty.” The rule will be reviewed for clarity, however, and possible revision.</p> <p>The agency will not change the determination of this rule.</p>
	5/26/17	<p>11b) Bridgett Stubbs, Rowan County DSS bridgett.stubbs@rowancountync.gov</p>	<p>Specifically pertaining to : .0604 (e)(1)(D) The facility shall have additional aide duty to meet the needs of the facility's heavy care residents equal to the amount of time reimbursed by Medicaid. As used in this Rule, the term, 'heavy care resident', means an individual residing in an adult care home who is defined as 'heavy care' by Medicaid and for which the facility is receiving enhanced Medicaid payments.</p> <p>This rule is obsolete but many residents require more direct care and supervision than can be provided by the minimum staffing requirement. All residents, Medicaid, private, VA or other payment, would benefit from a mandated staffing pattern based on resident assessments. There needs to be a formula to assure facilities have enough personal care staff available to provide for the assessed needs of the residents. In large facilities medication administration uses up to half of the required aide hours and the time left is not sufficient to provide other personal care task and supervision of residents.</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>The law has been changed in its reference to “heavy care” which makes this particular paragraph of the rule in need of deletion.</p> <p>This comment relates to all of Rule 13F .0604 and indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
	5/26/17	11c)	<p>Need to differentiate the personal care aide hours and the medication aide hours. I know medication administration is a part of personal care but it creates a problem. In the large facilities, the med aides not provide actual personal care but are counted in the staffing hours. It is difficult to prove a facility is understaffed and get management to add additional staff. I would like to see a rule establishing a ratio of residents to med aide or a set number of true PCS hours and set number of med aide hours.</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
	6/15/17	11d) Roberta Schmidt-Beebe, Wake County Human Services Roberta.schmidt-beebe@wakegov.com	<p>I have seen repeated needs, deficiencies and violations related to minimum staffing required for personal care & supervision, since facilities and FCHs are admitting higher level acuity residents to the assisted living level (e.g. wheel chair-bound, dementias/Alzheimer’s, residents taking medications that affect balance, etc.). ACHs and FCHs only staff to the minimum, per the current Rule. The Rule fit past care circumstances, but our times and needs of residents have changed. I find that increasing the staffing (Rule) will afford residents greater protection and care.</p> <p>Thank you for considering,</p> <p>Roberta Schmidt-Beebe Wake County Human Services Adult & Community Services Senior Practitioner/Adult Home Specialist Tel: 919.212-7054 Fax: 919.212-9210</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
12) 10A NCAC 13F .0605 – Staffing of Personal Care Aide Supervisors	6/15/17	12a) Roberta Schmidt-Beebe, Wake County Human Services Roberta.schmidt-beebe@wakegov.com	<p>I have seen repeated needs, deficiencies and violations related to minimum staffing required for personal care & supervision, since facilities and FCHs are admitting higher level acuity residents to the assisted living level (e.g. wheel chair-bound, dementias/Alzheimer’s, residents taking medications that affect balance, etc.). ACHs and FCHs only staff to the minimum, per the current Rule. The Rule fit past care circumstances, but our times and needs of residents have changed. I find that increasing the staffing (Rule) will afford residents greater protection and care.</p> <p>Thank you for considering,</p> <p>Roberta Schmidt-Beebe Wake County Human Services Adult & Community Services Senior Practitioner/Adult Home Specialist Tel: 919.212-7054 Fax: 919.212-9210</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
	6/19/17	12b) Chris Parker, Vienna Village, Inc.	In reference to paragraph (a): To be consistent with all other charts, supervisor should be tied to census not	This rule was determined as Necessary With Substantive Public Interest.

