

I Mina'trentai Ocho Na Liheslaturan Guåhan
BILL STATUS

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	FISCAL NOTES	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	NOTES
31-38 (COR)	William A. Parkinson	AN ACT TO <i>AMEND</i> CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND <i>ADD</i> A NEW (N) TO §9302 (b) (1) OF CHAPTER 9, OF DIVISION 1, TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES.	1/17/25 9:55 a.m.	1/27/25	Committee on Health and Veterans Affairs.	Request 1/27/25 2/13/25	2/19/25 2:00 p.m.	7/16/25 As Amended.	



Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

May 21, 2025

Honorable Frank Blas Jr., Speaker
I Mina'trentai Ocho Na Liheslaturan Guåhan
163 W. Chalan Santo Papa
Hagåtña, Guåhan 96910

VIA: **The Honorable V. Anthony Ada, Vice Speaker** 
Chairperson, Committee on Rules

RE: **Committee Report on the Public Hearing relative to Bill No. 31-38 (COR), As Amended by the Committee.**

Håfa Adai Speaker Blas,

- I. Transmitted herewith is the Committee Report on the Public Hearing relative to **Bill No. 31-38 (COR)**, As Amended - William A. Parkinson – AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND *ADD* A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

Committee votes are as follows:

1 TO DO PASS
____ TO NOT PASS
6 TO REPORT OUT ONLY
____ TO ABSTAIN
____ TO PLACE IN INACTIVE FILE

Sincerely,



Senator Sabrina Salas Matanane
Chairwoman, Committee on Health and Veterans Affairs



COMMITTEE ON RULES

RECEIVED:

May 21, 2025 10:16 a.m.
Marie Crisostomo
Revisions Received:
July 15, 2025 3:03 p.m.



Office of Legislative Secretary

SENATOR SABBINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature

Chairperson, Committee on Health and Veterans Affairs

COMMITTEE REPORT

Bill No. 31-38 (COR)

As Amended by the Committee on Health and Veterans Affairs -

William A. Parkinson

AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.



Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

May 20, 2025

MEMORANDUM

To: All Members
Committee on Health and Veterans Affairs

From: Senator Sabrina Salas Matanane *Smart*
Committee Chairperson

Subject: Committee Report on the Public Hearing relative to Bill No. 31-38 (COR), As Amended by the Committee.

Håfa Adai Committee Members,

- I. Transmitted herewith for your consideration is the Committee Report on the Public Hearing relative to **Bill No. 31-38 (COR)**, As Amended by the Committee on Health and Veterans Affairs - William A. Parkinson – AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

The report contains the following:

- COR Referral Memorandum
- Notice of Hearing
- Hearing Agenda
- Hearing Sign-in Sheet
- Submitted Testimonies and Supporting Documents
- Committee Report Vote Sheet
- Committee Report Digest
- Copy of Bill No. 31-38 (COR) Intro
- Copy of Bill No. 31-38 (COR) As amended
- Copy of Bill No. 31-38 (COR) Markup
- Fiscal Note

Please take appropriate action on the attached vote sheet. Your attention to this matter is greatly appreciated. Should you have any questions or concerns, please contact the Office of Senator Sabrina Salas Matanane.



COMMITTEE ON RULES

Vice Speaker V. Anthony Ada, Chairperson
I Mina'trentai Ocho Na Liheslaturan Guåhan
38th Guam Legislature

January 27, 2025

To: **Rennae V. C. Meno**
Clerk of the Legislature

Attorney Darleen Hiton
Legislative Legal Counsel

From: **Senator Christopher M. Dueñas** 
Acting Chairperson, Committee on Rules

Subject: **Referral of Bill No. 31-38 (COR)**

Håfa Adai,

As per my authority as Acting Chairperson of the Committee on Rules and subject to §6.01(d)(1), Rule VI of our Standing Rules, I am forwarding the referral of **Bill No. 31-38 (COR)** – William A. Parkinson. – “AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (b) (1) OF CHAPTER 9, OF DIVISION 1, TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES.”

Please ensure that the subject bill is referred to the Committee on Health and Veterans Affairs chaired by Senator Sabrina Salas Matanane. I also request that the same be forwarded to the Prime Sponsor of the subject bill and to Management Information Services (MIS) for posting on our website.

A copy of the bill is available on our legislative website.

Should you have any questions or concerns, please feel free to contact Kamarin Nelson, Committee on Rules Director at 671-472-2461.





Office Senator Bri <office.senatorbri@guamlegislature.gov>

First Notice of Public Hearing – Wednesday, February 19, 2025, 2:00 P.M.

2 messages

Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Wed, Feb 12, 2025 at 12:36 PM

To: phnotice@guamlegislature.gov

Cc: sgtarms@guamlegislature.gov, committeeonrules@guamlegislature.gov, mis@guamlegislature.gov, av@guamlegislature.gov, protocol@guamlegislature.gov

Bcc:

[Redacted content]

Håfa Adai! The Committee on Health and Veterans Affairs will conduct a Public Hearing on Wednesday, February 19, 2025, beginning at 2:00 P.M., in the Public Hearing Room of the Guam Congress Building.

The Committee will hear and accept testimony on the following:

2:00 P.M.

I. **Bill No. 13-38 (COR)**, Introduced by Therese M. Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4 TITLE 10 GUAM CODE ANNOTATED RELATIVE TO ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S PUBLIC HEALTH HOSPITAL.

II. **Bill No. 31-38 (COR)**, Introduced by William A. Parkinson – AN ACT TO AMEND CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

How to Participate: Written testimony may be delivered to the Office of Senator Sabrina Salas Matanane at the Guam Congress Building, 163 *Chalan Santo Papa Hagåtña*, Guam 96910 or via email to Office.SenatorBri@guamlegislature.gov. The Committee requests that testimonies be submitted at least forty-eight (48) hours prior to the scheduled hearing.

Please confirm your attendance by contacting the Office of Senator Sabrina Salas Matanane via email at Office.SenatorBri@guamlegislature.gov or via voice call at (671) 989-2572.

Special Accommodations: In compliance with the Americans with Disabilities Act (ADA), individuals requiring assistance or accommodations should contact Genese Morrison at the Office of Senator Sabrina Salas Matanane.

Watch Live/Record: The hearing will be broadcast on local television, GTA, Channel 21, Docomo Channel 117, and streamed online via *I Liheslaturan Guåhan's* live feed on YouTube. After the hearing, a hearing recording will also be available online via Guam Legislature Media on YouTube.

Si Yu'os Ma'åse'!



The Office of the Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
 Chairperson, Committee on Health and Veterans Affairs
 163 W. Chalan Santo Papa, Hagåtña, Guam 96910
 ☎ 671-989-2572 ✉ office.senatorbri@guamlegislature.gov

PH 2025.02.19 First Notice - SSM.pdf
 388K

Ed Pocaigue <sgtarms@guamlegislature.gov>
 To: Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Wed, Feb 12, 2025 at 1:03 PM

Hafa adai and posted on the calendar.

[Quoted text hidden]



Edward S. Pocaigue, Jr.
 Sergeant-at-Arms

I Mina'trentai Ocho Na Liheslaturan Guåhan
 Guam Congress Building, 1st Floor
 163 Chalan Santo Papa
 Hagåtña, Guam 96910

 ☎ 1-671-969-3514
 ✉ sgtarms@guamlegislature.gov

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The Office of the Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairwoman, Committee on Health and Veterans Affairs

February 12, 2025

MEMORANDUM

To: All Senators, Stakeholders, Media

From: Senator Sabrina Salas Matanane *Smatt*
Chairwoman, Committee on Health and Veterans Affairs

Subject: First Notice of Public Hearing – Wednesday, February 19, 2025, 2:00 P.M.

Håfa Adai! The Committee on Health and Veterans Affairs will conduct a Public Hearing on Wednesday, February 19, 2025, beginning at 2:00 P.M., in the Public Hearing Room of the Guam Congress Building.

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Watch Live/Record: The hearing will be broadcast on local television, GTA, Channel 21, Docomo Channel 117, and streamed online via *I Liheslaturan Guåhan's* live feed on YouTube. After the hearing, a hearing recording will also be available online via Guam Legislature Media on YouTube.

Si Yu'os Ma'åse'!

First Notice of Public Hearing – Wednesday, February 19, 2025, 2:00 P.M

 PRINT

**First Notice of Public Hearing – Wednesday,
February 19, 2025, 2:00 P.M**

PUBLIC HEARING



 **Posted on:** 02/12/2025 11:25 AM

 **Posted by:** Genese Morrison

 **Public Hearing Date:** 02/19/2025 02:00 PM

 **Department(s):**
GUAM LEGISLATURE (/notices?department_id=92)

 **Division(s):**
OFFICE OF SENATOR SABRINA SALAS MATANANE (/notices?
division_id=295)

 **Notice Topic(s):** PUBLIC HEARING (/notices?topic_id=74)

 **Types of Notice:** PUBLIC HEARING (/notices?type_id=7)

 **For Audience(s):** PUBLIC (/notices?public=1)

 **Share this notice**

The Committee on Health and Veterans Affairs will conduct a Public Hearing on Wednesday, February 19, 2025, beginning at 2:00 P.M., in the Public Hearing Room of the Guam Congress Building.

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2:00 P.M.

I. Bill No. 13-38 (COR)

([https://guamlegislature.gov/38th Guam Legislature/Bills_Introduced_38th/Bill%20No.%2013-](https://guamlegislature.gov/38th%20Guam%20Legislature/Bills_Introduced_38th/Bill%20No.%2013-38%20(COR)%20HISTORY.pdf)

38%20(COR)%20HISTORY.pdf), Introduced by Therese M. Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4 TITLE 10 GUAM CODE ANNOTATED RELATIVE TO ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S PUBLIC HEALTH HOSPITAL.

II. Bill No. 31-38 (COR)

([https://guamlegislature.gov/38th Guam Legislature/Bills_Introduced_38th/Bill%20No.%2031-38%20\(COR\).pdf](https://guamlegislature.gov/38th%20Guam%20Legislature/Bills_Introduced_38th/Bill%20No.%2031-38%20(COR).pdf),

Introduced by William A. Parkinson – AN ACT TO AMEND CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

How to Participate: Written testimony may be delivered to the Office of Senator Sabrina Salas Matanane at the Guam Congress Building, 163 *Chalan Santo Papa Hagåtña*, Guam 96910 or via email to **Office.SenatorBri@guamlegislature.gov** (**<mailto:Office.SenatorBri@guamlegislature.gov>**). The Committee requests that testimonies be submitted at least forty-eight (48) hours prior to the scheduled hearing.

Please confirm your attendance by contacting the Office of Senator Sabrina Salas Matanane via email at **Office.SenatorBri@guamlegislature.gov** (**<https://d.docs.live.net/bde30a67c51e7d3c/Documents/Templates/Office.SenatorBri@guamlegislature.gov>**) or via voice call at (671) 989-2572.

Special Accommodations: In compliance with the Americans with Disabilities Act (ADA), individuals requiring assistance or accommodations should contact Genese Morrison at the Office of Senator Sabrina Salas Matanane

SENATOR: CASIMIRO SARDIA MATARANGA.

Watch Live/Record: The hearing will be broadcast on local television, GTA, Channel 21, Docomo Channel 117, and streamed online via *I Liheslaturan Guåhan's* live feed on YouTube. After the hearing, a hearing recording will also be available online via Guam Legislature Media on YouTube.

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OFFICE OF SENATOR SABRINA SALAS MATANANE
38TH GUAM LEGISLATURE
GUAM CONGRESS BUILDING
163 CHALAN SANTO PAPA
HAGATNA, GUAM 96910

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Co-Op:
Description:
Salesperson: San Agustin, Christie

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The Office of the Legislative Secretary

SENATOR SABRINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairwoman, Committee on Health and Veterans Affairs

PUBLIC HEARING

The Committee on Health and Veterans Affairs will conduct an Public Hearing on

WEDNESDAY, FEBRUARY 19, 2025 AT 2:00 P.M. | GUAM CONGRESS BUILDING

The Committee will hear and receive information on the following:

Bill No. 13-38 (COR), Introduced by Therese M. Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4 TITLE 10 GUAM CODE ANNOTATED RELATIVE TO ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S PUBLIC HEALTH HOSPITAL.

Bill No. 31-38 (COR), Introduced by William A. Parkinson – AN ACT TO AMEND CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

Feb. 12, 2025

163 W. Chalan Santo Papa, Hagåtña, Guam 96910
(671) 989-2572 | Office.SenatorBri@guamlegislature.gov

First Notice



The Office of the Legislative Secretary

SENATOR SABRINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairwoman, Committee on Health and Veterans Affairs

How to Participate: Written testimony may be delivered to the Office of Senator Sabrina Salas Matanane at the Guam Congress Building, 163 Chalan Santo Papa Hagåtña, Guam 96910 or via email to Office.SenatorBri@guamlegislature.gov. The Committee requests that testimonies be submitted at least forty-eight (48) hours prior to the scheduled hearing.

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Special Accommodations: In compliance with the Americans with Disabilities Act (ADA), individuals requiring assistance or accommodations should contact the Office of Senator Sabrina Salas Matanane.

Watch Live/Record: The hearing will be broadcast on local television, GTA, Channel 21, Docomo Channel 117, and streamed online via I Liheslaturan Guåhan's live feed on YouTube.



Office Senator Bri <office.senatorbri@guamlegislature.gov>

Second Notice of Public Hearing – Wednesday, February 19, 2025

1 message

Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Mon, Feb 17, 2025 at 9:20 AM

To: phnotice@guamlegislature.gov

Cc: sgtarms@guamlegislature.gov, committeeonrules@guamlegislature.gov, mis@guamlegislature.gov, av@guamlegislature.gov, Protocol Guam Legislature <protocol@guamlegislature.gov>

Bcc:

[Redacted content]

Håfa Adai!

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Si Yu'os Ma'åse'!

--

Sabrina Salas Matanane
Senator



The Office of the Legislative Secretary

SENATOR SABRINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature

Chairperson, Committee on Health and Veterans Affairs

163 W. Chalan Santo Papa, Hagåtña, Guam 96910

☎ 671-989-2572

✉ office.senatorbri@guamlegislature.gov



PH 2025.02.19 Second Notice - SSM.pdf

385K



The Office of the Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairwoman, Committee on Health and Veterans Affairs

February 17, 2025

MEMORANDUM

To: All Senators, Stakeholders, Media

From: Senator Sabrina Salas Matanane *Smart*
Chairwoman, Committee on Health and Veterans Affairs

Subject: Second Notice of Public Hearing – Wednesday, February 19, 2025

Håfa Adai! The Committee on Health and Veterans Affairs will conduct a Public Hearing on Wednesday, February 19, 2025, beginning at 2:00 P.M., in the Public Hearing Room of the Guam Congress Building.

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Si Yu'os Ma'åse'!

Second Notice of Public Hearing – Wednesday, February 19, 2025

 PRINT

Second Notice of Public Hearing – Wednesday, February 19, 2025

PUBLIC HEARING



 **Posted on:** 02/17/2025 09:03 AM

 **Posted by:** Genese Morrison

 **Public Hearing Date:** 02/19/2025 02:00 PM

 **Department(s):**
GUAM LEGISLATURE (/notices?department_id=92)

 **Division(s):**
OFFICE OF SENATOR SABRINA SALAS MATANANE (/notices?
division_id=295)

 **Notice Topic(s):** PUBLIC HEARING (/notices?topic_id=74)

 **Types of Notice:** PUBLIC HEARING (/notices?type_id=7)

 **For Audience(s):** PUBLIC (/notices?public=1)

 **Share this notice**

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([https://guamlegislature.gov/38th_Guam_Legislature/Bills_Introduced_38th/Bill%20No.%2013-](https://guamlegislature.gov/38th_Guam_Legislature/Bills_Introduced_38th/Bill%20No.%2013-38%20(COR)%20HISTORY.pdf)

38%20(COR)%20HISTORY.pdf), Introduced by Therese M.

Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4

TITLE 10 GUAM CODE ANNOTATED RELATIVE TO

ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S

PUBLIC HEALTH HOSPITAL.

II. Bill No. 31-38 (COR)

([https://guamlegislature.gov/38th_Guam_Legislature/Bills_Introduced_38th/Bill%20No.%2031-38%20\(COR\).pdf](https://guamlegislature.gov/38th_Guam_Legislature/Bills_Introduced_38th/Bill%20No.%2031-38%20(COR).pdf)),

Introduced by William A. Parkinson – AN ACT TO *AMEND*

CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE

ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF

CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE

RULES AND REGULATIONS, RELATIVE TO EXPANDING

OPTIONS OF ASSISTED LIVING FACILITIES.

How to Participate: Written testimony may be delivered to the Office of Senator Sabrina Salas Matanane at the Guam Congress Building, 163 *Chalan Santo Papa Hagåtña*, Guam 96910 or via email to Office.SenatorBri@guamlegislature.gov (<mailto:Office.SenatorBri@guamlegislature.gov>). The Committee requests that testimonies be submitted at least forty-eight (48) hours prior to the scheduled hearing.

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Office.SenatorBri@guamlegislature.gov

(<https://d.docs.live.net/bde30a67c51e7d3c/Documents/Templates/Office.SenatorBri@guamlegislature.gov>) or via voice call at

(671) 989-2572.

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SENATOR: GUSTAVO GARCIA MATARRETE.

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Si Yu'os Ma'åse'!

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HAGATNA, GUAM 96932 U.S

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OFFICE OF SENATOR SABRINA SALAS MATANANE
38TH GUAM LEGISLATURE
GUAM CONGRESS BUILDING
163 CHALAN SANTO PAPA
HAGATNA, GUAM 96910

Purchase Order Number: **2538PO029**
Est. Number:
Co-Op:
Description:
Salesperson: San Agustin, Christie

Date	Day	Length		Qty	Rate	Total
02/21/2025	FRI		KUAM TV PUBLIC HEARING – FEBRUARY 19, 2025 AIR DATE: 02/12/25 1x :15 SECOND AD 1x :15 SECOND AD (KUAM MATCH) AIRDATE: 02/17/25 1x :15 SECOND AD 1x :15 SECOND AD (KUAM MATCH)			\$200.00

PAYMENT DUE UPON RECEIPT OF INVOICE.

Quantity	4	Total	\$200.00
Total Due			\$200.00

INVOICE



The Office of the Legislative Secretary

SENATOR SABRINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature

Chairwoman, Committee on Health and Veterans Affairs

PUBLIC HEARING

The Committee on Health and Veterans Affairs will conduct an Public Hearing on

WEDNESDAY, FEBRUARY 19, 2025 AT 2:00 P.M. | GUAM CONGRESS BUILDING

The Committee will hear and receive information on the following:

Bill No. 13-38 (COR), Introduced by Therese M. Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4 TITLE 10 GUAM CODE ANNOTATED RELATIVE TO ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S PUBLIC HEALTH HOSPITAL.

Bill No. 31-38 (COR), Introduced by William A. Parkinson – AN ACT TO AMEND CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.



The Office of the Legislative Secretary

SENATOR SABRINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature

Chairwoman, Committee on Health and Veterans Affairs

How to Participate: Written testimony may be delivered to the Office of Senator Sabrina Salas Matanane at the Guam Congress Building, 163 Chalan Santo Papa Hagåtña, Guam 96910 or via email to Office.SenatorBri@guamlegislature.gov. The Committee requests that testimonies be submitted at least forty-eight (48) hours prior to the scheduled hearing.

Please confirm your attendance by contacting the Office of Senator Sabrina Salas Matanane via email at Office.SenatorBri@guamlegislature.gov or via voice call at (671) 989-2572.

Special Accommodations: In compliance with the Americans with Disabilities Act (ADA), individuals requiring assistance or accommodations should contact the Office of Senator Sabrina Salas Matanane.

Watch Live/Record: The hearing will be broadcast on local television, GTA, Channel 21, Docomo Channel 117, and streamed online via I Liheslaturan Guåhan's live feed on YouTube.



The Office of the Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairwoman, Committee on Health and Veterans Affairs

February 12, 2025

Subject: Invitation to Public Hearing on Bill No. 31-38 (COR)

Håfa Adai!

The Committee on Health and Veterans Affairs will conduct a Public Hearing on Wednesday, February 19, 2025, beginning at 2:00 P.M., in the Public Hearing Room of the Guam Congress Building.

At the request of the bill's sponsor, you have been invited to attend the hearing to provide valuable insight on the following:

Bill No. 31-38 (COR), Introduced by William A. Parkinson – AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

The Committee requests that all written testimony and presentations be submitted forty-eight (48) hours prior to the hearing. Additionally, you are welcome to invite other stakeholders who may be able to contribute to the discussion.

If your office requires any assistance or accommodation that can be provided by my office or the 38th Guam Legislature, please contact my office.

Should you have any questions or concerns, you may contact my office at 671-989-2572 or email Office.SenatorBri@guamlegislature.gov.

Thank you,

Senator Sabrina Salas Matanane
38th Guam Legislature

CC: Honorable Jesse L.G. Alig, Mayor
Theresa C. Arriola, Director – Department of Public Health and Social Services
Elizabeth Napoli, Director – Guam Housing and Urban Renewal Authority
Fernando Esteves, Deputy Director – Guam Housing and Urban Renewal Authority
Peter Alecxis Ada
St. Dominic's Senior Care Home



Outlook

Invitation to Public Hearing on Bill No. 31-38 (COR)

From Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Date Wed 2/12/2025 3:25 PM

Cc jesse.alig@mcog.guam.gov <jesse.alig@mcog.guam.gov>; paa@gdoe.net <paa@gdoe.net>; Biba.SeniorCitizens@dphss.guam.gov <Biba.SeniorCitizens@dphss.guam.gov>; Theresa C. Arriola <Theresa.C.Arriola@dphss.guam.gov>; efnapoli@ghura.org <efnapoli@ghura.org>; fbsteves@ghura.org <fbsteves@ghura.org>; mel.mendiola@investguam.com <mel.mendiola@investguam.com>

 1 attachment (356 KB)

PH 2025.02.19 Invitation Bill No. 31-38 COR.pdf;

Håfa Adai!

The Committee on Health and Veterans Affairs will conduct a Public Hearing on **Wednesday, February 19, 2025, beginning at 2:00 P.M.**, in the Public Hearing Room of the Guam Congress Building.

At the request of the bill's sponsor, you have been invited to attend the hearing to provide valuable insight on the following:

Bill No. 31-38 (COR), Introduced by William A. Parkinson – AN ACT TO AMEND CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

The Committee requests that all written testimony and presentations be submitted forty-eight (48) hours prior to the hearing. Additionally, you are welcome to invite other stakeholders who may be able to contribute to the discussion.

If your office requires any assistance or accommodation that can be provided by my office or the 38th Guam Legislature, please contact my office.

Should you have any questions or concerns, you may contact my office at 671-989-2572 or email Office.SenatorBri@guamlegislature.gov.

--

Sabrina Salas Matanane

Senator





The Office of the Legislative Secretary

SENATOR SABRINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature

Chairwoman, Committee on Health and Veterans Affairs

Public Hearing

February 19, 2025 2:00 p.m.

Public Hearing Room, Guam Congress Building

Agenda

- I. [**Bill No. 13-38 \(COR\)**](#), Introduced by Therese M. Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4 TITLE 10 GUAM CODE ANNOTATED RELATIVE TO ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S PUBLIC HEALTH HOSPITAL.

- II. [**Bill No. 31-38 \(COR\)**](#), Introduced by William A. Parkinson – AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.



The Office of the Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairwoman, Committee on Health and Veterans Affairs

PUBLIC HEARING

Wednesday, February 19, 2025, 2:00 P.M.
Public Hearing Room, Guam Congress Building

Bill No. 13-38 (COR), Introduced by Therese M. Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4 TITLE 10 GUAM CODE ANNOTATED RELATIVE TO ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S PUBLIC HEALTH HOSPITAL.

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Check all that apply. Please provide staff with written testimony for photocopying.

Name (Please Print)	Agency /Organization	Contact Information	Written Testimony	Oral Testimony	Observing	Bill No. 13-38	Bill No. 31-38	In Support	Not In Support
Mae Ader	self				✓		✓	✓	
Peter Alexis Ader	Guam Oro		✓				✓		
Lillian Perez-Tomas	GMHA		✓			✓			✓
Frances M Adams	Guam Oro				✗		✗	✗	
Rodilyn GERARDO	GMHA				✓	✓			✓
Zaldy Tugade	GMHA				✓	✓			✓
N. CANALDO	GEHA				✓	✓			
Chal Palomo	DPHSS				✓		✓	✓	
Breanna Sablan	DPHSS						✓		
Krisinda Aguon	DPHSS				✓		✓	✓	



The Office of the Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairwoman, Committee on Health and Veterans Affairs

PUBLIC HEARING

Wednesday, February 19, 2025, 2:00 P.M
Public Hearing Room, Guam Congress Building

Bill No. 13-38 (COR), Introduced by Therese M. Terlaje – AN ACT TO ADD A NEW CHAPTER 98 TO DIVISION 4 TITLE 10 GUAM CODE ANNOTATED RELATIVE TO ESTABLISHING A PUBLIC PRIVATE PARTNERSHIP FOR GUAM'S PUBLIC HEALTH HOSPITAL.

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Check all that apply. Please provide staff with written testimony for photocopying.

Name (Please Print)	Agency /Organization	Contact Information	Written Testimony	Oral Testimony	Observing	Bill No. 13-38	Bill No. 31-38	In Support	Not In Support
VERAAD NYAM E	GMH			✓		✓			
Julian Jansen	DPHSS-DPW				✓		✓		
RAYMOND SALAS	Detention/PC					✓	✓		
Theresa Arriola	DPHSS		✓	✓		✓	✓	✓	
Mel Melendres	GMHA			✓		✓			
Dingo Mandiola	GEDA				✓				
YUKA HECHANOVA	GMHA				✓				
EDGAR REILLY	CHATHBOT				✓	✓			
Mitch Grossing					✓				
VAMSI GROSSING					✓				

February 15, 2025

The Honourable Sabrina Salas Matanane
Chairperson, Committee on Health and Veterans Affairs
Bill No. 31-38 (COR), Introduced by William A. Parkinson
Wednesday, February 19, 2025
2:00pm, Public Hearing Room of the Guam Congress Building

In support of Bill No. 31-38 (COR)

Hafa Adai Senator Matanane and Committee Members,

Thank you for the opportunity to provide written testimony on Bill No. 31-38 (COR). As a concerned citizen and daughter of Guåhan, social worker, and student, I am in support of this bill as it seeks to create a legal and regulatory framework for assisted living facilities on Guåhan.

Assisted living facilities address a significant gap in the continuum of care services on our island. The level of care in between independent living and intensive 24/7 care is essential for seniors, our Manåmko, so that they may embrace their independence as well as honour their overall quality of life while being provided the most suitable care. The ability and opportunity to do so is supportive of human dignity and of our own cultural values of respetu and inafa'maolek.

Bill 31-38 (COR) aims to introduce a legal and regulatory framework that is currently absent and potentially hinders quality of care, safety, as well as accountability for assisted living facilities. This framework will establish a guide for those investing in these facilities, and thereby our vulnerable aging population, and thereby promote and create standards for these facilities.

Once again, I am in support of Bill No. 31-38 (COR). My sincere thanks for this opportunity.

With respect and gratitude,

Jessica Aguon Cepeda



GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



LOURDES A. LEON GUERRERO
MAGA'HAGAN GUAHAN
GOVERNOR OF GUAM

JOSHUA F. TENORIO
SEGUNDO MAGA'LAIHEN GUAHAN
LT. GOVERNOR OF GUAM

FEB 19 2025

THERESA C. ARRIOLA, MBA
DIRECTOR

PETERJOHN D. CAMACHO, MPH
DEPUTY DIRECTOR

VIA ELECTRONIC MAIL

Senator Sabrina Salas Matanane
Chairperson, Committee on Health and Veterans Affairs
office.senatorbri@guamlegislature.gov

RE: TESTIMONY ON BILL 31-38 (COR) Introduced by Senator William Parkinson

Hafa Adai Senator Salas Matanane and Committee on Health Members:

My name is Theresa C. Arriola, Director of the Department of Public Health and Social Services (DPHSS). Thank you for the opportunity to present testimony **IN FAVOR** of Bill 31-38 (COR), *AN ACT TO AMEND CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (b)(1) OF CHAPTER 9, OF DIVISION 1, TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES.*

DPHSS would like to commend the bill author, Senator William Parkinson, for recognizing the amendment of Chapter 7, Division 1, Title 10 Guam Code Annotated to strike through Nursing Home and replace with "Assisted Living Facilities". The Amendment to Title 10 Chapter 7 will provide the amended rules and regulations with the Qualifying Certificate aimed at the development of Assisted Living Facilities.

DPHSS testimony includes the Division of Senior Citizens, Division of Public Welfare (Medicaid), Division of General Administration - Health Professional Licensing Office, and Division of Environmental Health comments and/or recommendations.

DIVISION OF SENIOR CITIZENS

The National Center for Assisted Living's, Assisted Living State Regulatory Review 2024 Edition, Overview states:

- Assisted living communities are a long-term care option preferred by many individuals who typically need help with everyday activities and some health care services but typically do not require 24-hour skilled nursing care services for extended periods of time. These communities offer a unique mix of companionship, independence, and security and become residents' home, prioritizing resident choice, dignity, and privacy. The assisted living model is built on the concept of delivering person-centered services (e.g., personal care) and supports (e.g., housing) that meet each resident's specific needs and preferences. In

addition to supporting residents in completing activities of daily living (e.g., bathing, dressing, managing medications), assisted living provides a variety of specialized services, including social work, mental health or counseling, or therapies. Additionally, one in five assisted living providers have a unit, wing or floor designated for dementia care or only serve adults with dementia.

Our department notes **Section 3. Added Funding Support for Assisted Living Facilities (page 20) and Section 4. (N).** Specific to Section 3. Funding Support for Assisted Living. The National Center for Assisted Living's, Assisted Living State Regulatory Review 2024 Edition, states: *The majority of assisted living residents pay privately for room, board, and services. Medicare does not cover services offered by assisted living. While Medicaid does not cover room and board, it may cover personal care services for eligible residents in states that allow a Medicaid waiver in assisted living. The Medicaid program is important for ensuring that seniors and individuals with disabilities are able to receive care in the most appropriate setting. An estimated 48 percent of communities are Medicaid-certified to be home and community-based services (HCBS) providers, while almost 18 percent of residents rely on Medicaid to cover daily care in assisted living.*

DIVISION OF PUBLIC WELFARE

Medicaid Optional Services for Long-Term Care. Under federal law and regulations, state and territorial Medicaid programs may cover nursing home services for individuals who meet applicable criteria. Some Medicaid programs also cover home and community-based services for people who would need to be in a nursing home if they did not receive the home care services. In most states, but not including Guam, Medicaid programs also cover services that will help individuals who require long-term care services to remain in their homes, such as personal care services, case management, and help with laundry and cleaning. However, Medicaid programs do not pay for rent, mortgage, utilities, or food.

Guam Medicaid provides medically necessary home health services, which tends to have higher utilization among individuals who require assisted living services, but does not currently cover home and community-based services, personal care services, or case management.

Locally, St. Dominic's Senior Care Home is covered by the locally funded Medically Indigent Program (MIP). Since this facility is not a CMS-certified Intermediate Care Facility, Guam Medicaid is not able to cover Intermediate Care Facility services. Currently, MIP provides supplemental coverage to thirty-seven (37) beneficiaries residing at St. Dominic's Senior Care Home at \$251.55 a day, or \$91,815.75 per year, which would have a total annual cost of \$3,397,182.75.

It should be noted that the Guam Medicaid Office is able to update the Guam Medicaid State Plan or pursue a waiver to provide a range of services to individuals residing in an Assisted Living Facility. In making such updates to the Guam Medicaid State Plan, the financial impact may exceed the current Medicaid cap appropriated/awarded to Guam. The ongoing advocacy to remove the Medicaid cap for territories must continue more aggressively than ever, making it equitable to states who do not share the same limitations.

DIVISION OF GENERAL ADMINISTRATION - HEALTH PROFESSIONAL LICENSING OFFICE (HPLO)

The HPLO identifies one concern regarding Bill 31-38 in its current form. The bill proposes shifting the responsibility for managing a facility from a Nursing Home Administrator (NHA) to an Assisted Living Facility Administrator (ALFA). This shift would require the Guam Board of Allied Health Examiners (GBAHE) to amend its current rules and regulations. We recommend collaborating with the GBAHE to ensure that the bill's provisions will accurately reflect and clearly define the requirements of the administrator. Specifically, NHAs manage facilities providing 24/7 medical care for residents with complex health needs, while ALFAs oversee facilities for largely independent residents who require varying levels of assistance. Tailoring regulations or requirements specific to the type of administrator will ensure that administrators are qualified and properly trained for their respective roles as it relates to the national standards.

