

**TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH  
CHAPTER 679. ~~LONG TERM~~ LONG-TERM CARE ADMINISTRATORS**

**RULEMAKING ACTION:**

Notice of proposed PERMANENT rulemaking.

**PROPOSED RULES:**

Chapter 679. ~~Long Term~~ Long-term Care Administrators [AMENDED]

**SUMMARY:**

HB 2824 directed the transfer of employees, powers, duties, monies, contractual rights and certain administrative rules from the Oklahoma State Board of Examiners for Long Term Care Administrators (Board) to the Oklahoma State Department of Health (Department) effective November 1, 2023. The legislation abolishes the Board and transfers the Board's duties and authority to the Commissioner of Health and the Department. These proposed permanent rules will replace emergency rules and are necessary to ensure the uninterrupted licensure of long-term care administrators by the Department.

The proposed rule amendments remove the references to the Board and its authority and replace it throughout with the designation of the Commissioner of Health and the Department as the authority for the licensure of long-term care administrators. Revisions to the licensure rules also reflect statutory amendments to the licensure process for long term care administrators contained in 63 O.S. §§ 1-1949 et seq., the Long-Term Care Administrator Licensing Act, and 63 O.S. §§ 330.51 et seq., Nursing Home Administrators. The categories for licensure in the rules have been amended to reflect the "Tier 1" and "Tier 2" designations in the legislation. Licensure requirements, including minimum education requirements, training and continuing education have been aligned with the designation of the long-term care administrator as Tier 1 or Tier 2.

**AUTHORITY:**

Commissioner of Health, Title 63 O.S. § 1-104; HB 2824.

**COMMENT PERIOD:**

December 1, 2023 through the close of the Department's normal business hours, 5 PM, on January 2, 2024. Interested persons may informally discuss the proposed rules with the contact person identified below; or may, through the close of the Department's normal business hours, 5 PM, on January 2, 2024 submit written comment to the contact person identified below, or may, at the hearing, ask to present written or oral views.

**PUBLIC HEARING:**

Pursuant to 75 O.S. § 303(A), the public hearing for the proposed rulemaking in this chapter shall be on January 4, 2024 at the Oklahoma State Department of Health Auditorium, 123 Robert S. Kerr Avenue, Oklahoma City, Oklahoma 73102 from 9:30 AM to 12:30 PM. The meeting may adjourn earlier if all attendees who signed up to comment have completed giving their comments. The alternate date and time in the event of an office closure due to inclement weather is January 9, 2024 in the Auditorium, from 9:30 AM to 12:30 PM. Those wishing to present oral comments should be present at that time to register to speak. The hearing will close at the conclusion of those registering to speak. Interested persons may attend for the purpose of submitting data, views or concerns, orally or in writing, about the rule proposal described and summarized in this Notice. Validated parking will be provided for the parking lot located at the east corner of Broadway and Robert S. Kerr Avenue, subject to availability.

**REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:**

Business entities affected by these proposed rules are requested to provide the agency with information, in dollar amounts if possible, on the increase in the level of direct costs such as fees, and indirect costs such as reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by a particular entity due to compliance with the proposed rule. Business entities may submit this information in writing through January 2, 2024, to the contact person identified below.

**COPIES OF PROPOSED RULES:**

The proposed rules may be obtained for review from the contact person identified below or via the agency website at [www.ok.gov/health](http://www.ok.gov/health).

**RULE IMPACT STATEMENT:**

Pursuant to 75 O.S., § 303(D), a rule impact statement is available through the contact person identified below or via the agency website at [www.ok.gov/health](http://www.ok.gov/health).

**CONTACT PERSON:**

Audrey C. Talley, Agency Rule Liaison, Oklahoma State Department of Health, 123 Robert S. Kerr Avenue, Oklahoma City, OK 73102, phone (405) 426-8563, e-mail [AudreyT@health.ok.gov](mailto:AudreyT@health.ok.gov).

## RULE IMPACT STATEMENT

### TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH CHAPTER 679. ~~LONG TERM~~ LONG-TERM CARE ADMINISTRATORS

1. **DESCRIPTION:**

HB 2824 directed the transfer of employees, powers, duties, monies, contractual rights and certain administrative rules from the Oklahoma State Board of Examiners for Long Term Care Administrators (Board) to the Oklahoma State Department of Health (Department) effective November 1, 2023. The legislation abolishes the Board and transfers the Board's duties and authority to the Commissioner of Health and the Department. These proposed permanent rules will replace emergency rules and are necessary to ensure the uninterrupted licensure of long-term care administrators by the Department.

The proposed rule amendments remove the references to the Board and its authority and replace it throughout with the designation of the Commissioner of Health and the Department as the authority for the licensure of long-term care administrators. Revisions to the licensure rules also reflect statutory amendments to the licensure process for long term care administrators contained in 63 O.S. §§ 1-1949 et seq., the Long-Term Care Administrator Licensing Act, and 63 O.S. §§ 330.51 et seq., Nursing Home Administrators. The categories for licensure in the rules have been amended to reflect the "Tier 1" and "Tier 2" designations in the legislation. Licensure requirements, including minimum education requirements, training and continuing education have been aligned with the designation of the long-term care administrator as Tier 1 or Tier 2.

2. **DESCRIPTION OF PERSONS AFFECTED AND COST IMPACT RESPONSE:**

Persons affected will be individuals seeking licensure as a long-term care administrator. There are no fee increases so the cost impact will be negligible.

3. **DESCRIPTION OF PERSONS BENEFITING, VALUE OF BENEFIT AND EXPECTED HEALTH OUTCOMES:**

Continuation of the licensure process by the State Department of Health will benefit licensure applicants with uninterrupted access to the licensure process. Properly trained and skilled administrators will benefit long-term care facilities in their operations. The public will benefit from skilled personnel functioning as long-term care administrators, as well as residents of the facilities, who should experience skilled and trained management at the facilities.

4. **ECONOMIC IMPACT, COST OF COMPLIANCE AND FEE CHANGES:**

There are no fee changes. The economic impact on the Department is negligible.

5. **COST AND BENEFITS OF IMPLEMENTATION AND ENFORCEMENT TO THE AGENCY:**

The Department does not anticipate incurring any additional costs.

6. **IMPACT ON POLITICAL SUBDIVISIONS:**

There will be no impact on political subdivisions and it will not require their cooperation in implementing or enforcing the proposed amendment.

7. **ADVERSE EFFECT ON SMALL BUSINESS:**

There is no known adverse economic effect on small business as provided by the Oklahoma Small Business Regulatory Flexibility Act.

8. **EFFORTS TO MINIMIZE COSTS OF RULE:**

There are no less costly means currently identified.

9. **EFFECT ON PUBLIC HEALTH AND SAFETY:**

Properly trained and skilled administrators will benefit long term care facilities in their operations. The public will benefit from skilled personnel functioning as long-term care administrators, as well as residents of the facilities, who should experience skilled and trained management at the facilities.

10. **DETRIMENTAL EFFECTS ON PUBLIC HEALTH AND SAFETY WITHOUT ADOPTION:**

These changes to the Department's rules are required by the changes made to the statutes from which the Department gets its authority to regulate long term care administrators. If the proposed rule amendments are not adopted, the Department is still bound to implement the terms of the statutory changes.

11. **PREPARATION AND MODIFICATION DATES:**

This rule impact statement was prepared on October 23, 2023.

**TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH  
CHAPTER 679. ~~LONG-TERM~~ LONG-TERM CARE ADMINISTRATORS**

**SUBCHAPTER 1. GENERAL PROVISIONS**

**310:679-1-1. Purpose**

This Chapter has been adopted for the purpose of ~~complying with~~ implementing the provisions of the ~~Administrative Procedures Act, 75 O.S. Sections 301 et seq.~~ "Long-Term Care Administrator Licensing Act" 63 O.S. § 1-1949.1. ~~This Board, known as the Oklahoma State Board of Examiners for Long-Term Care Administrators ("OSBELTCA")~~ The Commissioner of Health, carries out statutory authority for developing, imposing and enforcing standards that must be met by individuals in order for them to receive, maintain, or renew a ~~long-term~~ long-term care administrator's license/certification. These rules are written to execute the aforementioned statutory responsibilities for licensing and/or certifying administrators, ~~named in Title 63 Oklahoma Statutes, Chapter 12, "Oklahoma State Board of Examiners for Long-Term Care Administrators" §§ 330.51-330.65.~~

**310:679-1-2. Definitions**

The following words or terms, when used in this Chapter, shall have the following meaning, unless the context clearly indicates otherwise:

**"Accredited college" or "university"** means a college or university that is domiciled within the United States and that is accredited by: the North Central Association of Colleges and Schools, The Higher Learning Commission; the Southern Association of Colleges and Schools, Commission on Colleges; the Western Association of Schools and Colleges, Accrediting Commission for Senior Colleges and Universities; the New England Association of Schools and Colleges, Commission on Institutions of Higher Education; the Middle States Association of Colleges and Schools, Middle States Commission on Higher Education; or the Northwest Commission on Colleges and Universities.

**"Administrator-In-Training" or "AIT"** means an individual ~~servng~~ participating in a Board Department-approved internship within the facility type for which ~~he~~ the intern is seeking ~~licensure/certification~~ licensure or certification under the supervision of a Department-approved preceptor ~~'certified' by the Board.~~ These individuals may also be referred to as an intern or trainee. ~~Individuals serving an AIT internship may also be referred to herein as 'intern/trainee'.~~

**"Administrator"** means any individual ~~duly-licensed or certified~~ to operate as a long-term care facility administrator by the Board Department ~~regardless of the role or function he performs.~~

**"Administrator of Record" or "AOR"** means the administrator licensed by this Board Department who has the authority and responsibility for the total operation of the facility, subject only to the policies adopted by the governing authority.

**"Adult Day Care (ADC) Administrator"** means a ~~long-term~~ long-term care administrator (or director) ~~duly-licensed by the Board Department~~ to serve in this capacity in an Adult Day Care Center. The scope of practice of an individual licensed as an Adult Day Care Administrator is limited to a licensed Adult Day Care Center.

**"Adult Day Care (ADC) Center"** ~~shall have the same meaning as~~ means such term is as defined in the Adult Day Care Act, Title 63 O.S. Section 1-870 *et seq.*

**"Adverse action"** means revocation or suspension of a license, reprimand, censure or probation; any other loss of or restriction placed upon the license, including, but not limited to the right to apply for, or renew a license; voluntary surrender in lieu of discipline, non-renewal (excluding nonrenewal due to non-payment of fees, or retirement); administrative fines and any other negative action or finding by the Board Department.

**"Assisted Living Center"** ~~shall have~~ means the same meaning as such term is as defined in the Continuum of Care and Assisted Living Act, Title 63 O.S. Section 1-890.1 *et seq.* Also known as an Assisted Living Facility (ALF).

**"Board"** means the Oklahoma State Board of Examiners for Long Term Care Administrators (OSBELTCA) or its staff.

**"Certification"** contextually, prior to the effective date of these rules, means the authorization granting a person the privilege of serving as a long term care administrator and continues until licensed in accordance with these rules or until October 1, 2012, whichever occurs first. The exception is the certified assistant administrator (CAA) which this Board continues to certify. Certification after the effective date of these rules means the completion of documentation from a Department-approved Long-Term Care Administrator Training program certifying an applicant's completion of the training program and their preparedness for required examinations. training at an approved institution of higher learning or other body conducting such training (except Administrator University for Nursing Home Administrators and Board conducted training for Adult Day Care administrators). The institution or body certifies that the individual has been properly and completely trained and is prepared, as a prerequisite, for the state standards exam and/or NAB RC/AL exam. Certification of training is a step in the licensure process for RC and RC/AL licensure.

**"Certified Assistant Administrator (CAA)"** or **"Assistant Administrator"** as used herein means an individual who has been 'certified' by the Board Department as having met the minimum qualifications established by the Board Department to be able to serve as a full-time, Certified Assistant Administrator in a licensed long-term long-term care nursing facility, and who acts under the direction, supervision and license of a licensed nursing home administrator.

**"Complaint"** means an allegation that an individual licensed as a long-term care administrator has violated applicable statutes and/or rules.

**"Continuum of Care Facility"** shall have means the same meaning as such term is as defined in the Continuum of Care and Assisted Living Act, Title 63 O.S. Section 1-890.1 et seq.

**"Degree equivalency evaluation"** means an equivalency evaluation of a degree that was earned from a college or university not domiciled in the United States against a degree earned from an 'accredited college or university' (see definition earlier herein) accredited college or university that is performed by one of the following:

- (A) Educational Credential Evaluators (ECE)
- (B) Educational Records Evaluation Service (ERES)
- (C) International Education Research Foundation Credentials Evaluation Service (IERFCES)
- (D) World Education Services (WES)

**"Department"** means the Oklahoma State Department of Health (OSDH).

**"Endorsement"** means the applicant has met all requirements for reciprocity.

**"Formal Complaint"** means a formal allegation by the Board that probable cause exists that an individual licensed as a long term care administrator has violated applicable statutes and/or rules. These allegations are written in a legal document filed with the Board by its prosecuting attorney.

**"Good Standing"** means a current license/certification/registration is active and not expired, suspended, revoked, surrendered, conditioned or otherwise in status that in any manner restricts the activity of the holder under its authority restricted. When there is any other history of disciplinary action taken by any jurisdiction against a license, certification or registration, the Board retains sole discretion of evaluating the magnitude of any such action in its determination of an applicant's eligibility for approval in Oklahoma.

**"Health Services Executive" or "HSE"** means a broad-based NAB-verified qualification which exceeds this Board's standards to be licensed as a nursing home administrator (NHA). It is not a license and it does not grant the holder of this qualification any additional privileges with the NHA license. broad-based NAB credential that allows administrators to practice along the senior living and health services continuum and increases the portability of licensure.

**"Intermediate Care Facility for the Mentally Retarded) (ICF/MR) Individuals with Intellectual Disabilities (ICF/IID)"** means a facility with the whose primary purpose is to provide of providing health and rehabilitative services for persons with mental retardation or a related condition, individuals with intellectual disabilities and otherwise meets the Conditions Of Participation

(COPs) found at 42 CFR §483.400 *et seq.* ICF/MR is synonymous with the term ICF/IID (intermediate care facility for individuals with an intellectual disability).

**"Intermediate Care Facility for the Mentally Retarded Individuals with Intellectual Disabilities, 16 Beds and Less (ICF/MR-16) (ICF/IID-16)"** means a facility with sixteen (16) or fewer licensed resident beds that serves persons with mental retardation or with related conditions individuals with intellectual disabilities and that otherwise meets the Conditions Of Participation (COPs) found at 42 CFR §483.400 *et seq.*

**"Lapsed License or Expired License"** means a license that is no longer valid because the licensee failed to renew his/her license by the renewal deadline, causing the license to lapse or expire.

**"License"** means the written authorization of the Board granting a person the privilege of serving as a long term care administrator for a specific period of time, and further, a legal instrument obligating that person to adhere to the rules, regulations and statutes that govern the license.

**"Licensing Year"** shall mean the specific period of time a license/certification issued by the Board is valid. For purposes of these Rules, the term "licensing year" shall have the same meaning as "calendar year," the time period beginning at 12:01 a.m., January 1, and ending as of 12:00 midnight, the same December 31.

**"Licensure by Endorsement"** refers to the process of a jurisdiction granting a license to an applicant who is licensed in good standing and upon proof of requisite experience, education and qualifications at an equivalent designation in another jurisdiction.

**"Long Term Long-Term Care"** primarily for the purposes of this board, as used herein, includes means care given at facilities where a licensed long term long-term care administrator is required such as a nursing facility, assisted living facility, residential care facility or facility, an adult day care center, or intermediate care facility. It does not encompass temporary care situations such as a swing bed hospital.

**"Long-term care administrator"** means *a person licensed or certified as a Tier 1 long-term care administrator or Tier 2 long-term care administrator under ... the Long-Term Care Administrator Licensing Act. A long-term care administrator must devote at least one-half (1/2) of such person's working time to on-the-job supervision of a long-term care facility; provided that this requirement shall not apply to an administrator of an intermediate care facility for individuals with intellectual disabilities with sixteen or fewer beds (ICF/IID-16), in which case the person licensed by the state may be in charge of more than one ICF/IID-16, if such facilities are located within a circle that has a radius not more than fifteen (15) miles, and the total number of facilities and beds does not exceed six facilities and sixty-four beds. The facilities may be free-standing in a community or may be on campus with a parent institution. The ICF/IID-16 may be independently owned and operated or may be part of a larger institutional ownership and operation. [Title 63 O.S. § 1-1949.2]*

**"National Association of Long Term Long-Term Care Administrator Boards" ("NAB")** means an organization is composed of state boards or and agencies responsible for licensing long term long-term care administrators. The basic objective of the NAB is to assist these boards and agencies in carrying out their statutory and regulatory responsibilities in the licensure, re-licensure and regulation of long term care administrators. One of NAB's functions is the development and administration of the national long term care administrator or Nursing Home Administrator (NHA) examination, as well as the Residential Care/Assisted Living (RC/AL) examination.

