MAINE STATE LEGISLATURE

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FIRST REGULAR SESSION

ONE HUNDRED AND THIRTEENTH LEGISLATURE

Legislative Document NO. 500 H.P. 379 House of Representatives, February 23, 1987 Reference to the Committee on Banking and Insurance suggested and ordered printed. EDWIN H. PERT, Clerk

Presented by Representative CLARK of Brunswick. Cosponsored by Senator CLARK of Cumberland, Representatives MELENDY of Rockland and MANNING of Portland.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND EIGHTY-SEVEN

1 2 3	AN ACT to Regulate Continuing Care Retirement Communities.
4 5	Be it enacted by the People of the State of Maine as follows:
6	24-A MRSA c. 71 is enacted to read:
7	CHAPTER 71
8	CARE RETIREMENT COMMUNITIES
9	§6071. Definitions
10	As used in this chapter, unless the context indi- cates otherwise, the following terms have the follow-
L2	ing meanings.

- 1 <u>1. Bureau. "Bureau" means the Bureau of Insur-</u>
 2 <u>ance.</u>
- 2. Continuing care. "Continuing care" means furnishing shelter and either health care or supportive 3 4 5 services under an agreement that requires an entrance 6 fee, whether or not the shelter and services are provided at the same location, to an older individual 7 8 not related by blood or marriage to the provider, for 9 the life of the individual or for a period in excess of one year, including, but not limited to, mutually 10 terminable contracts. 11
 - 3. Entrance fee. "Entrance fee" means an initial or deferred payment or payments of a sum of money or any other consideration which assures a subscriber a place in a facility for a term of years or for life. An accommodation fee, admission fee, entrance loan or other fee of similar form and application even, if refundable in whole or part at the termination of the subscriber's contract, shall be considered to be an entrance fee.
- 21 4. Facility. "Facility" means a physical plant 22 in which continuing care is provided in accordance 23 with this chapter.
- 24 <u>5. Fiscal year. "Fiscal year" means the</u> 25 <u>provider's fiscal year.</u>
- 26 6. Health care. "Health care" means the provision of any one or more of the following services:
- 28 A. Physician services;
- B. Home health services;
 - C. Access to nursing home care; or
- D. Hospital care.

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7. Maintenance fee. "Maintenance fee" means any fee which a subscriber of a continuing care retirement community is required to pay to the continuing care retirement community on a regular basis to cover the cost of shelter and health care or supportive services provided to the subscriber by the continuing care retirement community.

- 8. Provider. "Provider" means the owner or operator, whether a natural person, partnership, unincorporated association, trust or corporation of an institution, building, residence or other place, whether operated for profit or not, in which the owner or operator undertakes to provide continuing care.
- 7 9. Records. "Records" means the financial infor-8 mation and personnel data maintained by the provider 9 for the proper operation of the facility pursuant to 10 this chapter.
- 11 10. Subscriber. "Subscriber" means a purchaser or nominee of a continuing care agreement.
- 13 11. Supportive services. "Supportive services"
 14 means providing assistance in the activities of daily
 15 living or other social services.
 - §6072. Certificate of authority required

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- 17 <u>1. Entering into or renewing a contract. No</u>
 18 provider may enter into or renew an agreement to pro19 vide continuing care in this State without the appro20 priate certificate of authority issued by the Bureau
 21 of Insurance.
- 22 2. Existing providers shall be given a reasonable time to comply. Any provider, who is offering continuing care when this chapter takes effect, shall be given a reasonable time to comply with this chapter and the rules promulgated pursuant thereto.
- 3. Existing providers who have previously offered agreements. Any provider who, as of the effective date of this chapter, has offered continuing
 care agreements prior thereto and who intends not to
 offer new continuing care agreements or to renew
 those agreements shall file a statement to that effect with the bureau.
 - §6073. Requirements for issuance of certificate
- 1. Preliminary certificate of authority. The Bureau of Insurance will issue a preliminary certificate of authority, which shall be valid for no more than 12 months, but which the bureau may extend for

1. such reasonable time as necessary, when the provider 2 has submitted to the bureau all materials which the 3 bureau shall, by rule, require to be submitted to obtain a preliminary certificate of authority, such ma-4 5 terials to include evidence of a preliminary decision 6 to grant a certificate of need from the Department of Human Services, if such certificate of need is neces-7 8 sary.