Rule Citation & Title	Date	Commenter	Comment	Agency Response
		chris@viennavillage.com	personal care aide hours. This verbage creates a disincentive for having more personal care aides and is not consistent with the staffing chart later listed.	<p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
	7/12/17	12c) Frances Messer, NCALA frances@ncala.org	To be consistent with all other charts, supervisor should be tied to census not personal care aide hours. This verbiage is not consistent with the staffing chart later listed. Chart based on census.	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
13) 10A NCAC 13F .0606 – Staffing Chart	6/15/17	13a) Roberta Schmidt-Beebe, Wake County Human Services Roberta.schmidt-beebe@wakegov.com	<p>I have seen repeated needs, deficiencies and violations related to minimum staffing required for personal care & supervision, since facilities and FCHs are admitting higher level acuity residents to the assisted living level (e.g. wheel chair-bound, dementias/Alzheimers, residents taking medications that affect balance, etc.). ACHs and FCHs only staff to the minimum, per the current Rule. The Rule fit past care circumstances, but our times and needs of residents have changed. I find that increasing the staffing (Rule) will afford residents greater protection and care.</p> <p>Thank you for considering,</p> <p>Roberta Schmidt-Beebe Wake County Human Services Adult & Community Services Senior Practitioner/Adult Home Specialist Tel: 919.212-7054 Fax: 919.212-9210</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
	7/12/17	13b) Frances Messer, NCALA frances@ncala.org	Supervisor in charge (SIC) is not appropriate for adult care homes. The term Supervisor in Charge is only used in Family Care Home rules Replace SIC with AIC (Administrator in Charge) in chart	This rule was determined as Necessary With Substantive Public Interest. Agreed and changes will be considered accordingly. The agency will not change the determination of this rule.
14) 10A NCAC 13F .0703 – Tuberculosis Test, Medical Examination and Immunizations	7/12/17	Frances Messer, NCALA frances@ncala.org	Update contact information for NC TB Control Program, include website	This rule was determined as Necessary With Substantive Public Interest. Agreed and most likely just a technical change to update contact. The agency will not change the determination of this rule.
15) 10A NCAC 13F .0704 – Resident Contract, Information on Home and Resident Register	5/26/17	Bridgett Stubbs, Rowan County DSS bridgett.stubbs@rowancountync.gov	Facilitates need to disclose services they will not provide prior to admission. What this rule does not specifically state is that facilities should make residents/responsible persons aware of services they do not provide prior to admission. Example: If a facility only offers a regular diet, potential residents should be aware of this prior to admission. Some facilities/companies will not provide therapeutic diets (diabetic diet, low fat diets, renal diets, etc...) A diabetic (or other individual requiring a therapeutic diet) needs to understand this prior to admission.	This rule was determined as Necessary Without Substantive Public Interest. Comment indicates an area warranting review and potential need for rule revision following further study. The agency will change the determination of this rule to Necessary with Substantive Public Interest
16) 10A NCAC 13F .0904 – Nutrition and Food Service	6/28/17	Chris Parker, Vienna Village, Inc. chris@viennavillage.com	Recommend that a certified dietitian review these nutrition and food service regulations to make sure they are up to date with the most recent dietary recommendations per FDA and other sources. For example, I am unsure who would be able to eat six servings of cereals and breads a day. Also, there other alternatives to fluid milk, i.e. yogurt, ice cream, pudding milk based, etc. that seniors find more	This rule was determined as Necessary With Substantive Public Interest. Comment indicates an area warranting review and potential need for rule revision following further study.

Rule Citation & Title	Date	Commenter	Comment	Agency Response
			<p>tasteful. In order to protect resident's rights and choices, wording should be changed to 'offer' or 'made available' rather than 'include.' For example, if a resident has been offered milk and continually refuses, it would be wasteful to include/put a cup of milk at their table only for it to be poured out every day because they refuse to drink it. Regulators have interpreted this differently with some requiring that you place milk in front of resident even though they refuse day after day and year after year. This is not respectful of the resident's wishes and is also very wasteful. Another example would be that eggs be 'offered' or 'made available'. Many people choose not to eat eggs at all so forcing them to have eggs on their plate three times a week is a violation of their preferences and rights. Also, under protein substitutes – who can eat 4 tablespoons of peanut butter? These nutrition rules just need to be updated with latest nutritional guidelines which include options and opt outs that are respectful of resident's wishes.</p>	<p>The agency will not change the determination of this rule.</p>