**"NAB Domains of Practice"** refers to means the content areas of tasks, knowledge, and skills necessary for administration of a long-term care facility, the tasks performed by a long term care administrator and the knowledge, skills and abilities identified by NAB as necessary to perform those tasks in its professional practice analysis. The NAB Domains of Practice can be found on the National Association of Long Term Long-Term Care Administrator Boards (NAB) website at [www.nabweb.org](http://www.nabweb.org).

**"Notification by OSDH"** refers to the OSDH (Oklahoma State Department of Health) notifying the Board of survey results of a nursing facility that include a substandard quality of care citation. A notification may become a referral.

**"Nursing Home and Nursing Facility"** shall refer to both "Nursing Facility" and "Specialized Facility" as such terms are defined in the Nursing Home Care Act, Title 63 O.S. Section 1-1901 *et seq.* and/or as defined at 42CFR §483.1 *et seq.*

**"Nursing home", "rest home" and "specialized home"** means "nursing facility" as such term is defined in the Nursing Home Care Act; "assisted living center" and "continuum of care facility" shall have the same meaning as such terms are defined in the Continuum of Care and Assisted Living Act; "home" and "residential care home" shall have the same meaning as the terms are used in the Residential Care Act; and "adult day care center" and "center" shall have the same meaning as such terms are used in the Adult Day Care Act. [63 O.S. 1-1949.2(4)]

**"Nursing Home Administrator (NHA)"** means a ~~long term~~ long-term care administrator duly licensed by the Board ~~the Department~~ to serve in this capacity in a nursing facility, nursing home, skilled nursing facility or any similarly worded facility type. Their scope of practice includes ICF/MR, ICF/IID, RCF, ALF and Adult Day Care Centers and the term is synonymous with nursing facility administrator.

**"Preceptor"** means an individual qualified by training and experience, who is currently licensed as a ~~long term~~ long-term care administrator in Oklahoma, is ~~'certified'~~ authorized by the Department as a qualified preceptor and is charged with coordinating the training of an individual authorized to operate as an administrator in training. ~~AIT intern/trainee who is enrolled in a Board-approved Administrator in Training (AIT) internship program.~~

**"Probation"** is a condition(s) imposed for a specified period of time at the initial issuance of a license or contained in an order resulting from a complaint against the administrator.

**"Provisional license"** means the temporary authority to serve as a ~~long term~~ long-term care administrator as granted by the Board ~~the Department~~ to an individual of ~~good character~~ who meets the appropriate conditions and requirements prescribed by the Board for provisional licensure.

**"RC/AL Administrator"** means a ~~long term~~ care administrator duly licensed by the Board to serve in this capacity in either an RCF or ALF. The scope of practice of an individual licensed as an RC/AL administrator is limited to either a licensed Residential Care Facility (RCF) or a licensed Assisted Living Facility (ALF).

**"Reciprocity"** means the licensure process through which candidates licensed in other states may be granted a license in Oklahoma once they have demonstrated the requirements for licensure for the state in which they are currently licensed have substantially equivalent requirements to those in this state and meet any residency requirements. ~~refers to the acceptance of an actual license wherein a jurisdiction chooses to recognize the education, experience and qualifications that a licensee has obtained from another state. To have an out-of-state long term care license accepted in Oklahoma, a licensee from another state is required to register with this Board and prove that equivalence. It is similar to licensure by endorsement but different in that with reciprocity, no new license is issued.~~

**"Referral or Report"** means an issue or concern regarding a long term care administrator that has been reduced to writing and is forwarded to the Board for a determination as to whether a violation of the Board's Rules has occurred. Such referral or report may be made by an individual or agency.

**"Registrant"** refers to a licensee from another jurisdiction who is registered in Oklahoma. They will have agreed to be held culpable for Oklahoma and federal laws relative to the facility(s) they are the administrator for and Oklahoma administrator rules and statutes, to include annual renewal of the registration. References to licensed administrators would include a reference to a registrant as they are licensed administrators albeit from (an)other jurisdiction(s).

**"Residential Care (RC) Administrator"** means a ~~long term~~ long-term care administrator duly licensed by the Board ~~Department~~ to serve in this capacity in ~~only an RCF~~ a residential care facility. The scope of practice of an individual licensed as a Residential Care Administrator is limited to a licensed Residential Care Facility (RCF).

**"Residential Care Home" or "Residential Care Facility (RCF)"** means shall have the same meaning as such term is defined in the Residential Care Act, Title 63 O.S. Section 1-819 et seq.



**"Residential Care/Assisted Living (RC/AL) "** means a long-term care administrator licensed by the Department to serve in this capacity in either a residential care facility, or an adult care center, an assisted living facility or intermediate care facility for individuals with intellectual disabilities with sixteen or fewer bed (ICF/IID-16).

**"Revocation or Revoked License"** means ~~is a sanction~~ an enforcement imposed upon a license/certificate license or certificate by the Board-Department that results in a ~~complete loss~~ termination of license/certificate license or certificate and all privileges attendant thereto and requires holder to surrender his license/certificate the license or certificate, the annual license/certificate renewal card and all other license or certificate related documents to the Board Department.

**"Specialized facility"** shall have means the same meaning as such term is defined in the Nursing Home Care Act, Title 63 O.S. Section 1-1901 *et seq.*

**"Suspension or Suspended License"** ~~is a sanction~~ means an enforcement imposed upon a license/certificate license or certificate holder by the Board Department for a designated period of time where the individual is not authorized to work in the capacity of an administrator until all the requirements for reinstatement of the licensure are met. ~~The licensee retains his license/certificate and his annual renewal card and therefore must renew the license, yet he shall not function in the capacity as a long term care administrator until the Board determines that conditions responsible for the suspension no longer exist, any or all other restoration requirements imposed by the Board Department have been met, and the Board has restored his status.~~

**"Tier 1 long-term care administrator"** means a person licensed by this state to perform the duties of an administrator serving in a skilled nursing or nursing facility or an intermediate care facility for individuals with intellectual disabilities with seventeen or greater beds (ICF/IID). [63 O.S. § 1-1949.2]

**"Tier 1 nursing home administrator (NHA)"** means a long-term care administrator licensed by the Department to serve in this capacity in a nursing facility, nursing home, skilled nursing facility or any similarly worded facility type. Their scope of practice includes ICF/IID, RCF, ALF and Adult Day Care Centers and the term is synonymous with nursing facility administrator.

**"Tier 2 adult day care (ADC) administrator"** means a long-term care administrator licensed by the Department to serve in this capacity in an Adult Day Care Center.

**"Tier 2 ICF/IID-16 administrator"** means a long-term care administrator licensed by the Department to serve in this capacity in an intermediate care facility for individuals with intellectual disabilities with sixteen or fewer bed (ICF/IID-16).

**"Tier 2 long-term care administrator"** means *a person licensed or certified by this state to perform the duties of an administrator serving in an assisted living facility, residential care facility, adult day care center, or intermediate care facility for individuals with intellectual disabilities with sixteen or fewer beds (ICF/IID-16.; [63 O.S. § 1-1949.2]*

**"Tier 2 residential care (RC) administrator"** means a long-term care administrator licensed by the Department to serve in this capacity in a residential care facility.

**"Tier 2 residential care/assisted Living (RC/AL) administrator"** means a long-term care administrator licensed by the Department to serve in this capacity in either a residential care facility or an assisted living facility.

### SUBCHAPTER 3. OKLAHOMA STATE BOARD OF EXAMINERS FOR LONG TERM CARE ADMINISTRATORS [REVOKED]

#### 310:679-3-1. Organization [REVOKED]

The members of the Board shall elect from their membership a Chair, Vice Chair and Secretary-Treasurer to serve two (2) year terms beginning November 1 of each odd numbered year.

(1) Nominations may be made by any member of the Board or a committee named by the Chair.

(2) Each member of the Board may cast one (1) vote for each office for which an election is held.

- (3) Election shall be by majority vote of a quorum.
- (4) Board officer vacancies shall be filled in the same manner when the vacancy occurs.
- (5) A simple majority of the filled seats of the current Board shall constitute a quorum of the Board.

**310:679-3-2. Officers and committees [REVOKED]**

- (a) The Chair shall be the Chief Executive Officer of the Board. The Chair shall call and preside at all meetings and shall be a member *ex officio* of all committees. The Chair may act for the Board in such other matters as it may authorize.
- (b) The Vice Chair, in the absence of the Chair, shall assume all of the Chair's duties and have all of the Chair's authority. The Vice Chair shall also perform such duties as may be assigned by the Chair.
- (c) The Secretary-Treasurer shall keep accurate and complete minutes of all meetings (including minutes of executive sessions), attend to all correspondence, call meetings on order of the Chair, and maintain accurate and complete records of all other business transactions and funds of the Board.
- (d) The Board may appoint a recording secretary to assist in fulfilling the responsibilities of the Secretary-Treasurer. The recording secretary may be an employee of the Board.
- (e) The elected officers shall constitute the Executive Committee of the Board and may provide counsel to the Chair and/or Executive Director in situations requiring immediate attention and action.
- (f) Standing and special committees may be instituted and their members appointed by the Chair, and shall serve until their purpose is accomplished or until the date of the meeting at which the officers of the Board are elected. Such committees shall, at each regular meeting of the Board, report on committee activities occurring since the last regular meeting of the Board if/when any activity occurred. If there was no activity, a report is not required.

**310:679-3-3. Meeting of the Board [REVOKED]**

- (a) All proceedings of the Board shall be held and conducted in compliance with the Oklahoma Open Meeting Act.
- (b) Regularly scheduled meetings shall be held at a time and place designated by the Chair.
- (c) The Secretary-Treasurer shall notify the membership of the time and place of all regularly-scheduled meetings at least five (5) working days prior to the date of said meeting.
- (d) Special meetings may be called at any time by the Chair and shall be called if requested by a majority of the members of the Executive Committee or at the request of a majority of the membership of the Board. The Secretary-Treasurer shall notify the Board of the time, place and business to be transacted at least forty-eight (48) hours in advance of the time set for the special meeting.

**310:679-3-8. Executive Director [REVOKED]**

The Board's Executive Director, as the chief administrative officer for the Board, shall carry out the administrative functions of the Board, including, but not limited to signing orders entered by the Board.

**SUBCHAPTER 5. INVESTIGATIVE PROCEDURES**

**310:679-5-2. Receipt of referrals, reports and notifications Filing a Complaint**

- (a) Any person or any person on behalf of a recognized legal entity agency may file a written referral or report with the Board by submitting the same via U.S. Mail, via electronic mail, via the Board's web-based electronic report form or by delivering the same in person to the Board's office complaint against a long-term care administrator by contacting the Oklahoma State Department of Health.
- (b) Anonymous referrals or reports shall not be accepted.
- (c) A report shall be generated by the Board or Board staff when information obtained from the media, law enforcement, any regulatory agency, or any other source indicates a violation may have occurred.

- (d) The Board shall reduce to writing a verbal report received by phone or in person.
- (e) If the individual making the report is a facility resident, the resident's personal or legal representative, or a current employee of the facility, the Board shall keep the individual's identity confidential.
- (f) 'Paper' referrals or reports received by Board staff shall be receipted with a 'date stamp' as to the date the same were received in the Board's office, or, as applicable, by the electronic 'date stamp' created when the electronic version of the referral or report was either created/sent or electronically received by Board staff.
- (g) When the Board receives notification of survey results by the Oklahoma State Department of Health (OSDH) that involve substandard quality of care; OR otherwise obtains information about events or incidents that may implicate an administrator as possibly having violated any of the Board's rules, such as through any form of news media, this information shall be reviewed by a person appointed by the Board, and shall determine whether the information should be referred to the Probable Cause Committee.

### **310:679-5-2.1. Action on referrals and reports [REVOKED]**

- (a) A Probable Cause Committee shall review and may recommend action to the Board on any and all referrals or reports received.
- (b) A formal complaint may be generated by the Board or Board staff when the Probable Cause Committee determines that a violation may have occurred.

### **310:679-5-3. Complaints: investigations and investigative reports**

- (a) Each referral or report shall be thoroughly investigated. If investigative reports are prepared, such reports are confidential.
- (b) An investigative report shall not be deemed to be a record as that term is defined in the Oklahoma Open Records Act nor shall the report be subject to subpoena or discovery in any civil or criminal proceeding. Upon receipt of a complaint against a long-term care administrator, the Department shall initiate an investigation within ninety (90) days. All information and records collected by the Department as part of a complaint investigation shall be kept in a confidential investigation file.
- (b) Upon completion of a complaint investigation, if the Department finds that sufficient evidence exists to initiate an individual proceeding against a long-term care administrator, a notice of the violation will be served upon the long-term care administrator in compliance with Chapter 2 of this Title and the Administrative Procedures Act. The notice of violation shall include the nature of the violation(s) found, the provisions of state law or rule alleged to have been violated, the Department's assessed administrator penalty resulting from the alleged violation, and the administrator's right to seek an informal dispute resolution or hearing.

### **310:679-5-6. Notice [REVOKED]**

- (a) All notices or other papers requiring service in an individual proceeding shall be served in one of the following manners:
- (1) personally by any person appointed to make service by the Director of the Board and in any manner authorized by the law of this State for the personal service of summonses in proceedings in a state court; or,
  - (2) by certified mail to the respondent at the last address provided to the Board by respondent or to respondent's attorney.
- (b) Service of notice. Such service shall be complete upon the personal service or certified mailing of the notice or other paper to respondent's last address provided to the Board by respondent or respondent's attorney.

### **310:679-5-6.1. Hearings**

- (a) An administrator may submit a request for hearing with the Department within thirty (30) days of receipt of the Notice of Violation.

(b) If a hearing is requested, the Department shall promptly schedule a hearing and serve the administrator with a Notice of Hearing in compliance with 75 O.S. §309(B).

(c) The hearing shall be conducted in accordance with the Administrative Procedures Act and Chapter 2 of this Title.

(d) The Commissioner of Health or designee shall issue a decision within fifteen (15) working days following the close of the hearing record. The decision shall include Findings of Fact and Conclusions of Law separately stated. The final order resulting from a hearing shall comply with the requirements of the 75 O.S. §312 and be served upon each party.

(e) An appeal of the Final Order shall be perfected pursuant to 75 O.S. Section 318 of the Administrative Procedures Act.

### **310:679-5-7. Hearing Informal dispute resolution**

(a) Individual proceedings shall be conducted by the Board according to the provisions established in 63 O.S. Section 1-1949.6 Sections 330.64 and 330.65 and 75 O.S. Section 309 et seq.

(1) The respondent shall bring to the hearing twenty (20) copies of all documents that he intends to offer into evidence as well as twenty (20) copies of all motions that he intends to submit for Board consideration.

(2) An electronic recording of the proceeding shall be made by the Board, and a copy of the electronic recording shall be provided by the Board to a party to the proceeding at that party's request. Should there be any equipment failures, the minutes of the meeting and proceedings will be provided instead of the electronic recording.

(3) The full proceedings of any hearing may be transcribed. The party wanting the services of a court reporter to transcribe the proceedings shall make the arrangements with a court reporter for such transcription pay the reporter's fee(s), and notify the Board in advance of the hearing of the expected presence of a court reporter.

(b) Any party aggrieved by a decision of the Board following a hearing may appeal directly to District Court pursuant to the provisions of Section 318 of Title 75 of the Oklahoma Statutes.

(a) An Administrator may request, in writing, an informal dispute resolution within thirty (30) days from the date of notice from the Department.