DIVISION OF ENVIRONMENTAL HEALTH

The Division of Environmental Health underscores the importance for proper regulation of Assisted Living Facilities in order to avoid health risks to its residents and the community at large, including waste management, cleaning protocols, infrastructure, adequate fall prevention measures, and food handling to prevent injuries and the spread of infections in the community.

By setting and enforcing clear environmental health standards, the regulation of Assisted Living Facilities ensures these facilities maintain safe and sanitary conditions for the target population. In addition, facility inspections and compliance records can assist families in making informed decisions regarding the care of our *manâmkô* and other suitable residents of the ALF.

Please be informed that there is another statute governing the operations of nursing home; thus, DPHSS would like to recommend the following to be consistent with Bill 31-38:

- Amend §25101(f) of Title 10 Guam Code Annotated, Chapter 25 to read:
 - (f) Assisted living facility means a residence for the elderly or infirm who require assistance with some of the routine activities of daily living as well as ready access to medical care as needed and shall include, but not be limited to, the following:
 - (1) Nursing home means a facility established for profit or non-profit, which provides nursing care and related medical services twenty-four (24) hours per day of two (2) or more individuals because of illness, disease or mental infirmity. It provides care for those persons not in need of hospital care but requiring nursing care or related medical services, which medical services shall be prescribed by a professional nurse or a physical therapist or an occupational therapist, depending upon the service required. If children are cared for, they shall have a separate unit an institution, private home, other place or part or unit thereof, however named, whether for profit or not, including facilities operated by the government of Guam, which is advertised, offered, maintained or operated for the express or implied purpose of providing accommodations, nursing and/or related health care for two or more individuals not related to the owner or administrator by blood or marriage within the third degree of consanguinity, which accommodations and care for a period of twenty-four (24) or more consecutive hours, but shall not include any place providing care and treatment primarily for the acutely ill; and

"Residential care facility for the elderly" means a housing arrangement chosen voluntarily by persons sixty (60) years of age or over, or their authorized representative, where varying levels and intensities of care and supervision, protective supervision, personal care, or health-related services are provided, based upon their varying needs, as determined in order to be admitted and to remain in the facility. People under 60 years of age with compatible needs may be allowed to be admitted or retained in a residential care facility for the elderly if needed.

Ensuring that Assisted Living Facilities provide a safe, healthy, and dignified environment for our *manāmkō* should be a priority.

In closing, DPHSS acknowledges the critical gap in services for our elderly population. As family dynamics and economic realities continue to evolve, many families face increasing challenges in providing in-home care for their aging loved ones. This shift underscores the urgent need for alternative care options, such as Assisted Living Facilities, to ensure our elderly receive the quality support, dignity, and specialized care they deserve.

We look forward to the passage of Bill 31-38 with DPHSS recommendations included. Thank you for your time and consideration.

Si Yu'os Ma'ase!


THERESA C. ARRIOLA, MBA



Lourdes A. Leon Guerrero
GOVERNOR

Joshua F. Tenorio
LIEUTENANT GOVERNOR

Department of Integrated Services For Individuals with Disabilities

Dipåttamenton Programa Para I Maninutet



Michelle L. C. Perez
DIRECTOR

Audrey J. A. Topasna
DEPUTY DIRECTOR

February 19, 2025

Honorable Senator Sabrina Salas Matanane
38th Guam Legislature
Guam Congress Building,
163 Chalan Santo Papa
Hagåtña, Guam 96910

RE: Testimony- Bill 31-38 (COR)

Hafa Adai Chairperson Salas Matanane and members of the Thirty-Eight Guam Legislature. Thank you for the opportunity to provide testimony on Bill No. 31-38 (COR). While this bill seeks to expand assisted living options for Guam's aging population, I respectfully recommend the Legislature to amend the bill to explicitly include individuals with disabilities aged 18-59. This group faces significant gaps in services and funding, making their inclusion in this bill essential for equitable access to necessary care.

Individuals with disabilities aged 18-59 face unique challenges. Many fall into a service gap where they are too old for youth-based programs but too young for senior services. Assisted living facilities designed to support this population would provide essential help with daily living, access to health care, social welfare services, and civic and social engagement opportunities.

Including them in this bill would encourage the development of facilities that can secure funding through existing programs and any new legislative measures, ensuring these individuals receive the care they need through adequate program support.

Additionally, many younger adults with disabilities are at risk of institutionalization due to the lack of appropriate supportive services. Assisted living facilities would provide a supportive environment that fosters independence while meeting their daily needs. For example, a 35-year-old with a spinal cord injury may not need hospital-level care but does require help with mobility, personal hygiene, and other daily tasks. Without proper support, individuals like this may end up in the Guam Memorial Hospital resulting in costly and inappropriate institutional setting.

138 East Marine Corps Drive Jones & Guerrero Commercial Plaza, Suite C101 Hagatna, Guam 96910

Office: (671) 475-4624 Fax: (671) 477-2892

Department of Integrated Services For Individuals with Disabilities

Dipåtamenton Programa Para I Maninutet

By amending Bill No. 31-38 (COR) to include individuals with disabilities aged 18-59, we can meet a critical gap in Guam's continuum of care. This amendment will not only enhance the quality of life for these individuals, it also aligns with the bill's broader goals of improving community well-being and ensuring comprehensive care for all vulnerable populations.

Thank you for your time and consideration.

Senseremente,



Michelle L.C. Perez
Director, DISID

Wednesday, February 19, 2025

Buenas and good afternoon, Madam Chair, committee members and senators present here this afternoon.

My name is Peter Alecxis Ada a Barrigada resident. I am here to testify on Bill #31 proposed by Senator Wil Parkinson.

Let me begin by commending Senator Parkinson who has a strong vision to seeing a nursing home built on Guam which is badly needed. This legislation is something that would help future potential builders.

Public Law 131-36 introduced by Senator Telo Taitague is similar in its intent that offers Qualifying Certificate that enhances anyone to include local and outside investors to build Nursing Homes. PL 131-36 and Bill # 31-38 would help two (2) potential locals who are seriously considering going into this venture.

Senators, after reading the full context of Bill 31, I noticed it is geared towards Nursing Homes, not Assisted Living Home to which I am in final process of establishing an Assisted Living Home on Guam.

It should be noted that there isn't anything currently that addresses Assisted Living Home in the laws on Guam. There is for Nursing Homes, but Nursing Homes and Assisted Living Homes are total two different concepts and design.

I've invited the inspectors from Environmental Health at Public Health and the inspectors from DPW to come and see onsite what they advise and what needed to be done to comply with Guam laws. Public Works inspectors were not able to make it to the meeting. But I knew that we needed to renovate certain rooms (if not all) to be ADA compliance. That was common sense. It was at this point that Public Health said there is nothing on the current law that addresses Assisted Living Homes. They do have for Nursing Homes.

Senators, this is the very reason why I am here requesting that we need rules and regulations addressing specifically Assisted Living Homes so we can follow the policies and not open, then someone comes and says you didn't do this, and you didn't do that. You have to close. This is exactly what I am trying to avoid.

Senators, as of early last night, there are 19 patients right now that are ready to be discharged from GMH and SNU, but these patients have no place to be released to or a place to go to. Some have no family on island to take care of them. This is where we come in.

Families on Guam would prefer to have their aging parents at their home and enjoy their familiar surroundings and be in their own beds. In some cases, parents live at home, but some families have to go work and the children go to school leaving nana/tata alone. This is dangerous and the family don't want to put their parents in that situation. This is where we come in and offer them an alternative for them to consider.

I was talking with an official from GHURA and they said they have about 100 applicant who may be in this situation. The question is "who needs it most?"

Our organization is to be called GUMA ORU and working in obtaining grants as Non-Profit 501(c) status for funding. I need to emphasize that we are not a Skill Nursing facility like St. Dominic and unlike Guma Tranquilidad who may have some services. We offer onsite services (covered under the grant at no cost

to the Resident-Patient. The only thing is they pay directly to the hotel for their unit. I have worked with the hotel owner to spread the security deposit to three (3) months to help the applicant. This particular hotel charges include full kitchen facility, microwave, water, power, cable, internet and back-up generator.

I have 5 years' experience as manager of the Elderly Housing program with Catholic Social Service. I found and ran a couple of years the Guam Medical Referral overseeing referred patients from Guam to medical facilities in Honolulu, Los Angeles and the Philippines. My experience in the health industry is wide range.

Some potential residents could be self-pay, some may have Medicare/Medicaid and may have only Medicaid that may qualify them to include caregivers' services, some families are able to pay for their patient's stay to include payment of their caregivers if ordered by their primary physician and qualify.

I should stress that GUMA ORU requires a doctor's referral in order to be admitted. Anyone can apply, but the question will be "who needs it most?"

We want to help GMH to avail rooms for those needing to be admitted and not to have to wait in the ER and hallways.

GUMA ORU will have social workers, Physician's Assistant, security guards and transportation to and from their appointments on a daily basis. Our services will be 24-hour.

GUMA ORU will be in a location within proximity to GMH, GRMC, Naval Hospital, most doctor's clinics, most dialysis treatment centers and wherever the new hospital is built.

I have done my research and finding the average cost for Assisted Living is anywhere between \$4,500 to \$54,000 monthly in the United States. We don't even come close to that. These companies are privately owned for profit. We offer more services than those offered in the mainland.

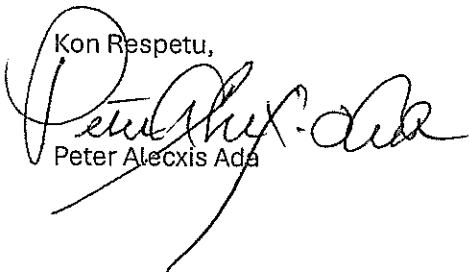
I have personally visited 13 senators and waiting for 2 more senators to be scheduled to discuss this issue. I only hope and pray to see that all 15 senators will be sponsors in the final legislation prior to voting.

Our Board of Directors consist of me founder, President and CEO, Dr. Vince Akimoto as Vice President, Ms. Frances Manibusan Adams as secretary -Treasurer, Ms. June Taitano representing the general population and a veteran herself and Mrs. Mae Ada.

We want to start small and perfect it and increase upon the availability of grant funds.

Thank you for your time and I hope and pray that this issue will be addressed as quickly as possible so we can help those in need

Senators, we need rules and regulations in the books to address Assisted Living Homes and THE NEED IS NOW.

Kon Respetu,

Peter Alexxis Ada



GHURA

Guam Housing and Urban Renewal Authority
Aturidat Ginima' Yan Rinueban Siudat Guahan
117 Bien Venida Avenue, Sinajana, GU 96910
Phone: (671) 477-9851 · Fax: (671) 300-7565 · TTY: (671) 472-3701
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February 18, 2025

Lourdes A. Leon Guerrero
Governor of Guam

Joshua F. Tenorio
Lt. Governor of Guam

John J. Rivera
Chairman

Nathanael P. Sanchez
Vice Chairman

Anisia S. Delia
Commissioner

Emilia F. Rice
Commissioner

Victor R. Torres
Commissioner

Karl E. Corpus
Resident Commissioner

Elizabeth F. Napoli
Executive Director

Fernando B. Esteves
Deputy Director

TO: Committee on Health
FROM: Fernando Esteves, Deputy Director
SUBJECT: Bill 31-38

Hafa Adai,

We support the intent, but are in opposition of Bill 31-38 as currently written. Bill 31 merely renames nursing home to assisted living facility and creates a hybrid definition that also neglects persons with disabilities who face the same needs as the elderly.

I've previously testified on the importance of consistency with the types of residential care facilities. In the recent summit, the Federal Housing Administration of the U.S. Housing Urban Development (HUD) shared resources for the development of residential care facilities. I support updating our statutes to accommodate the development of residential care facilities, but I disagree with the definition that is too far removed from industry standards. The type of facility and how it's defined is critical to informing on services provided, subsequent development, and regulations to its permitting and operations. Additionally, definitions consistent with standard definitions inform potential grantors, regulators, and investors on services provided.

There are 5 types of housing facilities for the elderly and persons with disabilities, all except Independent Living Facilities are considered Residential Care Facilities. Examples of each type of facility/home is provided for you below. Please take note of the important differences between the various types of facilities.

Independent Living Facility/Housing are housing units designed for the elderly or non-elderly persons with disabilities. They are designed for ease of use and may include ADA accommodations. Residents are able to live independently without service requirements for daily living or medical care. **Example:**
GHURA Elderly Housing (Guma Trankilidat, Talofoto, Agat, ect...)



Assisted Living Facilities are designed to accommodate frail elderly and people with disabilities who can live independently but need assistance with activities of daily living (e.g., assistance with eating, bathing, grooming, dressing and home management activities) ALFs must provide support services such as personal care, transportation, meals, housekeeping, and laundry. They don't require 24-hour assistance or services.

Service-Enriched Housing/Nursing Home is housing that is designed to accommodate frail elderly persons, elderly persons, persons with severe disabilities with service needs. Residents are able to live independently but need assistance with activities of daily living comparable to services provided in Assisted Living Facilities and additionally include healthcare-related services. These supportive services must be available through a licensed or certified third party service provider; they are typically 24-hour facilities. **(Example: St. Dominics)**

Skilled Nursing Facilities are long-term in-patient medical facilities that provides transitional care for its patients. **(Example: GMHA Skilled Nursing Facility)**

Palliative/Hospice Care Facility are medical facilities meant to provide physical comfort and emotional, social, and spiritual support for people near the end of their life.

Assisted Living Facilities, Service-Enriched Housing/Nursing Homes, and Skilled Nursing Facilities, are defined as Residential Care Facilities and should be allowable for government or private entities. I highly recommend defining each facility accordingly to clearly delineate the required services by type. There are companies that utilize the age in place model, however, the service models are still consistent with the levels of assistance/care necessary based on phases in aging. This isn't to say a facility can't be both an Independent Living Facility, Assisted Living Facility, and Service-Enriched Housing facility. However, requirements should be based on the type of service that's being provided whether singularly or in total.


Fernando Esteves
Deputy Director

**THE TESTIMONY OF JESSE L.G. ALIG
MAYOR OF PITI AND PRESIDENT OF THE MAYORS' COUNCIL OF GUAM
ON BILL 31-38**

(February 19, 2025)

In 2017, my father suffered a stroke in Oklahoma that caused him to be severely debilitated. He received the necessary medical treatment and subsequent therapies to allow him to lead the best possible life. After all the treatment and therapies, my father is still unable to live independently. He currently resides in a residential care facility in California where he receives quality health care and the activities of a typical lifestyle seven days a week and twenty-four hours a day. As much as he wants to come home, Dad will not return unless there is a facility and operation that provides unrivaled care in order for him to live the highest quality of life.

Typhoon Mawar presented us many opportunities for improvement in the government of Guam. The mayors worked tirelessly to assist residents pre and post disaster. Most of these residents were elderly or living alone. Their children and grandchildren either lived in another village or relocated for various reasons.

Our government should be concerned about the quality of life we provide our *man amko'* and everyone that calls Guam home. We should pave the way for business development that will offer our people alternatives and options to live their best life.

Assisted Living Facilities provide solutions for our veterans, *man amko'* and quite possibly, the homeless. These communities are created to give residents the proper health care and way of life every human being deserves. Certain facilities should accept Medicaid, MIP, veterans benefits and health insurances. Housing and care opportunities for everyone nearing their final stages of life must be addressed because it is our Chamorro culture to take care of one another.

Bill 31-38 is the impetus to the development of Assisted Living Facilities on Guam. I urge the senators to work with all the government agencies, developers, businesses and stakeholders to pass a bill that will ensure the swift construction of these facilities to meet the needs of our *man amko'* and the people of Guam.

Si Yu'os ma'ase'!



Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

COMMITTEE VOTE SHEET

Bill No. 31-38 (COR), As Amended by the Committee on Health and Veterans Affairs – AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

COMMITTEE MEMBERS	SIGNATURE AND DATE	TO DO PASS	TO NOT PASS	TO REPORT OUT ONLY	TO ABSTAIN	TO PLACE IN INACTIVE FILE
Senator Sabrina Salas Matanane Chairperson	<i>Smat</i> 5/20/2025			✓		
Vice Speaker V. Anthony Ada Vice Chair, Committee on Health	evote 5/20/2025			✓		
Senator Vincent A.V. Borja Vice Chair, Committee on Veterans Affairs	evote 5/20/2025	✓				
Speaker Frank F. Blas, Jr. Member						
Senator Jesse A. Lujan Member	evote 5/20/2025			✓		
Senator Shelly V. Calvo Member						
Senator Christopher M. Duenas Member	evote 5/20/2025			✓		
Senator Eulogio Shawn Gumataotao Member	evote 5/20/2025			✓		
Senator Tina Rose Muna Barnes Member	evote 5/20/2025			✓		



Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Replace - Request for e-vote: Committee Report relative to Bill No. 31-38 (COR).

7 messages

Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Tue, May 20, 2025 at 11:07 AM

To: Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Vince Borja <vince.borja@guamlegislature.gov>, "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>, Senator Tina Muna Barnes <senator.munabarnes@guamlegislature.gov>

Hafa Adai Committee Members:

Please see attached Committee Report relative to **Bill No. 31-38 (COR)** – AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES. .

Please indicate your preferred action, based on the following options:

- TO DO PASS
- TO NOT PASS
- TO REPORT OUT ONLY
- TO ABSTAIN
- TO PLACE IN INACTIVE FILE

Please submit your response **ASAP**. Your responses will be logged into the vote sheet which will be submitted as part of the final Committee Report to the Committee on Rules.

Please contact our office if you have any questions or concerns.

--



Office of Legislative Secretary

SENATOR SABRINA SALAS MATANANE

I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature

Chairperson, Committee on Health and Veterans Affairs

163 W. Chalan Santo Papa, Hagåtña, Guam 96910

☎ office.senatorbri@guamlegislature.gov

📞 671-989-2572

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CR 2025.02.19 31-38 - Final.pdf

10043K

Senator Chris Duenas <senator.duenas@guamlegislature.gov>

Tue, May 20, 2025 at 11:35 AM

To: Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Cc: Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Vince Borja

<vince.borja@guamlegislature.gov>, "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Senator Jesse Lujan

<senator.lujan@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>, Senator Tina Muna Barnes <senator.munabarnes@guamlegislature.gov>

To report out only

--



Office of Senator Christopher M. Dueñas

Chairman, Committee on Government Finance and Operations

259 Martyr St., Hagatna, Guam 96910

senator.duenas@guamlegislature.gov

(671) 989-9554

[Quoted text hidden]

Vice Speaker V. Anthony Ada <vicespeakertonyada@guamlegislature.gov>

Tue, May 20, 2025 at 1:04 PM

To: Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

To report out only

On Tue, May 20, 2025 at 11:08 AM Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov> wrote:

[Quoted text hidden]

--



Office of Vice Speaker V. Anthony Ada

38th Guam Legislature

I Mina'trentai Ocho Na Liheslaturan Guåhan

Guam Congress Building, 2nd Floor

163 Chalan Santo Papa

Hagåtña, Guam 96910

Phone: (671) 989-0855

Email: vicespeakertonyada@guamlegislature.gov

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Senator Vince Borja <vince.borja@guamlegislature.gov>

Tue, May 20, 2025 at 1:11 PM

Reply-To: Senator Vince Borja <vince.borja@guamlegislature.gov>

To: office.senatorbri@guamlegislature.gov

Cc: vicespeakertonyada@guamlegislature.gov, speakerblas@guamlegislature.gov, senator.lujan@guamlegislature.gov, officeofsenatorshellycalvo@guamlegislature.gov, senator.duenas@guamlegislature.gov, office.senatorshawn@guamlegislature.gov, senator.munabarnes@guamlegislature.gov, office.senatorbri@guamlegislature.gov

To do pass.

Respectfully,



Office of Senator Vincent A.V. Borja

Committee on Education, Libraries, & Public
Broadcasting

38th Guam Legislature

Suite 502, DNA Bldg. [238 Archbishop Flores St.](#)

[Hagåtña, Guam 96910](#)

T +1 (671) 969-8423

E contact@senatorvinceborja.com

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Senator Tina Muna Barnes <senator.munabarnes@guamlegislature.gov>

Tue, May 20, 2025 at 1:27 PM

To: Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>

Cc: Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Vince Borja <vince.borja@guamlegislature.gov>, "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>, Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>

to report out only

On Tue, May 20, 2025 at 11:08 AM Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov> wrote:

[Quoted text hidden]

Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>

Tue, May 20, 2025 at 1:32 PM

To: Senator Tina Muna Barnes <senator.munabarnes@guamlegislature.gov>

Cc: Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Vince Borja <vince.borja@guamlegislature.gov>, "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Senator Jesse Lujan <senator.lujan@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>

TO REPORT OUT ONLY

Office of Senator Eulogio Shawn Gumataotao

Chairman, Committee on Public Safety, Emergency Management, and Guam National Guard

38th Guam Legislature

[120 Father Duenas Avenue](#) Capitol Plaza Building, Suite 103, Hagåtña, Guam 96910

(671) 647-1409/1411

[Quoted text hidden]

Senator Jesse Lujan <senator.lujan@guamlegislature.gov>

Tue, May 20, 2025 at 3:56 PM

To: Senator Shawn Gumataotao <office.senatorshawn@guamlegislature.gov>

Cc: Senator Tina Muna Barnes <senator.munabarnes@guamlegislature.gov>, Senator Sabrina Salas Matanane <office.senatorbri@guamlegislature.gov>, Vice Speaker Tony Ada <vicespeakertonyada@guamlegislature.gov>, Senator Vince Borja <vince.borja@guamlegislature.gov>, "Speaker Frank Blas Jr." <speakerblas@guamlegislature.gov>, Office of Senator Shelly Calvo <officeofsenatorshellycalvo@guamlegislature.gov>, Senator Chris Duenas <senator.duenas@guamlegislature.gov>

To Report Out Only.

[Quoted text hidden]

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Office of Majority Leader Jesse A. Lujan

Chairman, Committee on Transportation, Tourism, Customs, Utilities and Federal & Foreign Affairs

259 Martyr St., Hagatna, Guam 96910

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(671) 969-6525



Office of Legislative Secretary
SENATOR SABRINA SALAS MATANANE
I Mina'trentai Ocho Na Liheslaturan Guåhan | 38th Guam Legislature
Chairperson, Committee on Health and Veterans Affairs

COMMITTEE REPORT DIGEST

I. OVERVIEW:

The Committee on Health and Veterans Affairs conducted a Public Hearing on Wednesday February 19, 2025, scheduled to begin at 2:00 P.M., in the Public Hearing Room of the Guam Congress Building.

Among the other items, on the agenda for discussion was:

- I. **Bill No. 31-38 (COR)**, Introduced by William A. Parkinson – AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.
 - a. Introduced on January 17, 2025
 - b. Referred to the Committee on January 27, 2025

Public Notice Requirements

In accordance with Open Government Law, public notice for the Public Hearing was disseminated via email to all senators and main media broadcasting outlets on February 12, 2025, and February 17, 2025. The public notice was also posted on the Guam Legislature website and the Public Notice Portal.

Senators Present

Senator Sabrina Salas Matanane, Chairperson of the Committee on Health and Veterans Affairs
Vice Speaker V. Anthony Ada, Vice Chairperson on Health
Senator Vincent Anthony V. Borja, Vice Chairperson on Veterans Affairs
Senator Shelly Calvo, Committee Member
Senator Shawn Gumataotao, Committee Member
Senator Telo T. Taitague
Senator William A. Parkingson
Senator Therese M. Terlaje
Senator Chris Barnett

Written Testimony Submitted By:

Theresa Arriola, Director – Department of Public Health and Social Services
Michelle Perez, Director – Department of Integrated Services For Individuals with Disabilities
Peter Alexxis Ada, President and CEO – Guma Oru

Committee Report Digest: [Bill No. 31-38 \(COR\)](#) AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

Wednesday, February 19, 2025, at 2:00 P.M. | Public Hearing Room, Guam Congress Building

Honorable Jesse Alig, Mayor – Municipality of Piti
Fernando Esteves, Deputy Director – Guam Housing and Urban Renewal Authority
Jessica Cepeda

II. SUMMARY OF TESTIMONY AND DISCUSSION:

The Public Hearing was called to order at 2:00 P.M.

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:

WELCOME BACK THE COMMITTEE ON HEALTH AND VETERANS AFFAIRS IS NOW CALLED BACK TO ORDER WE WERE WILL NOW PROCEED WITH TESTIMONY ON BILL 31 INTRODUCED BY SENATOR WILL PARKINSON AT THIS TIME I ASK THOSE WHO SIGNED UP TO TESTIFY TO PLEASE TAKE A SEAT ON THE PANEL BEFORE WE GET TO A TESTIMONY SENATOR PARKINSON YOU HAVE 10 MINUTES TO PROVIDE YOUR OPENING REMARKS ON YOUR BILL SENATOR PARKINSON IS GOING TO DO HIS INTRODUCTION OF THE BILL

SENATOR WILLIAM A. PARKINSON: THANK YOU MADAM CHAIR GOOD AFTERNOON EVERYONE AND THANK YOU ALL FOR BEING HERE TODAY I'D ALSO LIKE TO THANK THE CHAIRWOMAN SENATOR MATANANE FOR HEARING BILL NUMBER 31 38 TODAY AN IMPORTANT PIECE OF LEGISLATION THAT SEEKS TO EXPAND OPTIONS FOR ASSISTED LIVING HERE ON GUAM GUAM IS FACING A CRITICAL CHALLENGE OUR AGING POPULATION CONTINUES TO GROW AND WE MUST ENSURE THAT OUR ELDERLY OUR MANAMKO HAVE ACCESS TO THE CARE AND DIGNITY THEY DESERVE FOR TOO LONG THERE HAVE BEEN SIGNIFICANT GAPS IN THE CONTINUUM OF CARE ON OUR ISLAND MANY SENIORS REQUIRE ASSISTANCE BEYOND WHAT INDEPENDENT LIVING CAN OFFER BUT DO NOT YET NEED THE INTENSIVE CARE PROVIDED BY NURSING HOMES ASSISTED LIVING FACILITIES PROVIDE THAT ESSENTIAL MIDDLE GROUND A SAFE SUPPORTIVE ENVIRONMENT THAT ALLOWS OUR ELDERS TO MAINTAIN THEIR INDEPENDENCE WHILE RECEIVING THE NECESSARY SUPPORT FOR DAILY LIVING THIS BILL IS TO ADDRESS THAT GAP BY ESTABLISHING A COMPREHENSIVE STATUTORY AND REGULATORY FRAMEWORK FOR ASSISTED LIVING FACILITIES TO ENSURE FINANCIAL SUSTAINABILITY THE BILL LEVERAGES EXISTING GOVERNMENT PROGRAMS SUCH AS THE MEDICALLY INDIGEN PROGRAM THE MIP AND EXPANDS MEDICARE AND MEDICAID REIMBURSEMENTS AND ENCOURAGES PUBLIC PRIVATE PARTNERSHIPS THROUGH FEDERAL GRANTS AND INVESTMENT INCENTIVES WHILE THE QUALIFYING CERTIFICATE PROGRAM UNDER PUBLIC LAW 36-111 OFFERS ECONOMIC INCENTIVES FOR DEVELOPMENT IT DOES NOT PROVIDE THE NECESSARY LEGAL AND OPERATIONAL STRUCTURE TO ENSURE

Committee Report Digest: [Bill No. 31-38 \(COR\)](#) AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

Wednesday, February 19, 2025, at 2:00 P.M. | Public Hearing Room, Guam Congress Building

HIGH QUALITY CARE SAFETY AND OVERSIGHT BILL 31-38 SEEKS TO RECTIFY THIS BY SETTING CLEAR STANDARDS FOR THE LICENSING OPERATION AND MANAGEMENT OF THESE FACILITIES THIS LEGISLATION WILL NOT ONLY IMPROVE OUR QUALITY OF LIFE FOR OUR ELDERLY BUT WILL ALSO CREATE JOBS AND STIMULATE ECONOMIC GROWTH IN OUR HEALTH CARE SECTOR I LOOK FORWARD TO HEARING TESTIMONY TODAY AND DISCUSS HOW WE CAN IMPLEMENT THESE FUNDING MECHANISMS EFFECTIVELY WHILE KEEPING HEALTH CARE COSTS MANAGEABLE FOR THE GOVERNMENT AND PRIVATE SECTOR ALIKE WITH A LITTLE BIT OF MY TIME I'D LIKE TO READ IN THE TESTIMONY OF MAYOR JESSE LG ALIG MAYOR OF PITI AND PRESIDENT OF THE MAYORS COUNCIL OF GUAM ON BILL 31-38 AND READ IT INTO THE RECORD VERY BRIEF PIECE IN 2017 MY FATHER SUFFERED A STROKE IN OKLAHOMA THAT CAUSED HIM TO BE SEVERELY DEBILITATED HE RECEIVED THE NECESSARY MEDICAL TREATMENT AND SUBSEQUENT THERAPIES TO ALLOW HIM TO LEAD THE BEST POSSIBLE LIFE AFTER ALL THE TREATMENTS AND THERAPIES MY FATHER IS STILL UNABLE TO LIVE INDEPENDENTLY HE CURRENTLY RESIDES IN A RESIDENTIAL CARE FACILITY IN CALIFORNIA WHERE HE RECEIVES QUALITY HEALTH CARE AND THE ACTIVITIES OF A TYPICAL LIFESTYLE 7 DAYS A WEEK AND 24 HOURS A DAY AS MUCH AS HE WANTS TO COME HOME DAD WILL NOT RETURN UNLESS THERE IS A FACILITY IN OPERATION THAT PROVIDES UNRIVALED CARE IN ORDER FOR HIM TO LIVE THE HIGHEST QUALITY OF LIFE TYPHOON MAWAR PRESENTED US MANY OPPORTUNITIES FOR IMPROVEMENT IN THE GOVERNMENT OF GUAM THE MAYORS HAS WORKED TIRELESSLY TO ASSIST RESIDENTS PRE AND POST DISASTER MOST OF THESE RESIDENTS WERE ELDERLY OR LIVING ALONE THEIR CHILDREN AND GRANDCHILDREN EITHER LIVED IN ANOTHER VILLAGE OR RELOCATED FOR VARIOUS REASONS OUR GOVERNMENT SHOULD BE CONCERNED ABOUT THE QUALITY OF LIFE WE PROVIDE ARE MANAMKO AND EVERYONE THAT CALLS GUAM HOME WE SHOULD PAVE THE WAY FOR BUSINESS DEVELOPMENT THAT WILL OFFER OUR PEOPLE ALTERNATIVES AND OPTIONS TO LIVE THEIR BEST LIFE ASSISTED LIVING FACILITIES PROVIDE SOLUTIONS FOR OUR VETERANS MANAMKO AND QUITE POSSIBLY THE HOMELESS THESE COMMUNITIES ARE CREATED TO GIVE RESIDENTS THE PROPER HEALTH CARE AND WAY OF LIFE EVERY HUMAN BEING DESERVES CERTAIN FACILITIES SHOULD ACCEPT MEDICAID MIP VETERANS BENEFITS AND HEALTH INSURANCES HOUSING AND CARE OPPORTUNITIES FOR EVERYONE NEARING THEIR FINAL STAGE OF LIFE MUST BE ADDRESSED BECAUSE IS OUR CHAMORRO CULTURE TO TAKE CARE OF ONE ANOTHER BILL 31-38 IS THE IMPETUS TO THE DEVELOPMENT OF ASSISTED LIVING FACILITIES ON GUAM I URGE THE SENATORS TO WORK WITH ALL THE GOVERNMENT AGENCIES DEVELOPERS BUSINESSES AND STAKEHOLDERS TO PASS

Committee Report Digest: [Bill No. 31-38 \(COR\)](#) AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

Wednesday, February 19, 2025, at 2:00 P.M. | Public Hearing Room, Guam Congress Building

A BILL THAT WILL ENSURE THE SWIFT CONSTRUCTION OF THESE FACILITIES TO MEET THE NEEDS OF OUR MANOMKO AND THE PEOPLE OF GUAM TO SI YU'OSE MA'ASE JESSE MAYOR ALIG SO THIS THIS LETTER STUCK OUT TO ME BECAUSE HE IS ME HE IS THE PEOPLE OF GUAM OUT THERE WHO ARE SUFFERING THROUGH THIS SAME BURDEN OF HAVING TO TAKE CARE OF OUR FAMILY WITHOUT THE NECESSARILY TOOLS HERE TO DO SO AND SO FOR THIS REASON I ASK MY COLLEAGUES TO GIVE US YOUR BEST IDEAS ON HOW WE CAN MAKE THIS IDEA AS STRONG AND AS GOOD AS POSSIBLE SO MAKES IT TO THE SESSION FLOOR WE CAN GIVE THE PEOPLE GUAM THE BEST POSSIBLE BILL WE CAN HAVE SO THANK YOU AGAIN MADAM CHAIR FOR HEARING THE BILL AND I LOOK FORWARD TO HEARING MORE OF THE DISCUSSION THANK YOU

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:

THANK YOU SENATOR PARKINSON AND I LOOK FORWARD TO WORKING WITH YOU ON THIS BILL AS WELL WE WILL NOW BEGIN WITH PUBLIC TESTIMONY AND WE'LL BEGIN ON MY LEFT IF YOU COULD PLEASE STATE YOUR NAME AND WHAT ORGANIZATION OR IF YOU REPRESENT A GOVERNMENT AGENCY

PETER ALECIS ADA, FOUNDER AND CEO - GUMA ORU: BUENAS AND GOOD AFTERNOON MADAME CHAIR COMMITTEE MEMBERS AND SENATORS PRESENT HERE THIS AFTERNOON MY NAME IS PETER ALECIS ADA A BARRIADA RESIDENT I AM HERE TO TESTIFY ON BILL NUMBER 31 PROPOSED BY SENATOR WILL PARKINSON LET ME BEGIN BY COMMENDING SENATOR PARKINSON WHO HAS A STRONG VISION TO SEE NURSING HOMES BUILT ON GUAM WHICH IS BADLY NEEDED THIS LEGISLATION IS SOMETHING THAT WOULD HELP FUTURE POTENTIAL BUILDERS IN THE ARTICLE THAT I JUST OR THE WRITTEN TESTIMONY I HAD WRITTEN IT AS BILL PUBLIC LAW 131 PLEASE FORGIVE ME IT'S SUPPOSED TO BE 111 MY APOLOGY SENATOR TAITAGUE PUBLIC LAW 111-36 INTRODUCED BY SENATOR TAITAGUE IS SIMILAR IN ITS INTENT THAT'S OFFERING QUALIFYING CERTIFICATE THAT ENHANCES ANYONE WHO TO INCLUDE LOCAL AND OUTSIDE INVESTORS TO BUILD NURSING HOMES PUBLIC LAW 1 111 AND PUBLIC AND BILL NUMBER 31 38 WOULD HELP TWO POTENTIAL LOCALS WHO ARE SERIOUSLY CONSIDERING OF OPENING A ASSISTED LIVING HOME ON GUAM SENATORS AFTER READING THE FULL TEXT OF BILL NUMBER 31 I NOTICED IT IS GEARED TOWARDS NURSING HOME AND NOT ASSISTED LIVING HOME TO WHICH I AM IN THE FINAL PROCESS OF ESTABLISHING AN ASSIST ASSISTED LIVING HOME ON GUAM IT SHOULD BE NOTED THAT THERE ISN'T ANYTHING CURRENTLY THAT ADDRESSES ASSISTED LIVING HOMES ON GUAM THERE IS A NURSING HOME POLICIES BUT EXCUSE ME THERE IS FOR NURSING HOME BUT NURSING HOME AND ASSISTED LIVING HOMES ARE TOTALLY TWO DIFFERENT IN CONCEPT AND DESIGN I'VE

Committee Report Digest: [Bill No. 31-38 \(COR\)](#) AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES.