<p>17) 10A NCAC 13F .0908 – Cooperation with Case Managers</p>	<p>5/26/17</p>	<p>Belinda Wilson , bwilson777@msn.com</p>	<p>Not necessary</p>	<p>This rule was determined as Unnecessary.</p> <p>Agreed, rule is unnecessary because it is outdated and case management services are no longer available.</p> <p>The agency will not change the determination of this rule.</p>
<p>18) 10A NCAC 13F .1008 – Controlled Substances</p>	<p>6/28/17</p>	<p>Chris Parker, Vienna Village, Inc. chris@viennavillage.com</p>	<p>The below two rules state the same thing. We were cited twice and had points deducted twice because of these rules being listed twice. Either .1008 or .1010 should be eliminated since redundant.</p> <p>10A NCAC 13F .1008 CONTROLLED SUBSTANCES (a) An adult care home shall assure a readily retrievable record of controlled substances by documenting the receipt, administration and disposition of controlled substances. These records shall be maintained with the</p>	<p>This rule was determined as Necessary Without Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will change the determination of this rule to “Necessary with Substantive Public Interest.”</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
			<p>resident's record and in such an order that there can be accurate reconciliation. 10A NCAC 13F .1010 PHARMACEUTICAL SERVICES (e) The facility shall assure that accurate records of the receipt, use, and disposition of medications are maintained in the facility and available upon request for review.</p>	
<p>19) 10A NCAC 13F .1010 – Pharmaceutical Services</p>	<p>6/28/17</p>	<p>Chris Parker, Vienna Village, Inc. chris@viennavillage.com</p>	<p>The below two rules state the same thing. We were cited twice and had points deducted twice because of these rules being listed twice. Either .1008 or .1010 should be eliminated since redundant.</p> <p>10A NCAC 13F .1008 CONTROLLED SUBSTANCES (a) An adult care home shall assure a readily retrievable record of controlled substances by documenting the receipt, administration and disposition of controlled substances. These records shall be maintained with the resident's record and in such an order that there can be accurate reconciliation. 10A NCAC 13F .1010 PHARMACEUTICAL SERVICES (e) The facility shall assure that accurate records of the receipt, use, and disposition of medications are maintained in the facility and available upon request for review.</p>	<p>This rule was determined as Necessary Without Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will change the determination of this rule to “Necessary with Substantive Public Interest.”</p>
<p>20) 10A NCAC 13F .1106 – Settlement of Cost of Care</p>	<p>6/19/17</p>	<p>Melissa Long,</p>	<p>14 days is not enough time to process a refund because of the direct deposit rules AND resident bills that are paid on behalf of the residents. Medication bills and direct deposits are monthly occurrences. Final Medication costs and other final personal bills are not known usually until the next calendar billing cycle. Medicaid and Social Security are not able to stop direct deposits within 14 days (mid month), therefore a person can't be fully refunded for months (every source of funds being sent back or re-routed). This is causing undue hardship of facilities not being able to close out cases on a monthly basis. Direct Deposit send backs get missed because Files have to be re-visited to completely close them out. Facilities get stuck with personal med bills etc because the pharmacy didn't</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>

Rule Citation & Title	Date	Commenter	Comment	Agency Response
			<p>have time to thoroughly generate a bill. It just seems that since all payor sources and other bills are 30 day cycles, All refunds should be handled the same way. This would make the refund process more complete and thorough. Thank you.</p>	
<p>21) 10A NCAC 13F .1206 – Advertising</p>	<p>5/26/17</p>	<p>Belinda Wilson , bwilson777@msn.com</p>	<p>Not necessary</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule.</p>
<p>22) 10A NCAC 13F .1307 – Special Care Unit Resident Profile and Care Plan</p>	<p>7/12/17</p>	<p>Frances Messer, NCALA frances@ncala.org</p>	<p>Remove the requirement requiring quarterly resident profiles and care plans. This was discussed during the collaborative stakeholders meetings when we were discussing whether or not to change the staffing levels in the SCU.</p>	<p>This rule was determined as Necessary Without Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will change the determination of this rule to “Necessary with Substantive Public Interest.</p>
<p>23) 10A NCAC 13F. 1604 – Rating Calculation</p>	<p>5/26/17</p>		<p>I would like to see the citations share in some relevance to the star rating system. Some facilities receive multiple citations a year for the same rule area. They fix it temporarily then go right back to the same practice until it is a yo-yo effect. What about a limit to the number of citations in a rule area during the fiscal year. For example, if they receive more than 2 citations for medications, it lowers the total score.</p>	<p>This rule was determined as Necessary With Substantive Public Interest.</p> <p>Comment indicates an area warranting review and potential need for rule revision following further study.</p> <p>The agency will not change the determination of this rule</p>