(b) *The impartial decision-making panel shall be a group of six (6) individuals who meet the following criteria:*

*(1) Three members shall be impartial volunteers who have experience in the operation of the same type of long-term facility as the administrator who is the subject of the complaint. Such volunteers may include, but not be limited to, an administrator, assistant administrator, owner, operator, director of nursing, or compliance executive of an appropriate long-term care facility, but shall not include any person with a direct financial interest in any facility that employs or contracts with the administrator who is the subject of the complaint; and*

*(2) Three members shall be persons representing the aging or disabled community, as appropriate for the type of long-term facility whose administrator is the subject of the complaint.*

(c) *Each party shall submit to the impartial decision-making panel all documentary evidence that the party believes has a bearing on or relevance to the violation or violations alleged by the Department in the complaint.*

(d) *The Department shall present initial arguments. The administrator shall then present his or her arguments. The informal dispute resolution shall be limited to no more than two (2) hours in length, with each party being permitted one (1) hour to present its arguments; however, the impartial decision-making panel may grant each party additional equal time for good cause as determined by the impartial decision-making panel.*

(e) *Rules of evidence or procedure shall not apply to the informal dispute resolution except as provided in this section. The impartial decision-making panel may:*

- (1) Accept any information that the impartial decision-making panel deems material to the issue being presented; and
- (2) Reject any information that the impartial decision-making panel deems material to the issue being presented.
- (f) The informal dispute resolution may not be recorded; however, the impartial decision-making panel may make written or recorded notes of the arguments.
- (g) Only employees of or health care providers contracted by the facility where the administrator who is the subject of the complaint is employed may appear or participate in the informal dispute resolution on behalf of the administrator, except that the administrator may call one character witness to appear and testify on his or her behalf.
- (h) Only employees of the Department may appear or participate at the meeting for, or on behalf of, the Department for the purpose of presenting arguments. In addition to such employees, one or more employees of the Department may provide technical assistance to the impartial decision-making panel at the panel's request. Any employee of the Department who participates in the informal dispute resolution process as described in this paragraph shall have no current involvement in long-term care facility surveys including but not limited to the informal dispute process described in Section 1-1914.3 et seq. of Title 63 of the Oklahoma Statutes or the alternative informal dispute resolution process described in Section 1-1914.11 et seq. of Title 63 of the Oklahoma Statutes for long-term care facilities. this paragraph shall have no resolution process.
- (i) The State Long-Term Care Ombudsman or designee may appear or participate in the informal dispute resolution.
- (j) No party may be represented by an attorney in the informal dispute resolution.
- (k) The informal dispute resolution process is limited to violations alleged by the Department in the complaint. If the impartial decision-making panel finds that matters not subject to the informal dispute resolution are presented, the impartial decision-making panel shall strike all documentary evidence related to or presented for the purpose of disputing the matter not subject to the informal dispute resolution. The impartial decision-making panel may not include in the statement of findings described in subsection l of this section any matter not subject to the informal dispute resolution.
- (l) Upon the conclusion of all the arguments by the parties at the informal dispute resolution, the impartial decision-making panel shall issue a written statement of findings, which shall be provided to all parties and which shall include:
- (1) A summary of any alleged violations;
  - (2) A statement of whether the impartial decision-making panel agrees that the alleged violation or violations occurred;
  - (3) The facts and persuasive arguments that support the finding of the impartial decision-making panel for each alleged violation; and
  - (4) A recommendation on appropriate disciplinary action against the administrator, if any.
- (m) If the impartial decision-making panel cannot reach a majority decision on the findings of the informal dispute resolution as described in subsection l of this section, the State Commissioner of Health may intervene for the purpose of breaking a tie.
- (n) The Department shall review the findings of the impartial decision-making panel and shall take such findings into consideration when determining whether to pursue further disciplinary action against the administrator. [Title 63 O.S. §1-1949.7]

### **310:679-5-7.1. Administrative fines**

- (a) The Board Department may impose administrative fines, in an amount to be determined by the Board Department, against persons whom the Board Department has determined have not complied with the provisions of the Oklahoma statutes relating to Long Term Care Administrators or rules adopted by the Board and OAC 310:679. Administrative fines shall not exceed One Thousand Dollars (\$1,000.00) per violation.
- (b) Administrative fines shall not exceed One Thousand Dollars (\$1,000.00) per violation.

(c) In assessing a fine, the Board Commissioner shall give due consideration to the appropriateness of the amount of the fine with respect to factors such as the scope, severity and repetition of the violation and any additional factors deemed appropriate by the Board Commissioner.

(e) ~~Administrative fines assessed by the Board on or after August 1, 2009, must be paid, in full, within thirty (30) calendar days of the date assessed, unless other payment terms have been agreed to, in writing, by the Board.~~

(d) ~~Failure to timely pay Administrative fines assessed by the Board may subject the individual to additional Board sanction(s), including license suspension or revocation.~~

(e) ~~Failure of the licensee to provide verification of completion of the required number of CEUs shall result in specific standard fines and penalties (automatically approved) that will be enforced per 490:1-9-5.~~

### **310:679-5-8. Reporting**

(a) The Board Department shall report final adverse actions to the National Practitioner Data Bank (NPDB), formerly the Healthcare Integrity and Protection Data Bank (HIPDB), in accordance with requirements at Title 45, Code of Federal Regulations, Part 60.

(b) Disciplinary action taken against a license/certificate holder and reported to the NPDB shall be reported on the state registry as provided in 63 O.S. §330.64.

(c) ~~If the~~ The Department may report disciplinary action taken against a license or certificate holder to other jurisdictions where the Department has knowledge that a license or certificate holder possesses a license or certificate. has knowledge that the license/certificate holder is licensed or certified as a long-term care administrator in any other legal jurisdiction(s) and/or if the Board Department has knowledge that this person holds other professional license(s) or certification(s), the Board Department may report disciplinary action taken against this person to all appropriate state licensing authorities, federal regulatory authorities and professional certification organizations.

(d) ~~Referrals may be made to law enforcement authorities, the State's Medicaid Fraud and Abuse authorities, Adult Protective Services, the State's Ombudsman, or any other licensing or regulatory entity. The Department may make referrals to other regulatory authorities as necessary.~~

## **SUBCHAPTER 7. FEES AND DEPOSITS**

### **310:679-7-1. Fees and deposits [REVOKED]**

(a) ~~All fees, fines and costs collected by the Board under the provisions of 63 O.S. receipt, in a fund to be known as the Oklahoma State Board of Examiners for Long Term Care Administrators Revolving Fund. This fund may be used for the purposes of the Board as provided in the Statutes.~~

(b) ~~Fees, fines and costs received by the Board for any purpose described herein, all of which shall be payable to the Board online via credit or debit card payment, shall become the exclusive property of the Board and shall not be refunded in whole or in part for any reason or purpose without the Executive Director's approval. The Board does not accept checks or cash payments.~~

(c) ~~The following fees as listed within 490:1-7-2, are due and payable to the Board, in full, immediately upon assessment by the Board:~~

~~(1) Fees for Non-Sufficient Funds (NSF) related to Electronic Funds Transfers;~~

~~(2) Late Fees; and/or~~

~~(3) Late Fees for Failure to Provide Current Contact information.~~

(d) ~~Unless otherwise agreed to in writing by the Board, all other fees charged by the Board are due and payable to the Board, in full, on or before the date the Board or Board staff is to take action on the item wherein a fee is specified.~~

(e) ~~Failure to timely pay Administrative fees assessed by the Board may subject the individual to additional Board sanction(s), including license suspension or revocation.~~

**310:679-7-2. Schedule of fees**

- (a) ~~Initial and Temporary Long-Term Long-Term~~ Care Administrator License - \$200.00
  - (1) This licensure fee applies to all original licensures, registrations/registration renewals and certifications.
  - (2) The initial license will expire on December 31<sup>st</sup> of the year it was effective.
- (b) Renewal fees
  - (1) Tier 1 NHA or ICF/IID >17 bed License - \$200.00 per year;
  - (2) Certified Assistant - \$75.00 per year;
  - (3) Tier 2 RC/AL License - \$175.00 per year;
  - (4) Tier 2 RC License - \$100.00 per year;
  - (5) Tier 2 ADC License - \$100.00 per year;
  - (6) Tier 2 ICF/IID-16 License - \$100.00 per year
- (c) Late Fee - \$100.00 for each calendar week, or portion thereof, ~~a licensee fails to timely meet the requirements of a deadline or due date established or agreed to, in writing, by the Board.~~
- (d) Pre-Licensing File Origination and Maintenance fee - \$100.00
- (e) Provisional License Application ~~(per application)~~ - \$200.00
- (f) ~~Name Change on "Certificate of License" (per request) - \$25.00 (documentation of a legal name change shall be required, such as a marriage certificate or other legal document)~~
- (g) ~~Endorsement Licensure Questionnaire (per request) - \$50.00~~
- (h) ~~Replacement "Certificate of License" (due to loss or damage) - \$25.00~~
- (i) ~~(f) State Standards Review (per person) - \$100.00~~
- (j) ~~(g) State Standards Examination Packet - \$50.00~~
- (k) ~~(h) State Standards Examination - \$100.00 per examinee (when administered by OSBELTCA)~~
- (l) ~~(i) State Standards Examination, unscheduled examination - \$500.00 per examinee (when administered by OSBELTCA)~~
- (m) ~~(j) Board Department-Sponsored Educational Workshop (per day) - up to \$1,000 per attendee.~~
- (n) ~~Photocopies (per page) - \$0.25~~
- (o) ~~Rules and Regulations (paper copy), per page - \$0.25~~
- (p) ~~(k) Administrator-In-Training (AIT) Program: Internship Permit (per intern/trainee applicant) - 350.00 \$350.00~~
- (q) ~~(l) Continuing Education Program Approval Program Application Fee (per credit hour) - \$55.00~~
- (r) ~~Mailing List on Plain Paper (per page) - \$0.25~~
- (s) ~~Electronic Mailing List - \$10.00~~
- (t) ~~(m) Returned Check Fee or Fee related to Non-Sufficient Non-Sufficient Funds (NSF) to cover an Electronic Funds Transfer (EFT) - \$30.00~~
- (u) ~~Late Fee for Failure to Provide Current Contact and/or Employment Information - \$75.00~~
- (v) ~~(n) Fee for Administrator University Training - Not to exceed \$200.00 per day~~
- (w) ~~(o) Convenience Fee for Online Licensure Renewal - Determined by Intermediary A convenience fee may be charged by the online processing vendor in an amount determined by the processor.~~
- (x) ~~Review by Board Staff in order to determine whether or not an individual applicant is eligible for licensure or certification relative to the barrier offenses listed in OAC 490:10-1-2.1 or other eligibility criteria - \$200.00~~
- (y) ~~(p) License Application processing fee - \$100.00 (valid for one year).~~
- (z) ~~Temporary licensure fee - \$200.00 (wherein the Executive Director may issue a temporary license, upon request by the applicant and with all requirements being met, expiring at the next Board meeting date when the Board would issue a license, enabling one who is qualified to work while waiting for the next Board meeting).~~

**SUBCHAPTER 9. CONTINUING EDUCATION**

### **310:679-9-1. General provisions for continuing education programs**

- (a) Continuing education programs requests for credit recognition must be submitted to the Department for approval prior to presentation. In order to receive Board recognition and continuing education credit, continuing education programs shall be submitted to the Board for approval prior to presentation as indicated under this Chapter.
- (b) The continuing education program is responsible for providing proof of participation and credit amount awarded to each participant. All continuing education programs submitted to the Board for its evaluation and possible 'approval' for purposes of granting Oklahoma continuing education credit hours shall be submitted with a \$55.00 per credit hour, non-refundable fee. Approval will be granted only for specific programs for specific dates of presentation. The Board shall waive this fee for programs sponsored by State or federal agencies. Recurring presentations also require Board approval, but may be considered and approved by the Board based upon a report of program changes from the previously-approved program.
- (c) Administrators participating in continuing education training are responsible for maintaining proof of continuing education credits awarded. The Board may withdraw approval for continuing education credit should subsequent information come to its attention that program content differed from that approved.
- (d) Sponsors shall be responsible for obtaining satisfactory documentation of attendance and submission of the attendance records to the Board.
- (e) All programs approved by the National Continuing Education Review Service (NCERS), National Association of Long Term Care Administrator Boards (NAB) that receive a NCERS/NAB approval number will be presumptively accepted by the Board for purposes of meeting Oklahoma's annual continuing education requirements.
- (f) The Board may approve, sponsor and/or conduct its own educational and training programs for continuing education credit if such programs meet the criteria established in this Chapter.
- (g) The Board reserves the right to monitor any and all approved programs.
- (h) Programs that deal specifically with internal affairs of an organization do not qualify for continuing education hours.
- (i) Programs from the Administrator University may qualify for continuing education hours if they meet the criteria outlined in this Chapter and have been so approved by the Board.
- (j) (d) Attendees may be awarded partial credit, at the discretion of the sponsor, for partial participation, late arrival, or early departure from the program. Sponsors, at their discretion, may award partial credit for attendees who they deem have been late, left early, or otherwise not participated in the full activities of the program. The Board approval for a program is for "up to" up to the number of hours approved and it is the responsibility of the sponsor to judiciously grant credit. This also allows the sponsor to award fewer hours in the event of unplanned changes to a program such as a scheduled speaker being unable to make a presentation.
- (e) The Department may deny or revoke program approval if the program sponsor fails to issue hours appropriately. Failure to protect the integrity of the hours approved on the part of the sponsor could result in future denial of program approval by the Board.

### **310:679-9-2. Criteria for continuing education programs**

- (a) A correctly completed application must be submitted to the Department at least thirty (30) days in advance of the program; In order for the Board to approve a program for continuing education hours, an application shall be completed by the sponsor, and reviewed and approved by the Board.
- (b) Sponsors shall submit their application to the Board at least 30 days in advance of the program, provided however, should the Board fail to meet through lack of a quorum or other circumstance, the application will be reviewed at the next meeting of the Board and if approved, hours will be awarded retroactively.
- (c) The application shall contain documentation that certifies the following criteria are being met demonstrating the following requirements:



- (1) The program shall relate to ~~Long Term~~ Long-Term Care Administration and be designed to promote continued knowledge, skills and attitudes consistent with current standards in ~~long-term~~ long-term care administration.
- (2) The program shall be designed to assist administrators to improve their professional competencies.
- (3) The program shall be open and available to all ~~long-term~~ long-term care administrators in Oklahoma.
- (4) ~~The facility where the program will be conducted shall provide adequate~~ program location must be adequately equipped and have enough space to accommodate potential attendees and have the ability to supply the needed equipment.
- (5) ~~The faculty/instructors~~ Instructors must have ~~experience in long-term~~ long-term care supervision and ~~or administration~~ experience, or have ~~expertise in teaching and instructional methods suitable to the subject presented, or instructional expertise and/or have suitable academic qualifications in a relevant academic field, and experience for the subject presented.~~
- (6) The program objectives must:
  - (A) have reasonable and clear objectives with defined outcome expectations;
  - (B) be consistent with the program content; and
  - (C) identify the mechanism through which they will be taught ~~The learning objectives in the program must be reasonable and clearly stated in behavioral terms which define the expected outcomes for participants.~~
- (7) ~~The learning objectives must be consistent with the program content and the mechanism by which learning objectives are shared with participants must be identified.~~
- (8) Clearly stated program methods appropriate to the subject matter with an identified timeframe for teaching concepts. ~~The teaching methods in the program must be clearly stated, must be appropriate to the subject matter, and must allow suitable time.~~
- (9) ~~Instructional aids and resource materials used in the program that will be utilized in the program must be described.~~
- (10) ~~Sponsors should be qualified in the subject matter presented.~~
- (11) ~~The registration fee for a~~ the program and the location where the fee will be published on promotional material must be published clearly on promotional material.
- (12) ~~Registration fees may be reviewed by the Board.~~
- (13) ~~The sponsor must allow the Board to evaluate the program.~~
- (14) ~~(12) The sponsor must provide an~~ program evaluation form for each program participant's responses.
- (15) ~~Within 15 days after the conclusion of the program, the sponsor of Board approved programs (not NAB/NCERS approved programs) must provide to the Board a list of participants and a summary of the evaluations for each program. NAB/NCERS approved sponsors will use the NAB CE Registry to report attendees for those programs.~~
- (16) ~~(13) The application presented to the~~ Department must state the ~~The method to be used in certifying to capture accurate attendance or on-line completion.~~
- (17) ~~To receive full credit, attendees must attend the full program and/or log in for on-line attendance for the full program. See also 490:1-9-1(j).~~
- (18) ~~Partial credit of a minimum of two clock hours may be earned in a divisible program.~~
- (19) ~~(14) Instructional~~ Information indicating the instructional hours must be are based upon on ~~clock hours (60 minutes= 1clock 1 clock hour).~~
- (20) ~~(15) The~~ An agenda must show registration, meal times (not included in credit hours), and a showing breakdown of the all daily educational activities.
- (21) ~~(16) The maximum number of hours that can be approved or earned shall be seven clock hours per day. No more than seven (7) clock hours included in the program per day. In the event there is a required, onsite, coursework-specific presenter during the lunch hour, eight (8) hours may be included in the program description.~~