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- 2. Final certificate of authority. The bureau will issue a final certificate of authority, which shall be renewed annually, when the provider has submitted all materials which the bureau shall, by rule, prescribe to be submitted and when the bureau has determined the provider's plan is financially and actuarially feasible.
- 3. Authorization. A provider which has been issued a preliminary certificate of authority may ad-16 17 vertise, solicit and collect deposits, which shall 18 19 not exceed \$1,000 a subscriber for continuing care agreements, subject to receiving a final certificate 20 of authority from the bureau. The provider shall 21 22 form the subscriber in writing that the provider has a preliminary certificate of authority, that the 23 24 posit is received subject to the issuance by the bu-25 reau to the provider of a final certificate of au-26 thority and that if the provider does not receive a final certificate of authority from the bureau, the provider will refund the subscriber's deposit in full 27 28 29. within one month of notification of the bureau's de-30 cision not to issue the final certificate of authori-31 ty.
- Any deposit collected must be deposited to an interest bearing escrow account. The provider shall furnish the bureau with documentation of the name of the institution with which the provider has established the escrow account and the account number.
- 4. Renewal of certificate of authority. Each year the provider shall, within 120 days from the end of the provider's fiscal year, submit an application and all the required materials to the bureau for renewal of the provider's certificate of authority. The application shall contain the same materials for the provider's fiscal year just ended which the provider

1 2	is required to submit to the bureau under subsections 1 and 2.
3 4 5 6 7 8 9	5. Separate facilities. If the provider intends to provide continuing care at more than one facility, then the provider must obtain a separate certificate of authority for each facility at which the provider intends to provide continuing care. Funds collected by one facility may not be expended for the benefit of any other facility.
10 11	§6074. Suspension or revocation of certificate of authority
12 13 14 15 16 17 18	1. Grounds. A certificate of authority may be suspended or revoked for cause by the bureau. Grounds for suspension or revocation include violation of any of the provisions of this chapter, violations of any of the rules issued by the bureau pursuant to this chapter, any misrepresentations or submissions of any false financial statements, organizational statements or documents.
20 21 22 23 24	2. Governing procedure. The proceedings governing the appeal of a revocation or suspension shall be conducted in accordance with the requirements of the Maine Administrative Procedure Act, Title 5, chapter 375.
25 26	§6075. Required provisions of a continuing care agreement
27 28 29 30	The bureau shall, by rule, prescribe certain provisions which must be included in each continuing care agreement in order for that agreement to receive the bureau's approval.
31	§6076. Rescission of continuing care agreement
32 33 34 35	The bureau shall, by rule, prescribe the rights of a subscriber or provider to rescind, amend, cancel and obtain a refund under a continuing care agreement.

§6077. Waiver of certain continuing care agreement provisions prohibited

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- No act, agreement or statement of any subscriber may constitute a valid waiver of this chapter, or any rules under this chapter, intended for the benefit or protection of the subscriber.
- 5 §6078. Discharge of subscriber prior to expiration 6 of agreement
- No agreement for continuing care may permit dismissal or discharge of the subscriber from the facility providing care prior to the expiration of the agreement without just cause for such a removal and without providing at least 60 days advance notice in writing to the subscriber.

§6079. Violations

- 20 2. Punishment. Any person, association or corpo21 ration that violates this chapter commits a Class E
 22 crime. Each violation of this chapter shall consti23 tute a separate offense.
- 24 §6080. Actions for damages or equitable relief
- 1. Action for damages. Any subscriber injured by a violation of this chapter may bring an action for the recovery of damages in any court of general jurisdiction. In such cases the court may award reasonable attorneys fees to a subscriber in whose favor a judgment is rendered.
- 2. Equitable relief. Any subscriber injured by a violation of this chapter, or the bureau on behalf of any subscriber injured, may institute an action for an appropriate temporary restraining order or injunction.
- 36 §6081. Administration; rules
- 37 <u>1. Administration. The bureau shall administer</u> 38 this chapter and have the power to:

3	B. Establish and collect reasonable fees under
4	this chapter; and
5	C. Adopt, amend and repeal all necessary rules
6	to implement and interpret this chapter.
7	§6082. Reserve requirements
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8	Every provider shall maintain those reserves cov-
9	ering obligations under all continuing care agree-
10	ments which the bureau shall, by rule, prescribe.
10	ments which the buleau shall, by fule, prescribe.
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тт	§6083. Sale or transfer of ownership
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	Any provider desiring to sell or transfer owner-
13	ship of a continuing care facility shall notify the
14	bureau and obtain the bureau's advance approval of
15	the sale or transfer. The certificate of authority is
16	nontransferable. The new owner must apply for a new
17	certificate of authority to continue to provide con-
18	tinuing care at the facility.

A. Prescribe, prepare and furnish all necessary forms;

STATEMENT OF FACT

2 There exists at least one continuing care retirement community in the State at this time and there are others which are in various stages of development. The large sums of money which these continuing care retirement communities are collecting from sub-6 7 scribers and the experience of other states with continuing care retirement communities has shown that nonregulation of these facilities can lead to adverse 9 10 consequences for the subscribers. This Act seeks to lless encourage the development of the widest possible range of continuing care retirement communities, while at the same time, providing the citizens of this State with some basic protection and assurance 13 14 15 that the continuing care retirement communities de-16 veloped in this state meet certain mandatory minimums of financial security and feasibility.

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