Wednesday, February 19, 2025, at 2:00 P.M. | Public Hearing Room, Guam Congress Building

INVITED THE INSPECTORS OF THE ENVIRONMENTAL HEALTH OF PUBLIC HEALTH AND THE INSPECTORS OF DPW TO COME AND SEE ONSITE WHAT THEY ADVISED OF WHAT NEEDED TO BE DONE TO COMPLY WITH GUAM LAWS PUBLIC LAW PUBLIC WORKS INSPECTORS WERE NOT ABLE TO MAKE IT TO THE MEETING BUT I KNEW THAT WE NEEDED TO RENOVATE CERTAIN ROOMS IF NOT ALL TO COMPLY TO BE ADA COMPLIANT THAT IS COMMON SENSE IT IS AT THIS POINT THAT THE PUBLIC HEALTH SAID THAT THERE IS NOTHING IN THE LAW IN THE CURRENT LAW THAT ADDRESSES ASSISTED LIVING HOME THEY HAVE IT FOR NURSING HOME AND IT'S RIGHT HERE SENATORS THIS IS THE VERY REASON WHY I AM HERE REQUESTING THAT WE NEED RULES AND REGULATIONS ADDRESSING SPECIFICALLY ASSISTED LIVING HOMES SO THAT WE CAN ALLOW WE CAN FOLLOW THE POLICIES AND DO NOT OPEN THEN SOMEONE COMES AND SAYS YOU DIDN'T DO THIS YOU DIDN'T DO THAT WE WILL HAVE TO CLOSE YOU THIS IS EXACTLY WHAT I AM TRYING TO AVOID SENATORS AS OF EARLY LAST NIGHT THERE ARE 19 PATIENTS AT GUAM MEMORIAL HOSPITAL AT SNU THAT ARE READY TO BE DISCHARGE 2 AND A HALF HOURS AGO I RECEIVED AN UPDATE THAT NUMBER HAS NOW INCREASED TO 22 THESE PEOPLE WOULD HAVE BEEN COULD HAVE BEEN DISCHARGED FROM GUAM MEMORIAL HOSPITAL BUT THE THESE PATIENTS DO NOT HAVE DO HAVE NO PLACE TO BE NO PLACE TO BE RELEASED TO OR PLACE TO GO SOME HAVE NO FAMILIES ON ISLAND TO TAKE CARE OF THEM THIS IS WHERE WE COME IN FAMILIES ON GUAM PREFER TO HAVE THEIR AGING PARENT AT THEIR OWN HOME AND ENJOY THE FAMILIAR SURROUNDINGS AND IN THEIR OWN BEDS IN SOME CASES PARENTS LIVE AT HOME BUT SOME FAMILIES HAVE TO GO TO WORK AND CHILDREN GO TO SCHOOL LEAVING NANA AND TATA ALONE THIS IS EXTREMELY DANGEROUS SENATORS AND THE FAMILIES DON'T WANT TO PUT THEIR PARENTS IN THIS SITUATION THIS IS WHERE WE COME IN AND OFFER THEM AN ALTERNATIVE FOR THEM TO CONSIDER I WAS TALKING WITH A AN OFFICIAL FROM GHURA AND THEY SAID THAT THEY HAVE APPROXIMATELY 100 APPLICANTS WHO MAY BE IN THIS SITUATION THE QUESTION IS WHO NEEDS IT MOST OUR ORGANIZATION IS CALLED GUMA ORU AND IS WORKING TO OBTAIN GRANTS FROM NONPROFIT 501C STATUS FOR FUNDING I NEED TO EMPHASIZE THAT WE ARE NOT A SKILLED NURSING FACILITY LIKE ST DOMINIC AND UNLIKE GUMA TRANKILODOT WHO MAY HAVE SOME SERVICES WE OFFER ON-SITE SERVICES COVERED UNDER THE GRANT AT NO COST THE RESIDENT PATIENT THE ONLY THING THEY PAY WILL BE DIRECTLY TO THE HOTEL IS FOR THEIR UNIT I HAVE WORKED WITH THE HOTEL OWNER TO SPREAD THE SECURITY DEPOSIT TO THREE MONTHS TO HELP THE APPLICANT TO DISH OUT YOUR PAYMENT OF AN AMOUNT AND THEN REQUIRE AGAIN TO PAY FOR A SECURITY DEPART THAT CAN BE SO HARD FOR THE FAMILY SO I'VE BEEN ABLE TO WORK IT OUT WITH THEM THAT THEY WILL SPREAD IT OUT IN THREE MONTHS

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THIS PARTICULAR HOTEL INCLUDES FULL KITCHEN FACILITY MICROWAVE WATER POWER CABLE INTERNET AND BACKUP GENERATOR I HAVE 5 YEARS EXPERIENCE AS MANAGER OF THE ELDERLY HOUSING PROGRAM OF CATHOLIC SOCIAL SERVICES I FOUND AND RAN A COUPLE OF RAN FOR A COUPLE OF YEARS THE GUAM MEDICAL REFERRAL OFFICE OVERSEEING THE REFERRED PATIENTS FROM GUAM TO MEDICAL FACILITIES IN HONOLULU LOS ANGELES AND THE PHILIPPINES MY EXPERIENCE IN THE HEALTH INDUSTRY IS WIDE RANGE SOME POTENTIAL RESIDENTS COULD BE SELF-PAY SOME MAY HAVE MEDICARE MEDICAID AND MAY HAVE ONLY MEDICAID THAT MAY QUALIFY BY THEM TO INCLUDE CAREGIVING GIVERS SERVICE SOME FAMILIES ARE ABLE TO PAY FOR THEIR FOR THEIR PATIENTS STAY TO INCLUDE PAYMENT TO THE CAREGIVER IF THE ORDER BY THE PRIMARY PHYSICIAN AND QUALIFIED I SHOULD STRESS THAT GUMA ORU REQUIRES A DOCTOR'S REFERRAL IN ORDER TO BE ADMITTED ANYONE CAN APPLY BUT THE QUESTION IS WHO NEEDS IT MOST I WANT TO HELP GUAM MEMORIAL HOSPITAL TO AVAIL ROOMS FOR THOSE NEEDING TO BE ADMITTED AND NOT HAVE TO WAIT IN THE ER OR THE HALLWAYS GUMA ORU WILL HAVE A SOCIAL WORKER A PHYSICIAN'S ASSISTANT SECURITY GUARDS TRANSPORTATION TO AND FROM THEIR APPOINTMENTS ON A DAILY BASIS OUR SERVICES WILL BE 24 HOURS GUMA ORU WILL BE LOCATED IN A PROX WITH WITHIN PROXIMITY OF GMH GRMC NAVAL HOSPITALS MOST DOCTOR'S CLINICS MOST DIALYSIS TREATMENT CENTERS AND WHEREVER THE NEW HOSPITAL IS BUILT I HAVE DONE MY RESEARCH IN FINDING THE AVERAGE COST OF AN ASSISTED LIVING HOME AND ANYWHERE BETWEEN 4,500 TO \$54,000 MONTHLY IN THE UNITED STATES SENATORS WE DON'T EVEN COME CLOSE TO THAT THESE COMPANIES ARE PRIVATELY OWNED FOR PROFIT WE OFFER MORE SERVICES THAN THOSE OFFERED IN THE MAINLAND I HAVE PERSONALLY VISITED 13 SENATORS AND WAITING FOR TWO MORE SENATORS TO SCHEDULE ME TO DISCUSS THIS ISSUE I ONLY HOPE AND PRAY TO SEE THAT ALL 15 SENATORS WILL BE ABLE TO SPONSOR BE THE SPONSORS IN THIS FINAL LEGISLATION PRIOR TO VOTING OUR BOARD OF DIRECTORS CONSISTS OF ME THE FOUNDER PRESIDENT AND CEO DR VINCE AKIMOTO AS VICE PRESIDENT MISS FRANCIS MANIBUSAN ADAM WHO'S RIGHT HERE WITH US WHO IS THE SECRETARY TREASURE MISS JUNE TAITANO WHO IS ALSO HERE WITH US AND SHE IS REPRESENTING THE GENERAL POPULATION AND A VETERAN HERSELF AND MRS MAY ADA AND SHE IS ALSO HERE WE WANT TO START SMALL NOTHING BIG BUT WE WANT TO PERFECT THAT SMALL AND AS AND INCREASE IT UPON THE AVAILABILITY OF THE GRANT FUNDS SENATORS THANK YOU FOR YOUR TIME AND I HOPE AND PRAY THAT THIS ISSUE WILL BE ADDRESSED AS QUICKLY AS POSSIBLE SO WE CAN HELP THOSE IN NEED SENATORS WE NEED RULES AND REGULATIONS

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IN THE BOOKS TO ADDRESS ASSISTED LIVING HOMES AND THE NEED IS NOW SI YU'OS MA'ASE TO ALL OF YOU THANK YOU

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON: MR ADA MISS ARRIOLA

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THANK YOU CHAIRPERSON SALAS MATANANE SENATORS FIRST OF ALL LET ME THIS IS THE FIRST TIME I'VE COME BEFORE THIS 38TH LEGISLATURE SO CONGRATULATIONS TO YOU ALL AND TOGETHER WE WILL WORK AND DO GREAT THINGS SO I HAVE PROVIDED WITH YOU TESTIMONY I HOPE YOU'VE HAD YOU HAVE COPIES BEFORE YOU AND I'LL JUST GO THROUGH IT FOR THE VIEWING PUBLIC HABA ADAI SENATOR SALAS MATANANE COMMITTEE ON HEALTH MEMBERS MY NAME IS TERESA C ARRIOLA DIRECTOR OF DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES THANK YOU FOR THE OPPORTUNITY TO PRESENT TESTIMONY IN FAVOR OF BILL 31 38 COR AN ACT TO AMEND CHAPTER 7 OF DIVISION 1 TITLE 10 GUAM CODE ANNOTATED AND ADD A NEW CHAPTER N TO SUBSECTION 9302 B 1 OF CHAPTER 9 OF DIVISION 1 TITLE 26 GUAM ADMINISTRATIVE RULES AND REGULATIONS RELATIVE TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES DPHSS WOULD LIKE TO COMMEND THE BILL AUTHOR SENATOR WILLIAM PARKINSON FOR RECOGNIZING THE AMENDMENT OF CHAPTER 7 DIVISION 1 TITLE 10 GUAM CODE ANNOTATED TO STRIKE THROUGH NURSING HOME AND REPLACE IT WITH ASSISTED LIVING FACILITIES THE AMENDMENT TO TITLE 10 CHAPTER 7 WILL PROVIDE THE AMENDED RULES AND REGULATIONS WITH QUALIFYING CERTIFICATES AIMED AT THE DEVELOPMENT OF ASSISTED LIVING FACILITIES DPHSS TESTIMONY INCLUDES INPUT COMMENTS AND RECOMMENDATIONS FROM THE DIVISION OF SENIOR CITIZENS THE DIVISION OF PUBLIC WELFARE MEDICAID OFFICE DIVISION OF GENERAL ADMINISTRATION THE HEALTH PROFESSIONAL LICENSING OFFICE AND THE DIVISION OF ENVIRONMENTAL HEALTH UNDER THE DIVISION OF SENIOR CITIZENS THE NATIONAL CENTER FOR ASSISTED LIVING ASSISTED LIVING STATE REGULATORY REVIEW 20 2024 EDITION OVERVIEW STATES ASSISTED LIVING COMMUNITIES ARE A LONG-TERM CARE OPTION PREFERRED BY MANY INDIVIDUALS WHO TYPICALLY NEED HELP WITH EVERYDAY ACTIVITIES AND SOME HEALTH CARE SERVICES BUT TYPICALLY DO NOT REQUIRE 24-HOUR SKILLED NURSING CARE SERVICES FOR EXTENDED PERIODS OF TIME THESE COMMUNITIES OFFER A UNIQUE MIX OF COMPANIONSHIP INDEPENDENCE AND SECURITY AND BECOME RESIDENT'S HOME PRIORITIZING RESIDENT CHOICE DIGNITY AND PRIVACY THE ASSISTED LIVING MODEL IS BUILT ON THE CONCEPT OF DELIVERING PERSONAL PERSON CENTERED SERVICES AND SUPPORTS THAT MEET EACH RESIDENT'S SPECIFIC NEEDS AND

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PREFERENCES IN ADDITION TO SUPPORTING RESIDENTS IN COMPLETING ACTIVITIES OF DAILY LIVING SUCH AS BATHING DRESSING MANAGING THEIR MEDICATION ASSISTED LIVING PROVIDERS PROVIDES A VARIETY OF SPECIALIZED SERVICES INCLUDING SOCIAL WORK MENTAL HEALTH OR COUNSELING OR THERAPIES ADDITIONALLY ONE IN FIVE ASSISTED LIVING PROVIDERS HAVE A UNIT WING OR FLOOR DESIGNATED FOR THE DEMENTIA CARE OR ONLY SERVICE ADULTS WITH DEMENTIA OUR DEPARTMENT NOTES SECTION THREE ADDED FUNDING SUPPORT FOR ASSISTED LIVING FACILITIES PAGE 20 AND SECTION 4N SPECIFIC TO SECTION THREE FUNDING SUPPORT FOR ASSISTED LIVING THE NATIONAL CENTER FOR ASSISTED LIVING ASSISTED LIVING STATE REGULATORY REVIEW OF 2024 EDITION STATES THE MAJORITY OF ASSISTED LIVING RESIDENTS PAY PRIVATELY FOR ROOM BOARD AND SERVICES MEDICARE DOES NOT COVER SERVICES OFFERED BY ASSISTED LIVING WHILE MEDICAID DOES NOT COVER ROOM AND BOARD IT MAY COVER PERSONAL CARE SERVICES FOR ELIGIBLE RESIDENTS IN STATES THAT ALLOW A MEDICAID WAIVER IN ASSISTED LIVING THE MEDICAID PROGRAM IS IMPORTANT FOR ENSURING THAT SENIORS AND INDIVIDUALS WITH DISABILITIES ARE ABLE TO RECEIVE CARE IN THE MOST APPROPRIATE SETTING AN ESTIMATED 48% OF COMMUNITIES ARE MEDICAID CERTIFIED TO BE HOME AND COMMUNITY-BASED SERVICES PROVIDERS WHILE ALMOST 18% OF RESIDENTS RELY ON MEDICAID TO COVER DAILY CARE IN ASSISTED LIVING UNDER THE DIVISION OF PUBLIC WELFARE MEDICAID OPTION OPTIONAL SERVICES FOR LONG-TERM CARE UNDER FEDERAL LAW AND REGULATIONS STATE AND TERRITORIAL MEDICAID PROGRAM PROGRAMS MAY COVER NURSING HOME SERVICES FOR INDIVIDUALS WHO MEETS APPLICABLE CRITERIA SOME MEDICATE PROGRAMS ALSO COVER HOME AND COMMUNITY-BASED SERVICES FOR PEOPLE WHO WOULD NEED TO BE IN A NURSING HOME IF THEY DO NOT CAN RECEIVE THE HOME CARE SERVICES IN MOST STATES BUT NOT INCLUDING GUAM MEDICAID PROGRAMS ALSO COVER SERVICES THAT WILL HELP INDIVIDUALS WHO REQUIRE LONG-TERM CARE SERVICES TO REMAIN IN THEIR HOMES SUCH AS PERSONAL CARE SERVICES CASE MANAGEMENT HELP WITH LAUNDRY AND CLEANING HOWEVER MEDICAID PROGRAMS DO NOT PAY FOR RENT MORTGAGE UTILITIES OR FOOD GUAM MEDICAID PROVIDES MEDICALLY NECESSARY HOME HEALTH SERVICES WHICH TENDS TO HAVE HIGHER UTILIZATION AMONG INDIVIDUALS WHO REQUIRE ASSISTED LIVING SERVICES BUT DOES NOT CURRENTLY COVER HOME AND COMMUNITY-BASED SERVICES PERSONAL CARE SERVICES OR CASE MANAGEMENT LOCALLY ST DOMINIC SENIOR CARE HOME IS COVERED BY LOCALLY FUNDED MIP MEDIC THE MIP PROGRAM SINCE THIS FACILITY IS NOT A CMS CERTIFIED INTERMEDIATE CARE FACILITY GUAM MEDICAID IS NOT ABLE TO COVER INTER INTERMEDIATE CARE FACILITY

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SERVICES CURRENTLY MIP PROVIDES SUPPLEMENTAL COVERAGE TO 37 BENEFICIARIES RESIDING AT ST DOMINIC'S SENIOR CARE HOME AT \$251.55 A DAY OR \$91,000 AND CHANGE PER YEAR WHICH WOULD WHICH HAS A TOTAL ANNUAL COST TO THE MIP PROGRAM FUNDED BY THIS LEGISLATURE AT \$3.397 MILLION IT SHOULD BE NOTED THAT THE GUAM MEDICAID OFFICE IS ABLE TO UPDATE THE GUAM MEDICAID STATE PLAN OR PURSUE A WAIVER TO PROVIDE A RANGE OF SERVICES TO INDIVIDUALS RESIDING IN AN ASSISTED LIVING FACILITY IN MAKING SUCH UPDATES TO THE GUAM MEDICAID STATE PLAN THE FINANCIAL IMPACT MAY EXCEED THE CURRENT MEDICAID CAP APPROPRIATED AND AWARDED TO GUAM THE ONGOING ADVOCACY TO REMOVE THE MEDICAID CAP FOR TERRITORIES MUST CONTINUE MORE AGGRESSIVELY MORE AGGRESSIVELY THAN EVER MAKING IT EQUITABLE TO STATES WHO DO NOT SHARE THE SAME LIMITATIONS COMMENTS UNDER FROM THE DIVISION OF GENERAL ADMINISTRATION OR THE HEALTH PROFESSIONAL LICENSING OFFICE THE HPLO IDENTIFIES ONE CONCERN REGARDING BILL 31 38 IN ITS CURRENT FORM THE BILL PROPOSES SHIFTING THE RESPONSIBILITY FOR MANAGING IN FACILITY FROM A NURSING HOME ADMINISTRATOR TO AN ASSISTED LIVING FACILITY ADMINISTRATOR THIS SHIFT WOULD REQUIRE THAT THE GUAM BOARD OF ALLIED HEALTH EXAMINERS TO AMEND ITS CURRENT RULES AND REGULATIONS WE RECOMMEND COLLABORATING WITH THE GUAM WITH THE ALLIED HEALTH BOARD TO ENSURE THAT THE BILL'S PROVISIONS WILL ACCURATELY REFLECT AND CLEARLY DEFINE THE REQUIREMENTS OF THE ADMINISTRATOR SPECIFIC SPECIALLY NHA'S MANAGE FACILITIES PROVIDING 247 MEDICAL CARE FOR RESIDENTS WITH COMPLEX HEALTH NEEDS WHILE ASSISTED LIVING FACILITY ADMINISTRATORS OVERSEE FACILITIES FOR LARGELY INDEPENDENT RESIDENTS WHO REQUIRE VARYING LEVELS OF ASSISTANCE TAILORING REGULATIONS OR REQUIREMENTS SPECIFIC TO THE TYPE OF ADMINISTRATOR WILL ENSURE THAT ADMINISTRATORS ARE QUALIFIED AND PROPERLY TRAINED FOR THEIR RESPECTIVE ROLES AS IT AS IT RELATES TO THE NATIONAL STANDARDS THE DIVISION ENVIRONMENTAL HEALTH UNDERSCORES THE IMPORTANCE FOR PROPER REGULATIONS OF ASSISTED LIVING FACILITIES IN ORDER TO AVOID HEALTH RISKS TO ITS RESIDENTS AND THE COMMUNITY AT LARGE INCLUDING WASTE MANAGEMENT CLEANING PROTOCOLS INFRASTRUCTURE ADEQUATE FALL PREVENTION MEASURES AND FOOD HANDLING TO PREVENT INJURIES AND THE SPREAD OF INFECTIOUS DISEASE IN THE COMMUNITY BY SETTING AND ENFORCING CLEAR ENVIRONMENTAL HEALTH STANDARDS THE REGULATION OF ASSISTED LIVING FACILITIES ENSURES THAT THESE FACILITIES MAINTAIN SAFE AND SANITARY CONDITIONS FOR THE TARGET POPULATION IN ADDITION FACILITIES INSPECT INSPECTIONS AND COMPLIANCE RECORDS CAN ASSIST

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FAMILIES IN MAKING INFORMED DECISIONS REGARDING THE CARE OF OUR MANOMKO AND THE OTHER SUITABLE RESIDENTS OF THE ASSISTED LIVING FACILITY PLEASE BE INFORMED THAT THERE IS ANOTHER STATUTE GOVERNING THE OPERATION OF NURSING HOME THUS DPHSS WOULD LIKE TO RECOMMEND THE FOLLOWING TO BE CONSISTENT WITH BILL 31 38 AMEND SUBSECTION 25101 F OF TITLE 10 GCA CHAPTER 25 TO READ ASSISTED LIVING FACILITIES MEANS A RESIDENT FOR THE ELDERLY OR THE INFIRM WHO REQUIRE ASSISTANCE WITH SOME OF THE ROUTINE ACTIVITIES OF DAILY LIVING AS WELL AS READY ACCESS TO MEDICAL CARE AS NEEDED AND SHALL INCLUDE BUT NOT LIMITED TO THE FOLLOWING AN INSTITUTION PRIVATE HOME OTHER PLACE OR PART OF A UNIT THEREFORE HOWEVER NAMED WHETHER FOR PROFIT OR NOT INCLUDING FACILITIES OPERATED BY THE GOVERNMENT OF GUAM WHICH IS ADVERTISED OFFERED MAINTAINED OR OPERATED FOR THE EXPRESS OR IMPLICIT PURPOSE OF PROVIDING ACCOMMODATION NURSING OR RELATED HEALTH CARE FOR TWO OR MORE INDIVIDUALS NOT RELATED TO THE OWNER OR ADMINISTRATOR BY BLOOD OR MARRIAGE WITHIN THE THIRD DEGREE BETWEEN THE THIRD DEGREE WHICH ACCOMMODATIONS AND CARE FOR A PERIOD OF 24 HOURS OR MORE CONSECUTIVE HOURS BUT SHALL NOT INCLUDE ANY PLACE PROVIDING CARE AND TREATMENT PRIMARILY FOR THE ACUTELY OF ILL IN OTHER WORDS OUR HOSPITAL RESIDENT FACILITY FOR THE ELDERLY MEANS A HOUSING ARRANGEMENT CHOSEN VOLUNTARILY BY A PERSON 60 YEARS OF AGE OR OVER OR OTHER AUTHORIZED REPRESENTATIVE WHERE VARYING LEVELS OF INTENSITIES OF CARE AND SUPERVISION PROTECTION SUPERVISION PERSONAL CARE OR HEALTH RELATED SERVICES ARE PROVIDED UPON THEIR VARYING NEEDS AS DETERMINED IN ORDER TO BE ADMITTED AND TO REMAIN IN THE FACILITY PEOPLE UNDER 60 YEARS OF AGE WITH COMPATIBLE NEEDS MAY BE ALLOWED TO BE ADMITTED OR RETAINED IN A RESIDENTIAL CARE FACILITY FOR THE ELDERLY IF NEEDED ENSURING THAT THE ASSISTED LIVING FACILITIES PROVIDE A SAFE HEALTHY AND DIGNIFIED ENVIRONMENT FOR OUR MANOMKO SHOULD BE A PRIORITY INCLUDING IN CLOSING DPHSS ACKNOWLEDGES THE CRITICAL GAP IN SERVICES FOR OUR ELDERLY POPULATION AS FAMILY DYNAMICS AND ECONOMIC REALITIES CONTINUE TO EVOLVE MANY FAMILIES FACE INCREASING CHALLENGES IN PROVIDING IN-HOME CARE FOR THEIR AGED AGING LOVED ONES THIS SHIFT UNDERSCORES THE URGENT NEED FOR ALTERNATIVE CARE OPTIONS SUCH AS ASSISTED LIVING FACILITIES TO ENSURE OUR ELDERLY OUR ELDERLY RECEIVE THE QUALITY SUPPORT DIGNITY AND SPECIALIZED CARE THEY DESERVE WE LOOK FORWARD TO THE PASSAGE OF BILL 31 38 WITH DPHSS AS RECOMMENDATIONS INCLUDED THANK YOU FOR YOUR TIME AND CONSIDERATION THANK YOU COMMITTEE

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SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:

THANK YOU MRS ARRIOLA WE'VE ALSO RECEIVED WRITTEN TESTIMONY FROM JESSICA AGUON CEPEDA IN SUPPORT OF BILL 31 AS WELL AS WRITTEN TESTIMONY FROM THE GUAM HOUSING AND URBAN RENEWAL AUTHORITY FROM DEPUTY DIRECTOR FERNANDO ESTEVES WHO ASKED ME OR HIS TESTIMONY INTO THE RECORD Hafa Adai we support the intent but are in opposition of BILL 31 38 AS CURRENTLY WRITTEN BILL 31 MERELY RENAMES NURSING HOME TO ASSISTED LIVING FACILITY AND CREATES A HYBRID DEFINITION THAT ALSO NEGLECTS PERSONS WITH DISABILITIES WHO FACE THE SAME NEEDS AS THE ELDERLY I'VE PREVIOUSLY TESTIFIED ON THE IMPORTANCE OF CONSISTENCY WITH THE TYPES OF RESIDENTIAL CARE FACILITIES IN THE RECENT SUMMIT THE FEDERAL HOUSING ADMINISTRATION OF THE US HOUSING URBAN DEVELOPMENT HUD SHARED RESOURCES FOR THE DEVELOPMENT OF RESIDENTIAL CARE FACILITIES I SUPPORT UPDATING OUR STATUTES TO ACCOMMODATE THE DEVELOPMENT OF RESIDENTIAL CARE FACILITIES BUT I DISAGREE WITH THE DEFINITION THAT IS TOO FAR REMOVED FROM INDUSTRY STANDARDS THE TYPE OF FACILITY AND HOW IT'S DEFINED IS CRITICAL TO INFORMING ON SERVICES PROVIDED SUBSEQUENT DEVELOPMENT AND REGULATIONS TO ITS PERMITTING AND OPERATIONS ADDITIONALLY DEFINITIONS CONSISTENT WITH STANDARD DEFINITIONS INFORM POTENTIAL GRANTERS REGULATORS AND INVESTORS ON SERVICES PROVIDED THERE ARE FIVE TYPES OF HOUSING FACILITIES FOR THE ELDERLY AND PERSONS WITH DISABILITIES ALL EXCEPT INDEPENDENT LIVING FACILITIES ARE CONSIDERED RESIDENTIAL CARE FACILITIES EXAMPLES OF EACH TYPE OF FACILITY HOME IS PROVIDED FOR YOU BELOW PLEASE TAKE NOTE OF THE IMPORTANT DIFFERENCES BETWEEN THE VARIOUS TYPES OF FACILITIES INDEPENDENT LIVING FACILITY HOUSING ARE HOUSING UNITS DESIGNED FOR THE ELDERLY OR NON-ELDERLY PERSONS WITH DISABILITIES THEY ARE DESIGNED FOR EASE OF USE AND MAY INCLUDE ADA ACCOMMODATIONS RESIDENTS ARE ABLE TO LIVE INDEPENDENTLY WITHOUT SERVICE REQUIREMENTS FOR DAILY LIVING OR MEDICAL CARE EXAMPLE GHURA ELDERLY HOUSING GUMA TRANKILODOT TALOFOFO AGAT ETC ASSISTED LIVING FACILITIES ARE DESIGNED TO ACCOMMODATE FRAIL ELDERLY AND PEOPLE WITH DISABILITIES WHO CAN LIVE INDEPENDENTLY BUT NEED ASSISTANCE WITH ACTIVITIES OF DAILY LIVING ASSISTANCE WITH EATING BATHING GROOMING DRESSING AND HOME MANAGEMENT ACTIVITIES ALF'S MUST PROVIDE SUPPORT SERVICES SUCH AS PERSONAL CARE TRANSPORTATION MEALS HOUSEKEEPING AND LAUNDRY THEY DON'T REQUIRE 24 HOUR ASSISTANCE OR SERVICES SERVICE ENRICHED HOUSING NURSING HOME IS HOUSING THAT IS DESIGNED TO ACCOMMODATE FRAIL ELDERLY PERSONS ELDERLY PERSONS PERSONS WITH