~~(22) The target group for programs shall be long term care administrators and other disciplines related to long term care.~~

~~(23) (17) Licensed administrators who are "presenters" of approved CE programs may receive credit one time annually for the clock hour value of the class(es) they present. If the material is presented multiple times, credit is only awarded once per licensure year for the same educational material.~~

~~(24) (18) Licensed administrators who present in Administrators University (AU) or other Board Department approved entry level training such as Tier 2 RC, RCAL or RC/AL, Adult Day Care or ICF/IID-16 initial licensure training, will receive CE credit one time annually for the clock hour value of the material they present.~~

### **310:679-9-3. Approval Disapproval of continuing education programs**

~~(a) In order to be approved, continuing education programs shall be appropriately designed for Long Term Care Administrators and shall meet the criteria outlined in this Chapter. Upon disapproval, the sponsor:~~

~~(1) will be notified of missing requirements; and~~

~~(2) may submit additional information and/or documentation to address missing requirements.~~

~~(b) If a program is disapproved, the sponsor shall be notified in writing of the reasons for rejection within ten (10) working days of the Board's decision. Approved programs will be notified of approval by the Department.~~

~~(c) If a program is disapproved, the sponsor has 30 days to appeal in writing. The appeal must include a copy of the original application package and any additional information the sponsor feels is needed for further clarification.~~

~~(d) The Board may approve program content or a portion of the program content, even though the same content or a portion of the program content has been previously approved by the Board for the same calendar year.~~

### **310:679-9-4. Continuing education requirements**

~~(a) Each licensee shall be responsible for identifying and his own continuing education needs, taking the initiative in seeking continuing professional education requirements, activities to meet those needs, and integrating new knowledge and skills into his duties.~~

~~(b) Individuals who are newly licensed as a nursing home or ICF/MR ICF/IID administrators or certified as Assistant Administrators are required to successfully complete continuing education hours equivalent to a rate of two (2) hours per month, beginning with the month following the month his license/certificate is issued, for each month he holds the license/certificate during the current licensing year. For certified assistant administrators, this is a condition of employment.~~

~~(1) Individuals who are newly licensed as RC/AL administrators are required to successfully complete continuing education hours equivalent to a rate of one and one half (1.5) hours per month, beginning with the month following the month their license is issued, for each month they hold the license during the current licensing year.~~

~~(2) Individuals who are newly licensed as RC only administrators are required to successfully complete continuing education hours equivalent to a rate of 1.3 hours per month, rounded up to the next half hour increment (e.g., 1.3 = 1.5; 2.6 = 3), beginning with the month following the month their license is issued, for each month they hold the license during the current licensing year.~~

~~(3) Individuals who are newly licensed as Adult Day Care administrators are required to successfully complete continuing education hours equivalent to a rate of one (1) hour per month, beginning with the month following the month their license is issued, for each month they hold the license during the current licensing year.~~

~~(c) Licensees shall complete Continuing Education Units (CEUs) as follows:~~

~~(1) Tier one (1) licensees shall holding a nursing home administrator license and Certified Assistant Administrators shall successfully complete twenty-four (24) clock hours of continuing education~~

(commonly referred to as CEUs or continuing education units) during each license ~~licensing~~ year. For ~~Certified Assistant Administrators this shall be a condition of employment.~~

~~(1) (2) Tier 2 RC/AL administrators shall successfully complete eighteen (18) clock hours of continuing education during each licensing ~~license~~ year.~~

~~(2) (3) Tier 2 Residential Care administrators shall successfully complete sixteen (16) clock hours of continuing education during each license ~~licensing~~ year.~~

~~(3) (4) Licensed Tier 2 Adult Day Care Administrators shall successfully complete twelve (12) clock hours of continuing education during each license ~~licensing~~ year.~~

~~(5) Licensed Tier 2 ICF/IID-16 administrators shall successfully complete sixteen (16) clock hours of continuing education during each license year.~~

~~(d) (c) Licensees/certificate License and certificate holders are responsible for maintaining their own continuing education CEU records.~~

~~(e) (d) Required CEUs must be completed within the licensure period. Carry-over of continuing education hours earned in one licensing year that were in excess of the hours required for that year to a subsequent licensing year is not permitted.~~

~~(f) (e) Credit will only be given once per approved program for each licensure period; duplication of credit for the same course is not permissible in the same licensure year. Licensed administrators who have attended and received credit for previously approved program content shall be denied credit for attending subsequent duplicate programs in the same calendar year.~~

~~(g) (f) A written request for an extension may be submitted to the Department when a license or certificate holder cannot meet the requirements for continuing education due to illness, emergency, or other hardship. Extension requests will be reviewed by the Department and determinations made on a case-by-case basis. A licensee/certificate holder who cannot meet the continuing education requirement due to illness, emergency or hardship may petition the Board, in writing, requesting a waiver of the clock hour requirement. Any such waiver request must be received and acted upon by the Board. The waiver request shall explain why compliance is not possible, and include appropriate documentation. In the event of more broadly sealed events that, in the judgment of the Board, affect large groups or the whole of the profession, the Board may take action to temporarily alter or waive CE requirements for those larger groups or all licensees for a specified time period.~~

~~(h) (g) CEU documentation must be uploaded in the online renewal portal at the time of renewal for review by the Department. Renewal applicants must complete CEUs prior to the Department issuing a renewal to the renewal applicant. In the event a licensee fails to provide the Board, upon request, with documentation that the continuing education requirements have been met, the licensee will be subject to sanction by the Board, which may include suspension or revocation of his license. This is considered a reportable offense on the first offense and will appear as a violation in the Registry and NPDB.~~

~~(i) (h) All licensees, even those subject to enforcement action, are required to complete continuing education. A licensee whose license is suspended by the Board for disciplinary reasons is not exempt from the continuing education requirements, and must, therefore, successfully complete the required number of continuing education hours commensurate with his license/certificate type during any licensing year(s) in which his license is under suspension. Licensee shall, upon Board request, furnish documentation that the continuing education requirements have been met. Failure to provide such requested documentation shall subject licensee to sanction by the Board, including further suspension or revocation of his license.~~

~~(j) (i) NAB/NCERS-approved programs may be counted towards annual CE requirements with supporting documentation. All CE hours earned for programs approved by the NCERS/NAB or approved by the Board may be utilized by a licensee for purposes of meeting the annual CE requirement in the licensing period in which the hours were earned.~~

### **310:679-9-5. Auditing of continuing education hours**

~~(a) The Board Department may request continuing education information from sponsors of approved programs for audit purposes only.~~

(b) ~~The Board does not retain any record of continuing education hours completed by individual administrators except as it may otherwise obtain in its performance of the annual CE compliance audit.~~

(c) ~~An annual audit of at least 5% of the total number of each type of administrator will be made to verify compliance with the annual CE requirement. This percentage may be increased at the Board's discretion. If a license is not renewed by the last day of the current licensing year, an audit to verify compliance with the annual CE requirement shall be conducted prior to reinstatement of the license.~~

(d) ~~Failure of a licensee to provide verification of continuing education hours completed, if requested by the Board, shall result in disciplinary action against the licensee. The minimum penalty for a first time offense is \$50.00 per clock hour not completed and completion of twice the number of clock hours not completed, due within 120 days. These clock hours cannot be applied to the current year's requirements. This is also a NPDB (National Practitioners Data Bank) reportable offense. For a second offense, the penalty will double. Any subsequent offenses shall be referred to the Board for determination of an appropriate penalty which may include suspension or revocation. The Administrator shall be informed in writing prior to the drafting of an order that they may request a formal hearing before the Board in lieu of the "standard" penalty for either the first or second time offense, in which case a formal complaint shall be drafted and the Board shall have a full range of penalty options available to them, to include suspension and revocation. These automatic penalties for the first and second offense do not require Board approval; however, any variation from this "standard" will require Board approval. A formal complaint and appropriate order will still be drafted by the Board's attorney and the action taken shall be reported to the Board.~~

## **SUBCHAPTER 10. LICENSING OF ~~LONG TERM~~ LONG-TERM CARE ADMINISTRATORS**

### **PART 1. LICENSING OF ~~LONG TERM~~ LONG-TERM CARE ADMINISTRATORS**

#### **310:679-10-1. Purpose [REVOKED]**

~~This Chapter has been adopted for the purpose of complying with the provisions of the Administrative Procedures Act. This Chapter implements the specific rules for licensing administrators serving in the following facility types:~~

- ~~(1) Nursing facilities and specialized facilities licensed pursuant to 63 O.S. Section 1-1901 et seq., including but not limited to specialized facilities for persons with mental retardation, developmental disabilities or Alzheimer's disease; and~~
- ~~(2) Continuum of Care facilities or Assisted Living Center (ALC) licensed pursuant to 63 O.S. Section 1-890.1 et seq.~~
- ~~(3) Residential Care Homes licensed pursuant to 63 OS Section 1-819 et seq.~~
- ~~(4) Adult Day Care Centers licensed pursuant to 63 OS Section 1-870 et seq.~~

#### **310:679-10-2. Definitions [REVOKED]**

~~Definitions set forth in Chapter 1 of this Title shall also apply to this Chapter.~~

#### **310:679-10-2.1. General requirements for licensure that must be met by each applicant**

- ~~(a) Applicants shall not be less than must be at least twenty-one (21) years of age at the time the license is issued.~~
- ~~(b) Each applicant shall Applicants must be a United States citizen, or ~~be~~ a qualified alien under the Federal Immigration and Naturalization Act and lawfully residing in the United States. An affidavit of lawful presence must be submitted with the application.~~
- ~~(c) Each administrator applicant must establish to the satisfaction of the Board that the applicant is of reputable and responsible character and otherwise suitable and qualified to serve because of training or experience in institutional administration. Each provisional applicant must be of good character, otherwise suitable, and meet any other standards established.~~

~~(d) A background check will be conducted on each applicant. Each applicant shall submit to a criminal background check. If The Department will not issue or renew a license to any applicant if the results of a criminal background check reveal that the applicant has been convicted of or pleaded guilty or *nolo contendere* or no contest, or received a deferred sentence for any felony or misdemeanor offense for any of the following offenses in any state or federal jurisdiction, the Board shall not issue a license or renew a previously issued license to this person and employers shall not hire or contract with the person:~~

- ~~(1) abuse, neglect or financial exploitation of any person entrusted to the care or possession of such person,~~
- ~~(2) rape, incest or sodomy,~~
- ~~(3) child abuse,~~
- ~~(4) murder or attempted murder,~~
- ~~(5) manslaughter,~~
- ~~(6) kidnapping,~~
- ~~(7) aggravated assault and battery,~~
- ~~(8) assault and battery with a dangerous weapon, or~~
- ~~(9) arson in the first degree.~~

~~(e) The Department will not issue or renew a license for any applicant if less than seven (7) years have elapsed since the completion of sentence (meaning the last day of the entire term of the incarceration imposed by the sentence including any term that is deferred, suspended or subject to parole), and the results of a criminal history check reveal that the subject person the applicant has been convicted of, or pled guilty or *nolo contendere* or no contest to, a felony or misdemeanor offense for any of the following offenses, in any state or federal jurisdiction, the Board shall not issue a license or renew a previously issued license to this person and employers shall not hire or contract with the person:~~

- ~~(1) assault,~~
- ~~(2) battery,~~
- ~~(3) indecent exposure and indecent exhibition, except where such offense disqualifies the person as a registered sex offender,~~
- ~~(4) pandering,~~
- ~~(5) burglary in the first or second degree,~~
- ~~(6) robber in the first or second degree,~~
- ~~(7) robber or attempted robbery with a dangerous weapon, or imitation firearm,~~
- ~~(8) arson in the second degree,~~
- ~~(9) unlawful manufacture, distribution, prescription, or dispensing of a Schedule I through V drug as defined by the Uniform Controlled Dangerous Substance Act (noting that "possession" of a Schedule I through V drug as defined by the Uniform Controlled Dangerous Substance Act is no longer a barrier offense),~~
- ~~(10) grand larceny, or~~
- ~~(11) petit larceny or shoplifting.~~

~~to any felony or to any misdemeanor involving moral turpitude, the individual's application for licensure may be disapproved.~~

~~(f) To be eligible for a license, applicants must be able to effectively communicate with all individuals and entities related to all required administrator functions.~~

~~Each applicant shall report to the Board any adverse action taken by any licensing or certification entity in any jurisdiction. The Board shall examine the reasons for the action(s) and may consider this information in granting or denying a license. The applicant is required to report all jurisdictions where they've held a license and/or applied for licensure and been denied. Licensure denial is an adverse action and is required to be reported to the NPDB.~~

~~(g) Each applicant shall be in compliance with State income tax requirements pursuant to 68 O.S., 238-1. Each applicant must meet all other requirements prescribed by the Department.~~

~~(h) Each applicant shall remit any and all required fees associated with obtaining a license, including any outstanding fees or fines.~~

~~(i) Each applicant must have a working ability in the English language sufficient to communicate, both orally and in writing, with residents, family members, employees, the general public, and representatives of State and federal agencies and to engage in the practice of long term care administration.~~

~~(j) (h) Each applicant shall meet all other appropriate conditions and requirements as may be prescribed by the Board. Each applicant must disclose, for the Department to consider when making a determination on the issuance of a license, all other jurisdictions in which:~~

~~(1) A license has been applied for;~~

~~(2) A license has been issued; and~~

~~(3) Any disciplinary or enforcement action taken by another licensing authority.~~

~~(k) (i) When the Board denies an application for licensure, the Board will not reconsider such denial. A person cannot reapply for licensure until one year of the date of denial.~~

~~The required fee and a correctly completed application form demonstrating all requirements are met must be submitted to the Department by the applicant before a license may be issued.~~

~~(l) (j) The application shall be considered incomplete until all requirements have been met, to include any additional requirements prescribed by the Board for each license type. Board conducted training includes Administrator University and any initial qualification training such as the optional reviews for exams or Adult Day Care training. Approved initial qualification training conducted externally, such as training approved for RC or RCAL licensure, is not considered "Board conducted" and those applicants have to meet the prerequisites prior to testing or attending any "Review" courses the Board may offer.~~

~~The Department will notify the applicant when an application is missing any requirements. An applicant may submit additional documentation demonstrating compliance with licensure requirements for the Department to review. If an applicant is not eligible for a license, the Department will issue a denial letter specifying the reasons for the denial. Licensing denials will be reported to NPDB.~~

~~(m) (k) In accordance with the requirements detailed at 59 O.S. 4100.4(A), it shall be incumbent upon the applicant to bring any equivalent education, training and experience completed while in the Armed Forces to the attention of OSBELTCA staff during the application process. The staff shall accept and apply satisfactory evidence of this equivalent education, training and experience in a manner most favorable to the satisfying qualification requirements of the license and/or approval for license examination(s). In accordance with 59 O.S. 4100.4(A) The Department will review education, training, and experience completed by the individual as a member of the Armed Forces or Reserves of the United States, National Guard of any state, or the Naval Militias of any state, and apply it in the manner most favorable toward satisfying the qualifications of issuance of the requested license or certification or approval for license examination in this state.~~

~~(l) In accordance with 59 O.S. 41501, the Department will honor the requirements in the Universal Licensing Act.~~

**310:679-10-3. Requirements for initial licensure for nursing/skilled nursing facility (includes ICF/IID) administrator (also known as nursing home administrator) Tier 1 Nursing Home, Skilled Nursing Facility, and ICF/IID with >17 beds administrator requirements**

~~(a) In addition to the general requirements found in this Chapter, each applicant for initial licensure shall meet the requirements in this Section. Applicants must meet all general requirements for licensure.~~

~~(b) Each applicant shall must provide documentation demonstrating the successful completion provide, or shall cause to be provided, written evidence satisfactory to the Board of one of the following:~~

~~(1) Baccalaureate degree from an institution of higher education; or "Official Proof" [see 490:10-3-1.1. (relating to evidence requirements)] of successful completion of a formal program or program(s) of study, wherein applicant received, at a minimum, a bachelor's degree;~~

(A) applicant received a bachelor's degree from a college or university accredited by one of the regional accreditation organizations recognized by the U.S. Department of Education and the Board if the applicant's degree is from a school domiciled in the United States; or  
(B) if the applicant received his degree from a college or university domiciled outside the United States [and, as such, the college/university does not fall under the accreditation purview of any of the six (6) regional accreditation organizations recognized by the U.S. Department of Education and by the Board], applicant shall, at applicant's expense, cause a degree equivalency evaluation of his degree to be performed and the results sent directly to the Board. The Board shall assess the results of this degree equivalency evaluation and, at its sole discretion, determine if applicant's education and/or degree are equivalent, at a minimum, to a bachelor's degree earned from a regionally accredited college or university;

(2) Associate degree in a health- or business-related field or other relevant field and not less than five (5) years of experience in upper-level management of a long-term care facility.

(c) Unless granted a waiver for one or more of the requirements, applicants must successfully complete the following within twenty-four (24) months of submitting an application:

(1) A Department-approved training;

(2) The required internship; and

(3) Passing score on the following required examinations:

(A) The Oklahoma State Standards examination;

(B) The NAB Core examination; and

(C) The NAB NHA Line of Service examination;

(d) Training certification is required before an applicant may take the State Standards examination; a passing score on the State Standards exam is required before taking the NAB RC/AL Exam.

(e) A waiver for the required training may be granted by the Department if the applicant has a degree in long-term care administration from a NAB accredited institution.

(f) A waiver for the required internship may be granted by the Department if the applicant presents documentation of an equivalent internship from a NAB accredited institution.

(g) An applicant with a verified HSE credential/qualification may be issued a license upon passing the State Standards examination and payment of required licensure application fee.

~~(2) Receipt of a passing score on the national "NAB" NHA examinations (Core and NHA Line of Service (LOS)) conducted by the National Association of Long Term Care Administrator Boards (NAB) as discussed in paragraph 10-3-2 OAC 310:679-10-12 of this document.~~

~~(3) Receipt of a passing score on the Oklahoma State Standards examination within the twenty-four (24) months preceding the month in which the Board will be taking action to license the applicant, and if applicant is not licensed during this 24-month time period, applicant will have to pay all required fees and re-take the examination prior to any future licensing attempts;~~

~~(4) Successful completion of Administrator University or a presumptively approved NAB-approved entry level course for Nursing Home Administrators within the twenty-four (24) months preceding the month in which the Board will be taking action to license the applicant, and if applicant is not licensed during this 24-month time period, applicant will have to pay all required fees and re-take Administrator University prior to any future licensing attempts (if the candidate has a degree in long term care administration from an institution accredited by NAB, the Administrator University may be waived);~~

~~(5) Successful completion of the Administrator in Training (AIT) program (or documentation of an equivalent internship as part of a degree in long term care from an institution accredited by NAB) within the twenty-four (24) months preceding the month in which the Board will be taking action to license the individual, and if applicant is not licensed during this 24-month time period, applicant will have to pay all required fees and complete another AIT program prior to any future licensing attempts; and;~~

~~(6) Payment of the required fee(s).~~

~~(7) An applicant with the HSE credential/qualification will have been verified through/by NAB. This means the Board has been assured by NAB that the applicant has:~~

- ~~(A) met or exceeded the minimum education requirement;~~
- ~~(B) passed the NAB NHA exam as well as the NAB RCAL exam and NAB HCBS exam and~~
- ~~(C) met or exceeded the requirement for AU and AIT, either by experience or education, and shall only be required to take and pass our State Standards examination and pay the required fees to be licensed as a NHA in Oklahoma.~~

~~(e) (g) The Board Department, at its sole discretion, may waive the Administrator University administrator training requirement, the internship requirement, and/or the Administrator in Training requirement or both if the applicant was previously licensed in Oklahoma as a long-term long-term care administrator, was in good standing with the Board Department while applicant was previously licensed in Oklahoma, and has been active in long-term long-term care for at least two (2) of the last five (5) years.~~

~~(d) After the Board's staff has determined that all requirements for initial licensure have been met, an applicant may apply for a "temporary" license. The Executive Director may review and approve or disapprove issuance of a temporary license after an application has been made and additional licensure fees paid. An approved temporary license shall expire at the next regularly scheduled meeting of the Board when the application for licensure (no longer temporary) must be approved or disapproved by the Board.~~

**310:679-10-3.1. Requirements for initial licensure for residential care/assisted living (RC/AL) administrators Tier 2 RC/AL administrator requirements**

~~(a) In addition to the general requirements found in this Chapter, each applicant for initial licensure as an RC/AL administrator shall meet the requirements in this Section. Applicants must meet all general requirements for licensure. Administrators holding an RC/AL a Tier 2 RC/AL license may serve as an administrator in either an RCF or ALF RCF, ALF, or ICF/IID-16.~~

~~(b) Each applicant for initial licensure as an a Tier 2 RC/AL administrator shall provide documentation of one of the following; or shall cause to be provided, written evidence satisfactory to the Board of receipt of a high school diploma (or GED) or a higher level of education. When the applicant is providing proof of education beyond high school or GED, the same level of "proof" detailed in paragraph 10-1-3(b) is required.~~

- ~~(1) high school diploma;~~
- ~~(2) GED; or~~
- ~~(3) a higher level of education.~~

~~(c) Each Unless a waiver is granted, the applicant for initial licensure as a RC/AL administrator shall provide, or shall cause to be provided, written evidence satisfactory to the Board of the following: must complete the following requirements within twenty-four (24) months of application:~~

- ~~(1) Department-approved training; and~~
- ~~(2) Passing score on the following required examinations:~~
  - ~~(A) Oklahoma State Standards examination for RC/AL;~~
  - ~~(B) The NAB Core examination; and~~
  - ~~(C) The NAB RC/AL Line of Service examination.~~

~~(1) Current training certification, where "current" is defined as being completed within the twenty-four (24) months preceding the month in which the Board will be taking action to license the individual:~~

- ~~(A) through training from an institution of higher learning whose program has been approved by the Board, to include presumptively approved NAB approved entry level courses completed within 24 months prior to licensure; or~~
- ~~(B) receipt of a nationally recognized assisted living certificate of training and competency for assisted living administrators that has been reviewed and approved by the Board;~~



~~(C) Sources of certification are required to be reviewed and approved by the Board. Approved training sources shall include an expiration date on their certification which shall be two years after the date of the completion of their training.~~

~~(D) Applicants for training shall provide or cause to be provided to the approved training entity evidence that they have met at least one of the following pre-requisites to enter training:~~

~~(i) At least one (1) consecutive year of health care experience, OR~~

~~(ii) At least thirty (30) college semester hours in a healthcare related field of study, OR~~

~~(iii) A Bachelor's degree in any field of study.~~

~~(2) Receipt of a passing score on the Oklahoma State Standards examination for RC/AL administrators within the twenty-four (24) months preceding the month in which the Board will be taking action to license the applicant, and if applicant is not licensed during this 24-month time period, applicant will have to pay all required fees and re-take the examination prior to any future licensing attempts;~~

~~(3) Receipt of a passing score on the national "NAB" RC/AL examinations (Core and RCAL Line of Service (LOS)) conducted by the National Association of Long Term Care Administrator Boards (NAB) as discussed in paragraph 10-3-2 of this document, and~~

~~(4) Payment of the required fee(s).~~

~~(5) Training certification required in (c) (1) above is a prerequisite to being able to take the State Standards examination; a passing score on the State Standards exam is a prerequisite to take the NAB RC/AL Exam.~~

(d) Training certification is required before an applicant may take the State Standards examination; a passing score on the State Standards exam is required before taking the NAB RC/AL Exam.

(e) Applicants for Tier 2 RC/AL training must meet one or more of the following pre-requisites to enter training:

(1) At least one (1) consecutive year of health care experience, OR

(2) At least thirty (30) college semester hours in a healthcare related field of study, OR

(3) A Bachelor's degree in any field of study.

~~(d) (f) The Board Department, in its sole discretion, may waive re-completion of the administrator training requirement if the applicant was previously licensed in Oklahoma as an RC/AL any Tier 2 administrator type, was in good standing with the Board Department while applicant was previously licensed in Oklahoma, and has been active in long-term long-term care for at least two (2) of the last five (5) years.~~

~~(e) After the Board's staff has determined that all requirements for initial licensure have been met, an applicant may apply for a "temporary" license. The Executive Director may review and approve or disapprove issuance of a temporary license after an application has been made and additional licensure fees paid. An approved temporary license shall expire at the next regularly scheduled meeting of the Board when the application for licensure (no longer temporary) must be approved or disapproved by the Board.~~

### **310:679-10-3.3. Requirements for initial licensure for residential care (RC) administrators Tier 2 RC and ICF/IID-16 administrator requirements**

(a) In addition to the general requirements found in this Chapter, each applicant for initial licensure as an RC administrator shall meet the requirements in this Section. Applicants must meet all general requirements for licensure. Administrators holding an a Tier 2 RC or ICF/IID-16 license may serve as an administrator in an RCF and may not serve in any other facility type.

(b) Each applicant for initial licensure as an a Tier 2 RC or ICF/IID-16 administrator shall provide, or shall cause to be provided, written evidence satisfactory to the Board of receipt of a high school diploma (or GED) or a higher level of education. When the applicant is providing proof of education beyond high school or GED, the same level of "proof" detailed in paragraph 10-1-3(b) is required. documentation of one of the following:

(1) high school diploma;

- (2) GED; or
- (3) a higher level of education.
- (c) Unless a waiver is granted for one or more of the requirements, the applicant must complete all following requirements within twenty-four (24) months of application:
  - (1) Department-approved training; and
  - (2) Passing score on the following:
    - (A) Oklahoma State Standards examination for RC/AL; and
    - (B) The NAB Core examination;
- (d) Training certification is required before an applicant may take the State Standards examination. Each applicant for initial licensure as a RC administrator shall provide, or shall cause to be provided, written evidence satisfactory to the Board of the following:
  - (1) Current training certification (completed within the twenty-four (24) months preceding the month in which the Board will be taking action to license the individual) through training from an institution of higher learning whose program has been approved by the Board, to include presumptively approved NAB-approved entry level courses completed within 24 months prior to licensure;
  - (2) Receipt of a passing score on the Oklahoma State Standards examination for RC administrators within the twenty-four (24) months preceding the month in which the Board will be taking action to license the applicant, and if applicant is not licensed during this 24-month time period, applicant will have to pay all required fees and re-take the examination prior to any future licensing attempts;
  - (3) Receipt of a passing score on the "NAB" Core examination conducted by the National Association of Long Term Care Administrator Boards (NAB) as discussed in paragraph 10-3-2 of this document;
  - (4) Payment of the required fee(s).
  - (5) Training certification required in (c)(1) above is a prerequisite to being able to take the State Standards examination.
- (e) ~~The Board Department, in its sole discretion, may waive re-completion of the administrator training requirement if the applicant was previously licensed in Oklahoma as an a Tier 2 RC or ICF/IID-16 administrator, was in good standing with the Board Department while applicant was previously licensed in Oklahoma, and has been active in long-term long-term care for at least two (2) of the last five (5) years.~~
- (e) ~~After the Board's staff has determined that all requirements for initial licensure have been met, an applicant may apply for a "temporary" license. The Executive Director may review and approve or disapprove issuance of a temporary license after an application has been made and additional licensure fees paid. An approved temporary license shall expire at the next regularly scheduled meeting of the Board when the application for licensure (no longer temporary) must be approved or disapproved by the Board.~~

**310:679-10-3.5. Requirements for initial licensure for adult day care (ADC) administrators Tier 2 Adult day care administrator requirements**

- (a) Applicants must meet all general requirements for licensure.
- (b) Each applicant for initial licensure as an a Tier 2 ADC administrator shall provide for initial licensure as an a Tier 2 ADC administrator shall provide documentation of one of the following:
  - (1) high school diploma or GED and five (5) consecutive years supervisory experience (full-time or equivalent) in a long-term care or geriatric setting; or
  - (2) proof of a bachelor's degree and one (1) year of supervisory experience in a social or health services setting; or
  - (3) A current Oklahoma Nursing License (LPN or RN) in good standing and two (2) years of nursing experience.
- (1) One of the following:

~~(A) A high school diploma (or GED) AND five (5) consecutive years supervisory experience (full time or equivalent) in a long term care or geriatric setting; OR~~

~~(B) A Bachelor's degree AND one (1) year of supervisory experience, preferably in a social or health services setting; Each applicant for initial licensure as an ADC administrator under this provision shall provide, or shall cause to be provided, written evidence satisfactory to the Board of receipt of Bachelor's degree. The same level of "proof" detailed in paragraph 10-1-3(b) is required; OR~~

~~(C) An active Oklahoma Nursing license (either LPN or RN), in good standing, and two years of nursing experience.~~

(c) Unless a waiver is granted for one or more of the requirements, the applicant must complete all following requirements within twenty-four (24) months of application:

(1) Department-approved training; and

(2) Passing score on the following required examinations:

(A) Oklahoma State Standards examination for adult day care administrators; and

(B) The NAB Core examination;

~~(2) Successful completion of Board approved training for adult day care administrators (completed within the twenty four (24) months preceding the month in which the Board will be taking action to license the individual), to include presumptively approved NAB approved entry level courses completed within 24 months prior to licensure;~~

~~(3) Receipt of a passing score on the Oklahoma State Standards examination for adult day care administrators within the twenty four (24) months preceding the month in which the Board will be taking action to license the applicant, and if applicant is not licensed during this the twenty four (24) month time period, applicant will have to pay all required fees and re take the examination prior to any future licensing attempts;~~

~~(4) Receipt of a passing score on the "NAB" Core examination conducted by the National Association of Long Term Care Administrator Board (NAB) as discussed in paragraph 10-3-2 of this document, and~~

~~(5) Payment of the required fee(s).~~

~~(e) After the Board's staff has determined that all requirements for initial licensure have been met, an applicant may apply for a "temporary" license. The Executive Director may review and approve or disapprove issuance of a temporary license after an application has been made and additional licensure fees paid. An approved temporary license shall expire at the next Board meeting when the application for licensure (no longer temporary) must be approved or disapproved by the Board.~~

#### **310:69-10-4. Requirements for licensure by endorsement for long term care administrators** **Endorsement and reciprocity requirements**

(a) Applicants must meet all general requirements for licensure. In addition to the general requirements found in this Chapter, each applicant for licensure by interstate endorsement as a long term care administrator shall meet the requirements of this Section.

(1) The Board Department permits licensure for candidates for Nursing Home Administrators and RCAL administrators may endorse a candidate for licensure reciprocity from other jurisdictions who have met the following minimum requirements: submitted documentation with evidence meeting the following requirements:

(A) Proof of successful completion of a formal program of study;

(B) Receipt of a Bachelor's degree that meets the minimum requirements;

(C) Proof of passing score on the NAB examination for the specific license type for which the applicant is applying;

(D) Copy of current license(s);

(E) Proof of full-time service as administrator-of-record for the past two (2) consecutive years or service as licensed administrator for the specific license type the applicant is applying for at least two (2) of the last three (3) years;

(F) Disclosure of any pending or past disciplinary actions, enforcements, investigations, reprimand, suspension, and revocation or voluntary surrender of license(s); and

(G) Attestation to the truthfulness of information provided;

(A) Submission to the Board of "Official Proof" of successful completion of a formal program(s) of study and, at a minimum, receipt of a bachelors degree that meets the requirements set forth in 490:10-1-3;

(B) Submission to the Board of evidence of current licensure, in good standing, as a long term care/nursing home administrator, and submission of proof that applicant has:

(i) served full time as the administrator of record for the past two (2) consecutive years in a jurisdiction regulated by a licensing authority; or

(ii) been active as a licensed nursing home administrator in a jurisdiction regulated by a licensing authority for at least two (2) of the past three (3) consecutive years;

(C) Submission to the Board of proof of initial licensure as a long term care/nursing home administrator, including active NAB-NHA Exam scores, and proof that such license is in;

(D) Submission to the Board of full disclosure of any/all pending disciplinary actions or current investigations against applicant as well as any sanctions imposed against applicant's long term care/nursing home administrator license or against any professional license he presently holds or has ever held in any other State or jurisdiction, including, but not limited to: revocation; suspension; 'voluntary surrender'; other licensure restriction(s) that limited applicant's practice under such license; or the assessment of monetary penalties or fines or the assessment of additional CEUs by the licensing entity as a result of disciplinary proceedings. Loss of a professional license due to nonrenewal or failure to obtain the required number of annual CEU hours is excepted from the full and complete disclosure otherwise required herein;

(E) Documentation related to current or previous licensure shall be submitted directly to the Board by the state appointed authority(ies) regulating the respective license(s) OR by NAB when the applicant has the HSE credential/qualification; and

(F) Payment of the required fee(s).