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SEVERE DISABILITIES WITH SERVICE NEEDS RESIDENTS ARE ABLE TO LIVE INDEPENDENTLY BUT NEED ASSISTANCE WITH ACTIVITIES OF DAILY LIVING COMPARABLE TO SERVICES PROVIDED IN ASSISTED LIVING FACILITIES AND ADDITIONALLY INCLUDE HEALTHCARE RELATED SERVICES THESE SUPPORTIVE SERVICES MUST BE AVAILABLE THROUGH A LICENSED OR CERTIFIED THIRD-PARTY SERVICE PROVIDER THEY ARE TYPICALLY 24-HOUR FACILITIES EXAMPLE ST DOMINIC'S SKILLED NURSING FACILITIES ARE LONG-TERM INPATIENT MEDICAL FACILITIES THAT PROVIDE TRANSITIONAL CARE FOR ITS PATIENTS EXAMPLE GMH SKILLED NURSING FACILITY PALLIATIVE HOSPICE CARE FACILITY ARE MEDICAL FACILITIES IS MEANT TO PROVIDE PHYSICAL COMFORT AND EMOTIONAL SOCIAL AND SPIRITUAL SUPPORT FOR PEOPLE NEAR THE END OF THEIR LIFE ASSISTED LIVING FACILITIES SERVICE ENRICH HOUSING NURSING HOMES AND SKILLED NURSING FACILITIES ARE DEFINED AS RESIDENTIAL CARE FACILITIES AND SHOULD BE ALLOWABLE FOR GOVERNMENT OR PRIVATE ENTITIES I HIGHLY RECOMMEND DEFINING EACH FACILITY ACCORDINGLY TO CLEARLY DELINEATE THE REQUIRED SERVICES BY TYPE THERE ARE COMPANIES THAT UTILIZE THE AGE IN PLACE MODEL HOWEVER THE SERVICE MODELS ARE STILL CONSISTENT WITH THE LEVELS OF ASSISTANCE CARE NECESSARY BASED ON PHASES IN AGING THIS ISN'T TO SAY A FACILITY CAN'T BE BOTH AN INDEPENDENT LIVING FACILITY ASSISTED LIVING FACILITY AND SERVICE ENRICHED HOUSING FACILITY HOWEVER REQUIREMENT SHOULD BE BASED ON THE TYPE OF SERVICE THAT'S BEING PROVIDED WHETHER SINGULARLY OR IN TOTAL SIGN FERNANDO ESTEVES DEPUTY DIRECTOR GUAM HOUSING URBAN RENEWAL AUTHORITY THANK YOU FOR YOUR INPUT SENATOR PARKINSON YOU CAN BEGIN WITH THE QUESTIONING AND YOU HAVE FIVE MINUTES

SENATOR WILLIAM A. PARKINSON: AT THIS TIME MADAM CHAIR I JUST WANT TO LISTEN TO WHAT PEOPLE HAVE TO SAY SO I DON'T HAVE ANY QUESTIONS AT THIS TIME

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:
SENATOR TELO TAITAGUE

SENATOR TELO T. TAITAGUE: THANK YOU MADAM CHAIR YOU KNOW I'VE BEEN A REAL ADVOCATE WHEN IT COMES TO YOU KNOW FINDING FACILITIES FOR OUR AGING POPULATION WHICH BY 20 2030 IT'S ESTIMATED THAT IN THE US AS WELL AS JAPAN THERE WILL BE MORE SENIOR CITIZENS THAN THERE ARE CHILDREN AND THIS IS AN AREA IN WHICH WE HAVE TO ADDRESS NOW BECAUSE WE'RE GETTING TO THAT POINT 20 2030 2030 YEAH NOT 202030 BUT 2030 I DID INTRODUCE THANK YOU MR ADA FOR BRINGING UP THE QC FOR BILL 111-36 THAT WAS

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INTRODUCED THERE WAS ANOTHER BILL THAT WAS INTRODUCED IN THE 36 GUAM LEGISLATURE THAT ACTUALLY VERBATIM IS EXACTLY WHAT THIS BILL IS IT WAS INTRODUCED BY THEN SPEAKER TERLAJE AS WELL AS MYSELF AS WELL AS SENATOR PEREZ I BELIEVE SHE WAS ANOTHER CO-SPONSOR OF THE I MEAN LITERALLY THIS BILL IS EXACTLY WORD FOR WORD EXCEPT THE INTENT I'M NOT SURE IF WE HAD A BUT I DON'T THINK THERE WAS A PUBLIC HEARING ON IT BUT I DO UNDERSTAND THE CONCERNS OF GHURA AND HAVING TO ADDRESS SOME OF THEIR CONCERNS ENSURING THAT THE DEFINITION IS ACTUALLY SPOT ON THAT WE'RE NOT GOING TO JEOPARDIZE ONE BILL THAT PASSED EARLIER COMPARED TO A NEW BILL THAT WAS INTRODUCED BY SPEAKER WELL NOW IT'S SENATOR PARKINSON TOOK THE BILL AND REINTRODUCED HER BILL THAT WE DON'T LEAVE OUT ANY OTHER TYPES OF FACILITIES WHETHER IT'S MULTI FACILITY WHETHER IT'S INDEPENDENT LIVING OUR SKILLED NURSING FACILITY AND THAT'S THE MOST IMPORTANT THING BUT I WILL LOOK AT TALKING WITH THE FORMER SENATOR FERNANDEZ ESTEVES I'M SORRY ESTEVES TO GO OVER THIS PARTICULAR BILL AND FIND OUT HIS CONCERNS AND TRY AND TWEAK IT TO BRING IT TO SOMETHING THAT IT'S MORE CONDUCIVE TO HIM BUT I APPRECIATE THE TESTIMONY FROM PUBLIC HEALTH THOUGH THERE WAS NOTHING REALLY IN THAT TESTIMONY THAT WOULD LET ME PULL THAT ONE UP AGAIN THERE IT IS OKAY YEAH THE DEFINITIONS ARE VERY IMPORTANT DIRECTOR ARRIOLA AND I DON'T KNOW IF YOU HAD THE OPPORTUNITY DID YOU HAVE AN OPPORTUNITY TO READ GHURA'S TESTIMONY I'M SORRY CAN YOU TURN ON THE MIC I CAN'T HEAR YOU IT'S

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: NO AS THE SENATOR SALAS JUST READ IT NOW I DON'T I DIDN'T

SENATOR TELO T. TAITAGUE: OH OKAY

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: I'M JUST HEARING IT WITH YOU

SENATOR TELO T. TAITAGUE: OKAY SO MAYBE TAKE A COPY OF THAT TESTIMONY I THINK THEY MIGHT HAVE A COPY OF IT WITH YOU AND THEN MAYBE GET A HOLD OF DIRECTOR ESTEVES AND FIND OUT WHAT THE CONCERNS ARE BECAUSE OF COURSE THIS HAS A LOT TO DO WITH PUBLIC HEALTH AND ENSURING THAT THOSE ARE MET BUT YEAH IT'S VERY CONTRADICTIVE WHEN WE HAVE THE AGENCIES YOU KNOW GOING AGAINST EACH OTHER AND NOT BEING ABLE TO WORK TOGETHER AND SOMETHING LIKE THIS BUT OTHER THAN THAT LIKE I SAID THIS WAS AN EXACT SAME BILL THAT WAS INTRODUCED IN THE 36 DIDN'T HAVE A

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PUBLIC HEARING IT'S HERE TODAY AND I'M AT LEAST I'M GLAD IT'S BEING HEARD RIGHT AWAY SO OTHER THAN THAT THANK YOU MADAM CHAIR I BELIEVE MY TIME IS UP

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON: I BELIEVE YOU HAD A FEW MORE MINUTES BUT

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: MADAM CHAIR I IF I COULD ADDRESS SENATOR TELO'S COMMENT ABOUT CONTRADICTION THERE'S NO CONTRADICTION

SENATOR TELO T. TAITAGUE: I DIDN'T ASK A QUESTION MADAM CHAIR THANK YOU

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON: YOU CAN PROCEED

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THERE'S NO CONTRADICTION I DON'T SEE A CONTRADICTION SENATOR OR I'M SORRY DEPUTY FERNAN FERNANDO ESTEVES HE MENTIONED HE'S IN FAVOR OF THE INTENT HE WAS JUST SOME CONCERNED ABOUT OF THE DEFINITION SO I DON'T FEEL THAT

SENATOR TELO T. TAITAGUE: DIRECTOR ARRIOLA OPPOSED TO THE BILL HE WAS OPPOSED TO THE BILL

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON: IT STATES THAT WE SUPPORT THE INTENT BUT ARE IN OPPOSITION OF BILL 31 AS CURRENTLY WRITTEN

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: BECAUSE OF THE DEFINITION

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON: YEAH I CAN PROVIDE YOU A COPY AFTER THE HEARING

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THANK YOU

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON: THANK YOU SENATOR GUMATAOTAO

SENATOR EULOGIO SHAWN GUMATAOTAO, COMMITTEE MEMBER: THANK YOU MADAM CHAIR AND THANK YOU PANEL FOR BEING AND

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ENDURING TODAY I APPRECIATE YOU BOTH FOR SPENDING THE TIME AND YOUR TEAM DIRECTOR ARRIOLA FOR BEING HERE TODAY I DON'T HAVE VERY MANY QUESTIONS BUT I JUST IN MY INITIAL READ THE THERE IS GOING TO BE A STATUTE THAT WOULD BE IMPACTED BY BILL 31-38 AND THAT'S 10 GCA CHAPTER 7 NURSING HOMES WAS WHICH WAS CODIFIED IN JANUARY OF 1975 BY PUBLIC LAW 12-204 NOW IN PUBLIC LAW 2012- 204 IT REFERENCED COMPLIANCE TO STANDARDS RULES AND REGULATIONS ISSUED PURSUANT TO THE LAW SO FOR THE RECORD WHAT STANDARDS RULES AND OR REGULATIONS RELATIVE TO THE LICENSE SHARE OPERATIONS AND OVERSIGHT OF NURSING HOMES OR SIMILAR GROUP ACCOMMODATION FACILITIES HAVE BEEN ESTABLISHED PURSUANT TO THE ADMINISTRATIVE ADJUDICATION ACT OR GUAM LAW SINCE THE ENACTMENT OF PUBLIC LAW 12-204 NEARLY 50 YEARS AGO

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: YEAH I'LL GET BACK TO YOU BECAUSE THAT WAS WHAT YEAR

SENATOR EULOGIO SHAWN GUMATAOTAO, COMMITTEE MEMBER: YEAH
YEAH IT'S YEAH 12-204

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: I WILL HAVE TO LOOK INTO THAT

SENATOR EULOGIO SHAWN GUMATAOTAO, COMMITTEE MEMBER: YEAH
AND GET BACK TO COMMITTEE YEAH I THINK IT WOULD BE IMPORTANT FOR US AS WE'RE GOING THROUGH THIS

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: OR MAYBE TOM IF I CAN INVITE UP TOM NADEAU JOIN ME HE'S THE DIVISION CHIEF FOR ENVIRONMENTAL HEALTH AND MAYBE HE KNOWS IT BECAUSE HE'S BEEN AROUND

MASATOMOL TOM NADEAU, CHIEF ENVIRONMENTAL OFFICER - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THANK YOU GOOD
AFTERNOON MY NAME IS TOM NADEAU I'M THE CHIEF ENVIRONMENTAL PUBLIC HEALTH OFFICER

SENATOR EULOGIO SHAWN GUMATAOTAO, COMMITTEE MEMBER:
THANKS TOM

MASATOMOL TOM NADEAU, CHIEF ENVIRONMENTAL OFFICER - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THANK YOU VERY MUCH I CAN
ANSWER IN TERMS OF THE STANDARDS FOR SANITATION SO THAT THERE ARE

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STANDARDS CHAPTER SIX OF TITLE 10 ARTICLE THREE SPECIFICALLY THEY'VE ADOPTED AN INTERIM REGULATIONS GOVERNING NURSING HOMES BUT AS THE ORIGINAL QUESTION IS THE LICENSING THAT IS NOT MY DIVISIONS AREA IF YOU WILL SO I CAN'T ANSWER THAT BUT THERE ARE STANDARDS FOR SANITATION WHICH WE DO APPLY BUT TO THE ACTUAL LICENSING OF THE FACILITY THAT IT'S NOT WITHIN OUR PURVIEW ALL RIGHT

SENATOR EULOGIO SHAWN GUMATAOTAO, COMMITTEE MEMBER:

THANK YOU SO MUCH TOM ALSO IN THE BILL'S PREAMBLE IT CITES PUBLIC LAW 36 111 WHICH IS IN WHICH WAS ENACTED IN OCTOBER OF 22 2022 WHICH AUTHORIZED A SPECIAL QUALIFYING CERTIFICATE PROGRAM FOR DEVELOPERS WHO ENGAGE IN CONSTRUCTING OR SUBSTANTIALLY RENOVATING EXISTING FACILITIES IN ORDER TO ACCOMMODATE THE HOUSE HOUSING NEEDS OF OUR MANOMKO PUBLIC LAW 36 111 INCLUDES THE TERM RESIDENTIAL LIVING WHICH IS DEFINED AS A HOUSING ARRANGEMENT BETWEEN ADA COMPLIANCE AND THE FAIR HOUSING ACT FOR ELDERLY THAT IS CHOSEN VOLUNTARILY BY PERSONS 55 YEARS OF AGE AND OVER OR THEIR AUTHORIZED REPRESENTATIVE WHERE INDEPENDENT LIVING ACCOMMODATIONS ASSISTED CARE ACCOMMODATIONS AND OR NURSING HOME ACCOMMODATIONS OR ANY COMBINATION THEREOF INVOLVING VARYING LEVELS AND INTENSITIES OF CARE AND SUPERVISION PROTECTIVE SUPERVISION OR PERSONAL CARE ARE PROVIDED BASED ON THEIR VARYING NEEDS THAT ARE LOCATED WITHIN THE ELDERLY HOUSING FACILITY SO IF YOU CAN I'M HOPING THAT MAYBE YOU CAN HELP ANSWER WHAT EFFORTS IF ANY MAY HAVE BEEN MADE TO DATE TO PROVIDE ANY MAYBE AWARENESS OF PUBLIC LAW 36-111 AND HAS THE DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES MADE ANY EFFORT TO ADDRESS MAYBE ANY POLICY GAPS THAT MAY EXIST WHICH COULD PREVENT OR MAKE IT CHALLENGING FOR INVESTORS TO DEVELOP ASSISTED LIVING FACILITIES AS DEFINED IN BILL 31-38 THROUGH THE SPECIAL QUALIFYING CERTIFICATE PROGRAM THAT'S AUTHORIZED BY PUBLIC LAW 36 111

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES:

I AM NOT AWARE OF ANY EFFORT I THINK WHAT I HEARD IS ANY EFFORT THAT WOULD LIMIT ANY POSSIBLE BUSINESS VENTURE TO OPEN IS THAT WHAT YOU'RE SAYING

SENATOR EULOGIO SHAWN GUMATAOTAO, COMMITTEE MEMBER: YES

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES:

I'M NOT AWARE OF IT I MEAN WE SET YOU KNOW OUR LIMITATIONS ARE REALLY SPECIFIC TO SANITATION AND STANDARDS OF THAT

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NATURE WITH REGARDS TO ANY QC PROMOTION THAT IT'S AVAILABLE I WOULDN'T I THINK THAT WOULD BE MORE OF A GEDA QUESTION I'M NOT SURE MAYBE I CAN'T I CAN'T SAY I'M SURE THERE'S A BUNCH OF QC'S THAT THEY PROMOTE ON THEIR WEBSITE THAT'S MY ASSUMPTION BUT THAT WOULDN'T BE IN THE PUBLIC HEALTH REALM THE PUBLIC HEALTH REALM WOULD BE IF ANYTHING THE SANITATION CONCERNS AND REGULATIONS

SENATOR EULOGIO SHAWN GUMATAOTAO, COMMITTEE MEMBER:

THANK YOU DIRECTOR ARRIOLA AND AGAIN I JUST WANT TO THANK YOU ALL FOR TESTIFYING I AM IN SUPPORT OF TRYING TO MAKE SURE THAT THIS BILL CAN WORK FOR ALL THE PEOPLE OF GUAM SO THANK YOU VERY MUCH FOR BEING HERE TODAY THANK YOU MADAM CHAIR

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THANK YOU

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:

THANK YOU SENATOR GUMATAOTAO SENATOR VINCE BORJA

SENATOR VINCENT A. V. BORJA, COMMITTEE MEMBER: THANK YOU MADAM CHAIR I HAVE NO QUESTIONS BUT I JUST WANT TO SHARE THAT YOU KNOW MEAN I MET WITH MR ADA PREVIOUSLY BEFORE THIS NOT BEFORE THIS PUBLIC HEARING BUT A COUPLE WEEKS AGO IN REGARDS TO THIS PROPOSAL AND I'M FULL IN FULL SUPPORT I SUPPORT THE INTENT BUT OBVIOUSLY A LOT OF WORK TO BE DONE WITH THE BILL AND SO I LOOK FORWARD TO DISCUSSING THIS MORE IN COMMITTEE THANK YOU

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:

THANKS SENATOR BORHA SENATOR TERLAJE

SENATOR THERESE M. TERLAJE: SI YU'OS MA'ASE MADAM CHAIR THANK YOU FOR YOUR TESTIMONY I THINK EVERYONE ON GUAM IS IN SUPPORT OF A ASSISTED LIVING RIGHT AND WHAT WE NEED TO DO TO GET IT DONE AS IS BY AS THE SENATOR SAID WE DID INTRODUCE A BILL BACK IN 2022 IT WAS WE WERE ASSISTED WITH THAT WITH BY GEDA AND WE DID HAVE A PUBLIC HEARING BUT AT THE PUBLIC HEARING THERE WERE INCONSISTENT TESTIMONY BETWEEN AGENCIES AGAIN AND VERY MUCH CONCERNS RAISED BY THE PUBLIC GUARDIAN AS TO WHETHER THE BILL WOULD IN FACT MAKE ANY CHANGE AS TO THE COVERAGE AT PERSONS WHO WERE AT ST DOMINIC'S BECAUSE THAT WAS THE ONLY PLACE AT THE TIME THAT ANY TYPE OF ARRANGEMENT LIKE THIS AND OF COURSE NOW WE HAVE SOMEBODY WHO'S PROPOSING TO OPEN ONE DO YOU THINK SO DO WE DO HAVE A WHAT LOOKS LIKE A CONFLICT IN DEFINITION

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BETWEEN GHURA PUBLIC HEALTH I'M NOT SURE I MEAN THERE ARE EXISTING RULES AND REGS FOR NURSING HOMES RIGHT AND THIS BILL PROPOSES TO REDEFINE EVERYTHING AS AN ASSISTANT LIVING FACILITY NURSING HOMES ARE A SUBSET OF THAT SO THERE ARE SOME OTHER CHANGES THAT MIGHT NEED TO BE MADE BUT DOES THIS BILL IMPACT COVERAGE AT ST DOMINIC'S

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: IT WOULDN'T

SENATOR THERESE M. TERLAJE: IN FACT

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THEY'RE CURRENTLY BEING COVERED BY MIP

SENATOR THERESE M. TERLAJE: RIGHT THEY'RE BEING SO THEY WERE ONLY BEING BECAUSE IN THE PAST THEY HAD BEEN COVERED BY MEDICAID AND THEN PUBLIC HEALTH CHANGED ITS POLICY OR MADE A DIFFERENT DETERMINATION AND NOW THAT COVERAGE ENDED AND SO NOW IT'S ONLY MIP

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: MIP

SENATOR THERESE M. TERLAJE: THAT'S CORRECT YOU SAID THAT THEY WERE NOT CURRENTLY

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: CMS

SENATOR THERESE M. TERLAJE: YES WERE THERE ANY EFFORTS TO HELP THEM TO BECOME CMS CERTIFIED

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: I'M NOT SURE OF THE PAST EFFORTS YOU KNOW THEY'RE PRIVATELY RUN SO I'M SURE THAT I HAVE TO BELIEVE THAT THEIR MANAGEMENT KIND OF LOOKED AT PERHAPS WHAT IT REQUIRES TO BE A CMS CERTIFIED WHICH SOMETIMES IT MIGHT BE VERY DIFFICULT OR A BUSINESS DECISION I'M JUST ASSUMING ALL RIGHT WELL

SENATOR THERESE M. TERLAJE: BECAUSE IF I REMEMBER CORRECTLY THAT WAS ONE OF THE ISSUES THAT PUBLIC HEALTH HAD DISCUSSED THAT THEY WERE GOING TO TRY TO PURSUE THAT BECAUSE ST DOMINIC'S WAS THE ONLY PLACE BECAUSE THEY WANTED TO MOVE SOME RESIDENTS OUT OF GMH IT WAS ALL A GOVERNMENT WIDE SOLUTION WAS TO HELP THEM TO BECOME CMS CERTIFIED

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OR WHATEVER AND IF THAT WAS POSSIBLE SO THAT THEY COULD BE COVERED AND THAT WE WERE GOING TO IN TURN YOU KNOW REVISE DEFINITIONS AND THINGS LIKE THAT ON OUR SITE THAT WAS POSSIBLE

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: SO WHAT I CAN DO IS I CAN REACH OUT TO THE MANAGEMENT OF ST DOMINIC'S AND ASK IF THAT'S STILL SOMETHING THAT THEIR MANAGEMENT IS WILLING TO LOOK INTO AND IF SO AND IF THERE'S A CHANCE THAT IT'S A YES THEN WE'LL DEFINITELY DO WHAT WE CAN AS A GOVERNMENT TO HELP THEM GET THERE ALL RIGHT

SENATOR THERESE M. TERLAJE: AND SO THIS BILL DOESN'T IN ANY WAY CHANGE OUR ELIGIBILITY FOR MEDICAID SO WOULD THE FACILITY THAT MR ADA IS PROPOSING BE COVERED BY MEDICAID

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: NO BECAUSE CURRENTLY MEDICAID DOESN'T COVER BUT THAT'S WHY WE I ADDED INTO MY TESTIMONY THAT MEDICAID THE MEDICAID OFFICE CAN REVISE OR UPDATE ITS STATE PLAN NOW THAT WE HAVE A I GUESS A VIABLE BUSINESS THAT WANTS TO OPEN SUCH A FACILITY AND I THINK WE JUST NEED TO DETERMINE I GUESS THIS BILL WILL DETERMINE HOW THAT HOW THAT THE BUSINESS WILL BE LICENSED AND THEN ON OUR END SANITARY PERMITS AND THINGS OF THAT NATURE BUT IT IS NOT CURRENTLY COVERED MEDICAID DOES NOT CURRENTLY COVER ASSISTED LIVING FACILITIES IS IT POSSIBLE ABSOLUTELY WE CAN LOOK INTO IT BUT I CAUTION AND I THINK I MENTIONED THIS IN MY TESTIMONY THAT WE IN THE PAST YEAR I KNOW LAST YEAR LAST FISCAL YEAR WE ALMOST MET THE CAP OF THE CURRENT THINGS WE DO COVER AND SO WHEN WE ADD ANOTHER COVERAGE ANOTHER SERVICE SUCH AS THIS WE NEED TO DO SOME FINANCIAL ANALYSIS ON HOW THAT'S GOING TO IMPACT AND IF IT GOES OVER OUR CAP BECAUSE WE'RE CAPPED RIGHT AS A TERRITORY THEN WE NEED TO DETERMINE WE NEED TO MAKE SOME HARD DECISIONS OF WHAT SERVICES ARE CURRENTLY COVERED BY MEDICAID THAT WILL NO LONGER BE COVERED BY MEDICAID IF ASSISTED LIVING FACILITIES ARE A PRIORITY OVER THAT OVER THAT SERVICE

PETER ALECIS ADA, FOUNDER AND CEO - GUMA ORU: MAY MAY I COMMENT PLEASE IF YOU MIND I AM VERY MUCH AWARE THAT IN IN SOME CASES NOT ALL CASES MEDICAID PATIENTS THEY WILL COVER FOR A FOR THE CAREGIVER THERE THEY THERE HAVE BEEN SITUATIONS THAT THEY HAVE COVERED FOR THAT SO JUST DON'T KNOW

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THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: NO I THINK YOU'RE TALKING ABOUT SEPARATE AUXILIARY SERVICES THAT MEDICAID COVERS BUT WE'RE TALKING ABOUT MEDICAID COVERING ROOM AND BOARD AND THINGS OF THAT NATURE THAT IS CURRENTLY NOT COVERED BUT YOU'RE CORRECT MR ADA THERE ARE CERTAIN SERVICES THAT ARE COVERED BY MEDICAID BUT NOT THE FACILITY ITSELF IN OTHER WORDS WE WOULDN'T BE ABLE AN INDIVIDUAL WOULDN'T BE ABLE TO CHARGE MEDICAID FOR THEIR COST TO LIVE THERE AT THIS MOMENT

SENATOR THERESE M. TERLAJE: RIGHT AND SO THE BILL DOESN'T CHANGE THAT SO WHAT WE HAVE IN PLACE TODAY WHAT MEDICAID IS COVERING MEDICALLY NECESSARY HOME HEALTH SERVICES BUT DOES NOT COVER HOME AND COMMUNITY BASED SERVICES PERSONAL CARE SERVICES OR CASE MANAGEMENT THAT'S STILL GOING TO BE IN PLACE AFTER THIS BILL'S PASSED BUT IT WAS ALSO IN 2022 THAT I REMEMBER BECAUSE THE PUBLIC GUARDIAN WAS VERY ADAMANT MARCY SANTOS AT THAT TIME THAT WE SHOULD UPDATE OUR STATE PLAN OR PURSUE THAT WAIVER BECAUSE THERE WAS ALSO TESTIMONY BY PUBLIC HEALTH WHERE THEY GAVE ALL THE DIFFERENT STATES AND WHAT THEIR YOU KNOW WHICH ONES HAD WAIVERS AND DIFFERENT THINGS AND HOW THEY HANDLED THIS ASSISTED LIVING SO YEAH I'M SURPRISED IF THERE HAS BEEN NO EFFORT TO DO THAT SINCE 2022 BECAUSE THAT WAS ONE OF THE REASONS I THOUGHT WE WERE PUTTING THAT OFF IS BECAUSE YEAH THAT'S THE WHOLE POINT RIGHT WE WANT TO HAVE THESE AND MAKE IT A VIABLE BUSINESS SO THAT THEY CAN BE SUSTAINABLE HERE ON GUAM

PETER ALECIS ADA, FOUNDER AND CEO - GUMA ORU: MAY I COMPLETELY FORGOT TO MENTION THIS DOES NOT PRECLUDE EVEN A VETERAN TO APPLY FOR ASSISTED LIVING THE QUESTION IS WHO NEEDS IT MOST AND THE DOCTOR WE WILL HAVE TO TAKE THAT FROM THE DOCTOR THE SOCIAL WORKERS WILL GROUP TOGETHER WITH THE DOCTOR AS WELL AS THE INTAKE WORKER AND THE AND THE NURSE TO DETERMINE SO I JUST WANTED TO MAKE SURE THAT I DON'T LEAVE OUT THE VETERANS CAUSE IF THEY IF SOMEBODY WANTS TO THERE'S NOTHING TO PREVENT ANYONE FROM APPLYING THE QUESTION IS WHO NEEDS IT MOST

SENATOR THERESE M. TERLAJE: ARE WE SAYING IT THIS COULD BE PRIVATE YOUR PROPOSAL IS THAT IT WILL BE PRIVATELY FUNDED RIGHT DOES WILL MIP APPLY

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: NO WE WOULD NEED TO LOOK INTO THAT I THINK I THINK HIS NONPROFIT ORGANIZATION MENTION THAT THEY HAVE A GRANT THAT

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MIGHT I'M NOT SURE MAYBE HOW MUCH THEY'RE GOING TO COVER BUT MAYBE SUBSIDIZE MAYBE THE WORD IS THE GRANT WILL PROBABLY

SENATOR THERESE M. TERLAJE: I THINK OUR ULTIMATE GOAL IS TO GET IT SO THAT WE'VE GOT OUR

PETER ALECIS ADA, FOUNDER AND CEO - GUMA ORU: LET ME ANSWER THAT PLEASE REAL QUICKLY AS FAR AS THE LODGING FOR THEM TO SEE IF WHOEVER IS GOING TO STAY THAT'S GOING TO BE SHOULDERED BY THE INDIVIDUAL WHO IS TRYING TO ATTEMPT TO MOVE IN WHAT WE WILL COVER IS THE SERVICES TO WHICH WE ARE GOING TO PROVIDE HIM OR HER WE'RE NOT INVOLVED IN THE DETERMINE AND THE PAYMENT OF THEIR LODGING ALL RIGHT

SENATOR THERESE M. TERLAJE: ALL RIGHT I HAVE NO OBJECTION TO THAT MODEL I'M JUST POINTING OUT THAT WE WERE TRYING TO GO SOMETHING BIGGER AND BETTER YOU KNOW BIGGER SO THAT MANY COMPANIES CAN APPLY FOR MEDICAID SO THAT WE WOULD BE MORE SUSTAINABLE IN THIS INDUSTRY IN THIS SERVICE THAT WE ARE PROVIDING SO I WOULD I WOULD ASK PUBLIC HEALTH TO PLEASE PURSUE AND TELL US WHAT THE ANALYSIS SHOWS YOU WHETHER YOU KNOW IT'S WORTH IT OR IT'S NOT WORTH IT AND IF IT'S NOT THEN I THINK WE SHOULD REALLY PUT THAT ON THE RECORD BECAUSE WE'VE BEEN WAITING TWO YEARS NOW TO HEAR THAT IT'S NOT GOING TO BE PURSUED BECAUSE WE'RE GOING TO EXCEED OUR CAP BUT IT WE'RE REALLY TRYING TO CREATE THIS AS A VENUE FOR OUR ELDERLY HERE ON GUAM SI YU'OS MA'ASE AND SI YU'OS MA'ASE MADAM CHAIR

SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:
THANK YOU SENATOR TERLAJE SENATOR CALVO

SENATOR SHELLY V. CALVO, COMMITTEE MEMBER: THANK YOU MADAM CHAIR THANK YOU FOR YOUR TESTIMONIES DIRECTOR THERESE ARRIOLA AND MR PETER ALECIS I HAVE SOME REMARKS AND SOME QUESTIONS LATER ON I KNOW THAT BILL 31 38 IS WELL INTENDED WHICH WILL EXPAND ASSISTED LIVING OPTIONS FOR OUR MANOMKO OUR COMMUNITY'S TREASURE PROVIDING THEM WITH DIGNITY INDEPENDENCE AND THE CARE THEY NEED TOO MANY SENIORS FIND THEMSELVES CAUGHT BETWEEN INDEPENDENT LIVING AND FULL-TIME NURSING HOME CARE WITH VERY FEW ALTERNATIVES THIS BILL FILLS THE GAP BY ESTABLISHING A CLEAR REGULATORY FRAMEWORK ATTRACTING INVESTMENT OPPORTUNITIES AND ENSURING AFFORDABILITY THROUGH MEDICAID AND OTHER HEALTH CARE PROGRAMS THIS LEGISLATION IS NOT JUST ABOUT FACILITIES IT'S ABOUT PEOPLE IT'S ABOUT ENSURING THAT OUR ELDERS

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CAN AGE WITH DIGNITY SECURITY AND RESPECT WHILE EASING THE BURDEN ON FAMILIES STRUGGLING TO PROVIDE ADEQUATE CARE IT ALSO PRESENTS AN ECONOMIC OPPORTUNITY CREATION OF JOBS AND STRENGTHENING LOCAL BUSINESSES IN THE HEALTH CARE SECTOR I RECOGNIZE THE INTENT AND POTENTIAL BENEFITS OF THIS MEASURE PARTICULARLY IN FILLING THE GAP BETWEEN INDEPENDENT LIVING AND NURSING HOME CARE GIVING OUR SENIORS MORE CHOICES AND REDUCING THE BURDEN ON FAMILIES WHO STRUGGLE TO PROVIDE CARE NOW ALL WE NEED TO DO IS TO ENSURE THAT ASSISTED LIVING FACILITIES ARE AFFORDABLE WELL-REGULATED AND FINANCIALLY SUSTAINABLE IT IS CRITICAL WE NEED CLEAR OVERSIGHT MECHANISMS TO PREVENT FINANCIAL EXPLOITATION OR SUBSTANDARD CARE AND A WELL-DEFINED FUNDING PLAN SO THAT THESE FAMILIES OR FACILITIES DO NOT BECOME OUT OF REACH FOR OUR LOW AND MIDDLE INCOME SENIORS ADDITIONALLY WE MUST ENSURE THAT OUR HEALTH CARE SYSTEM IS EQUIPPED TO INTEGRATE OTHER SUPPORT SERVICES AND RESOURCES NOW GOING TO MY QUESTION I WILL DIRECT MY QUESTION TO DIRECTOR THERESE DOES THE DPHSS CURRENTLY HAVE THE STAFFING TRAINING AND RESOURCES NECESSARY TO REGULATE ALF OR ASSISTED LIVING FACILITIES EFFECTIVELY OR WILL ADDITIONAL FUNDING AND PERSONNEL BE REQUIRED