(2) The Board Department, in its sole discretion, shall assess the magnitude of any disciplinary action taken by other licensing authorities in its determination of applicant's eligibility for an Oklahoma license. will determine if past actions by regulatory authorities disqualify an applicant from eligibility for Oklahoma licensure in alignment with standards and requirements for Oklahoma licensure.

(3) In accordance with provisions detailed in 59 O.S. 4100.5(B) and (C), the Board will expedite the approval process for endorsement applicants where the license requirements of the other state are substantially equivalent to Oklahoma requirements. All applicants determined eligible for Oklahoma licensure by endorsement, the spouse of an active duty military member, a spouse subject to a military transfer or someone who left employment in another state to accompany the person's spouse to Oklahoma shall be required to sit for and receive a passing score on the Oklahoma State Standards examination and pay the required license fee before a license is granted by the Board through approval of the Executive Director. Only those applicants to whom this applies with a record of any form of disciplinary action by another licensing authority or any other possible negative indicator shall be required to be approved by a vote of the Board. It shall be the sole responsibility of the applicant to notify staff if this expedited pathway to licensure per Title 59 provisions applies to them and to provide satisfactory evidence of the same. A Temporary License may be issued (fees shall not be waived) for those to whom this applies, at their request, upon a complete application and all qualifications being met except having passed the applicable State Standards Examination. The Temporary license shall expire after no more than sixty (60) days from the date of issuance and may only be issued one time per applicant.

(b) In addition to the general requirements found in this Chapter, each applicant for licensure by interstate endorsement as a residential care/assisted living (RCAL) administrator shall meet the requirements of this Section.

~~(1) The Board permits licensure for candidates for RCAL Administrators from other jurisdictions who have met the following minimum requirements.~~

~~(A) Submission to the Board of "Official Proof" of successful completion of a formal program(s) of study and, at a minimum, receipt of a high school diploma; meeting the requirements of proof for a bachelors degree meeting the requirements set forth in 490:10-1-3 exceeds the high school diploma minimum requirement.;~~

~~(B) Submission to the Board of evidence of current licensure, in good standing, as a long term care/RCAL administrator, and submission of proof that applicant has:~~

~~(i) served full time as the administrator of record for the past two (2) consecutive years in a jurisdiction regulated by a licensing authority.;~~

~~(ii) been active as a licensed RCAL administrator in a jurisdiction regulated by a licensing authority for at least two (2) of the past three (3) consecutive years;~~

~~(C) Submission to the Board of proof of initial licensure as a long term care/RCAL administrator, including active NAB RCAL Exam scores, and proof that such license is in good standing with that licensing authority;~~

~~(D) Submission to the Board of full disclosure of any/all pending disciplinary actions or current investigations against applicant as well as any sanctions imposed against applicant's long term care/RCAL administrator license or against any professional license he presently holds or has ever held in any other State or jurisdiction, including, but not limited to: revocation; suspension; 'voluntary surrender'; other licensure restriction(s) that limited applicant's practice under such license; or the assessment of monetary penalties or fines or the assessment of additional CEUs by the licensing entity as a result of disciplinary proceedings. Loss of a professional license due to nonrenewal or failure to obtain the required number of annual CEU hours is excepted from the full and complete disclosure otherwise required herein;~~

~~(E) Documentation related to current or previous licensure shall be submitted directly to the Board by the state appointed authority(ies) regulating the respective license(s); and~~

~~(F) Payment of the required fee(s).~~

~~(e) There is typically no licensure by endorsement allowance for licensure for the RC license or the Adult Day Care License. All out of state licensure applications for these licensure types (except NHAs from other states applying for one these licenses) shall be treated as initial licensures with the exception of individuals who previously passed a required NAB sanctioned exam, shall not be required to re-take that exam, however these individuals must provide proof of having passed that exam if/when required to meet Oklahoma licensure requirements. However, a person licensed in another jurisdiction as a NHA or equivalent but who does not have a bachelor's degree may be eligible to apply for the RCAL, RC or Adult Day Care Administrators license (or to be certified as a CAA) in Oklahoma if they have met all other requirements (experience, license in good standing, NAB scores, fees paid).~~

~~(d)(b) In accordance with requirements detailed in 59 O.S. 4100.5(A), it shall be incumbent on the applicant to notify OSBELTCA Staff during the application process if the applicant is the spouse of a military service member on active duty in Oklahoma, or is claiming permanent residency in the state for six (6) months prior to active duty or during the period of active duty. Staff will expedite the process to the extent possible. Approval of the license will be in accordance with OAC 490:10-1-4(a)(4) above. The applicant shall indicate on the licensure application if applying under Title 59 military reciprocity pathway. The Department will comply with all military reciprocity requirements.~~

~~(c) Endorsement will be given to the applicant by the Department if the reciprocity process shows the applicant completed substantially equivalent requirements in the state in which they are currently licensed.~~

**310:679-10-4.1. Requirements for registration for licensure reciprocity for long-term long-term care-administrators [REVOKED]**

~~(a) In addition to the general requirements found in this Chapter and upon the applicant fully proving eligibility for licensure by endorsement (they must meet all the same requirement as outlined in 10-1-4), each applicant registering their license from another state to work in Oklahoma with that license shall be required to pay an application fee to begin the process of registering their out-of-state license in Oklahoma. Registrants will be required agree to comply with and culpable for Oklahoma and federal laws applicable to the facilities where they are employed as well as for the laws applicable to licensed Oklahoma long-term care administrators. Upon receipt of the required documents, and receipt of a registration fee equivalent to the licensure fee, the Executive Director may approve the registration so long as there are no negative indicators, or otherwise the application will have to be approved by the Board (similar to the licensure by endorsement process).~~

~~(b) Renewals of the registrations will also follow similar procedures to licensure renewals expiring at the end of the calendar year and being renewed with a renewal fee equivalent to licensure fees. Should the original license lapse or be vacated for any reason, the registration for use in Oklahoma will be considered invalidated.~~

~~Any violations of Oklahoma law as determined by the Board through the probable cause process can result in the same penalties as well as being reported to the NPDB and/or the jurisdiction where the original license(s) is/are held.~~

**310:679-10-5. Requirements for a provisional license as a nursing home administrator or residential care/assisted living (RC/AL) administrator Provisional license requirements**

~~(a) To fill a position of administrator that unexpectedly becomes vacant, the Board~~ The department may grant one (1) provisional license for a single period not to exceed six (6) months to fill an unexpected vacancy at a facility. The ~~Once a provisional license has been granted, the department may not grant additional provisional licenses for the same facility within a one-year period of issuance. shall not grant another provisional license to fill a vacancy at the same facility for a period of one year after the date the provisional license is granted.~~

~~(b) Provisional license applicants must meet all general licensure requirements outlined in OAC 310:679-10-2.1. In addition to the general requirements found in this Chapter each applicant for a provisional license shall meet the requirements of this Section.~~

~~(c) A provisional license may be granted to a person who does may not meet all of the licensing training and testing requirements established by the Board~~ Department, but who:

~~(1) For a provisional nursing home administrator license, has~~ Has successfully completed a formal program(s) of study and, ~~at a minimum, received~~ holds a bachelor's degree that meets the requirements set forth in 490:10-1-3(b)(1)(A) or (B);

~~(2) Has obtained the services of a documentation that a currently-licensed Oklahoma long-term long-term care administrator, with a minimum of two (2) years experience as a licensed administrator in Oklahoma in the same facility type as the provisional licensee, to~~ will act as an on-site consultant to the provisional licensee;

~~(3) Has provided the Board with satisfactory evidence indicating he has~~ documentation showing at least two (2) years of experience in a long-term long-term care facility;

~~(4) Has received a passing score on the current applicable Oklahoma State Standards examination;~~  
~~and~~

~~(5) Has paid the required fee(s) submitted a correctly completed application; and~~

~~(6) Paid the applicable application fee.~~

~~(d) A provisional license shall not be issued to a current AIT and/or AU student unless that student/AIT had the applicant previously passed the NAB NHA exam.~~

~~(e) The consultant administrator to a provisional licensee must have been employed as an administrator in a comparable long-term care facility in Oklahoma for a minimum of the last two (2) years.~~

~~(f) (e) The consultant administrator to a provisional licensee shall:~~

- (1) Provide direct supervision of the provisional licensee for at least eight (8) hours per week with no more than 10 calendar days lapsing between consultant visits to the provisional licensee's facility; and
- (2) ~~Submit monthly evaluation reports on the provisional licensee to the Board no later than the tenth day of each month for the duration of the provisional license~~ Alert the Department if the provisional licensee is unable to fulfill the administrator requirements; and-
- (3) Notify the Department if they are no longer able to provide supervision to the provisional licensee.

**310:679-10-6. Requirements for restoration from suspended status Restoration of a suspended license**

- (a) ~~A suspended license may be restored once all conditions for restoration have been met. In addition to the general requirements found in this Chapter, each applicant for restoration of a suspended license shall meet the requirements in this Section.~~
- (b) ~~Individuals seeking restoration of a license that has been suspended must petition and appear, in person, before the Board and provide the Board with written documentation that he has complied with all terms of the suspension.~~
- (c) ~~The Board, in its sole discretion, may restore a suspended license after the suspension time has elapsed, upon submission of evidence satisfactory to the Board that the conditions responsible for the suspension no longer exist and that no other reasons exist which warrant continued suspension.~~
- (d) ~~Evidence shall include complete documentation attested to under oath and by witnesses of facts that indicate that the conditions responsible for the suspension no longer exist. Letters of recommendations from employees, officers of courts, or respected members of the individual's community may also be submitted.~~
- (e) ~~Petitioners who have been suspended may be required to complete continuing education hours (in addition to those required for license renewal), and/or specific Administrator In Training (AIT) modules, and/or the portions of or the entire Administrator University curriculum at the discretion of the Board, at the expense of the applicant.~~
- (f) ~~Petitioners who were suspended but allowed their license to lapse while suspended or while pending adjudication of a case that resulted in suspension shall be required, at the time of their petition for reinstatement, to pay the renewal fees for every year they did not renew. If they are unable to show documented proof of completion of the continuing education requirements for the entire period of their suspension, they shall also be subject to the provisions of OAC 490:1-9-5(d) except that the penalty must be complied with (CE accomplished and fines paid) prior to the Board reviewing the petition for reinstatement. The license may however be removed from the former lapsed status and returned to suspended status (requiring annual renewal and annual completion of CE requirements) but meeting these requirements does not obligate the Board to reinstate the license.~~

**PART 3. APPLICATION FOR LONG-TERM LONG-TERM CARE ADMINISTRATOR LICENSURE**

**310:679-10-10. Application for initial licensure, licensure by endorsement, or provisional license timeline**

- (a) ~~Each applicant for licensure as a long term care administrator shall make a verified application on a form furnished by the Board stating the license type for which he is applying and remit a non-refundable application fee as prescribed by the Board at OAC 490:1-7-2.~~
- (b) ~~An application for initial license or for a provisional license is valid concurrent with the time constraints set for licensure following completion of training (see OAC 490:10-1-3 for requirements). Applicants will have twenty-four (24) months to complete all licensure requirements.~~

- (c) ~~(b) An applicant for licensure by endorsement or registering for reciprocity shall be deemed to have abandoned the application if he does not fulfill all requirements for licensure within one year from the date of application. Reciprocity applicants will have one year to complete any licensure requirements to qualify for endorsement.~~
- (d) ~~An application for Administrators University (AU) shall be used as an application for initial licensure. However, if this application is over a year old when all requirements have been met, the Board shall require that the application be updated. Such an application shall be deemed abandoned if it has not been updated within the time restrictions for licensure.~~
- (e) ~~An application for licensure submitted subsequent to the abandonment of a former application shall be treated as a new application and the applicant must meet current requirements for licensure as a long term care administrator.~~
- (f) ~~Upon receipt of an application for licensure, the Board shall request that a criminal history background check be performed on the individual requesting licensure. If the results of a criminal background check reveal that the applicant has been convicted of or pleaded guilty or nolo contendere to any felony or to any misdemeanor involving moral turpitude, the individual's application for licensure may be disapproved and no further action will be taken on the application.~~
- (g) ~~An application is complete when:~~
- ~~(1) the application fee prescribed by the Board at OAC 490:1-7-2 has been remitted and deposited to the Board's credit with the State Treasurer (the date of payment of the application fee establishes the date of the application);~~
  - ~~(2) all documentation required to be submitted along with or in support of the application has been received by the Board;~~
  - ~~(3) the applicant has met all other requirements for an initial license, for licensure by endorsement, for a provisional license or a certification, as applicable, and~~
  - ~~(4) the results of the criminal background check have been received by the Board.~~
- (h) ~~Upon verification of compliance with all requirements, an applicant shall be eligible for consideration by the Board for purposes of licensure as a long term care administrator.~~
- (i) ~~A license will not be issued until all fees are paid in full.~~
- (j) ~~The certificate of license shall be presented at the Board meeting when it is approved, if possible, or mailed to the applicant within seven (7) working days of Board's formal grant of license to the applicant. Applicants are encouraged to attend the Board meeting.~~
- (k) ~~A temporary license may also be applied for in accordance with the applicable provisions in paragraph 10-1-3(d), 10-1-3.1(e), 10-1-3.3(e), or 10-1-3.5(e) at the discretion of the applicant.~~

### **310:679-10-11. Evidence Documentation requirements**

- (a) ~~To satisfy the Board's requirement for evidence verifying educational degree(s) conferred or hours of post-secondary education completed, the applicant shall an official transcript(s) to be sent directly to the Board office from the educational institution(s) that awarded the degree(s) and/or from the educational institution(s) at which the post-secondary education was completed. Transcripts issued to the student, or copies thereof, shall not be accepted.~~
- (b) ~~To satisfy the Board's requirement for evidence indicating experience, the applicant shall submit a declaration signed by a licensed long term care administrator, medical director, director of nurses, or registered nurse who can attest to the applicant's work experience.~~
- If submitting documentation for long-term care work history, the applicant must submit a letter, signed by a licensed long-term care administrator, medical director, director of nursing, or registered nurse on company letterhead attesting to the applicant's long-term care work history.
- (b) A signed affidavit of lawful presence must be submitted with each application.
- (c) For bachelor's or associate's degree documentation, an official copy of the transcript is required.



### **310:679-10-12. National examination examinations**

(a) "NAB Examination(s)" refers to the required examination(s) for a particular license type. Prior to July 2017, NAB conducted only two examinations—one for the NHA and one for the RCAL license types. Many administrators will have single scores from those exams on file. After this date, the examinations were broken into two (2) parts consisting of a "Core" examination and a "Line of Service" or "LOS" module exam, with three (3) different LOS exams possible—the existing NHA and RCAL with HCBS (Home and Community Based Services) being the third LOS "module" added. The "Core" examination items are those items that according to NAB's periodic professional practice analysis have been determined to be "core" to all lines of service as an administrator where the LOS exams or modules are specific to those lines of service. NAB's HSE credential, for example, would require that one will have passed all four (4) of these exams (the "Core" and all three LOS exams). Other licenses may require the Core and a corresponding LOS exam be passed, but viewed as a single exam requirement. It is also possible to simply have a requirement for the Core exam wherein the LOS exams available may not be viewed as wholly compatible with the license/certification type. When one speaks of the NAB Exam, they would typically be referring to the "whole" requirement for an exam or series of exams for the specified license type or credential which explains why it's possible to be referenced in singular or plural. The NAB Core examination consists of items determined to be core to all lines of service as an administrator. This examination is required for all long-term care administrator applicants.

(b) An individual applying for an initial license must receive a passing score on the applicable exam, either the Nursing Home Administrator ("NHA") examination (Core and NHA module) or the Residential Care/Assisted living ("RC/AL") exam (Core and RCAL module), administered by the National Association of Long Term Care Administrator Boards (NAB) (neither is applicable to Residential Care or Adult Day Care administrator applicants). The Board may waive this requirement if the applicant provides evidence that he has successfully passed the appropriate NAB examination at a previous time. The NAB's RC/AL (Residential Care/Assisted living) exam does not meet the requirements for a nursing home administrator license. An applicant showing proper evidence of having the HSE credential shall be considered to have shown evidence that he passed both the NHA and RCAL exams as well as the HCBS exam. An applicant who tested prior to the implementation of the Core and LOS modules shall be considered to have passed the Core as well as either the NHA or RCAL module (or both) depending on the test(s) taken and passed. The Lines of Service module examination is required by certain license types and contains questions specifically related to a particular license type.