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: YES AND YES SO I MEAN NO WE DON'T HAVE THE CURRENT PERSONNEL THIS IS WOULD BE AN ADDED REGULATING AN ADDED FACILITY THAT WE'RE CURRENTLY NOT REGULATING BECAUSE THERE'S NO CURRENT BUSINESS OPERATING WOULD REQUIRE US IT'LL BE ANOTHER MANDATE OF OURS SO WITH A WITH AN ADDITIONAL MANDATE WOULD REQUIRE ADDITIONAL STAFF MY UNDERSTANDING IS I WHAT I'M HEARING IS PROBABLY THIS IS THE FIRST IF ANYTHING THAT MIGHT BE POSSIBLY COMING UP I'M NOT QUITE SURE WHERE THIS FACILITY THAT GUMA ORU IS LOOKING INTO BUT I'M SURE WHEN START GETTING THEIR PERMITS AND THEIR BUSINESS LICENSE AND THINGS LIKE THAT IT WILL TRIGGER US TO DO WHAT WE NEED TO DO ON THE SANITARY THE SANITATION SITE

PETER ALECIS ADA, FOUNDER AND CEO - GUMA ORU: IT WILL GET TO YOU

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: YES IT EVENTUALLY WILL GET TO ME BUT WE CURRENTLY DON'T HAVE THE STAFFING BECAUSE THERE IS CURRENTLY NO BUSINESS IN PLACE BUT WE WOULD BE WE WOULD NEED

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SENATOR SHELLY V. CALVO, COMMITTEE MEMBER: AND AS YOU MENTIONED AN ADDITIONAL MANDATE IS REQUIRED YEAH NEXT QUESTION HOW FREQUENTLY WILL INSPECTIONS AND COMPLIANCE CHECK BE CONDUCTED ANY IDEA

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: MAYBE TOM CAN COME IT'S PROBABLY GOING TO MIRROR SOME OTHER FACILITY INSPECTIONS THAT WE DO

MASATOMOL TOM NADEAU, CHIEF ENVIRONMENTAL OFFICER - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: THANK YOU FOR THE QUESTION MA'AM SO IN TERMS OF SANITARY PERMIT AND THE DEFINITION OF NURSING HOMES THERE ARE TWO FACILITIES THAT HAVE CENTER PERMITS UNDER THE DEFINITION OF NURSING HOME AND THEY ARE SKILL NURSING FACILITY AND THE ST DOMINIC'S AND THEY ARE WHAT WE DEEMED A FACILITY THAT CATERS TO HIGHLY SUSCEPTIBLE POPULATION SO BY POLICY AND PRACTICE FOUR TIMES A YEAR THAT IS THE ESTABLISHMENT RIGHT THAT WE HAVE ESTABLISHED FOR CURRENT STANDARDS WE HAVE ESTABLISHED FOR THAT TYPE OF OPERATIONS

SENATOR SHELLY V. CALVO, COMMITTEE MEMBER: I SEE FOUR TIMES A YEAR LAST QUESTION HOW WILL YOU KNOW THESE ARE THINGS THAT ARE UNAVOIDABLE RIGHT COMPLAINTS AND GRIEVANCES FROM RESIDENTS OR THEIR FAMILY MEMBERS HOW ARE THESE GOING TO BE HANDLED AND WHAT ENFORCEMENT ACTIONS WILL BE TAKEN IF ISSUES ARISE

THERESE ARRIOLA, DIRECTOR - DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES: WELL IF IT IS A SANITATION OR SANITARY ISSUE THEN OF COURSE PUBLIC HEALTH WOULD BE INVOLVED BUT IF IT'S A COMPLAINT OF MANAGEMENT OR CLEAN OR DAY-TO-DAY CLEANLINESS I WOULD HAVE TO BELIEVE THAT THE BUSINESS ITSELF AND THE MANAGEMENT WILL ADDRESS THAT WE WOULD ONLY BE ABLE TO ASSIST IN COMPLAINTS WHEN IT COMES TO ANY SANITARY OR EVEN MAYBE FOOD SPOILAGE ISSUES ANYTHING CONNECTED TO OUR SANITATE SANITATION REQUIREMENT THAT WE OVERSEE BUT ANYTHING ELSE OTHER THAN THAT THE MANAGEMENT OF THE SITE I WOULD I BELIEVE THAT THE OWNERS OR THE BUSINESS OWNERS WILL ADDRESS THAT WILL ADDRESS THAT

SENATOR SHELLY V. CALVO, COMMITTEE MEMBER: MR ADA WOULD YOU LIKE TO ADD TO THAT THANK YOU VERY MUCH THAT IS THE VERY REASON WHY I INVITED ENVIRONMENTAL HEALTH AND PUBLIC WORKS TO COME AND LOOK AT

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THE FACILITY THEMSELVES AND GUIDE ME WHAT I NEED TO DO THE FIRST THING THAT CAME TO MY MIND IS IT HAS TO BE ADA COMPLIANT THAT WAS THE FIRST THING AND I HAVE TO COMMEND ENVIRONMENTAL HEALTH STAFF THEY WERE VERY SUPPORTIVE THEY TRIED THEIR BEST BUT THEY SAID MR ADA I'M SORRY WE ONLY HAVE RULES FOR NURSING HOMES NOTHING FOR ASSISTANT LIVING I CAN'T FAULT THEM ON THAT AT LEAST THEY WERE BEING HONEST AND SO THIS IS WHERE WE COME IN YEAH I YOU KNOW YOU TALK SENATOR CALVO YOU TALKED VERY BRIEFLY AND I WANT TO BECAUSE I KNOW THAT ALL OF YOU ARE HEARD YOU COULD GET OUT LET ME TELL YOU OF AN INCIDENT I'M NOT GOING TO MENTION ANY NAMES OKAY PLEASE

SENATOR SHELLY V. CALVO, COMMITTEE MEMBER: NO NO

PETER ALECIS ADA, FOUNDER AND CEO - GUMA ORU: THIS HAPPENED SEVERAL DECADES AGO HERE ON GUAM A FAMILY HAD THEIR MOTHER THEIR ELDERLY MOTHER AND THE REST OF THE CHILDREN HAD TO GO TO SCHOOL THE INTENTION WAS GOOD BUT THE ACT WAS WRONG THEY LOCKED THE MOTHER IN THE ROOM AS I SAID THE INTENTION WAS GOOD SO THAT SHE DOESN'T WANDER OUT ON THE ROAD OR GO OUT TO THE KITCHEN AND TURN ON THE STOVE BUT IT IS WRONG MORALLY WRONG BUT TO THAT FAMILY THEY ARE IT WAS THE RIGHT THING TO DO BECAUSE THAT WAS THE SITUATION THEY WERE FACING SO THERE'S WHERE WE COME INTO TO ASSIST TO HELP THEM WE WANT TO BE THERE YOU KNOW WE WANT TO MAKE SURE THAT IF THEY WANT TO GO YOU KNOW WE SAY ASSISTED LIVING HEY IF THEY'RE ABLE TO MANEUVER AROUND THEY WANT TO GO DOWN ON WEDNESDAY THE CHAMORRO VILLAGE AND DANCE OKAY GO JUST GO MAKE SURE YOU COME BACK YOU LET US KNOW WHAT TIME SO THAT IN CASE YOU DON'T COME BACK BY 2:00 IN THE MORNING WE'RE GOING TO GO LOOKING FOR YOU HAVE TRY TO FIGURE OUT WHERE YOU WENT BUT AT LEAST WE KNOW WHERE YOU KNOW WE WANT TO GIVE YOU THAT LEVERAGE OF LIBERTY AND NOT BOIL YOU DOWN AND SAY YOU CAN'T DO YOU CAN'T MOVE YOU CAN'T MOVE NO YOU' GOT TO GIVE THEM SOME HOPE THAT THEY GOT TO MOVE THEIR BODY IF YOU WANT TO CLEAN YOUR ROOM DO IT CLEAN YOUR REFRIGERATOR COOK YOUR OWN FOOD HEY DOG GARN IT DO IT WE'RE GOING TO ENCOURAGE YOU

SENATOR SHELLY V. CALVO, COMMITTEE MEMBER: THANK YOU MR ADA I DON'T HAVE ANY FURTHER QUESTION I WOULD LIKE TO THANK YOU GUYS ONCE AGAIN AND I JUST WANT TO SAY THAT I AM SO GLAD THAT THIS IS ALREADY ON THE TABLE IN DISCUSSION BECAUSE THE TRUTH OF THE MATTER IS WE'RE ALL GOING TO GET THERE THANK YOU SO MUCH MADAM CHAIR

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SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:
THANK YOU SENATOR CALVO SENATOR PARKINSON

SENATOR WILLIAM A. PARKINSON: SO THANK YOU SO MUCH FOR COMING IN AND GIVING YOUR TESTIMONY AND FOR ALL THE SUPPORT FROM MY COLLEAGUES TOWARDS THE IDEA OF THIS BILL I REALLY HAVE A STRONG PERSONAL CONNECTION TO CARE FOR OUR ELDERLY HERE TAKING CARE OF MY SICK AND ELDERLY FATHER IS WHAT BROUGHT ME BACK HERE AND THERE'S A SAYING THAT BY THE TIME YOU'RE 18 YOU'RE GOING TO BE SPENDING 90% OF THE TIME YOU'RE EVER GOING TO SPEND WITH YOUR FAMILY BY THAT AGE AND SO DESPITE THE BURDENS OF ADVANCED ELDER CARE I FIND IT AS A GREAT PRIVILEGE AND HONOR THAT I WAS ABLE TO SPEND MORE TIME WITH MY FAMILY THAN WHAT YOU WOULD NORMALLY HAVE IN AN AVERAGE LIFETIME ONE OF THE THINGS THAT MADE ME INTRODUCE THIS BILL AND CONSIDERED THIS TOPIC IS I WATCHED A PLAY HERE ABOUT A YEAR AGO HERE ON GUAM AND IT WAS A STORY OF A CHAMORRO MAN WHO WAS INSTITUTIONALIZED IN THE ASSISTANT CARE FACILITY AGAINST HIS WILL IT WAS A COMEDY AND THE WHOLE PLAY THIS OLD MAN AND HIS GANG OF FRIENDS IN THE ASSISTED LIVING FACILITY ARE TRYING TO ESCAPE TO FREEDOM AND THEN AFTER THE SECOND ACT YOU DISCOVER THAT THE GRANDFATHER HAS A GRANDDAUGHTER THAT'S ALIVE AND WHO'S COME TO BAIL THEM OUT OF THE ASSISTED LIVING FACILITY HE DISCOVERS THAT HIS DAUGHTER HAD PUT THEM THERE AGAINST HIS WILL BECAUSE HIS DAUGHTER WAS TERMINALLY ILL AND HE NEEDED SOME WAY SHE NEEDED SOME WAY TO TAKE CARE OF HER FATHER AND SO SHE DID IT AS THE LAST POSSIBLE OPTION BUT NOW THE DAUGHTER HAD COME OF AGE AND WAS IN A POSITION TO HELP TAKE CARE OF GRANDPA AND WANT TO GET HIM OUT AND AT THE END OF THE PLAY THE OLD MAN DECIDED THAT HE WAS GOING TO STAY IN THE ASSISTED LIVING FACILITY BECAUSE HE HAD MADE SO MANY GOOD FRIENDS THERE AND HE DIDN'T WANT TO BURDEN HIS GRANDDAUGHTER WITH THE BURDEN OF HIS CARE AND YOU KNOW WHILE THERE WERE SOME FUNNY PARTS OF IT I CAN'T KEEP HELP BUT THINK OF THE TRAGEDY OF THAT GENTLEMAN'S DAUGHTER WHERE SHE WAS IN A TERMINAL SITUATION AND SHE DIDN'T KNOW SHE HAD ANY RESOURCES TO HELP AND SO SHE DID SOMETHING SO EXTREME AND IT MAKES ME THINK OF ALL THE PEOPLE HERE ON GUAM WHO DO NOT HAVE ACCESS TO ASSISTED LIVING HERE ON THE ISLAND AND HAVE TO MAKE DO SOMEWHERE ELSE AT THE END OF OUR LIVES THIS IS THE TIME WE ARE SUPPOSED TO BE SPENDING WITH OUR FAMILIES THE MOST AND IT IS TRULY TRAGIC THAT WE HAVE TO MAKE DO ELSEWHERE FOR THAT CARE IS VERY HARD AND I HAVE TO ADMIT THAT EVEN MY OWN MOTIVATIONS FOR THIS BILL ARE VERY SELFISH AND THAT

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I'M A FATHER AND SOMEDAY I'M GOING TO BE OLD AND GOING TO HAVE SOME NEEDS OF MY OWN AND I WANT TO DO AS MUCH AS I CAN TO MAKE SURE THAT I DO NOT BURDEN HER WITH THE WITH THE CARE OF MY ADVANCED AGE AND SO WE INTRODUCED THIS BILL NOW I THINK ACTUALLY SENATOR TERLAJE MIGHT HAVE BEEN THERE AT THE SAME PLAY THAT NIGHT AND SO WHEN I WAS LOOKING FOR MODEL LEGISLATION TO POTENTIALLY INTRODUCE TO TACKLE THIS ISSUE I'D SEEN THAT SHE HAD INTRODUCED ONE ALREADY IT WAS FANTASTIC WORK IT HAD HAD A PUBLIC HEARING AND I REINTRODUCED IT WORD FOR WORD BECAUSE I BELIEVED IT WAS SOLID WORK AND WHY TRY TO REINVENT THE WHEEL WHY TRY TO CHANGE A FEW WORDS AGAINST AROUND AND TRY TO PASS IT OFF AS ORIGINAL WORK NO THE WORK HAD ALREADY BE DONE LET'S CONTINUE ON THAT CONVERSATION THAT THEY HAD SO ON THIS BILL I AM TRULY POLICY NEUTRAL FOR ME WHAT'S IMPORTANT IS THAT WE GET A PRODUCT THAT WORKS AT THE END OF THE DAY I HAVE NO SACRED COWS IN HERE I HAVE NO POLICY THINGS THAT ARE SOME THINGS THAT CAN CHANGE ULTIMATELY THE THING THAT DRIVES ME IS RAW UNBRIDLED EFFICACY DOES IT WORK TO ALL MY COLLEAGUES I APPRECIATE THE SOCRATIC DIALOGUE WE'VE HAD HERE I ESPECIALLY APPRECIATE THE WORK OF SENATOR TELO YOU KNOW THANK YOU SO MUCH FOR BEING ABLE TO LOOK AT THIS BILL WITH CRITICAL EYES DESPITE YOU KNOW BEING THE ORIGINAL CO-AUTHOR YOU'RE STILL ABLE TO LOOK AT IT CRITICALLY AND I ALWAYS APPRECIATE THAT AND SO YOU KNOW LET THIS BE SOMETHING I SAY TO ALL MY COLLEAGUES I AM ALWAYS WATCHING ALL OF YOUR WORK AND IF IT IS A GOOD IDEA I WILL NOT HESITATE TO INCORPORATE IT INTO SOME OF THE BEST IDEAS WE COULD COME UP WITH BECAUSE I ALWAYS BELIEVE THAT YOU COULD DO MORE WITH COLLABORATION AND THAT IDEAS THAT AREN'T CHALLENGED OR AREN'T REALLY FLESHED OUT GROW WEAK SO I APPRECIATE THAT WE HAVE AN EXTENDED DIALOGUE WITH THIS BILL AND I LOOK FORWARD TO WORKING WITH SENATOR TERLAJE SENATOR TELO SENATOR SHELLY SENATOR VINCE SENATOR GUMATAOTAO AND THE LEGISLATIVE SECRETARY SENATOR SABRINA SALAS MATANANE AND WHATEVER WE NEED TO DO TO THESE BILLS LET'S DO THEM LET'S DO THEM WHATEVER GOOD IDEAS WE HAVE LET'S MAKE IT WORK THIS IS AN IDEA WHOSE TIME HAS COME HERE ON GUAM AND WE HAVE A RARE MOMENT OF CONSENSUS AND COOPERATION THAT WE WANT TO DO THIS SO LET'S DO IT SO I ASK MY COLLEAGUES TO SUPPORT THIS BILL TO GIVE US YOUR BEST IDEAS TO THE PUBLIC PLEASE GIVE US YOUR TESTIMONY ON ANY WAY WE CAN MAKE THIS BILL STRONGER IDEAS THAT ARE NOT CHALLENGED GROW WEAK SO CHALLENGE THE IDEAS I DON'T CARE IF IT'S REPUBLICAN OR DEMOCRAT LET THE BEST IDEAS STAND ON THEIR OWN WITH THAT MADAM CHAIR I YIELD THE REST OF MY TIME THANK YOU

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SENATOR SABRINA SALAS MATANANE, COMMITTEE CHAIRPERSON:

THANK YOU SENATOR PARKINSON AND I ABSOLUTELY AGREE THAT WE NEED TO WORK TOGETHER TO MOVE OUR ISLAND FORWARD AND THANK YOU TO THE PANEL MY COLLEAGUES FOR BEING HERE TODAY AND THANK YOU TO EVERYONE THAT CAME AND TESTIFIED ON BILL 13 AND BILL 31 FOR THOSE OF YOU WHO MAY NOT HAVE HAD A CHANCE TO SPEAK TODAY WE WILL CONTINUE TO ACCEPT WRITTEN TESTIMONY UNTIL FRIDAY FEBRUARY 21ST TESTIMONY SHOULD BE ADDRESSED TO THE COMMITTEE ON HEALTH AND VETERANS AFFAIRS AND DROPPED TO THE GUAM BUILDING OR YOU CAN EMAIL IT TO OFFICE.SENATORBRI@GUAMLEGISLATURE.GOV ONCE AGAIN THANK YOU FOR BEING A PART OF THIS IMPORTANT CONVERSATION THAT CONCLUDES TODAY'S PUBLIC HEARING IT IS NOW 5:27 WE ARE ADJOURNED

The Public Hearing was adjourned at 5:27 P.M.

III. FINDINGS AND RECOMMENDATIONS

The Committee on Health and Veterans Affairs finds that the testimonies and discussions on Bill 31-38 highlight the urgent need for a regulatory and financial framework for assisted living facilities on Guam. With the island's aging population increasing, there is a clear gap between independent living and nursing home care, leaving many elderly individuals without proper care options. Testimonies emphasized that while existing incentives under Public Law 36-111 encourage development, they lack necessary legal and operational structures to ensure quality care, oversight, and financial sustainability. Key concerns raised include the need for Medicaid and MIP coverage, as assisted living is currently not covered under Medicaid, requiring a potential state plan update or waiver. Additionally, regulatory challenges were noted, with GHURA opposing the bill's current form due to ambiguous definitions that fail to distinguish between different types of senior living facilities. The Department of Public Health and Social Services (DPHSS) supported the bill but stressed the need for additional staffing and funding to regulate assisted living facilities effectively. Lawmakers expressed overall support for the intent of the bill while recognizing the need for refinements, particularly in defining facility types, addressing funding sources, and ensuring appropriate oversight mechanisms.

Recommendations included revising Medicaid policies to explore possible funding avenues, amending the bill to clearly define different types of care facilities, and ensuring collaboration between agencies to align regulatory frameworks. Senator Parkinson urged swift action, stressing that assisted living is a critical issue that must be addressed now to ensure dignity, care, and security for Guam's elderly population while also fostering economic growth in the healthcare sector.

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The Committee on Health and Veterans Affairs hereby reports out on [Bill No. 31-38 \(COR\)](#), As Amended by the Committee on Health and Veterans Affairs - AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (B) (1) OF CHAPTER 9, OF DIVISION 1 TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS OF ASSISTED LIVING FACILITIES with a recommendation TO REPORT OUT ONLY.

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2025 (FIRST) Regular Session

Bill No. 31-38 (COR)

Introduced by:

William A. Parkinson 

AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (b) (1) OF CHAPTER 9, OF DIVISION 1, TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES

BE IT ENACTED BY THE PEOPLE OF GUAM:

Section 1. Legislative Findings and Intent. *I Liheslaturan Guåhan* finds that Guam's aging population continues to grow significantly, with *Manåmko* comprising a substantial portion of the island's residents. Many of these individuals require care and assistance that falls between independent living and the intensive support of a nursing home. Currently, Guam lacks adequate intermediate care options to address the diverse needs of *Manåmko*, creating a gap in the continuum of care. Assisted living facilities provide a vital service by offering safe, supportive environments for seniors who require assistance with daily activities but do not need the constant medical care provided in nursing homes. Such facilities promote dignity, independence, and quality of life, aligning with cultural values of respect and care for elders.

Additionally, *I Liheslaturan Guåhan* recognizes the introduction of a qualifying certificate (QC) program aimed at incentivizing the development of assisted living facilities on Guam was passed under Public Law 36-111. While the QC program provides essential economic incentives, the absence of a statutory

1 framework leaves a regulatory void, potentially hindering the effective
2 establishment and oversight of assisted living facilities.

3 *I Liheslaturan Guåhan* further finds that the establishment of a comprehensive
4 statutory and regulatory framework for assisted living facilities will enhance care
5 quality, ensure safety, and promote accountability. Moreover, this framework is
6 essential to attract and guide investment in such facilities under the QC program. By
7 supporting the development of assisted living facilities, Guam can better address the
8 needs of its *Manåmko*, enhance community well-being, and stimulate economic
9 activity through the creation of jobs and related services.

10 Therefore, it is the intent of *I Liheslaturan Guåhan* to establish a robust legal
11 and regulatory framework to facilitate the development, operation, and oversight of
12 assisted living facilities on Guam. This framework will ensure that facilities meet
13 high standards of care, address the intermediate care needs of *Manåmko*, and
14 maximize the potential benefits of the qualifying certificate program for Guam's
15 residents and economy.

16 **Section 2.** Chapter 7, Division 1, Title 10, Guam Code Annotated, is hereby
17 *amended* to read:

18 **“CHAPTER 7**

19 **~~NURSING HOMES~~ ASSISTED LIVING FACILITIES**

20 **§ 7101. Declaration of Policy.**

21 **§ 7102. Definitions.**

22 **§ 7103. License Required.**

23 **§ 7104. ~~Homes~~ Assisted Living Facilities Operated by Territory.**

24 **§ 7105. Application for the Issuance of License to Operate**

25 **~~Nursing Home~~ Assisted Living Facility.**

26 **§ 7106. Renewal and Revocation of ~~Nursing Home~~ Assisted Living**
27 **Facility License; Provisional License.**

1 **§ 7107. Submission of Plan and Consultation.**

2 **§ 7108. Powers.**

3 **§ 7109. Name of ~~Home~~ Facility.**

4 **§ 7110. Administration and Management of ~~Nursing Homes~~**
5 **Assisted Living Facilities.**

6 **§ 7111. Contracts.**

7 **§ 7112. Classification of ~~Homes~~ Facilities; Administrators and**
8 **Nurses.**

9 **§ 7113. Property and Personal Affairs of Patients.**

10 **§ 7114. Health of Personnel.**

11 **§ 7115. Exclusion from ~~Nursing Home~~ Assisted Living Facility.**

12 **§ 7116. Rebating Prohibited.**

13 **§ 7117. Closing of ~~Nursing Home~~ Assisted Living Facility.**

14 **§ 7118. Chapter Not Applicable.**

15 **§ 7119. Right of Entry and Inspection.**

16 **§ 7120. Public Funds.**

17 **§ 7121. Fees.**

18 **§ 7122. Penalties and Remedies.**

19 **§ 7123. Hearings and Judicial Review.**

20
21 **§ 7101. Declaration of Policy**

22 It is the policy of this Territory to encourage and promote measures and the
23 development and utilization of resources to ensure the effective care and treatment
24 of persons who are convalescing or whose physical or mental condition requires
25 them to receive a degree of nursing and/or related health care greater than that
26 necessary for well individuals, but not so acute as to require hospitalization. Such
27 care and treatment require a living environment for them which, to the extent

1 practicable, will approximate a normal home environment. To this end, the guiding
2 principle for the administration of the laws of this Territory is that such person
3 shall be encouraged and assisted in securing necessary care and treatment in non-
4 institutional surroundings. Recognizing that for many persons effective care and
5 treatment can only be secured from proprietary, voluntary, and governmental
6 nursing homes, it is the policy of this Territory to encourage, promote and require
7 the maintenance of institutions other than hospitals offering nursing and/or related
8 health care so as to insure protection of those using the services of such facilities.

9 **§ 7102. Definitions.**

10 As used in this Chapter, unless the context requires a different meaning:

11 (a) “Assisted living facility” means a residence for the elderly or infirm who
12 require assistance with some of the routine activities of daily living as well as
13 ready access to medical care as needed and shall include, but not be limited to, the
14 following:

15 (1) Nursing home means an institution, private home, other place
16 or part or unit thereof, however named, whether for profit or not,
17 including facilities operated by the government of Guam, which is
18 advertised, offered, maintained or operated for the express or implied
19 purpose of providing accommodations, nursing and/or related health care
20 for two or more individuals not related to the owner or administrator by
21 blood or marriage within the third degree of consanguinity, which
22 accommodations and care for a period of twenty-four (24) or more
23 consecutive hours, but shall not include any place providing care and
24 treatment primarily for the acutely ill; and

25 (2) “Residential care facility for the elderly” means a housing
26 arrangement chosen voluntarily by persons sixty (60) years of age or over,
27 or their authorized representative, where varying levels and intensities of

1 care and supervision, protective supervision, personal care, or health-related
2 services are provided, based upon their varying needs, as determined in
3 order to be admitted and to remain in the facility. Persons under 60 years of
4 age with compatible needs may be allowed to be admitted or retained in a
5 residential care facility for the elderly if needed;

6 (b) “Administrator ~~of a nursing home~~” means the individual in general
7 administrative charge of the ~~nursing home~~ assisted living facility; and

8 (c) “Person” means any individual, corporation, partnership, association,
9 territory or agency of the Territory or any other entity.

10 **§ 7103. License Required.**

11 (a) No person shall operate an ~~nursing home~~ assisted living facility unless
12 the Department of Public Health and Social Services has issued, and there is in
13 force, a license authorizing such operation.

14 (b) No license to operate a hospital or other facility for the care and
15 treatment of the physically or mentally shall authorize the operation of an ~~nursing~~
16 ~~home~~ assisted living facility or an ~~nursing home~~ assisted living facility part of such
17 hospital or facility. The operation of an ~~nursing home~~ assisted living facility in
18 conjunction with, or under the same management as a hospital or other facility,
19 shall require such ~~nursing home~~ assisted living facility or ~~nursing home~~ assisted
20 living facility part to be separately licensed as an ~~nursing home~~ assisted living
21 facility pursuant to this Chapter.

22 **§ 7104. ~~Homes~~ Assisted Living Facilities Operated by Territory**

23 Notwithstanding any provision of this Chapter no license pursuant to § 7103
24 here of shall be required as a condition of the establishment or operation of any
25 ~~nursing home~~ assisted living facility by this Territory or any agency thereof. All
26 other provisions and requirements of this Chapter and standards, rules, and
27 regulations in force pursuant thereto shall apply to any such homes, and the

1 Department of Public Health and Social Services shall have powers of supervision
2 with respect thereto.

3 **§ 7105. Application for the Issuance of License to Operate Nursing**
4 **Home Assisted Living Facility.**

5 (a) Any person proposing to operate an ~~nursing home~~ assisted living facility
6 shall, prior to the commencement of such operation, make application to the
7 Department of Public Health and Social Services for a license by the Department
8 of Public Health and Social Services, which shall contain the following
9 information:

10 (1) The name and address of the person making application;

11 (2) The name and address of the individual designated by the
12 applicant as the administrator of the ~~nursing home~~ assisted living facility,
13 and such additional information concerning such individual as the
14 Department of Public Health and Social Services may require;

15 (3) The address of the premises which are to constitute the ~~nursing~~
16 ~~home~~ assisted living facility, together with a description of all structures and
17 facilities forming a part thereof, in such detail as the Department of Public
18 Health and Social Services may require;

19 (4) The name by which the ~~nursing home~~ assisted living facility is to
20 be known;

21 (5) The identity of the owner or owners of the ~~nursing home~~ assisted
22 living facility and, if the owner is a corporation, the names of the officers
23 and principal stockholders thereof;

24 (6) The bed capacity and/or maximum occupancy of the ~~nursing home~~
25 assisted living facility;

26 (7) A description of the programs and services to be furnished and of
27 the means available to the applicant for providing the same, and for meeting

1 requirements for staffing, equipping and operating the ~~nursing home~~ assisted
2 living facility, with particular reference to the professional requirements of §
3 7110 of this Chapter;

4 (8) Proof that the premises are in conformity with all applicable state
5 and local health, safety, zoning and subdivision laws or ordinances, and
6 building codes, and that any necessary permits for occupancy have been
7 issued by the appropriate territorial authorities and are in full force; and

8 (9) Such other information as the Department of Public Health and
9 Social Services may require in order to permit the Department of Public
10 Health and Social Services to ascertain whether the applicant is in a position
11 to operate an ~~nursing home~~ assisted living facility in conformity with the
12 provisions of this Chapter.

13 (b) Within sixty (60) days of receipt of a completed application, the
14 Department of Public Health and Social Services shall issue an ~~nursing home~~
15 assisted living facility license to the applicant, valid for one (1) year from the date
16 of issue and covering the premises identified in the application, unless it finds the
17 representation made in the application to be materially incorrect or insufficient, or
18 unless it finds that the applicant, the premises and the designated administrator of
19 the ~~nursing home~~ assisted living facility do not meet all requirements of law for
20 entitlement thereto.

21 (c) The name of the administrator of the ~~nursing home~~ assisted living facility
22 shall appear on the ~~nursing home~~ assisted living facility license. Any change of
23 such administrator shall require the surrender and cancellation of the ~~nursing home~~
24 assisted living facility license and the issuance of a new license bearing the name
25 of the new administrator. Unless a change of administrators occurs at the time of
26 renewal of an ~~nursing home~~ assisted living facility license, such change shall not of
27 itself require the Department of Public Health and Social Services to pass upon any

1 matter other than whether the newly designated administrator meets applicable
2 requirements of law. Any license issued solely by reason of a change in the
3 designated administrator shall bear the same expiration date as the license which it
4 replaces. If the holder of an ~~nursing home~~ assisted living facility license is required
5 to secure a new administrator on inadequate notice or under emergency conditions,
6 he may, upon prompt notice to the Department of Public Health and Social
7 Services and in accordance with rules and regulations thereof, place the ~~nursing~~
8 ~~home~~ assisted living facility in charge of an acting administrator for such limited
9 time as may be necessary to permit the securing of a proper administrator, but in
10 no case shall such time be in excess of one hundred twenty (120) days.

11 (d) No change in an ~~nursing home~~ assisted living facility, its operation,
12 program or services of a degree or character affecting continuing licensability shall
13 be made prior to approval thereof by the Department of Public Health and Social
14 Services.

15 (e) The Department of Public Health and Social Services by rule or
16 regulation may determine the types of changes which may not be made without its
17 prior approval.

18 **§ 7106. Renewal and Revocation of ~~Nursing Home~~ Assisted Living**
19 **Facility License; Provisional License.**

20 (a) Sixty (60) days prior to the expiration date of an ~~nursing home~~ assisted
21 living facility license, an application for a renewal thereof shall be submitted to the
22 Department of Public Health and Social Services on a form approved by it. Upon
23 receipt and review of the application and determination of compliance with the
24 requirements of this Chapter and any standards, rules and regulations in force
25 pursuant thereto, the Department of Public Health and Social Services shall renew
26 such license for a period of one (1) year, unless it finds that there are specific and
27 sufficient grounds for denying the application for renewal.

1 (b) The Department of Public Health and Social Services shall have the
2 authority to revoke an ~~nursing home~~ assisted living facility license at any time that
3 it finds that there has been a failure to comply with the provisions of this Chapter
4 or any standards, rule or regulation in force pursuant thereto.

5 (c) If the Department of Public Health and Social Services finds that the
6 immediate interests of the patients in an ~~nursing home~~ assisted living facility and
7 of the general public would be best served by affording such home facility the
8 opportunity to correct a condition forming the ground for revocation of, or refusal
9 to renew, an ~~nursing home~~ assisted living facility license, it may afford such
10 opportunity. For such purpose, it may suspend or refuse to renew an ~~nursing home~~
11 assisted living facility license and issue a provisional license which shall be valid
12 for such period as the Department of Public Health and Social Services may fix,
13 but in no case to exceed ninety (90) days. No provisional license shall be renewed.
14 A provisional license shall be replaced by a restored or renewed license only if,
15 within the period for which the provisional license is effective, the licensee has
16 fully corrected all conditions constituting failure to comply with the provisions of
17 this Chapter and any standard, rule, or regulation in force pursuant thereto.

18 **§ 7107. Submission of Plan and Consultation.**

19 Any owner or administrator of an ~~nursing home~~ assisted living facility or proposed
20 ~~nursing home~~ assisted living facility may submit plans and specifications thereof,
21 to the Department of Public Health and Social Services for advice concerning their
22 suitability in the light of requirements of law. The Department of Public Health
23 and Social Services may consult with any such owner or owners with respect to
24 any such plans, provided that the Department of Public Health and Social Services
25 shall not draw, redraw or otherwise furnish construction plans or specifications,
26 except to the extent that the same may be contained in its standards, rules and
27 regulations issued pursuant to this Chapter.

1 **§ 7108. Powers.**

2 In administering this Chapter, the Department of Public Health and Social
3 Services shall, in addition to powers otherwise conferred upon it, have power to:

4 (a) Develop, issue, amend and revise standards, rules and regulations which
5 shall implement this Chapter and shall have the force of law;

6 (b) Provide by rules and regulations standards of competence and suitability
7 of administrators of ~~nursing home~~ assisted living facilities, in accordance with the
8 provision of P.L. 11-26;

9 (c) Make studies and investigations of ~~nursing home~~ assisted living facility
10 conditions and problems generally, and as they relate to compliance with the
11 provisions of this Chapter and standards, rules and regulations issued pursuant
12 thereto;

13 (d) Develop manuals and guides relating to any of the several aspects of
14 physical facilities and operation of ~~nursing home~~ assisted living facilities and make
15 such manuals and guides available, with or without charge, to the owners and
16 administrators of nursing homes and to the general public;

17 (e) Consult with and otherwise assist owners and administrators of ~~nursing~~
18 ~~home~~ assisted living facilities for the purpose of facilitating improvements to the
19 extent and quality of care available therein;

20 (f) Investigate conditions in and the operation of any ~~nursing home~~ assisted
21 living facility and the status and qualifications of any personnel employed thereby
22 or otherwise engaged in the operation thereof; and

23 (g) Conduct hearings in aid of any of its functions pursuant to this Chapter; require
24 the production of evidence in connection with any such hearing or any
25 investigation validly conducted pursuant to this Chapter, and take written or oral
26 testimony under oath, or otherwise.

1 **§ 7109. Name of ~~Home~~ Facility.**

2 The words hospital, sanitarium, rehabilitation center, or any words
3 conveying a meaning substantially identical thereto, shall not be used in the name
4 of an ~~nursing home~~ assisted living facility. An ~~nursing home~~ assisted living facility
5 shall use the name as it appears on the ~~nursing home~~ assisted living facility license
6 for its premises. The name of the ~~nursing home~~ assisted living facility shall not be
7 changed without notification to and written approval from the Department of
8 Public Health and Social Services.

9 **§ 7110. Administration and Management of ~~Nursing Homes~~ Assisted**
10 **Living Facilities.**

11 Every ~~nursing home~~ assisted living facility shall comply with all applicable
12 standards, rules and regulations of the Department of Public Health and Social
13 Services agency and shall be subject to all requirements as deemed necessary for
14 such facilities, which include, but is not limited to, the following:

15 (a) Be under the administrative direction and charge of the person whose
16 name appears on the ~~nursing home~~ assisted living facility license as administrator
17 of the ~~nursing home~~ assisted living facility;

18 (b) Have at least one (1) registered nurse duly licensed to practice on Guam
19 responsible for planning and directing the nursing care, at least one (1) nurse
20 licensed by this Territory on duty at all times, and such additional registered and
21 licensed practical nurses and other paraprofessional personnel in its employ as the
22 size and regular patient care needs in the ~~home~~ facility may require;

23 (c) Provide for the access of its patients to dental and other health-related
24 services, recreational services, rehabilitative services and social work services,
25 appropriate to their needs and conditions and not directly furnished by ~~nursing~~
26 ~~home~~ assisted living facility;

27 (d) Keep drugs and medicine in a safe place specially set aside for the

1 purpose. No patient or other unauthorized person shall be permitted access to such
2 place and such drugs and medicine. Nothing herein shall be construed to authorize
3 any person to keep or administer drugs or medicine who is not otherwise legally
4 authorized to keep or administer such drugs or medicine;

5 (e) Maintain its premises and equipment and conduct its operations in a safe
6 and sanitary manner;

7 (f) Provide a wholesome and nourishing diet sufficient to meet generally accepted
8 standards of proper nutrition for its patients and provide such therapeutic diets as
9 may be prescribed for individual patients. In making rules and regulations to
10 implement this Subsection, the Department of Public Health and Social Services
11 shall be guided by standards recommended by nationally recognized professional
12 groups and associations with knowledge of dietetics;

13 (g) Keep full records of patient admission, discharges, medical and general
14 health status, including medical records, personal and social history, and identity
15 and address of next of kin or other person who may have responsibility for the
16 affairs of the patient; and

17 (h) Keep such fiscal records of its operations and conditions as may be
18 necessary to provide information pursuant to this Chapter as may be required by
19 rules and regulations of the Department of Public Health and Social Services.

20 **§ 7111. Contracts.**

21 (a) The presence of each resident in an ~~nursing home~~ assisted living facility
22 shall be covered by a contract executed at the time of admission or prior thereto by
23 the patient or his legal representative and the ~~nursing home~~ assisted living facility.
24 Each party to such a contract shall be entitled to a duplicate original thereof and the
25 ~~nursing home~~ assisted living facility shall keep on file all contracts which it has
26 with patients. The ~~nursing home~~ assisted living facility shall not destroy or
27 otherwise dispose of any such contract until one (1) year after its expiration or such

1 longer period as may be provided in the rules and regulations of the Department of
2 Public Health and Social Services.

3 (b) Each contract to which this Section applies shall contain express
4 provision specifically setting forth the following:

5 (1) The term of the contract;

6 (2) The services and accommodations to be provided by the ~~nursing~~
7 ~~home~~ assisted living facility and the rate or charge therefor;

8 (3) Specification of any rights, duties, and obligations of the parties in
9 addition to those required by operation of law; and

10 (4) Any other matters which the parties deem appropriate.

11 (c) No contract or any provision thereof shall be construed to relieve
12 any ~~nursing home~~ assisted living facility of any requirement or
13 obligation imposed upon it by this Chapter or any standards, rules, or
14 regulations in force pursuant thereto.

15 **§ 7112. Classification of ~~Homes~~ Facilities; Administrators and**
16 **Nurses.**

17 (a) The Department of Public Health and Social Services shall classify
18 ~~nursing home~~ assisted living facilities according to character, size and range of
19 services provided. Wherever it considers distinction to its standards, rules and
20 regulations to be appropriate as among different classes of ~~nursing home~~ assisted
21 living facilities, it may make such distinctions.

22 (b) No administrator of an ~~nursing home~~ assisted living facility, and no
23 registered nurse who plans and directs the nursing care in a ~~home~~ facility, shall
24 function as either administrator or one who plans and directs the nursing care for
25 more than one nursing home, unless the homes involved are of a class or classes
26 found by the Department of Public Health and Social Services to be of a character,
27 size and type of operations making it reasonable for a single administrator or

1 registered nurse to perform such functions effectively for more than one (1)
2 ~~nursing home~~ assisted living facility. As part of the classifications made pursuant
3 to this Section, the Department of Public Health and Social Services shall
4 determine and fix specific limits on the number of ~~homes~~ facilities of particular
5 classes which may be served by the same individual acting as administrator or
6 registered nurse responsible for planning and directing nursing care. No such
7 administrator or nurse shall accept employment in violation of such limitations; nor
8 shall the owner or administrator of an ~~nursing home~~ assisted living facility
9 knowingly employ any person in violation thereof. The Department of Public
10 Health and Social Services shall not issue or renew any ~~nursing home~~ assisted
11 living facility bearing the name of an administrator, if the name of such
12 administrator already appears on the maximum number of ~~nursing home~~ assisted
13 living facility licenses permitted by its standards, rules and regulations.

14 **§ 7113. Property and Personal Affairs of Patients.**

15 (a) The admission of a patient to an ~~nursing home~~ assisted living facility and
16 his presence therein shall not confer on such ~~nursing home~~ assisted living facility
17 or its owner, administrator, employees or representatives an authority to manage,
18 use or dispose of any property of such patient; nor shall such admission or
19 presence confer on any of the aforementioned persons any authority or
20 responsibility for the personal affairs of the patient, except what may be necessary
21 for the safety and orderly management of the ~~nursing home~~ assisted living facility.

22 (b) No ~~nursing home~~ assisted living facility, and no owner, administrator,
23 employee or representative thereof shall act as guardian, trustee or conservator for
24 any patient of such ~~nursing home~~ assisted living facility or any of such patient's
25 property.

26 (c) An ~~nursing home~~ assisted living facility shall provide for the safekeeping
27 of personal effects, funds and property of the patient in the ~~home~~ facility; provided

1 that whenever necessary for the protection of valuables or in order to avoid
2 unreasonable responsibility therefor, the ~~nursing home~~ assisted living facility may
3 require that they be excluded or removed from the ~~home~~ facility and kept at some
4 place not subject to the control of the ~~home~~ facility.

5 (d) An ~~nursing home~~ assisted living facility shall keep complete and accurate
6 records of all funds and other effects and property of its patients received by it for
7 safekeeping.

8 (e) Any funds or other property belonging or due to a patient or expendable
9 for his account which are received by an ~~nursing home~~ assisted living facility shall
10 be trust funds, shall be kept separate from the funds and property of the ~~nursing~~
11 ~~home~~ assisted living facility and other patients or specifically credited to such
12 patient, and shall be used or otherwise expended only for the account of the
13 patient. Upon request, but, except upon order of a court of competent jurisdiction,
14 not more often than once every three (3) months, the ~~nursing home~~ assisted living
15 facility shall furnish the patient and the guardian, trustee or conservator, (if any is
16 available for such patient) a complete and verified statement of all funds and other
17 property to which this Subsection applies, detailing the amounts and items
18 received, together with their sources and disposition. In any event, the ~~nursing~~
19 ~~home~~ assisted living facility shall furnish such a statement annually and upon the
20 discharge or transfer of a patient. Any governmental agency or private charitable
21 agency contributing funds or other property on account of a patient, also shall be
22 entitled to receive such statement annually and upon discharge or transfer and such
23 other reports as it may require pursuant to law.

24 **§ 7114. Health of Personnel.**

25 No ~~nursing home~~ assisted living facility shall employ or otherwise permit
26 any person to serve there in any capacity, if such person has a communicable or
27 contagious disease or other disease or condition that would make him dangerous to

1 the health or welfare of patients therein. Except in ~~homes~~ facilities exempt from
2 medical requirements as provided in § 7118 of this Chapter, the appropriate state
3 agency shall require annual medical examinations for all such personnel and shall
4 require them to have and, upon demand, to present satisfactory evidence of such
5 examination.

6 **§ 7115. Exclusion from ~~Nursing Home~~ Assisted Living Facility.**

7 (a) No person shall be admitted to or be permitted to remain in an ~~nursing~~
8 ~~home~~ assisted living facility as a patient if:

9 (1) He is dangerous to himself or other patients;

10 (2) His condition or conduct is such that he would be unduly
11 disturbing to other patients;

12 (3) He is in need of medical procedures which cannot be carried out in
13 the ~~nursing home~~ assisted living facility; and

14 (4) Upon certification of a physician that such person would no longer
15 benefit from or be in need of an ~~nursing home~~ assisted living facility.

16 (b) Except in emergencies, a patient shall be transferred out of an ~~nursing~~
17 ~~home~~ assisted living facility or discharged for any reason, only after prior
18 notification to the next of kin, legal representative, or agency acting on the patient's
19 behalf. If the next of kin or person or agency acting on the patient's behalf cannot
20 be reached or refuses to cooperate, proper arrangements shall be made by the ~~home~~
21 facility for the patient's welfare before transfer or discharge.

22 **§ 7116. Rebating Prohibited.**

23 No owner, administrator, employee, or representative of an ~~nursing home~~ assisted
24 living facility shall pay any commission, bonus, fee, or gratuity in any form
25 whatsoever to any physician, surgeon, organization, agency, or to any person either
26 directly or indirectly, for patients referred.

1 **§ 7117. Closing of ~~Nursing Home~~ Assisted Living Facility.**

2 (a) Whenever an ~~nursing home~~ assisted living facility discontinues
3 operation, and during the period when it is preparing for such discontinuance, the
4 ~~home~~ facility shall inform the Department of Public Health and Social Services of
5 the impending discontinuance of operation. The ~~home~~ facility also shall inform the
6 patient, the next of kin, legal representative, or agency acting on the patient's
7 behalf of the fact and the proposed time of such discontinuance with sufficient
8 notice so that suitable arrangements may be made for the transfer and care of such
9 patient. In the case of any patient who has no such person, the ~~home~~ facility shall
10 be responsible for securing a suitable transfer of the patient prior to the
11 discontinuance of operation.

12 (b) Immediately upon discontinuance of operation of ~~home~~ facility, the
13 owner shall surrender the license therefor to the Department of Public Health and
14 Social Services and such license shall be cancelled.

15 **§ 7118. Chapter Not Applicable.**

16 (a) The requirements of this Chapter, or of any standard, rule, or regulation
17 pursuant thereto, for medical and nursing services shall not apply to any ~~home~~
18 facility operated by or exclusively for the members of a religious order or
19 denomination whose tenets forbid subjection of the person to the ministrations of
20 practitioners of medicine or related nursing care or include reliance on spiritual
21 means alone through prayer for healing. All other provisions of this Chapter and of
22 any such standards, rules, and regulations shall be fully applicable to such ~~nursing~~
23 ~~home~~ assisted living facility.

24 (b) Any ~~nursing home~~ assisted living facility which considers itself eligible
25 for the exemptions provided in this Section shall so state on its application for an
26 ~~nursing home~~ assisted living facility license, and on any application for renewal
27 thereof; and shall inform each applicant for admission to patient status therein of

1 the auspices under which the ~~home~~ facility is operated and of the meaning thereof
2 with respect to the availability of medical and nursing services.

3 **§ 7119. Right of Entry and Inspection.**

4 The Department of Public Health and Social Services and any duly
5 designated officer or employee thereof, shall have the right to enter upon and into
6 the premises of any ~~nursing home~~ assisted living facility licensed pursuant to this
7 Chapter at any time in order to determine the state of compliance with the
8 provisions of this Chapter and any rules and regulations in force pursuant thereto.
9 Such right of entry and inspection also shall extend to any premises which the
10 Department of Public Health and Social Services has reason to believe is being
11 operated or maintained as an ~~nursing home~~ assisted living facility without a
12 license, but no such entry or inspection of any premises shall be made without the
13 permission of the owner or person in charge thereof, unless a warrant is first
14 obtained from the Superior Court of Guam, authorizing the same. Any application
15 for a nursing home assisted living facility license made pursuant to § 7105 of this
16 Chapter shall constitute permission for and complete acquiescence in any entry or
17 inspection of the premises for which the license is sought in order to facilitate
18 verification of the information submitted on or in connection with such application.

19 **§ 7120. Public Funds.**

20 (a) No department, agency, or officer of this Territory shall pay or approve
21 for payment from public funds any amount or amounts to an ~~nursing home~~ assisted
22 living facility under any program of government aid in connection with services
23 provided, or to be provided, an actual or prospective patient in an ~~nursing home~~
24 assisted living facility, unless the ~~nursing home~~ assisted living facility has a current
25 nursing home assisted living facility license issued by the Department of Public
26 Health and Social Services and meets such other requirements as may be in force
27 pursuant to law.

(b) Nothing in this Section shall be construed to apply to the payment of government aid for construction, renovation, or improvement of an ~~nursing home~~ assisted living facility or premises intended to qualify as an ~~nursing home~~ assisted living facility upon completion of such construction, renovation, or improvement.

§ 7121. Fees.

(a) Any application for an ~~nursing home~~ assisted living facility license and an application for renewal thereof shall be accompanied by a fee which shall, by rules and regulations, be established by the Department of Public Health and Social Services. The issuance of a new ~~nursing home~~ assisted living facility license resulting solely from a change in the designated administrator of the ~~nursing home~~ assisted living facility shall be without fee.

(b) No fee required by this Section shall be returnable.

§ 7122. Penalties and Remedies.

(a) Any person who violates any provision of this Chapter or any standard, rule, or regulation in force pursuant thereto shall be subject to a fine of not to exceed One Thousand Dollars (\$1,000). If the violation consists in whole or in part of operating an ~~nursing home~~ assisted living facility without a license in force pursuant to this Act or of causing an ~~nursing home~~ assisted living facility to be so operated, the violator shall be guilty of a misdemeanor.

(b) The imposition of any fine or term of imprisonment pursuant to Subsection (a) of this Section shall be in addition to any suspension, revocation, or refusal to renew an ~~nursing home~~ assisted living facility license which may result from the violation.

(c) Action pursuant to other provisions of this Section shall not be a bar to enforcement of this Chapter and standards, rules, and regulations in force pursuant thereto by injunction or other appropriate remedy, and the Department of Public Health and Social Services agency shall have power to institute and maintain in the

1 name of this Territory any and all such enforcement proceedings.

2 (d) Each day of violation shall constitute a separate offense.

3 (e) Nothing in this Chapter shall be construed to make any provision of the
4 laws of Guam, otherwise applicable, inapplicable to any act or omission done or
5 omitted by any person in connection with the operation of an ~~nursing home~~
6 assisted living facility.

7 **§ 7123. Hearings and Judicial Review.**

8 (a) No ~~nursing home~~ assisted living facility license may be suspended,
9 revoked, denied, or renewal denied without a hearing, if requested by the licensee,
10 on due notice, except that the Department of Public Health and Social Services
11 may suspend any such license prior to hearing when it finds that the health or
12 safety of patients requires such action on an emergency basis.

13 (b) Except for rules and regulations made to implement Subsection (c) of
14 this Section, no standards, rule, regulation, amendment, or revision thereof having
15 the force of law as provided in Section 8 of this Chapter shall be issued prior to a
16 public hearing thereon, held on due notice, and consideration of the record of such
17 hearing by the Department of Public Health and Social Services.

18 (c) Transcripts of such hearings shall be available to those entitled to receive
19 the same upon payment of reasonable cost therefor in accordance with rules and
20 regulations of the Department of Public Health and Social Services.

21 (d) Any action of the Department of Public Health and Social Services taken
22 pursuant to this Chapter shall be reviewable as provided in the Administrative
23 Adjudication Law.

24 **Section 3. Funding Support for Assisted Living Facilities.**

25 Within 180 calendar days of enactment of this law, the Director of Public
26 Health and Social Services shall submit to the Legislature, recommendations of
27 maximizing funding support in the operation of Assisted Living Facilities by any,

1 and all existing appropriate funding support sources (such as Medicare, or
2 Medicaid, or the Medically Indigent Program, or others) as applicable and
3 authorized under their respective individual guidelines. Within such
4 recommendation, the Director shall include all costs associated with maximizing
5 funding support for Assisted Living Facilities for the Legislature's consideration.

6 **Section 4.** A New (N) is hereby *added* to § 9302, (b), (1) of Chapter 9,
7 Division 1 of Title 26, Guam Administrative Rules and Regulations, to read:

8 “(b) Outpatient Services.

9 (1) The following outpatient hospital services shall be covered:

10 (A) Hospital-based physician services.

11 (B) Laboratory and diagnostic tests.

12 (C) Diagnostic radiology.

13 (D) Laboratory tests and diagnostic radiology not available at Public
14 Health for Maternal and Child Health Program clients (clients must be
15 program eligible).

16 (E) Emergency room for warranted emergencies. \$5.00 co-payment
17 required.

18 (F) Drugs which are prescribed by physicians and cannot be bought
19 without a prescription.

20 (G) Medical and surgical supplies.

21 (H) Operating room.

22 (I) Dialysis treatment.

23 (K) Physical and inhalation therapy (prior authorization is required).

24 (L) Insulin injections for diabetes.

25 (M) Lytico-Bodig related services. (amyotrophic lateral sclerosis or
26 Parkinsonism dementia).

27 (N) Assisted Living Facilities.”

1 **Section 5. Effective Date.** This Act shall be effective upon enactment.

2 **Section 6. Severability.** If any provision of this Act or its application to any
3 person or circumstance is found to be invalid or inorganic, such invalidity shall not
4 affect other provisions or applications of this Act that can be given effect without
5 the invalid provision or application, and to this end the provisions of this Act are
6 severable.

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2025 (FIRST) Regular Session

Bill No. 31-38 (COR)

As Amended by the Committee
on Health and Veterans Affairs

Introduced by:

William A. Parkinson

**AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10,
GUAM CODE ANNOTATED, AND *ADD* A NEW (N) TO §9302 (b)
(1) OF CHAPTER 9, OF DIVISION 1, TITLE 26, GUAM
ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE
TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES**

BE IT ENACTED BY THE PEOPLE OF GUAM:

Section 1. Legislative Findings and Intent. *I Liheslaturan Guåhan* finds that Guam's aging population continues to grow significantly, with *Manåmko'* comprising a substantial portion of the island's residents. Many of these individuals require care and assistance that falls between independent living and the intensive support of a nursing home. Currently, Guam lacks adequate intermediate care options to address the diverse needs of *Manåmko'*, creating a gap in the continuum of care. Assisted living facilities provide a vital service by offering safe, supportive environments for seniors who require assistance with daily activities but do not need the constant medical care provided in nursing homes. Such facilities promote dignity, independence, and quality of life, aligning with cultural values of respect and care for elders.

Additionally, *I Liheslaturan Guåhan* recognizes the introduction of a qualifying certificate (QC) program aimed at incentivizing the development of assisted living facilities on Guam was passed under Public Law 36-111. While the QC program provides essential economic incentives, the absence of a statutory

1 framework leaves a regulatory void, potentially hindering the effective
2 establishment and oversight of assisted living facilities.

3 *I Liheslaturan Guåhan* further finds that the establishment of a comprehensive
4 statutory and regulatory framework for assisted living facilities will enhance care
5 quality, ensure safety, and promote accountability. Moreover, this framework is
6 essential to attract and guide investment in such facilities under the QC program. By
7 supporting the development of assisted living facilities, Guam can better address the
8 needs of its *Manåmko*’, enhance community well-being, and stimulate economic
9 activity through the creation of jobs and related services.

10 Therefore, it is the intent of *I Liheslaturan Guåhan* to establish a robust legal
11 and regulatory framework to facilitate the development, operation, and oversight of
12 assisted living facilities on Guam. This framework will ensure that facilities meet
13 high standards of care, address the intermediate care needs of *Manåmko*’, and
14 maximize the potential benefits of the qualifying certificate program for Guam’s
15 residents and economy.

16 **Section 2.** Chapter 7, Division 1, Title 10, Guam Code Annotated, is hereby
17 *amended* to read:

18 **“CHAPTER 7**

19 **NURSING HOMES ASSISTED LIVING FACILITIES**

20 § 7101. Declaration of Policy.

21 § 7102. Definitions.

22 § 7103. License Required.

23 § 7104. ~~Homes~~ Assisted Living Facilities Operated by ~~Territory~~ Guam.

24 § 7105. Application for the Issuance of License to Operate

25 ~~Nursing Home~~ an Assisted Living Facility.

26 § 7106. Renewal and Revocation of ~~Nursing Home~~ Assisted Living Facility
27 License; Provisional License.

1 § 7107. Submission of Plan and Consultation.

2 § 7108. Powers.

3 § 7109. Name of ~~Home~~ Facility.

4 § 7110. Administration and Management of ~~Nursing Homes~~ Assisted Living
5 Facilities.

6 § 7111. Contracts.

7 § 7112. Classification of ~~Homes~~ Facilities; Administrators and Nurses.

8 § 7113. Property and Personal Affairs of Patients.

9 § 7114. Health of Personnel.

10 § 7115. Exclusion from ~~Nursing Home~~ Assisted Living Facility.

11 § 7116. Rebating Prohibited.

12 § 7117. Closing of ~~Nursing Home~~ Assisted Living Facility.

13 § 7118. Chapter Not Applicable.

14 § 7119. Right of Entry and Inspection.

15 § 7120. Public Funds.

16 § 7121. Fees.

17 § 7122. Penalties and Remedies.

18 § 7123. Hearings and Judicial Review.

19
20 **§ 7101. Declaration of Policy**

21 It is the policy of ~~this Territory~~ Guam to encourage and promote measures and
22 the development and utilization of resources to insure the effective care and
23 treatment of persons who are convalescing or whose physical or mental condition
24 requires them to receive a degree of nursing and/or related health care greater than
25 that necessary for well individuals, but not so acute as to require hospitalization.
26 Such care and treatment requires a living environment for them which, to the extent
27 practicable, will approximate a normal home environment. To this end, the guiding

1 principle for the administration of the laws of ~~this Territory~~ Guam is that such person
2 shall be encouraged and assisted in securing necessary care and treatment in non-
3 institutional surroundings. Recognizing that for many persons effective care and
4 treatment can only be secured from proprietary, voluntary, and governmental
5 nursing homes, it is the policy of ~~this Territory~~ Guam to encourage, promote and
6 require the maintenance of institutions other than hospitals offering nursing and/or
7 related health care so as to insure protection of those using the services of such
8 facilities.

9 **§ 7102. Definitions.**

10 As used in this Chapter, unless the context requires a different meaning:

11 (a) “Assisted living facility” means a residence for the elderly or infirm
12 who require assistance with some of the routine activities of daily living as
13 well as ready access to medical care as needed and shall include, but not be
14 limited to, the following:

15 (1) “Nursing home” means an institution, private home, other
16 place or part or unit thereof, however named, whether for profit or not,
17 including facilities operated by the government of Guam, which is
18 advertised, offered, maintained or operated for the express or implied
19 purpose of providing accommodations, nursing and/or related health
20 care for two (2) or more individuals not related to the owner or
21 administrator by blood or marriage within the third degree of
22 consanguinity, which accommodations and care for a period of twenty-
23 four (24) or more consecutive hours, but shall not include any place
24 providing care and treatment primarily for the acutely ill;

25 (2) “Independent living facility” means housing units deigned for
26 the elderly or non-elderly persons with disabilities designed for ease of
27 use and may include ADA accommodations.

1 (3) “Residential care facility for the elderly” means a housing
2 arrangement chosen voluntarily by persons sixty (60) years of age or
3 over, or their authorized representative, where varying levels and
4 intensities of care and supervision, protective supervision, personal
5 care, or health-related services are provided, based upon their
6 varying needs, as determined in order to be admitted and to remain in
7 the facility. Persons under 60 years of age with compatible needs may
8 be allowed to be admitted or retained in a residential care facility for
9 the elderly if needed.

10 (A) “Service-enriched housing/nursing home” means
11 housing that is designed to accommodate frail elderly persons,
12 elderly persons, or persons with severe disabilities with service
13 needs where residents are able to live independently but need
14 assistance with activities of daily living.

15 (B) “Palliative/hospice care facility” means medical
16 facilities meant to provide physical comfort and emotional,
17 social, and spiritual support for individuals with serious, chronic,
18 or terminal illnesses.

19 (b) “Administrator of a nursing home” means the individual in general
20 administrative charge of the ~~nursing home~~ assisted living facility.

21 (c) “Person” means any individual, corporation, partnership,
22 association, territory or agency of the Territory Guam or any other entity.

23 **§ 7103. License Required.**

24 (a) No person shall operate an ~~nursing home~~ assisted living facility
25 unless the Department of Public Health and Social Services has issued, and
26 there is in force, a license authorizing such operation.

(b) No license to operate a hospital or other facility for the care and treatment of the physically or mentally ill shall authorize the operation of an ~~nursing home~~ assisted living facility or an ~~nursing home~~ assisted living facility part of such hospital or facility. The operation of an ~~nursing home~~ assisted living facility in conjunction with, or under the same management as a hospital or other facility, shall require such ~~nursing home~~ assisted living facility or ~~nursing home~~ assisted living facility part to be separately licensed as an ~~nursing home~~ assisted living facility pursuant to this Chapter.

§ 7104. ~~Homes~~ Assisted Living Facilities Operated by Territory Guam.

Notwithstanding any provision of this Chapter no license pursuant to § 7103 hereof shall be required as a condition of the establishment or operation of any ~~nursing home~~ assisted living facility by this Territory Guam or any agency thereof. All other provisions and requirements of this Chapter and standards, rules, and regulations in force pursuant thereto shall apply to any such ~~homes~~ facility, and the Department of Public Health and Social Services shall have powers of supervision with respect thereto.

§ 7105. Application for the Issuance of License to Operate ~~Nursing Home~~ an Assisted Living Facility.

(a) Any person proposing to operate an ~~nursing home~~ assisted living facility shall, prior to the commencement of such operation, make application to the Department of Public Health and Social Services for a license by the Department of Public Health and Social Services, which shall contain the following information:

(1) The name and address of the person making application;

(2) The name and address of the individual designated by the applicant as the administrator of the ~~nursing home~~ assisted living

1 facility, and such additional information concerning such individual as
2 the Department of Public Health and Social Services may require;

3 (3) The address of the premises which are to constitute the
4 ~~nursing home~~ assisted living facility, together with a description of all
5 structures and facilities forming a part thereof, in such detail as the
6 Department of Public Health and Social Services may require;

7 (4) The name by which the ~~nursing home~~ assisted living facility
8 is to be known;

9 (5) The identity of the owner or owners of the ~~nursing home~~
10 assisted living facility and, if the owner is a corporation, the names of
11 the officers and principal stockholders thereof;

12 (6) The bed capacity and/or maximum occupancy of the ~~nursing~~
13 ~~home~~ assisted living facility;

14 (7) A description of the programs and services to be furnished
15 and of the means available to the applicant for providing the same, and
16 for meeting requirements for staffing, equipping and operating the
17 ~~nursing home~~ assisted living facility, with particular reference to the
18 professional requirements of § 7110 of this Chapter;

19 (8) Proof that the premises are in conformity with all applicable
20 state and local health, safety, zoning and subdivision laws or
21 ordinances, and building codes, and that any necessary permits for
22 occupancy have been issued by the appropriate territorial authorities
23 and are in full force; and

24 (9) Such other information as the Department of Public Health
25 and Social Services may require in order to permit the Department of
26 Public Health and Social Services to ascertain whether the applicant is

1 in a position to operate an ~~nursing home~~ assisted living facility in
2 conformity with the provisions of this Chapter.

3 (b) Within sixty (60) days of receipt of a completed application, the
4 Department of Public Health and Social Services shall issue an ~~nursing home~~
5 assisted living facility license to the applicant, valid for one (1) year from the
6 date of issue and covering the premises identified in the application, unless it
7 finds the representation made in the application to be materially incorrect or
8 insufficient, or unless it finds that the applicant, the premises and the
9 designated administrator of the ~~nursing home~~ assisted living facility do not
10 meet all requirements of law for entitlement thereto.

11 (c) The name of the administrator of the ~~nursing home~~ assisted living
12 facility shall appear on the ~~nursing home~~ assisted living facility license. Any
13 change of such administrator shall require the surrender and cancellation of
14 the ~~nursing home~~ assisted living facility license and the issuance of a new
15 license bearing the name of the new administrator. Unless a change of
16 administrators occurs at the time of renewal of an ~~nursing home~~ assisted living
17 facility license, such change shall not of itself require the Department of
18 Public Health and Social Services to pass upon any matter other than whether
19 the newly designated administrator meets applicable requirements of law.
20 Any license issued solely by reason of a change in the designated
21 administrator shall bear the same expiration date as the license which it
22 replaces. If the holder of an ~~nursing home~~ assisted living facility license is
23 required to secure a new administrator on inadequate notice or under
24 emergency conditions, he may, upon prompt notice to the Department of
25 Public Health and Social Services and in accordance with rules and
26 regulations thereof, place the ~~nursing home~~ assisted living facility in charge
27 of an acting administrator for such limited time as may be necessary to permit

1 the securing of a proper administrator, but in no case shall such time be in
2 excess of one hundred twenty (120) days.

3 (d) No change in an ~~nursing home~~ assisted living facility, its operation,
4 program or services of a degree or character affecting continuing licensability
5 shall be made prior to approval thereof by the Department of Public Health
6 and Social Services.

7 (e) The Department of Public Health and Social Services by rule or
8 regulation may determine the types of changes which may not be made
9 without its prior approval.