(c) An applicant for licensure by endorsement who has previously passed the required NAB examination will not be required to retake the examination if the applicant provides evidence of a passing score. HSE credentialed applicants as well as endorsement applicants who provide evidence of a previous passing score, will be exempt from taking the NAB tests again.

(d) An individual applying for a provisional license shall not be required to pass the applicable NAB examination to be provisionally licensed. Provisional license applicants will not be required to pass the NAB examination before becoming provisionally licensed, so long as all other provisional licensure requirements are met.

(e) Fees for all national examinations shall be in an amount prescribed by and are due are prescribed by and payable to the NAB or its authorized designee.

### **310:679-10-13. State Standards examination Required examinations**

(a) An individual applying for an initial license, licensure by endorsement, or a provisional license, must, prior to the issuance of the respective license, Applicants must receive a passing score on the appropriate pass the applicable State Standards examination for the license for which he is applying prior to a license being issued. There shall be a separate examination for each type of license Each license type requires a separate State Standards examination. First time applicants for initial licensure

shall have received a passing score on the State Standards examination within the twenty four (24) months preceding the month in which the Board will be taking action to license the applicant, and if applicant is not licensed during this 24 month time period, applicant will have to pay all required fees and re-take the examination prior to any future licensing attempts. Applicants for licensure by endorsement reciprocity, applicants for a provisional license and applicants for initial licensure who have previously held an Oklahoma long-term long-term care administrator license must, prior to the issuance of the respective license, successfully pass the current, applicable current State Standards examination. Initial applicants

(1) Applicants for an initial license must take and pass the appropriate applicable State Standards Examination prior to being eligible for an the applicable NAB exam.

(2) Board staff are required to receive the testing results from the testing source to validate the passing scores of all examinations, to include the State Standards Examinations.

(b) The application must be complete and supporting documents required by the Board for licensure must be completed and on file with the Board prior to entering correct before the applicant may begin training and/or prior to being approved or being granted approval to take the applicable examination(s).

(c) The Board will periodically schedule examinations and publish the dates and times in a timely manner on the website. The Department will publish dates and times for testing on the Department website. Applicants are permitted to take the examination during these scheduled examinations or they may opt to take the examination at a testing facility where it is administered. State examinations taken in a testing facility shall be scheduled by the candidate when eligible and shall be may take the exam at a Department-designated location or through a testing center so long as the examinations are administered through the same examination methods and procedures as the NAB examinations are conducted, including but not limited to the use of electronic or online methods of examination.

(d) The Board has determined the A passing score for all State Standards examinations to be is Seventy-Five percent (75%) or greater, and shall apply this standard uniformly to all persons taking the examinations.

(e) Fees for the State Standards examination administered by the Board Department shall be in an amount prescribed by the Board Department at OAC 490:1-7-2. All examination fees must be paid prior to examination.

### **310:679-10-14. Admission to the State Standards and National Examinations [REVOKED]**

(a) Applicants must meet requirements to sit for a state examination. When a NAB examination is required, they must first pass the state exam.

(b) Applicants for licensure by endorsement, for a provisional license and for a certification as an assistant administrator (nursing facility only) are eligible to sit for the State Standards examination on the next scheduled testing date, or pay the appropriate fee for an unscheduled testing date, or they may schedule the examination through a testing facility that administers the examination.

(c) Applicants shall not compromise the NAB or the Oklahoma State Standards examination by disclosing any information, questions, or answers on these examinations. Applicants shall complete a "Test Confidentiality and Attestation" form provided by the Board or an online equivalent.

(d) Failure to observe the confidentiality of a NAB Examination or an Oklahoma State Standards Examination may result in disciplinary action by the Board as outlined in OAC 490:10-5-3(a)(23).

### **310:679-10-15. Application for licensure/certification/registration renewal Renewal requirements**

(a) Each applicant for a renewal of a license, certification or registration shall:

(1) File an application, on the form and in the manner as prescribed by the Board (online), prior to the expiration date of the current license/certification/registration.

(2) Submit evidence, upon request, satisfactory to the Board that the applicant has successfully completed the hours of continuing education as required for license renewal. During the renewal process, licensees certify that they have or will have accomplished the required continuing education requirements during the licensure year. The Board conducts random audits of this accomplishment each year per OAC 490:1-9-5(e).

(3) Be in compliance pursuant to 68 O.S. Section 238.1 with State income tax requirements. If a licensee whose license is on 'active' status is found to be in non-compliance with these State income tax requirements:

(A) such license shall not be renewed; and

(B) licensee shall not have recourse against the Board for non-renewal of his license.

(4) Submit to a criminal background check. Concurrent with the annual CE audits conducted per OAC 490:1-9-5(e), the Board will randomly select not less than a five (5%) percent sample from all renewed licenses against which sample the Board will perform criminal background checks. If the results of a criminal background check reveal that a licensee has been convicted of or pleaded guilty or *nolo contendere* to any misdemeanor involving moral turpitude or to any felony, or to any of the barrier offenses listed at OAC 490:10-1-2.1 the licensee will be subject to Board sanction(s), including license suspension or revocation.

(5) Remit the Annual License Renewal fee as prescribed by the Board at OAC 490:1-7-2 and ensure all outstanding fees and fines owed to the Board have been paid. If a licensee has outstanding fees or fines owed to the Board, licensee shall not be permitted to renew his license until the same have been paid in full to the Board, provided that such payment is made prior to the expiration of the current license. If such payment is not made prior to the expiration date of the current license, licensee no longer holds a valid license and licensee is considered to have abandoned his license and the practice of long term care administration, and the Board shall take action to formally vacate his license. If this occurs, and if he wishes to resume the practice of long term care administration, he must re-apply to the Board, fully satisfy any/all outstanding fees or fines owed to the Board, and meet current requirements for initial licensure as a long term care administrator.

(b) A suspended license is an 'active' license against which the Board has taken disciplinary action and suspended licensee's ability to engage in the practice of long term care administration. As such, a suspended license shall be subject to expiration and shall be renewed as provided in this Section. Renewal of a suspended license shall not entitle the licensee to engage in the practice of long term care administration until the suspension is removed by the Board and the privilege to practice long term care administration is restored by the Board.

(c) It is the personal responsibility of each licensee to renew his license prior to the expiration date of the current license and, further, to ensure that the information he provides for purposes of renewal is true and accurate.

(d) If the license is not renewed by the last day of the current licensing year, a late fee of \$100 per week shall be assessed wherein the first day equates to the first week (e.g., week 2 starts on the 8<sup>th</sup> day...) up until the first Board meeting of the year when all non-renewed licenses at that point shall be declared lapsed by the Board and those licensees shall be considered to have abandoned their licenses and do not hold a valid license as of 12:01 a.m. on the day after expiration and shall not hold a position or function in the capacity as a long term care administrator in Oklahoma.

(1) Credential holders (licensees, certificate holders, registrants) may actively opt out of renewing their credential for the following year by acknowledging that they have agreed to having their license vacated by the Board and are waiving the notices sent by Board staff regarding late renewals. The decision to have the credential vacated in these cases is made by the credential holder.

(2) Should the credential holder who actively opted not to renew later decide to renew after the expiration date but before the Board has taken action to vacate other credentials for the year, they will follow the same procedures to renew late as those who failed to renew but take responsibility to do so without notifications from Board Staff, having waived such notices upon actively opting to not renew.

(e) All lapsed licensees or certificate holders, following this declaration, (if he wishes to resume the practice of long term care administration) must re-apply to the Board and meet current requirements for initial licensure as a long term care administrator, provided that the individual petitioner can provide evidence to the Board that he complied with all lawful requirements for the retention or renewal of the license.

(f) All non-renewed licenses shall be presented to the Board at a meeting of the Board. The Board shall take formal action at that meeting to vacate all non-renewed licenses.

(g) Following this Board meeting, a listing of all licenses vacated by the Board shall be submitted to the Oklahoma State Department of Health, Long Term Care Services Division.

(h) An individual who practices after the expiration (lapsed or vacated) of his license is practicing without a license and is subject to disciplinary action and/or sanctions as determined by the Board.

(i) A license that is vacated with an open case is required to be reported to the National Practitioners Data Base (NPDB) and included in the Board's Complaint Registry.

(j) Title 59 O.S. 4100.6(A), (B), (C) and (D), notwithstanding any other statutes to the contrary, provides for the automatic extension of license or certification for active duty military service members. The licensee to whom this applies shall be required to notify OSBELTCA staff and provide satisfactory evidence they are active duty and the status of their license shall become "Military."

(1) The license must be in good standing at the time the status is changed.

(2) The licensee must keep the Board informed of address changes and any changes in their active duty status. Failure to keep the Board informed in a timely manner shall cause the status of the license to be vacated by an action of the Board.

(3) While the active duty member is deployed and circumstances with military duty prevent obtaining training, the license will be renewed annually by staff without the payment of renewal fees and without a continuing education requirement.

(4) The license or certificate issued/renewed pursuant to this paragraph may be continued as long as the licensee or certificate holder is a member of the Armed Forces of the United States on active duty and for a period of at least one (1) year after discharge from active duty.

(a) The renewal applicant shall submit an application with the following information and supporting documentation:

(1) Updated contact information;

(2) Current location where operating as an administrator;

(3) If applicable, a list of interns to whom they have served as a preceptor with dates; and

(4) An affidavit of lawful presence.

(b) The renewal applicant shall submit the required fee at the time of renewal.

### **310:679-10-16. Provisional licensure term**

A provisional license shall expire six (6) months from the effective date of the provisional license. Provisional licenses are non-renewable and shall not be renewed.

## **PART 5. DISCIPLINE**

### **310:679-10-20. Disciplinary action**

(a) This subchapter applies to all long term care administrators (licensed and/or registered), certified assistant administrators (CAAs), any person applying for licensure, registration or certification, unlicensed persons acting as administrators without a license or certification, and any person acting as administrator with a revoked, suspended, surrendered, lapsed or vacated license.

(b) The Board may take action against a licensed/registered administrator or an unlicensed person acting as administrator, and may deny an initial application; deny an application for reinstatement; deny a licensure by endorsement application; deny a renewal application; suspend or revoke a long term care administrator license or certification, a provisional license, a preceptor certification, an assistant administrator's certification, or an AIT internship training permit; warn; censure; reprimand; impose

~~administrative fines and/or costs including attorney fees, impose probation or use other remedies that may be considered to be less than suspension or revocation upon satisfactory evidence of any of the following~~ The following reasons may disqualify an initial or renewal applicant from licensure and/or result in enforcement by the Commissioner of Health:

- (1) Obtaining or attempting to obtain a license, registration or certificate by fraud, deceit, or misrepresentation; or misrepresenting oneself as holding a license or certification when they do not.
- (2) Conviction of or a plea of guilty or *nolo contendere* to any felony or to any misdemeanor involving moral turpitude, or any barrier offense as outlined in this chapter.
- (3) Use of legally-prescribed or illegal drugs (narcotics or other dangerous drugs) or alcohol or the dependence on legally-prescribed drugs or illegal drugs or alcohol, or gambling, if such use or dependence, or such gambling, or the behaviors related to or resulting from such use or dependence compromise the individual's ability or capacity to fulfill his duties or responsibilities in the ~~long term~~ long-term care facility, or if the same constitute(s) a criminal offense.
- (4) Commitment to a mental institution or judicial determination of incompetence.
- (5) Gross negligence, or negligence that constitutes a danger to the health, welfare or safety of the residents or the public.
- (6) Physical or verbal abuse of a resident or misappropriation of a resident's funds or property; failure to report an allegation of physical or verbal abuse of a resident or misappropriation of a resident's funds or property to appropriate state authorities as required by law.
- (7) Fraudulent, deceptive or dishonest conduct in the management of a ~~long term~~ long-term care facility, or other conduct unbecoming to a person licensed or subject to licensure under this law when, in the judgment of the Board Department, such conduct is detrimental to the best interest of the ~~long term~~ long-term care field, the ~~long term~~ long-term care administrator profession and/or the public.
- (8) Except as otherwise permitted in this Chapter, concurrently serving or acting as the administrator of more than one nursing facility or assisted living facility; or exceeding the conditions placed on administrators of ICF/IID facilities with 16 beds or less as stated in this Chapter; or otherwise serving as an administrator beyond the scope of their licensed authority.
- (9) Failure to comply with State or federal requirements applicable to the facility.
- (10) Failure to comply with rules and requirements for administrators established by the Board Department, including the Administrator Code of Ethics and Administrator Responsibilities adopted by the Board Department.
- (11) Evidence that the administrator has paid, given, has caused to be paid or given or offered to pay or to give to any person a commission or other valuable consideration for the solicitation or procurement, either directly or indirectly, of long-term care facility patronage.
- (12) Intentional retaliation or discrimination against any resident or employee for contacting or providing information to any State official, licensing agency or regulatory agency.
- (13) Failure to provide verification of continuing education hours.
- (14) Sexual abuse, sexual harassment, or sexual exploitation of any resident, employee, trainee, volunteer, consultant, or visitor to the facility in which the licensee practices.
- (15) Falsification of any records or documents relating to the operation of a long-term care facility; falsification of records or documents submitted to the Department or any other state or federal agency; falsification of a resident's records, or causing a resident's records to be falsified.
- (16) Use of the licensee's professional status, title, position, or relationship as a long-term care facility administrator to coerce, improperly influence, or obtain money, property, or services from a resident, resident's family member, employee, visitor, or any person served by or doing business with the facility that employs the administrator.
- (17) Interfering with, refusing to participate in, or impeding any investigation, inspection, or disciplinary proceeding authorized by Statute.
- (18) Violation of any disciplinary order, consent agreement, term of suspension, condition, stipulation, or any other limitation imposed on the licensee by the Department.

- (19) Unlicensed practice, practice on a revoked, suspended, or lapsed license; or practice on a provisional license without the use of an on-site consultant or practice as a Certified Assistant Administrator without the oversight of an Administrator-of-Record.
- (20) Failure to pay fees or fines established or imposed by the Department.
- (21) Knowingly aiding, assisting, or advising a person to unlawfully practice as an administrator without a required license.
- (22) Failure to adequately supervise an assistant administrator and/or failure to assure that the assistant administrator complies with state and federal requirements applicable to the facility.
- (23) Conduct that violates the security of any licensure examination materials.
- (24) Coercion or harassment, or the attempt to coerce or harass, or the use of any other form of uninvited solicitation directed toward a resident of a long-term care facility or toward a member of the resident's family or the resident's guardian for the purpose of attempting to persuade the resident to change ~~long-term~~ long-term care facilities.
- (25) Failure to notify the Department of a change of name, business or personal mailing address(es), or change of employment within fifteen (15) calendar days of the occurrence.
- (26) Coercion or harassment of, or the attempt to coerce or harass, a member of the Department, a Department employee or an authorized agent or representative of the Department as related to any matter or issue over which the Department has authority.
- (27) Exclusion by the Department of Health and Human Services Office of Inspector General from participation in any capacity in the Medicare, Medicaid, and all Federal health care programs as defined in section 1128B(f) of the Social Security Act.