10 **§ 7106. Renewal and Revocation of ~~Nursing Home~~ Assisted Living**
11 **Facility License; Provisional License.**

12 (a) Sixty (60) days prior to the expiration date of an ~~nursing home~~
13 assisted living facility license, an application for a renewal thereof shall be
14 submitted to the Department of Public Health and Social Services on a form
15 approved by it. Upon receipt and review of the application and determination
16 of compliance with the requirements of this Chapter and any standards, rules
17 and regulations in force pursuant thereto, the Department of Public Health and
18 Social Services shall renew such license for a period of one (1) year, unless it
19 finds that there are specific and sufficient grounds for denying the application
20 for renewal.

21 (b) The Department of Public Health and Social Services shall have the
22 authority to revoke an ~~nursing home~~ assisted living facility license at any time
23 that it finds that there has been a failure to comply with the provisions of this
24 Chapter or any standards, rule or regulation in force pursuant thereto.

25 (c) If the Department of Public Health and Social Services finds that
26 the immediate interests of the patients in an ~~nursing home~~ assisted living
27 facility and of the general public would be best served by affording such home

1 facility the opportunity to correct a condition forming the ground for
2 revocation of, or refusal to renew, an ~~nursing home~~ assisted living facility
3 license, it may afford such opportunity. For such purpose, it may suspend or
4 refuse to renew an ~~nursing home~~ assisted living facility license and issue a
5 provisional license which shall be valid for such period as the Department of
6 Public Health and Social Services may fix, but in no case to exceed ninety
7 (90) days. No provisional license shall be renewed. A provisional license shall
8 be replaced by a restored or renewed license only if, within the period for
9 which the provisional license is effective, the licensee has fully corrected all
10 conditions constituting failure to comply with the provisions of this Chapter
11 and any standard, rule, or regulation in force pursuant thereto.

12 **§ 7107. Submission of Plan and Consultation.**

13 Any owner or administrator of an ~~nursing home~~ assisted living facility or
14 proposed ~~nursing home~~ assisted living facility may submit plans and specifications
15 thereof, to the Department of Public Health and Social Services for advice
16 concerning their suitability in the light of requirements of law. The Department of
17 Public Health and Social Services may consult with any such owner or owners with
18 respect to any such plans, provided that the Department of Public Health and Social
19 Services shall not draw, redraw or otherwise furnish construction plans or
20 specifications, except to the extent that the same may be contained in its standards,
21 rules and regulations issued pursuant to this Chapter.

22 **§ 7108. Powers.**

23 In administering this Chapter, the Department of Public Health and Social
24 Services shall, in addition to powers otherwise conferred upon it, have power to:

25 (a) Develop, issue, amend and revise standards, rules and regulations
26 which shall implement this Chapter and shall have the force of law;

1 (b) Provide by rules and regulations standards of competence and
2 suitability of administrators of ~~nursing home~~ assisted living facilities, in
3 accordance with the provision of ~~P.L.~~ Public Law 11-26;

4 (c) Make studies and investigations of ~~nursing home~~ assisted living
5 facility conditions and problems generally, and as they relate to compliance
6 with the provisions of this Chapter and standards, rules and regulations issued
7 pursuant thereto;

8 (d) Develop manuals and guides relating to any of the several aspects
9 of physical facilities and operation of ~~nursing home~~ assisted living facilities
10 and make such manuals and guides available, with or without charge, to the
11 owners and administrators of assisted living facilities and to the general
12 public;

13 (e) Consult with and otherwise assist owners and administrators of
14 ~~nursing home~~ assisted living facilities for the purpose of facilitating
15 improvements to the extent and quality of care available therein;

16 (f) Investigate conditions in and the operation of any ~~nursing home~~
17 assisted living facility and the status and qualifications of any personnel
18 employed thereby or otherwise engaged in the operation thereof; and

19 (g) Conduct hearings in aid of any of its functions pursuant to this
20 Chapter; require the production of evidence in connection with any such
21 hearing or any investigation validly conducted pursuant to this Chapter, and
22 take written or oral testimony under oath, or otherwise.

23 **§ 7109. Name of ~~Home~~ Facility.**

24 The words hospital, sanitarium, rehabilitation center, or any words conveying
25 a meaning substantially identical thereto, shall not be used in the name of an ~~nursing~~
26 ~~home~~ assisted living facility. An ~~nursing home~~ assisted living facility shall use the
27 name as it appears on the ~~nursing home~~ assisted living facility license for its

premises. The name of the ~~nursing home~~ assisted living facility shall not be changed without notification to and written approval from the Department of Public Health and Social Services.

§ 7110. Administration and Management of ~~Nursing Homes~~ Assisted Living Facilities.

Every ~~nursing home~~ assisted living facility shall comply with all applicable standards, rules and regulations of the Department of Public Health and Social Services agency and shall be subject to all requirements as deemed necessary for such facilities, which include, but are not limited to, the following:

(a) Be under the administrative direction and charge of the person whose name appears on the ~~nursing home~~ assisted living facility license as administrator of the ~~nursing home~~ assisted living facility;

(b) Have at least one (1) registered nurse duly licensed to practice on Guam responsible for planning and directing the nursing care, at least one (1) nurse licensed on by this Territory Guam on duty at all times, and such additional registered and licensed practical nurses and other paraprofessional personnel in its employ as the size and regular patient care needs in the ~~home~~ facility may require;

(c) Provide for the access of its patients to dental and other health-related services, recreational services, rehabilitative services and social work services, appropriate to their needs and conditions and not directly furnished by ~~nursing home~~ assisted living facility;

(d) Keep drugs and medicine in a safe place specially set aside for the purpose. No patient or other unauthorized person shall be permitted access to such place and such drugs and medicine. Nothing herein shall be construed to authorize any person to keep or administer drugs or medicine who is not otherwise legally authorized to keep or administer such drugs or medicine;

1 (e) Maintain its premises and equipment and conduct its operations in
2 a safe and sanitary manner;

3 (f) Provide a wholesome and nourishing diet sufficient to meet
4 generally accepted standards of proper nutrition for its patients and provide
5 such therapeutic diets as may be prescribed for individual patients. In making
6 rules and regulations to implement this Subsection, the Department of Public
7 Health and Social Services shall be guided by standards recommended by
8 nationally recognized professional groups and associations with knowledge
9 of dietetics;

10 (g) Keep full records of patient admission, discharges, medical and
11 general health status, including medical records, personal and social history,
12 and identity and address of next of kin or other person who may have
13 responsibility for the affairs of the patient; and

14 (h) Keep such fiscal records of its operations and conditions as may be
15 necessary to provide information pursuant to this Chapter as may be required
16 by rules and regulations of the Department of Public Health and Social
17 Services.

18 **§ 7111. Contracts.**

19 (a) The presence of each resident in a ~~nursing home~~ assisted living
20 facility shall be covered by a contract executed at the time of admission or
21 prior thereto by the patient or his legal representative and the ~~nursing home~~
22 assisted living facility. Each party to such a contract shall be entitled to a
23 duplicate original thereof and the ~~nursing home~~ assisted living facility shall
24 keep on file all contracts which it has with patients. The ~~nursing home~~ assisted
25 living facility shall not destroy or otherwise dispose of any such contract until
26 one (1) year after its expiration or such longer period as may be provided in

1 the rules and regulations of the Department of Public Health and Social
2 Services.

3 (b) Each contract to which this Section applies shall contain express
4 provision specifically setting forth the following:

5 (1) The term of the contract;

6 (2) The services and accommodations to be provided by the
7 ~~nursing home~~ assisted living facility and the rate or charge therefor;

8 (3) Specification of any rights, duties, and obligations of the
9 parties in addition to those required by operation of law; and

10 (4) Any other matters which the parties deem appropriate.

11 (c) No contract or any provision thereof shall be construed to relieve
12 any ~~nursing home~~ assisted living facility of any requirement or
13 obligation imposed upon it by this Chapter or any standards, rules, or
14 regulations in force pursuant thereto.

15 **§ 7112. Classification of ~~Homes~~ Facilities; Administrators and Nurses.**

16 (a) The Department of Public Health and Social Services shall classify
17 ~~nursing home~~ assisted living facilities according to character, size and range
18 of services provided. Wherever it considers distinction to its standards, rules
19 and regulations to be appropriate as among different classes of ~~nursing home~~
20 assisted living facilities, it may make such distinctions.

21 (b) No administrator of an ~~nursing home~~ assisted living facility, and no
22 registered nurse who plans and directs the nursing care in a ~~home~~ facility, shall
23 function as either administrator or one who plans and directs the nursing care
24 for more than one nursing home, unless the homes involved are of a class or
25 classes found by the Department of Public Health and Social Services to be
26 of a character, size and type of operations making it reasonable for a single
27 administrator or registered nurse to perform such functions effectively for

1 more than one (1) ~~nursing-home~~ assisted living facility. As part of the
2 classifications made pursuant to this Section, the Department of Public Health
3 and Social Services shall determine and fix specific limits on the number of
4 ~~homes~~ facilities of particular classes which may be served by the same
5 individual acting as administrator or registered nurse responsible for planning
6 and directing nursing care. No such administrator or nurse shall accept
7 employment in violation of such limitations; nor shall the owner or
8 administrator of an ~~nursing-home~~ assisted living facility knowingly employ
9 any person in violation thereof. The Department of Public Health and Social
10 Services shall not issue or renew any ~~nursing-home~~ assisted living facility
11 license bearing the name of an administrator, if the name of such administrator
12 already appears on the maximum number of ~~nursing-home~~ assisted living
13 facility licenses permitted by its standards, rules and regulations.

14 **§ 7113. Property and Personal Affairs of Patients.**

15 (a) The admission of a patient to an ~~nursing-home~~ assisted living facility
16 and his presence therein shall not confer on such ~~nursing-home~~ assisted living
17 facility or its owner, administrator, employees or representatives an authority
18 to manage, use or dispose of any property of such patient; nor shall such
19 admission or presence confer on any of the aforementioned persons any
20 authority or responsibility for the personal affairs of the patient, except what
21 may be necessary for the safety and orderly management of the ~~nursing-home~~
22 assisted living facility.

23 (b) No ~~nursing-home~~ assisted living facility, and no owner,
24 administrator, employee or representative thereof shall act as guardian, trustee
25 or conservator for any patient of such ~~nursing-home~~ assisted living facility or
26 any of such patient's property.

1 (c) An ~~nursing home~~ assisted living facility shall provide for the
2 safekeeping of personal effects, funds and property of the patient in the ~~home~~
3 facility; provided that whenever necessary for the protection of valuables or
4 in order to avoid unreasonable responsibility therefor, the ~~nursing home~~
5 assisted living facility may require that they be excluded or removed from the
6 ~~home~~ facility and kept at some place not subject to the control of the ~~home~~
7 facility.

8 (d) An ~~nursing home~~ assisted living facility shall keep complete and
9 accurate records of all funds and other effects and property of its patients
10 received by it for safekeeping.

11 (e) Any funds or other property belonging or due to a patient or
12 expendable for his account which are received by an ~~nursing home~~ assisted
13 living facility shall be trust funds, shall be kept separate from the funds and
14 property of the ~~nursing home~~ assisted living facility and other patients or
15 specifically credited to such patient, and shall be used or otherwise expended
16 only for the account of the patient. Upon request, but, except upon order of a
17 court of competent jurisdiction, not more often than once every three (3)
18 months, the ~~nursing home~~ assisted living facility shall furnish the patient and
19 the guardian, trustee or conservator, (if any is available for such patient) a
20 complete and verified statement of all funds and other property to which this
21 Subsection applies, detailing the amounts and items received, together with
22 their sources and disposition. In any event, the ~~nursing home~~ assisted living
23 facility shall furnish such a statement annually and upon the discharge or
24 transfer of a patient. Any governmental agency or private charitable agency
25 contributing funds or other property on account of a patient, also shall be
26 entitled to receive such statement annually and upon discharge or transfer and
27 such other reports as it may require pursuant to law.

1 **§ 7114. Health of Personnel.**

2 No ~~nursing home~~ assisted living facility shall employ or otherwise permit any
3 person to serve there in any capacity, if such person has a communicable or
4 contagious disease or other disease or condition that would make him dangerous to
5 the health or welfare of patients therein. Except in ~~homes~~ facilities exempt from
6 medical requirements as provided in § 7118 of this Chapter, the appropriate state
7 agency shall require annual medical examinations for all such personnel and shall
8 require them to have and, upon demand, to present satisfactory evidence of such
9 examination.

10 **§ 7115. Exclusion from ~~Nursing Home~~ Assisted Living Facility.**

11 (a) No person shall be admitted to or be permitted to remain in an
12 ~~nursing home~~ assisted living facility as a patient if:

13 (1) He is dangerous to himself or other patients;

14 (2) His condition or conduct is such that he would be unduly
15 disturbing to other patients;

16 (3) He is in need of medical procedures which cannot be carried
17 out in the ~~nursing home~~ assisted living facility; and

18 (4) Upon certification of a physician that such person would no
19 longer benefit from or be in need of an ~~nursing home~~ assisted living
20 facility.

21 (b) Except in emergencies, a patient shall be transferred out of an
22 ~~nursing home~~ assisted living facility or discharged for any reason, only
23 after prior notification to the next of kin, legal representative, or agency
24 acting on the patient's behalf. If the next of kin or person or agency
25 acting on the patient's behalf cannot be reached or refuses to cooperate,
26 proper arrangements shall be made by the ~~home~~ facility for the patient's
27 welfare before transfer or discharge.

1 **§ 7116. Rebating Prohibited.**

2 No owner, administrator, employee, or representative of an ~~nursing home~~
3 assisted living facility shall pay any commission, bonus, fee, or gratuity in any form
4 whatsoever to any physician, surgeon, organization, agency, or to any person either
5 directly or indirectly, for patients referred.

6 **§ 7117. Closing of ~~Nursing Home~~ Assisted Living Facility.**

7 (a) Whenever an ~~nursing home~~ assisted living facility discontinues
8 operation, and during the period when it is preparing for such discontinuance,
9 the ~~home~~ facility shall inform the Department of Public Health and Social
10 Services of the impending discontinuance of operation. The ~~home~~ facility also
11 shall inform the patient, the next of kin, legal representative, or agency acting
12 on the patient's behalf of the fact and the proposed time of such discontinuance
13 with sufficient notice so that suitable arrangements may be made for the
14 transfer and care of such patient. In the case of any patient who has no such
15 person, the ~~home~~ facility shall be responsible for securing a suitable transfer
16 of the patient prior to the discontinuance of operation.

17 (b) Immediately upon discontinuance of operation of a ~~nursing home~~
18 facility, the owner shall surrender the license therefor to the Department of
19 Public Health and Social Services and such license shall be cancelled.

20 **§ 7118. Chapter Not Applicable.**

21 (a) The requirements of this Chapter, or of any standard, rule, or
22 regulation pursuant thereto, for medical and nursing services shall not apply
23 to any ~~home~~ facility operated by or exclusively for the members of a religious
24 order or denomination whose tenets forbid subjection of the person to the
25 ministrations of practitioners of medicine or related nursing care or include
26 reliance on spiritual means alone through prayer for healing. All other

1 provisions of this Chapter and of any such standards, rules, and regulations
2 shall be fully applicable to such ~~nursing home~~ assisted living facility.

3 (b) Any ~~nursing home~~ assisted living facility which considers itself
4 eligible for the exemptions provided in this Section shall so state on its
5 application for an ~~nursing home~~ assisted living facility license, and on any
6 application for renewal thereof; and shall inform each applicant for admission
7 to patient status therein of the auspices under which the ~~home~~ facility is
8 operated and of the meaning thereof with respect to the availability of medical
9 and nursing services.

10 **§ 7119. Right of Entry and Inspection.**

11 The Department of Public Health and Social Services and any duly designated
12 officer or employee thereof, shall have the right to enter upon and into the premises
13 of any ~~nursing home~~ assisted living facility licensed pursuant to this Chapter at any
14 time in order to determine the state of compliance with the provisions of this Chapter
15 and any rules and regulations in force pursuant thereto. Such right of entry and
16 inspection also shall extend to any premises which the Department of Public Health
17 and Social Services has reason to believe is being operated or maintained as an
18 ~~nursing home~~ assisted living facility without a license, but no such entry or
19 inspection of any premises shall be made without the permission of the owner or
20 person in charge thereof, unless a warrant is first obtained from the Superior Court
21 of Guam, authorizing the same. Any application for a nursing home assisted living
22 facility license made pursuant to § 7105 of this Chapter shall constitute permission
23 for and complete acquiescence in any entry or inspection of the premises for which
24 the license is sought in order to facilitate verification of the information submitted
25 on or in connection with such application.

26 **§ 7120. Public Funds.**

1 (a) No department, agency, or officer of ~~this Territory~~ Guam shall pay
2 or approve for payment from public funds any amount or amounts to an
3 ~~nursing home~~ assisted living facility under any program of government aid in
4 connection with services provided, or to be provided, an actual or prospective
5 patient in an ~~nursing home~~ assisted living facility, unless the ~~nursing home~~
6 assisted living facility has a current nursing home assisted living facility
7 license issued by the Department of Public Health and Social Services and
8 meets such other requirements as may be in force pursuant to law.

9 (b) Nothing in this Section shall be construed to apply to the payment
10 of government aid for construction, renovation, or improvement of an ~~nursing~~
11 ~~home~~ assisted living facility or premises intended to qualify as an ~~nursing~~
12 ~~home~~ assisted living facility upon completion of such construction,
13 renovation, or improvement.

14 **§ 7121. Fees.**

15 (a) Any application for an ~~nursing home~~ assisted living facility license
16 and an application for renewal thereof shall be accompanied by a fee which
17 shall, by rules and regulations, be established by the Department of Public
18 Health and Social Services. The issuance of a new ~~nursing home~~ assisted
19 living facility license resulting solely from a change in the designated
20 administrator of the ~~nursing home~~ assisted living facility shall be without fee.

21 (b) No fee required by this Section shall be returnable.

22 **§ 7122. Penalties and Remedies.**

23 (a) Any person who violates any provision of this Chapter or any
24 standard, rule, or regulation in force pursuant thereto shall be subject to a fine
25 of not to exceed One Thousand Dollars (\$1,000). If the violation consists in
26 whole or in part of operating an ~~nursing home~~ assisted living facility without
27 a license in force pursuant to this ~~Act~~ Chapter or of causing an ~~nursing home~~

1 assisted living facility to be so operated, the violator shall be guilty of a
2 misdemeanor.

3 (b) The imposition of any fine or term of imprisonment pursuant to
4 Subsection (a) of this Section shall be in addition to any suspension,
5 revocation, or refusal to renew an ~~nursing home~~ assisted living facility license
6 which may result from the violation.

7 (c) Action pursuant to other provisions of this Section shall not be a bar
8 to enforcement of this Chapter and standards, rules, and regulations in force
9 pursuant thereto by injunction or other appropriate remedy, and the
10 Department of Public Health and Social Services agency shall have power to
11 institute and maintain in the name of ~~this Territory~~ government of Guam any
12 and all such enforcement proceedings.

13 (d) Each day of violation shall constitute a separate offense.

14 (e) Nothing in this Chapter shall be construed to make any provision of
15 the laws of Guam, otherwise applicable, inapplicable to any act or omission
16 done or omitted by any person in connection with the operation of an ~~nursing~~
17 ~~home~~ assisted living facility.

18 **§ 7123. Hearings and Judicial Review.**

19 (a) No ~~nursing home~~ assisted living facility license may be suspended,
20 revoked, denied, or renewal denied without a hearing, if requested by the
21 licensee, on due notice, except that the Department of Public Health and
22 Social Services may suspend any such license prior to hearing when it finds
23 that the health or safety of patients requires such action on an emergency basis.

24 (b) Except for rules and regulations made to implement Subsection (c)
25 of this Section, no standards, rule, regulation, amendment, or revision thereof
26 having the force of law as provided in Section 8 of this Chapter shall be issued
27 prior to a public hearing thereon, held on due notice, and consideration of the

1 record of such hearing by the Department of Public Health and Social
2 Services.

3 (c) Transcripts of such hearings shall be available to those entitled to
4 receive the same upon payment of reasonable cost therefor in accordance with
5 rules and regulations of the Department of Public Health and Social Services.

6 (d) Any action of the Department of Public Health and Social Services
7 taken pursuant to this Chapter shall be reviewable as provided in the
8 Administrative Adjudication Law.”

9 **Section 3. Funding Support for Assisted Living Facilities.**

10 Within one hundred eighty (180) calendar days of enactment of this Act, the
11 Director of Public Health and Social Services shall submit to the Legislature,
12 recommendations of maximizing funding support in the operation of Assisted Living
13 Facilities by any, and all existing appropriate funding support sources (such as
14 Medicare, or Medicaid, or the Medically Indigent Program, or others) as applicable
15 and authorized under their respective individual guidelines. Within such
16 recommendation, the Director shall include all costs associated with maximizing
17 funding support for Assisted Living Facilities for the Legislature’s consideration.

18 **Section 4.** A New (N) is hereby *added* to § 9302, (b), (1) of Chapter 9,
19 Division 1 of Title 26, Guam Administrative Rules and Regulations, to read:

20 “(b) Outpatient Services.

21 (1) The following outpatient hospital services shall be covered:

22 (A) Hospital-based physician services.

23 (B) Laboratory and diagnostic tests.

24 (C) Diagnostic radiology.

25 (D) Laboratory tests and diagnostic radiology not
26 available at Public Health for Maternal and Child Health
27 Program clients (clients must be program eligible).

1 (E) Emergency room for warranted emergencies. \$5.00
2 co-payment required.

3 (F) Drugs which are prescribed by physicians and cannot
4 be bought without a prescription.

5 (G) Medical and surgical supplies.

6 (H) Operating room.

7 (I) Dialysis treatment.

8 (K) Physical and inhalation therapy (prior authorization is
9 required).

10 (L) Insulin injections for diabetes.

11 (M) Lytico-Bodig related services. (amyotrophic lateral
12 sclerosis or Parkinsonism dementia).

13 (N) Assisted Living Facilities.”

14 **Section 5. Effective Date.** This Act shall be effective upon enactment.

15 **Section 6. Severability.** If any provision of this Act or its application to any
16 person or circumstance is found to be invalid or inorganic, such invalidity shall not
17 affect other provisions or applications of this Act that can be given effect without
18 the invalid provision or application, and to this end the provisions of this Act are
19 severable.

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2025 (FIRST) Regular Session

Bill No. 31-38 (COR)

As Amended by the Committee
on Health and Veterans Affairs

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Introduced by:

William A. Parkinson

**AN ACT TO *AMEND* CHAPTER 7 OF DIVISION 1, TITLE 10,
GUAM CODE ANNOTATED, AND *ADD A NEW (N) TO §9302 (b)*
(1) OF CHAPTER 9, OF DIVISION 1, TITLE 26, GUAM
ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE
TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES**

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BE IT ENACTED BY THE PEOPLE OF GUAM:

Section 1. Legislative Findings and Intent. *I Liheslaturan Guåhan* finds that Guam's aging population continues to grow significantly, with *Manåmko* comprising a substantial portion of the island's residents. Many of these individuals require care and assistance that falls between independent living and the intensive support of a nursing home. Currently, Guam lacks adequate intermediate care options to address the diverse needs of *Manåmko*, creating a gap in the continuum of care. Assisted living facilities provide a vital service by offering safe, supportive environments for seniors who require assistance with daily activities but do not need the constant medical care provided in nursing homes. Such facilities promote dignity, independence, and quality of life, aligning with cultural values of respect and care for elders.

Additionally, *I Liheslaturan Guåhan* recognizes the introduction of a qualifying certificate (QC) program aimed at incentivizing the development of assisted living facilities on Guam was passed under Public Law 36-111. While the QC program provides essential economic incentives, the absence of a statutory

1 framework leaves a regulatory void, potentially hindering the effective
2 establishment and oversight of assisted living facilities.

3 *I Liheslaturan Guåhan* further finds that the establishment of a comprehensive
4 statutory and regulatory framework for assisted living facilities will enhance care
5 quality, ensure safety, and promote accountability. Moreover, this framework is
6 essential to attract and guide investment in such facilities under the QC program. By
7 supporting the development of assisted living facilities, Guam can better address the
8 needs of its *Manåmko*, enhance community well-being, and stimulate economic
9 activity through the creation of jobs and related services.

10 Therefore, it is the intent of *I Liheslaturan Guåhan* to establish a robust legal
11 and regulatory framework to facilitate the development, operation, and oversight of
12 assisted living facilities on Guam. This framework will ensure that facilities meet
13 high standards of care, address the intermediate care needs of *Manåmko*, and
14 maximize the potential benefits of the qualifying certificate program for Guam's
15 residents and economy.

16 **Section 2.** Chapter 7, Division 1, Title 10, Guam Code Annotated, is hereby
17 amended to read:

18 **“CHAPTER 7**

19 **NURSING HOMES ASSISTED LIVING FACILITIES**

20 § 7101. Declaration of Policy.

21 § 7102. Definitions.

22 § 7103. License Required.

23 § 7104. ~~Homes~~ Assisted Living Facilities Operated by Territory

24 Guam.

25 § 7105. Application for the Issuance of License to Operate

26 Nursing Home ~~an~~ Assisted Living Facility.

27 § 7106. Renewal and Revocation of Nursing Home Assisted

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1 Living ~~Facility~~ License; Provisional License.
2 ~~§ 7107. Submission of Plan and Consultation.~~
3 ~~§ 7108. Powers.~~
4 ~~§ 7109. Name of ~~Home~~ Facility.~~
5 ~~§ 7110. Administration and Management of ~~Nursing Homes~~~~
6 ~~Assisted Living Facilities.~~
7 ~~§ 7111. Contracts.~~
8 ~~§ 7112. Classification of ~~Homes~~ Facilities; Administrators and~~
9 ~~Nurses.~~
10 ~~§ 7113. Property and Personal Affairs of Patients.~~
11 ~~§ 7114. Health of Personnel.~~
12 ~~§ 7115. Exclusion from ~~Nursing Home~~ Assisted Living~~
13 ~~Facility.~~
14 ~~§ 7116. Rebating Prohibited.~~
15 ~~§ 7117. Closing of ~~Nursing Home~~ Assisted Living Facility.~~
16 ~~§ 7118. Chapter Not Applicable.~~
17 ~~§ 7119. Right of Entry and Inspection.~~
18 ~~§ 7120. Public Funds.~~
19 ~~§ 7121. Fees.~~
20 ~~§ 7122. Penalties and Remedies.~~
21 ~~§ 7123. Hearings and Judicial Review.~~

22
23 ~~§ 7101.~~ **Declaration of Policy**

24
25 ~~It is the policy of this Territory~~ this TerritoryGuam to encourage and promote
26 measures and the development and utilization of resources to insure the effective
27 care and treatment of persons who are convalescing or whose physical or mental

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1 condition requires them to receive a degree of nursing and/or related health care
2 greater than that necessary for well individuals, but not so acute as to require
3 hospitalization. Such care and treatment requires a living environment for them
4 which, to the extent practicable, will approximate a normal home environment. To
5 this end, the guiding principle for the administration of the laws of ~~this Territory~~ this
6 ~~Territory~~ Guam is that such person shall be encouraged and assisted in securing
7 necessary care and treatment in non-institutional surroundings. Recognizing that for
8 many persons effective care and treatment can only be secured from proprietary,
9 voluntary, and governmental nursing homes, it is the policy of ~~this Territory~~ this
10 ~~Territory~~ Guam to encourage, promote and require the maintenance of institutions
11 other than hospitals offering nursing and/or related health care so as to insure
12 protection of those using the services of such facilities.

13
14 ~~§ 7102.~~ **Definitions.**

15
16 ~~As used in this Chapter, unless the context requires a different meaning:~~

17
18 ~~(a) “Assisted living facility” means a residence for the elderly or infirm~~
19 ~~who require assistance with some of the routine activities of daily living as~~
20 ~~well as ready access to medical care as needed and shall include, but not be~~
21 ~~limited to, the following:~~

22
23 ~~(1) “Nursing home” means an institution, private home,~~
24 ~~other place or part or unit thereof, however named, whether for profit~~
25 ~~or not, including facilities operated by the government of Guam,~~
26 ~~which is advertised, offered, maintained or operated for the express~~
27 ~~or implied purpose of providing accommodations, nursing and/or~~

1 related health care for two (2) or more individuals not related to the
2 owner or administrator by ~~—~~ blood or marriage within the third
3 degree of consanguinity, which accommodations and care for a period
4 of twenty-four (24) or more ~~—~~ consecutive hours, but shall not
5 include any place providing care and ~~—~~ treatment primarily for the
6 acutely ill; ~~and~~

7
8 ~~— (2) “Independent living facility” means housing units~~
9 ~~designed for the elderly or non-elderly persons with disabilities designed~~
10 ~~for ease of use and may include ADA accommodations.~~

11 (3) “Residential care facility for the elderly” means a housing
12 ~~—~~ arrangement chosen voluntarily by persons sixty (60) years of
13 age or over, or their authorized representative, where varying levels
14 and intensities of ~~—~~ care and supervision, protective supervision,
15 personal care, or health-related services are provided, based upon their
16 varying needs, as determined in ~~—~~ order to be admitted and to
17 remain in the facility. Persons under 60 years of ~~—~~ age with
18 compatible needs may be allowed to be admitted or retained in a
19 ~~—~~ residential care facility for the elderly if needed.

20 (A) “Service-enriched housing/nursing home” means
21 housing that is designed to accommodate frail elderly persons,
22 elderly persons, or persons with severe disabilities with service
23 needs where residents are able to live independently but need
24 assistance with activities of daily living.

25 (B) “Palliative/hospice care facility” means medical
26 facilities meant to provide physical comfort and emotional,

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1 social, and spiritual support for individuals with serious, chronic,
2 or terminal illnesses.

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3
4 —(b) “Administrator of a nursing home” means the individual in general
5 administrative charge of the ~~nursing home~~ assisted living facility; ~~and~~

6 (c)

7 —(e) “Person” means any individual, corporation, partnership,
8 association, territory or agency of the Territory Guam or any other entity.

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9
10 — § 7103. License Required.

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11
12 —(a) No person shall operate an ~~nursing home~~ assisted living facility
13 unless the Department of Public Health and Social Services has issued, and
14 there is in force, a license authorizing such operation.

15
16 —(b) No license to operate a hospital or other facility for the care and
17 treatment of the physically or mentally ill shall authorize the operation of an
18 ~~nursing home~~ assisted living facility or an ~~nursing home~~ assisted living facility
19 part of such hospital or facility. The operation of an ~~nursing home~~ assisted
20 living facility in conjunction with, or under the same management as a
21 hospital or other facility, shall require such ~~nursing home~~ assisted living
22 facility or ~~nursing home~~ assisted living facility part to be separately licensed
23 as an ~~nursing home~~ assisted living facility pursuant to this Chapter.

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25 — § 7104. Homes Assisted Living Facilities Operated by
26 Territory Guam.

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1 —Notwithstanding any provision of this Chapter no license pursuant to §
2 7103 hereof shall be required as a condition of the establishment or operation of any
3 ~~nursing home~~ assisted living facility by ~~this Territory~~ Guam or any agency thereof.
4 All other provisions and requirements of this Chapter and standards, rules, and
5 regulations in force pursuant thereto shall apply to any such ~~homes~~ facility~~homes~~,
6 and the Department of Public Health and Social Services shall have powers of
7 supervision with respect thereto.

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8 —§ 7105. —Application for the Issuance of License to Operate
9 ~~Nursing Home~~ an Assisted Living Facility.

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10
11 —(a) Any person proposing to operate ~~an nursing home~~ assisted living
12 facility shall, prior to the commencement of such operation, make application
13 to the Department of Public Health and Social Services for a license by the
14 Department of Public Health and Social Services, which shall contain the
15 following information:

16
17 —(1) The name and address of the person making
18 application;

19
20 —(2) The name and address of the individual designated by
21 the —applicant as the administrator of the ~~nursing home~~ assisted living
22 facility, —and such additional information concerning such
23 individual as the Department of Public Health and Social Services
24 may require;

25
26 —(3) The address of the premises which are to constitute the
27 ~~nursing~~ ~~home~~ assisted living facility, together with a description of

1 all structures and ~~—~~facilities forming a part thereof, in such detail as the
2 Department of Public ~~—~~Health and Social Services may require;

3
4 ~~—~~(4) The name by which the ~~nursing home~~ assisted living
5 facility is to be known;

6
7 ~~—~~(5) The identity of the owner or owners of the ~~nursing~~
8 ~~home assisted~~ ~~—~~living facility and, if the owner is a corporation, the
9 names of the officers ~~—~~and principal stockholders thereof;

10
11 ~~—~~(6) The bed capacity and/or maximum occupancy of the
12 ~~nursing home~~ ~~—~~assisted living facility;

13
14 ~~—~~(7) A description of the programs and services to be
15 furnished and of ~~—~~the means available to the applicant for providing
16 the same, and for meeting ~~—~~requirements for staffing, equipping
17 and operating the ~~nursing home assisted~~ ~~—~~living facility, with
18 particular reference to the professional requirements of § -7110 of this
19 Chapter;

20
21 ~~—~~(8) Proof that the premises are in conformity with all
22 applicable state and local health, safety, zoning and subdivision
23 laws or ordinances, and building codes, and that any necessary
24 permits for occupancy have been ~~—~~issued by the appropriate
25 territorial authorities and are in full force; and

26
27 ~~—~~(9) Such other information as the Department of Public

1 Health and Social Services may require in order to permit the
2 Department of Public ~~Health and Social Services~~ to ascertain
3 whether the applicant is in a position to operate ~~an nursing home~~
4 assisted living facility in conformity with the ~~provisions~~ of this
5 Chapter.

6 ~~Within sixty (60) days of receipt of a completed application,~~
7 the Department of Public Health and Social Services shall issue ~~an nursing~~
8 ~~home~~ assisted living facility license to the applicant, valid for one (1) year
9 from the date of issue and covering the premises identified in the application,
10 unless it finds the representation made in the application to be materially
11 incorrect or insufficient, or unless it finds that the applicant, the premises and
12 the designated administrator of the ~~nursing home~~ assisted living facility do
13 not meet all requirements of law for entitlement thereto.

14 ~~(c) The name of the administrator of the nursing home assisted~~
15 ~~living facility~~ shall appear on the ~~nursing home~~ assisted living facility license.
16 Any change of such administrator shall require the surrender and cancellation
17 of the ~~nursing home~~ assisted living facility license and the issuance of a new
18 license bearing the name of the new administrator. Unless a change of
19 administrators occurs at the time of renewal of ~~an nursing home~~ assisted living
20 facility license, such change shall not of itself require the Department of
21 Public Health and Social Services to pass upon any matter other than whether
22 the newly designated administrator meets applicable requirements of law.
23 Any license issued solely by reason of a change in the designated
24 administrator shall bear the same expiration date as the license which it
25 replaces. If the holder of ~~an nursing home~~ assisted living facility license is
26 required to secure a new administrator on inadequate notice or under
27

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1 emergency conditions, he may, upon prompt notice to the Department of
2 Public Health and Social Services and in accordance with rules and
3 regulations thereof, place the ~~nursing home~~ assisted living facility in charge
4 of an acting administrator for such limited time as may be necessary to permit
5 the securing of a proper administrator, but in no case shall such time be in
6 excess of one hundred twenty (120) days.

7
8 (d) No change in an ~~nursing home~~ assisted living facility, its
9 operation, program or services of a degree or character affecting continuing
10 licensability shall be made prior to approval thereof by the Department of
11 Public Health and Social Services.

12
13 (e) The Department of Public Health and Social Services by rule
14 or regulation may determine the types of changes which may not be made
15 without its prior approval.

16 ~~§ 7106.~~ **Renewal and Revocation of Nursing Home Assisted**
17 **Living Facility License; Provisional License.**

18
19 (a) Sixty (60) days prior to the expiration date of an ~~nursing home~~
20 assisted living facility license, an application for a renewal thereof shall be
21 submitted to the Department of Public Health and Social Services on a form
22 approved by it. Upon receipt and review of the application and determination
23 of compliance with the requirements of this Chapter and any standards, rules
24 and regulations in force pursuant thereto, the Department of Public Health and
25 Social Services shall renew such license for a period of one (1) year, unless it
26 finds that there are specific and sufficient grounds for denying the application
27 for renewal.

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1
2 (b) The Department of Public Health and Social Services shall
3 have the authority to revoke an nursing home assisted living facility license at
4 any time that it finds that there has been a failure to comply with the provisions
5 of this Chapter or any standards, rule or regulation in force pursuant thereto.

6
7 (c) If the Department of Public Health and Social Services finds
8 that the immediate interests of the patients in an nursing home assisted living
9 facility and of the general public would be best served by affording such home
10 facility the opportunity to correct a condition forming the ground for
11 revocation of, or refusal to renew, an nursing home assisted living facility
12 license, it may afford such opportunity. For such purpose, it may suspend or
13 refuse to renew an nursing home assisted living facility license and issue a
14 provisional license which shall be valid for such period as the Department of
15 Public Health and Social Services may fix, but in no case to exceed ninety
16 (90) days. No provisional license shall be renewed. A provisional license shall
17 be replaced by a restored or renewed license only if, within the period for
18 which the provisional license is effective, the licensee has fully corrected all
19 conditions constituting failure to comply with the provisions of this Chapter
20 and any standard, rule, or regulation in force pursuant thereto.

21 **§ 7107. Submission of Plan and Consultation.**

22
23 Any owner or administrator of an nursing home assisted living facility or proposed
24 nursing home assisted living facility may submit plans and specifications thereof, to
25 the Department of Public Health and Social Services for advice concerning their
26 suitability in ~~the~~ the light of requirements of law. The Department of Public Health
27 and Social Services may consult with any such owner or owners with respect to any

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1 such plans, provided that the Department of Public Health and Social Services shall
2 not draw, redraw or otherwise furnish construction plans or specifications, except to
3 the extent that the same may be contained in its standards, rules and regulations
4 issued pursuant to this Chapter.

5 ~~§ 7108.~~ **Powers.**

6
7 ~~In administering this Chapter, the Department of Public Health and Social~~
8 Services shall, in addition to powers otherwise conferred upon it, have power to:

9
10 ~~(a)~~ Develop, issue, amend and revise standards, rules and regulations
11 which shall implement this Chapter and shall have the force of law;

12
13 ~~(b)~~ Provide by rules and regulations standards of competence and
14 suitability of administrators of ~~nursing home~~ assisted living facilities, in
15 accordance with the provision of ~~P.L.~~ Public Law 11-26;

16
17 ~~(c)~~ Make studies and investigations of ~~nursing home~~ assisted living
18 facility conditions and problems generally, and as they relate to compliance
19 with the provisions of this Chapter and standards, rules and regulations issued
20 pursuant thereto;

21
22 ~~(d)~~ Develop manuals and guides relating to any of the several aspects
23 of physical facilities and operation of ~~nursing home~~ assisted living facilities
24 and make such manuals and guides available, with or without charge, to the
25 owners and administrators of ~~nursing homes~~ assisted living facilities and to the
26 general public;

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1
2 —(e) Consult with and otherwise assist owners and administrators of
3 ~~nursing home~~ assisted living facilities for the purpose of facilitating
4 improvements to the extent and quality of care available therein;

5
6 —(f) Investigate conditions in and the operation of any ~~nursing home~~
7 assisted living facility and the status and qualifications of any personnel
8 employed thereby or otherwise engaged in the operation thereof; and

9
10 (g) Conduct hearings in aid of any of its functions pursuant to this Chapter;
11 require the production of evidence in connection with any such hearing or any
12 investigation validly conducted pursuant to this Chapter, and take written or
13 oral testimony under oath, or otherwise.

14 —§ 7109. ~~Name of Home Facility.~~

15
16 —The words hospital, sanitarium, rehabilitation center, or any words conveying
17 a meaning substantially identical thereto, shall not be used in the name of an ~~nursing~~
18 ~~home~~ assisted living facility. An ~~nursing home~~ assisted living facility shall use the
19 name as it appears on the ~~nursing home~~ assisted living facility license for its
20 premises. The name of the ~~nursing home~~ assisted living facility shall not be changed
21 without notification to and written approval from the Department of Public Health
22 and Social Services.

23 —§ 7110. ~~Administration and Management of Nursing Homes~~
24 Assisted Living Facilities.

25
26 —Every ~~nursing home~~ assisted living facility shall comply with all applicable
27 standards, rules and regulations of the Department of Public Health and Social

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Services agency and shall be subject to all requirements as deemed necessary for such facilities, which include, but ~~is~~are not limited to, the following:

—(a) Be under the administrative direction and charge of the person whose name appears on the ~~nursing home~~ assisted living facility license as administrator of the ~~nursing home~~ assisted living facility;

—(b) Have at least one (1) registered nurse duly licensed to practice on Guam responsible for planning and directing the nursing care, at least one (1) nurse licensed on by this Territory Guam on duty at all times, and such additional registered and licensed practical nurses and other paraprofessional personnel in its employ as the size and regular patient care needs in the ~~home~~ facility may require;

—(c) Provide for the access of its patients to dental and other health-related services, recreational services, rehabilitative services and social work services, appropriate to their needs and conditions and not directly furnished by ~~nursing home~~ assisted living facility;

—(d) Keep drugs and medicine in a safe place specially set aside for the purpose. No patient or other unauthorized person shall be permitted access to such place and such drugs and medicine. Nothing herein shall be construed to authorize any person to keep or administer drugs or medicine who is not otherwise legally authorized to keep or administer such drugs or medicine;

—(e) Maintain its premises and equipment and conduct its operations in a safe and sanitary manner;

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1
2 (f) Provide a wholesome and nourishing diet sufficient to meet generally
3 accepted standards of proper nutrition for its patients and provide such
4 therapeutic diets as may be prescribed for individual patients. In making rules
5 and regulations to implement this Subsection, the Department of Public
6 Health and Social Services shall be guided by standards recommended by
7 nationally recognized professional groups and associations with knowledge
8 of dietetics;

9
10 —(g) Keep full records of patient admission, discharges, medical and
11 general health status, including medical records, personal and social history,
12 and identity and address of next of kin or other person who may have
13 responsibility for the affairs of the patient; and

14
15 —(h) Keep such fiscal records of its operations and conditions as may be
16 necessary to provide information pursuant to this Chapter as may be required
17 by rules and regulations of the Department of Public Health and Social
18 Services.

19 —§ 7111. —Contracts.

20
21 —(a) The presence of each resident in a ~~nursing home~~ assisted living
22 facility shall be covered by a contract executed at the time of admission or
23 prior thereto by the patient or his legal representative and the ~~nursing home~~
24 assisted living facility. Each party to such a contract shall be entitled to a
25 duplicate original thereof and the ~~nursing home~~ assisted living facility shall
26 keep on file all contracts which it has with patients. The ~~nursing home~~ assisted
27 living facility shall not destroy or otherwise dispose of any such contract until

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one (1) year after its expiration or such longer period as may be provided in the rules and regulations of the Department of Public Health and Social Services.

(b) Each contract to which this Section applies shall contain express provision specifically setting forth the following:

(1) The term of the contract;

(2) The services and accommodations to be provided by the ~~nursing home~~ assisted living facility and the rate or charge therefor;

(3) Specification of any rights, duties, and obligations of the parties in addition to those required by operation of law; and

(4) Any other matters which the parties deem appropriate.

(c) No contract or any provision thereof shall be construed to relieve any ~~nursing home~~ assisted living facility of any requirement or obligation imposed upon it by this Chapter or any standards, rules, or regulations in force pursuant thereto.

§ 7112. ~~Classification of Homes~~ Facilities; Administrators and Nurses.

(a) The Department of Public Health and Social Services shall classify ~~nursing home~~ assisted living facilities according to character, size and range

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1 of services provided. Wherever it considers distinction to its standards, rules
2 and regulations to be appropriate as among different classes of ~~nursing home~~
3 assisted living facilities, it may make such distinctions.

4
5 —(b) No administrator of an ~~nursing home~~ assisted living facility, and no
6 registered nurse who plans and directs the nursing care in a ~~home~~ facility, shall
7 function as either administrator or one who plans and directs the nursing care
8 for more than one nursing home, unless the homes involved are of a class or
9 classes found by the Department of Public Health and Social Services to be
10 of a character, size and type of operations making it reasonable for a single
11 administrator or registered nurse to perform such functions effectively for
12 more than one (1) ~~nursing home~~ assisted living facility. As part of the
13 classifications made pursuant to this Section, the Department of Public Health
14 and Social Services shall determine and fix specific limits on the number of
15 ~~homes~~ facilities of particular classes which may be served by the same
16 individual acting as administrator or registered nurse responsible for planning
17 and directing nursing care. No such administrator or nurse shall accept
18 employment in violation of such limitations; nor shall the owner or
19 administrator of an ~~nursing home~~ assisted living facility knowingly employ
20 any person in violation thereof. The Department of Public Health and Social
21 Services shall not issue or renew any ~~nursing home~~ assisted living facility
22 license bearing the name of an administrator, if the name of such administrator
23 already appears on the maximum number of ~~nursing home~~ assisted living
24 facility licenses permitted by its standards, rules and regulations.

25 —§ 7113. —**Property and Personal Affairs of Patients.**

26
27 —(a) The admission of a patient to an ~~nursing home~~ assisted living facility

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1 and his presence therein shall not confer on such ~~nursing home~~ assisted living
2 facility or its owner, administrator, employees or representatives an authority
3 to manage, use or dispose of any property of such patient; nor shall such
4 admission or presence confer on any of the aforementioned persons any
5 authority or responsibility for the personal affairs of the patient, except what
6 may be necessary for the safety and orderly management of the ~~nursing home~~
7 assisted living facility.

8
9 —(b) No ~~nursing home~~ assisted living facility, and no owner,
10 administrator, employee or representative thereof shall act as guardian, trustee
11 or conservator for any patient of such ~~nursing home~~ assisted living facility or
12 any of such patient's property.

13
14 —(c) An ~~nursing home~~ assisted living facility shall provide for the
15 safekeeping of personal effects, funds and property of the patient in the ~~home~~
16 facility; provided that whenever necessary for the protection of valuables or
17 in order to avoid unreasonable responsibility therefor, the ~~nursing home~~
18 assisted living facility may require that they be excluded or removed from the
19 ~~home facility~~ and kept at some place not subject to the control of the ~~home~~
20 facility.

21
22 —(d) An ~~nursing home~~ assisted living facility shall keep complete and
23 accurate records of all funds and other effects and property of its patients
24 received by it for safekeeping.

25
26 —(e) Any funds or other property belonging or due to a patient or
27 expendable for his account which are received by an ~~nursing home~~ assisted

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1 living facility shall be trust funds, shall be kept separate from the funds and
2 property of the ~~nursing home~~ assisted living facility and other patients or
3 specifically credited to such patient, and shall be used or otherwise expended
4 only for the account of the patient. Upon request, but, except upon order of a
5 court of competent jurisdiction, not more often than once every three (3)
6 months, the ~~nursing home~~ assisted living facility shall furnish the patient and
7 the guardian, trustee or conservator, (if any is available for such patient) a
8 complete and verified statement of all funds and other property to which this
9 Subsection applies, detailing the amounts and items received, together with
10 their sources and disposition. In any event, the ~~nursing home~~ assisted living
11 facility shall furnish such a statement annually and upon the discharge or
12 transfer of a patient. Any governmental agency or private charitable agency
13 contributing funds or other property on account of a patient, also shall be
14 entitled to receive such statement annually and upon discharge or transfer and
15 such other reports as it may require pursuant to law.

16 ~~§ 7114.~~ **Health of Personnel.**

17
18 ~~No~~ ~~nursing home~~ assisted living facility shall employ or otherwise permit any
19 person to serve there in any capacity, if such person has a communicable or
20 contagious disease or other disease or condition that would make him dangerous to
21 the health or welfare of patients therein. Except in ~~homes~~ facilities exempt from
22 medical requirements as provided in § 7118 of this Chapter, the appropriate state
23 agency shall require annual medical examinations for all such personnel and shall
24 require them to have and, upon demand, to present satisfactory evidence of such
25 examination.

26 ~~§ 7115.~~ **Exclusion from Nursing Home Assisted Living**
27 **Facility.**

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1
2 ~~—~~(a) No person shall be admitted to or be permitted to remain in an
3 ~~nursing home~~ assisted living facility as a patient if:

4
5 ~~—~~(1) He is dangerous to himself or other patients;

6
7 ~~—~~(2) His condition or conduct is such that he would be
8 unduly ~~—~~disturbing to other patients;

9
10 ~~—~~(3) He is in need of medical procedures which cannot be
11 carried out in the ~~nursing home~~ assisted living facility; and

12
13 ~~—~~(4) Upon certification of a physician that such person
14 would no longer ~~—~~benefit from or be in need of an ~~nursing home~~
15 assisted living facility.

16
17 ~~—~~(b) Except in emergencies, a patient shall be transferred out of an
18 ~~nursing home~~ assisted living facility or discharged for any reason, only
19 after prior notification to the next of kin, legal representative, or agency
20 acting on the patient's behalf. If the next of kin or person or agency
21 acting on the patient's behalf cannot be reached or refuses to cooperate,
22 proper arrangements shall be made by the ~~home~~ facility for the patient's
23 welfare before transfer or discharge.

24 ~~—~~§ 7116. ~~—~~**Rebating Prohibited.**

25
26 No owner, administrator, employee, or representative of an ~~nursing home~~ assisted
27 living facility shall pay any commission, bonus, fee, or gratuity in any form

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whatsoever to any physician, surgeon, organization, agency, or to any person either directly or indirectly, for patients referred.

~~§ 7117.~~ **Closing of Nursing Home Assisted Living Facility.**

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(a) Whenever an ~~nursing home~~ assisted living facility discontinues operation, and during the period when it is preparing for such discontinuance, the ~~home~~ facility shall inform the Department of Public Health and Social Services of the impending discontinuance of operation. The ~~home~~ facility also shall inform the patient, the next of kin, legal representative, or agency acting on the patient's behalf of the fact and the proposed time of such discontinuance with sufficient notice so that suitable arrangements may be made for the transfer and care of such patient. In the case of any patient who has no such person, the ~~home~~ facility shall be responsible for securing a suitable transfer of the patient prior to the discontinuance of operation.

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(b) Immediately upon discontinuance of operation of a ~~nursing home~~ facility, the owner shall surrender the license therefor to the Department of Public Health and Social Services and such license shall be cancelled.

~~§ 7118.~~ **Chapter Not Applicable.**

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(a) The requirements of this Chapter, or of any standard, rule, or regulation pursuant thereto, for medical and nursing services shall not apply to any ~~home~~ facility operated by or exclusively for the members of a religious order or denomination whose tenets forbid subjection of the person to the ministrations of practitioners of medicine or related nursing care or include reliance on spiritual means alone through prayer for healing. All other

provisions of this Chapter and of any such standards, rules, and regulations shall be fully applicable to such ~~nursing home~~ assisted living facility.

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(b) Any ~~nursing home~~ assisted living facility which considers itself eligible for the exemptions provided in this Section shall so state on its application for an ~~nursing home~~ assisted living facility license, and on any application for renewal thereof; and shall inform each applicant for admission to patient status therein of the auspices under which the ~~home~~ facility is operated and of the meaning thereof with respect to the availability of medical and nursing services.

§ 7119. ~~Right of Entry and Inspection.~~

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The Department of Public Health and Social Services and any duly designated officer or employee thereof, shall have the right to enter upon and into the premises of any ~~nursing home~~ assisted living facility licensed pursuant to this Chapter at any time in order to determine the state of compliance with the provisions of this Chapter and any rules and regulations in force pursuant thereto. Such right of entry and inspection also shall extend to any premises which the Department of Public Health and Social Services has reason to believe is being operated or maintained as an ~~nursing home~~ assisted living facility without a license, but no such entry or inspection of any premises shall be made without the permission of the owner or person in charge thereof, unless a warrant is first obtained from the Superior Court of Guam, authorizing the same. Any application for a nursing home assisted living facility license made pursuant to § 7105 of this Chapter shall constitute permission for and complete acquiescence in any entry or inspection of the premises for which the license is sought in order to facilitate verification of the information submitted on or in connection with such application.

1 ~~§ 7120.~~ **Public Funds.**

2
3 ~~(a)~~ No department, agency, or officer of ~~this Territory-Guam~~ shall pay
4 or approve for payment from public funds any amount or amounts to an
5 ~~nursing home~~ assisted living facility under any program of government aid in
6 connection with services provided, or to be provided, an actual or prospective
7 patient in an ~~nursing home~~ assisted living facility, unless the ~~nursing home~~
8 assisted living facility has a current nursing home assisted living facility
9 license issued by the Department of Public Health and Social Services and
10 meets such other requirements as may be in force pursuant to law.

11
12 ~~(b)~~ Nothing in this Section shall be construed to apply to the payment
13 of government aid for construction, renovation, or improvement of an ~~nursing~~
14 ~~home~~ assisted living facility or premises intended to qualify as an ~~nursing~~
15 ~~home~~ assisted living facility upon completion of such construction,
16 renovation, or improvement.

17 ~~§ 7121.~~ **Fees.**

18
19 ~~(a)~~ Any application for an ~~nursing home~~ assisted living facility license
20 and an application for renewal thereof shall be accompanied by a fee which
21 shall, by rules and regulations, be established by the Department of Public
22 Health and Social Services. The issuance of a new ~~nursing home~~ assisted
23 living facility license resulting solely from a change in the designated
24 administrator of the ~~nursing home~~ assisted living facility shall be without fee.

25
26 ~~(b)~~ No fee required by this Section shall be returnable.

27 ~~§ 7122.~~ **Penalties and Remedies.**

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1
2 —(a) Any person who violates any provision of this Chapter or any
3 standard, rule, or regulation in force pursuant thereto shall be subject to a fine
4 of not to exceed One Thousand Dollars (\$1,000). If the violation consists in
5 whole or in part of operating an ~~nursing home~~ assisted living facility without
6 a license in force pursuant to this ~~Act~~ Chapter or of causing an ~~nursing~~
7 ~~home~~ assisted living facility to be so operated, the violator shall be guilty of a
8 misdemeanor.

9
10 —(b) The imposition of any fine or term of imprisonment pursuant to
11 Subsection (a) of this Section shall be in addition to any suspension,
12 revocation, or refusal to renew an ~~nursing home~~ assisted living facility license
13 which may result from the violation.

14
15 —(c) Action pursuant to other provisions of this Section shall not be a bar
16 to enforcement of this Chapter and standards, rules, and regulations in force
17 pursuant thereto by injunction or other appropriate remedy, and the
18 Department of Public Health and Social Services agency shall have power to
19 institute and maintain in the name of this ~~Territory~~ government of Guam any
20 and all such enforcement proceedings.

21
22 —(d) Each day of violation shall constitute a separate offense.

23
24 —(e) Nothing in this Chapter shall be construed to make any provision of
25 the laws of Guam, otherwise applicable, inapplicable to any act or omission
26 done or omitted by any person in connection with the operation of an ~~nursing~~
27 ~~home~~ assisted living facility.

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1 ~~§ 7123.~~ **Hearings and Judicial Review.**

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2
3 ~~(a) No nursing home assisted living facility license may be suspended,~~
4 ~~revoked, denied, or renewal denied without a hearing, if requested by the~~
5 ~~licensee, on due notice, except that the Department of Public Health and~~
6 ~~Social Services may suspend any such license prior to hearing when it finds~~
7 ~~that the health or safety of patients requires such action on an emergency basis.~~

8
9 ~~(b) Except for rules and regulations made to implement Subsection (c)~~
10 ~~of this Section, no standards, rule, regulation, amendment, or revision thereof~~
11 ~~having the force of law as provided in Section 8 of this Chapter shall be issued~~
12 ~~prior to a public hearing thereon, held on due notice, and consideration of the~~
13 ~~record of such hearing by the Department of Public Health and Social~~
14 ~~Services.~~

15
16 ~~(c) Transcripts of such hearings shall be available to those entitled to~~
17 ~~receive the same upon payment of reasonable cost therefor in accordance with~~
18 ~~rules and regulations of the Department of Public Health and Social Services.~~

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19
20 ~~(d) Any action of the Department of Public Health and Social Services~~
21 ~~taken pursuant to this Chapter shall be reviewable as provided in the~~
22 ~~Administrative Adjudication Law."~~

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23 ~~Section 3.~~ **Funding Support for Assisted Living Facilities.**

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24
25 ~~Within one hundred eighty (180) calendar days of enactment of this law Act,~~
26 ~~the Director of Public Health and Social Services shall submit to the Legislature,~~
27 ~~recommendations of maximizing funding support in the operation of Assisted Living~~

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1 Facilities by any, and all existing appropriate funding support sources (such as
2 Medicare, or Medicaid, or the Medically Indigent Program, or others) as applicable
3 and authorized under their respective individual guidelines. Within such
4 recommendation, the Director shall include all costs associated with maximizing
5 funding support for Assisted Living Facilities for the Legislature's consideration.

6 ~~Section 4.~~ A New (N) is hereby *added* to § 9302, (b), (1) of Chapter
7 9, Division 1 of Title 26, Guam Administrative Rules and Regulations, to read:

8
9 ~~“(b) Outpatient Services.~~

10
11 ~~“(1) The following outpatient hospital services shall be~~
12 ~~covered:~~

13
14 ~~“(A) Hospital-based physician services.~~

15
16 ~~“(B) Laboratory and diagnostic tests.~~

17
18 ~~“(C) Diagnostic radiology.~~

19
20 ~~“(D) Laboratory tests and diagnostic radiology not~~
21 ~~available at Public Health for Maternal and Child~~
22 ~~Health Program clients (clients must be program~~
23 ~~eligible).~~

24
25 ~~“(E) Emergency room for warranted emergencies.~~
26 ~~\$5.00 co-payment required.~~

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1
2 _____(F) Drugs which are prescribed by physicians and
3 cannot be bought _____without a prescription.

4
5 _____(G) Medical and surgical supplies.

6
7 _____(H) Operating room.

8
9 _____(I) Dialysis treatment.

10
11 _____(K) Physical and inhalation therapy (prior
12 authorization is required).

13
14 _____(L) Insulin injections for diabetes.

15
16 _____(M) Lytico-Bodig related services. (amyotrophic
17 lateral sclerosis or _____Parkinsonism dementia).

18
19 _____(N) Assisted Living Facilities.”

20 **Section 5. Effective Date.** This Act shall be effective upon enactment.

21 **Section 6. Severability.** If any provision of this Act or its application to any
22 person or circumstance is found to be invalid or inorganic, such invalidity shall not
23 affect other provisions or applications of this Act that can be given effect without
24 the invalid provision or application, and to this end the provisions of this Act are
25 severable.

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COMMITTEE ON RULES

Vice Speaker V. Anthony Ada, Chairperson

I Mina'trentai Ocho Na Liheslaturan Guåhan

38th Guam Legislature

February 13, 2025

To: **Rennae V. C. Meno**
Clerk of the Legislature

From: **Vice Speaker V. Anthony Ada** 
Chairperson, Committee on Rules

Subject: **Fiscal Note for Bill No. 31-38 (COR)**

Håfa Adai!

Find the attached, Fiscal Note for the following bill:

Bill No. 31-38 (COR).

I also request that the same be sent to the respective Chairperson of the Standing Committee, to which this bill has been referred. Kindly forward the same to Management Information Services (MIS) for posting on our website.



Bureau of Budget & Management Research

Fiscal Note of Bill No. 31-38 (COR)

AN ACT TO AMEND CHAPTER 7 OF DIVISION 1, TITLE 10, GUAM CODE ANNOTATED, AND ADD A NEW (N) TO §9302 (b) (1) OF CHAPTER 9, OF DIVISION 1, TITLE 26, GUAM ADMINISTRATIVE RULES AND REGULATIONS, RELATIVE TO EXPANDING OPTIONS FOR ASSISTED LIVING FACILITIES.

Department/Agency Appropriation Information

Dept./Agency Affected: Department of Public Health and Social Services	Dept./Agency Head: Theresa C. Arriola, Director
Department's General Fund (GF) appropriation(s) to date: Operations (\$58,150,402); Health Insurance Premiums for Foster Children (\$1,855,841); Child Protective Services Program (\$2,220,129); Miscellaneous Appropriation for Grants for Homelessness (\$500,000)	\$70,787,961
Department's Other Fund appropriation(s) to date: Environmental Health Fund (\$1,415,223); Health Professional Licensing Office Revolving Fund (\$338,801); Office of Vital Statistics Revolving Fund (\$225,014); DPHSS Sanitary Inspection Revolving Fund (\$424,986); Healthy Futures Fund for Guam Cancer Registry (\$389,144)	\$2,793,168
Total Department/Agency Appropriation(s) to date:	\$73,581,129

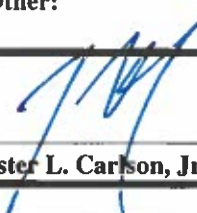
Fund Source Information of Proposed Appropriation

	General Fund:	(Specify Special Fund):	Total:
FY 2024 Unreserved Fund Balance	\$0	\$0	\$0
FY 2025 Adopted Revenues	\$0	\$0	\$0
FY 2025 Appro. (P.L. 37-125)	\$0	\$0	\$0
Sub-total:	\$0	\$0	\$0
Less appropriation in Bill	\$0	\$0	\$0
Total:	\$0	\$0	\$0

Estimated Fiscal Impact of Bill

	One Full Fiscal Year	For Remainder of FY 2025 (if applicable)	FY 2026	FY 2027	FY 2028	FY 2029
General Fund	1/	1/	\$0	\$0	\$0	\$0
Special Funds	1/	1/	\$0	\$0	\$0	\$0
Total	1/	1/	\$0	\$0	\$0	\$0

- | | | |
|---|------------|----------|
| 1. Does the bill contain "revenue generating" provisions? | / / Yes | / X / No |
| If Yes, see attachment | | |
| 2. Is amount appropriated adequate to fund the intent of the appropriation? | / X / N/A | / / Yes |
| If no, what is the additional amount required? | / X / N/A | / / No |
| 3. Does the Bill establish a new program/agency? | / / Yes | / X / No |
| If yes, will the program duplicate existing programs/agencies? | / X / N/A | / / No |
| Is there a federal mandate to establish the program/agency? | / / Yes | / X / No |
| 4. Will the enactment of this Bill require new physical facilities? | / / Yes | / X / No |
| 5. Was Fiscal Note coordinated with the affected dept/agency? If no, indicate reason: | / X / Yes | / / No |
| / X / Requested agency comments not received by due date | / / Other: | |

Analyst: 	Date: <u>2/11/2025</u>	Director: 	Date: FEB 12 2025
Abigail R. Ofeciar, BMA Supervisor		Lester L. Carlson, Jr., Director	

Notes:
1/ See attached comments.

BUREAU OF BUDGET AND MANAGEMENT RESEARCH
COMMENTS ON BILL NO. 31-38 (COR)

Bill No. 31-38 (COR) is an act to amend Chapter 7, Division 1 of Title 10 Guam Code Annotated (10 GCA), and to add a new (N) to §9302(b)(1) of Chapter 9, Division 1 of Title 26 Guam Administrative Rules and Regulations (26 GARR) relative to assisted living facilities. Per the proposed legislation's findings and intent, Guam lacks the intermediate care options for its aging population who require assistance with daily activities but not the constant medical care provided in nursing homes. It further states that although a special qualifying certificate program is in place to incentivize the development of assisted living facilities, a statutory framework for the establishment and oversight of assisted living facilities does not exist. As such, the proposed legislation seeks to address this void by amending Chapter 7, Division 1 of 10 GCA by essentially replacing references to "nursing homes" with "assisted living facilities". The definition of "assisted living facility" is stated to mean "a residence for the elderly or the infirm who require assistance with some of the routine activities of daily living as well as ready access to medical care as needed..." The definition of "assisted living facility" is intended to include the existing definition of "nursing home" and the added "residential care facility for the elderly". The proposed legislation also added the new "(N) Assisted Living Facilities" to the list of outpatient services as contained in §9302(b)(1) of Chapter 9, Division 1 of 26 GARR. Finally, the proposed legislation mandates the Department of Public Health and Social Services (DPHSS) to submit to the Legislature recommendations for maximizing funding support for the assisted living facilities within 180 calendar days of enactment.

The proposed legislation does not contain revenue generating provisions, nor does it appropriate any additional funding source to DPHSS. Further, the proposed legislation does not impose additional mandates to the affected entities as it only seeks to amend the existing statute for "Nursing Homes" to a more comprehensive "Assisted Living Facilities". Given the administrative nature of the proposed legislation, the Bureau does not anticipate a direct fiscal impact to the Government of Guam. However, the Bureau recognizes there may be the potential for increased economic activity as a result of expanding the statutory and regulatory framework for assisted living facilities. However, absent any input from the DPHSS, the Bureau is unable to determine the resulting fiscal impact at this time.