~~(c) When the Board places a license in probationary status, it may require the licensee to have a "consultant" administrator during the probationary period. The consultant shall agree to the terms of the consultant role as defined in 490:10-1-5(c)(2), meet the qualifications in 490:10-1-5(e), and agree to the requirements of a consultant as listed at 490:10-1-5(f)(1) and (2).~~

~~(d) The Board may stipulate requirements for reinstatement in disciplinary orders that are consistent with 490:10-1-11 requirements for reinstatement from suspended status.~~

### **310:679-10-21. Summary suspension**

~~(a) In the course of an investigation, The Board the Department may order a summary suspension of an administrator's license/certification license or certification or an Administrator in Training. Or an intern/trainee Administrator In Training internship permit, if, in the course of an investigation, it is determined that the respondent a licensee, certificate holder, or AIT candidate for licensure has engaged in conduct of a nature that is detrimental to the health, safety, or welfare of one-or-more residents or to the health, safety or welfare of the public, or detrimental to the profession of long-term long-term care administration, and which conduct necessitates immediate action to prevent further harm. The Department shall immediately notify the licensee, certificate holder, or AIT candidate of the order. The licensee, certificate holder, or AIT candidate shall have the right to contest the order at an Administrative hearing.~~

~~(b) The Board shall be charged with making the determination that an emergency exists and that a summary suspension is necessary, and shall incorporate in it's Order that public health, safety or welfare requires emergency action.~~

~~(c) Proceedings for revocation or other appropriate action shall be promptly instituted and a determination promptly rendered by the Board.~~

## **PART 7. ADMINISTRATOR UNIVERSITY ADMINISTRATOR TRAINING REQUIREMENTS**

### **310:679-10-25. General provisions**

- (a) ~~The Board~~ If a waiver is not granted according to specifications in this chapter, applicants are required to complete Department-approved trainings prior to being eligible for a license. NAB-approved trainings may be taken at any time to satisfy the training requirement. ~~is committed to providing learning opportunities to individuals interested in pursuing a career in long term care administration, and enhancing the development of licensed administrators. To further this objective, the Board has established an Administrator University (AU) for nursing home administrator and Certified Assistant Administrator (CAA) applicants with curriculum designed specifically to educate individuals with knowledge and skills that may assist them in becoming a successful nursing home and/or ICF/MR administrator or CAA. The Board will periodically review and approve or establish training for residential care/assisted living and adult day care administrators as deemed necessary.~~
- (b) Internships are required for applicants without waivers and for license types that require an internship as outlined in this chapter. Effective August 1, 2006, individuals applying to become nursing home administrators shall successfully complete Administrator University (AU) prior to being licensed. Effective January 1, 2019, individuals applying to become Certified Assistant Administrators shall successfully complete AU prior to being certified. The Board presumptively approves NAB-approved entry level training designed for Nursing Home Administrators for either the NHA or CAA requirement to complete AU.
- (c) ~~Administrators who are already licensed in the State of Oklahoma as a nursing home administrator may enter Administrator University at their own expense for enhanced training if classroom space is available.~~
- (d) ~~Upon mutual agreement of the Board and licensee, specific classes or the entire Administrator University curriculum may be imposed as a penalty for the violation of rules and/or standards established by the Board.~~
- (e) ~~The Board may also designate certain days or classes within the curriculum as eligible for continuing education (CE) credit and may charge an appropriate fee (as a workshop) for administrators to attend on a space available basis.~~
- (f) ~~The application fee and Administrator University fee prescribed by the Board at OAC 490:1-7-2 shall be submitted during the online application process prior to admission to Administrator University.~~
- (g) ~~An applicant for licensure who successfully completes Administrator University (AU) will not have to repeat Administrator University if he is successfully licensed in Oklahoma as a long term care administrator within twenty-four (24) months after the completion of AU which is marked by the scheduled date of class for that particular class.~~
- (h) ~~If applicant fails to become licensed/certified as an Oklahoma long term care administrator during this 24-month time frame, applicant will have to pay all applicable fees and repeat Administrator University prior to any future licensing/certification attempts.~~

## **PART 8. ADMINISTRATOR IN TRAINING (AIT) INTERNSHIP PROGRAM FOR NURSING HOME ADMINISTRATORS AND CERTIFIED ASSISTANT ADMINISTRATORS**

### **310:679-10-29. Application Requirements**

(a) ~~The applicant shall submit to the Board an~~ An application shall be submitted to the Department, which shall contain such ~~containing the following information and documentation: as name, education, employment history, information pertaining to moral character, any other information the Board requires, and an affidavit stating that the applicant, if granted a license, will obey the laws of the State and the rules of the Board, and will maintain the honor and dignity of the profession. The application for licensure and/or to attend AU meets this requirement.~~

(1) Name;

(2) Contact Information;

(3) Educational history as required by license type;

(4) Signed letter outlining applicable work history if required by license type; and

(5) Affidavit of Lawful Presence.

- (b) ~~To satisfy the Board's requirement for evidence verifying educational degree(s) conferred or hours of post-secondary education completed, the found at OAC 490:10-3-1.1.~~
- (c) ~~The applicant will be subjected to a criminal background check as described in this Chapter prior to beginning an AIT internship. A background check will be completed on all applicants.~~
- (d) ~~(c) A fee as prescribed by the Board Department at OAC 490:1-7-2 shall be submitted with the application.~~
- (e) ~~(d) An applicant who successfully completes a Board approved AIT internship will not have to repeat the internship if he is successfully licensed/certified as a long term care administrator/CAA in Oklahoma within the will have twenty-four (24) months to complete the required training and internship. following the month in which he first began his internship, and if applicant fails to secure licensure/certification within this 24 month time frame, applicant will have to pay all applicable fees and serve a new AIT internship prior to any future licensing/certification attempts. A one-time extension may be granted by petitioning the Department if the applicant submits a formal request outlining the reasons for the delay. The Department has discretion to approve or deny extension requests and will notify the applicant of the decision.~~

**310:679-10-30. Training permit Required internship**

- (a) ~~In order for a training permit to be issued, the facility or facilities at which the AIT internship is to be served must be Internship permits may be granted to applicants who have been approved by facilities which are:~~
- ~~(1) licensed by the Oklahoma State Department of Health as a long-term long-term care facility; and~~
  - ~~(2) in substantial compliance with the rules and regulations governing licensure and operation of long-term long-term care facilities.~~
- (b) ~~After approval of the proposed AIT internship, the Board shall issue an applicable AIT internship training permit to the applicant (the 'intern/trainee'), one that shall be valid for a maximum one-year time period beginning on the date the permit is issued.~~
- (c) ~~Should the intern/trainee not maintain acceptable standards and submit the required reports, the Board shall place the intern/trainee on probation or may rescind the AIT internship training permit. Interns must submit all required documentation to the Department.~~

**310:679-10-31. Preceptor selection Identification of preceptor**

- (a) ~~From a list of preceptors 'certified' by the Board, the intern/trainee may indicate his choice. Applicants are required to submit information on a proposed preceptor for review by the Department.~~
- (b) ~~It shall be the responsibility of the Board to contact a preceptor to determine if the preceptor will accept the applicant. Applicants must submit required documentation for their selected preceptor to include:~~
- ~~(1) Name of preceptor;~~
  - ~~(2) License number of preceptor;~~
  - ~~(3) Name of the facility where the preceptor is an administrator;~~
  - ~~(4) Address of facility where the preceptor is an administrator;~~
  - ~~(5) Phone number of preceptor;~~
  - ~~(6) Email address of preceptor; and~~
  - ~~(7) Signature of the preceptor on preceptor attestation form.~~
- (c) ~~Once a preceptor accepts an AIT intern/trainee, any subsequent changes must be approved by the Board. Once the internship has begun, if a change in preceptor becomes necessary, interns are required to notify the Department.~~
- (d) ~~The preceptor shall notify the Board of the date of acceptance and the date of any discontinuance of AIT internship. Approvals for a change in preceptor are at the discretion of the Department.~~



(e) Applicants may access the list of qualified preceptors from the Department website if they do not have a preceptor identified. The Department will provide technical assistance for those needing assistance with preceptor identification.

### **310:679-10-32. Preceptor qualifications**

~~(a) A licensed administrator wishing to be certified as a preceptor for the AIT program shall apply online and pay the required fees. interested in being a preceptor for an administrator intern must:~~

~~(b) To be certified as a preceptor, the applicant shall:~~

~~(1) exemplify the highest ethical and professional standards as an administrator for at least the preceding twenty four (24) consecutive months;~~

~~(2) be licensed and be able to document employment as: Hold a current Oklahoma administrator license;~~

~~(A) an Oklahoma long term care administrator for at least twenty four (24) months of the preceding sixty (60) months; OR~~

~~(B) an Oklahoma long term care administrator for at least twenty four (24) of the preceding sixty (60) months and supervising administrators in multiple locations wherein an AIT could be appropriately trained under his direct and/or indirect supervision, e.g., as a regional supervisor or operations officer with multiple homes; OR~~

~~(C) an Oklahoma long term care administrator for at least twenty four (24) months of the preceding sixty (60) months currently serving as an assistant administrator in a Veterans Administration (ODVA) home (not the administrator of record);~~

~~(2) Have been operating as a licensed administrator for the twenty-four (24) months immediately preceding the internship or thirty-six (36) of the last sixty (60) months;~~

~~(3) successfully complete preceptor training that meets the requirements established by the Board; and Be currently working as an administrator in a licensed Oklahoma facility;~~

~~(4) has not been the subject of any action by any Board or licensing authority which resulted in formal reprimand, suspension or revocation of license, within the preceding twenty four (24) consecutive months; Not had an enforcement action against their license by the Department in the thirty-six (36) months immediately prior to the start of the internship; and~~

~~(5) has not been the subject to any other action by any Board or licensing authority which resulted in a Board order prohibiting serving as a Preceptor. Is not currently subject to disciplinary or enforcement action in another state.~~

~~(e) If the Board imposes a disqualifying sanction against an administrator, such administrator may not be eligible to be certified as a preceptor for twenty four (24) months from the date of the sanction, as specified in the sanction's final or agreed order.~~

~~(d) Preceptors shall be certified for a period of thirty six (36) months if active (who trained at least one trainee during the first twenty four (24) months of their preceptor ship or twenty four (24) months if inactive). Preceptors may be re-certified at the discretion of the Board. There shall be an automatic extension of the certification period for any preceptor whose certification expires while overseeing an AIT intern/trainee, provided that the preceptor otherwise meets all other requirements for certification and those governing assignment of a preceptor to an AIT intern/trainee. The extension shall be granted to the end of the training period for the particular intern/trainee.~~

~~(b) A licensed administrator interested in becoming a preceptor, must fill out all required information on the preceptor section of the renewal application.~~

### **310:679-10-33. Preceptor designation/assignment to an AIT intern/trainee Preceptor requirements**

~~In order to To be designated/assigned designated as the a preceptor for an AIT training program intern, a 'certified' preceptor licensed long-term care administrator must:~~

~~(1) be either the full-time administrator-of-record of the facility at which the AIT intern/trainee where the internship will take place, would be completing his internship rotation, OR be a licensed~~

administrator and the direct supervisor of the administrators(s)-of-record at the facility(s) at which the AIT intern/trainee where the internship will take place his internship rotation;

(2) agree to give the intern/trainee intern an opportunity to observe and take part in the managerial tasks associated with the operation of a facility, acquaint the intern/trainee intern with the organization and operation of all the various departments of the facility by permitting his observation and/or participation the intern to observe and participate in department activities subject to the training which align with the intern's Department-approved training program approved by the Board;

(3) hold regular meetings and/or discussions with the intern/trainee regularly meet with the intern to discuss progress to date, consider potential refinements to hours spent in each module/domain of practice (in preparation for the NAB NHA exam), and interview him upon completion of the internship to mutually discuss noted review the interns strengths and weaknesses; and

(4) upon satisfactory completion of the program, provide complete the Board Department-required attestation form a letter certifying the completion of the required internship hours once the intern has satisfactorily completed all internship hours.

### **310:679-10-34. Curriculum for nursing home administrator and certified assistant administrator (CAA) AITs Individualized internship requirements**

(a) The preceptor, in conjunction with the AIT intern/trainee intern, will assess and evaluate the intern's background, training and experience of the intern/trainee to determine specific areas of concentration within the domains of practice and departmental rotations.

(b) The preceptor will submit to the Board, prior to or within the first week of an AIT internship, an individualized curriculum for the intern/trainee, one that meets the Board's AIT internship requirements. The Board requires that the training be carried out in modules as delineated in the training materials keep track of the training for each module and provide written documentation upon request by the Department.

### **310:679-10-35. Module reports for nursing home administrator and certified assistant administrator (CAA) AITs Documentation of internship requirements**

(a) At the conclusion of each module of training, the The preceptor will submit to the Board an evaluation of progress on a form approved by the Board for that purpose document the intern's progress through each module of training.

(b) Module reports must be received in the Board's office within ten (10) working days of completion of the module Module completion will be documented on the checklist submitted by the preceptor to the Department and that accompanies the final preceptor intern review form.

### **310:679-10-36. Preceptor's final report Preceptor CEUs**

(a) At the end of the approved AIT internship, the preceptor will submit a final report and an evaluation of the intern/trainee on the form(s) and in the manner as prescribed by the Board. The preceptor will sign the form(s). The form(s) will indicate whether or not the intern/trainee has satisfactorily completed the prescribed internship program.

(b) The reports will be filed in the intern/trainee's record and will become a permanent part of the record in the individual's file.

(c) (a) Preceptors for nursing home AIT candidates shall interns may be awarded:

(1) 3 CEUs per each for every 560 hour trainee completed hours completed; or

(2) 4 CEUs per each 700 hour trainee completed; and

(3) (awarded in the year the training was completed) and may earn up Up to 12 CEUs in this manner per calendar year (credited for a maximum of 3 students in any one calendar year).

(d) (b) CEU credit is awarded for the year the training was completed.

### **310:679-10-37. Preceptor's checklist**

(a) The preceptor will maintain a current program completion checklist in the facility on the intern/trainee on a form approved by the Board Department to be reviewed by the Board Department upon request.

(b) The program completion checklist shall will be submitted to the Board along with the final report and evaluation Department with the final evaluation form.

**310:679-10-38. ~~Change of status and discontinuance~~ Preceptor concerns**

(a) If the intern/trainee wishes to change to another preceptor, or discontinues the training, the intern/trainee must notify the Board prior to making this change.

(b) The notification requires the name of the intern/trainee and preceptor, the change requested, the effective date, reasons for the change, and any other information that the Board may request. Either the intern/trainee or the preceptor must sign the notification.

(c) If a substandard quality of care finding in a facility is upheld disciplinary or enforcement action is taken against an administrator who is a certified serving as a preceptor working with an intern/trainee, the Board Department shall evaluate the situation and determine if there is a need to assist the intern/trainee in finding a new preceptor and may, at its sole discretion, direct that a new preceptor be assigned to the AIT reassign the intern to a different preceptor.

**310:679-10-39. Dismissal from program Intern concerns**

(a) The preceptor will inform the intern/trainee of his performance as the program progresses.

(b) If the intern's/trainee's performance is not acceptable, the preceptor will so inform him, and the intern/trainee will be given an opportunity to correct the deficiencies.

(c) If the intern/trainee does not correct the deficiencies, the preceptor will notify Board staff of the same, and a member of the Board's staff will notify the intern/trainee that he will be dismissed from the program.

(d) If the intern/trainee violates any of the Board's rules or regulations, or if the intern/trainee violates any of the policies or procedures of the facility(ies) at which he is serving his AIT training, the preceptor or authorized representatives of the facility(ies) will notify the Board's staff of the same, and the Board staff will notify the intern/trainee that he can no longer participate in the program.

(e) The intern/trainee may appeal dismissal from the program by petitioning the full Board for a formal hearing. When a preceptor has concerns about an intern's ability to complete the internship requirements and/or ethical concerns that may affect the intern's ability to become a licensed administrator, the preceptor must notify the Department.

**310:679-10-40. Compensation of AIT Interns/Trainees for interns**

The facility or facilities in which the intern/trainee is training may compensate the intern/trainee an intern, but is/are not required to do so. The Department does not regulate compensation agreements on behalf of the intern or the preceptor.

**310:679-10-41. AIT time on the job Internship requirements**

(a) For applicants required to complete internships, the number of hours are:

(1) 560 hours for applicants who hold a degree in a filed related to NAB defined domains or practice or who have experience in long-term care for two (2) of the last five (5) years; and

(2) 700 hours for all other applicants who are required to complete an internship.

The intern/trainee with a degree in a field related to any of the NAB defined domains of practice, OR with experience in long term care for 2 of the last 5 years shall serve a 560 hour internship, unless in the opinion of the Board or preceptor, the intern/trainee requires additional hours of training; or unless the hours required to complete the internship, are otherwise reduced by formal action of the Board. All others (with a degree not related to a NAB defined domain of practice or without experience in long term care for 2 of the last 5 years) shall serve a minimum of a 700 hour internship with the same exceptions noted wherein additional hours are required in the opinion of the Board or preceptor.

(b) ~~An internship that has been discontinued due to a period of active duty military service of the intern/trainee shall be allowed to be completed within one (1) year after the intern/trainee has completed his military service obligation. If this time frame cannot be met by the intern/trainee, the previously started internship shall be cancelled by the Board and he will have to reapply to the Board for a new internship and pay all applicable fees. If an internship has been discontinued due to active duty military service of the preceptor, the Board will work with the intern/trainee to secure another preceptor. Applicants completing an internship who are called to active military duty may request stoppage on the twenty-four (24) month timeline. The Department may halt the timeline for military members called to active duty if the pause in the timeline is not likely to impede the applicant's ability to perform the required administrator duties once they are a licensed administrator.~~

(c) ~~An internship that has been discontinued for any purpose other than military service, and such discontinuance exceeds one year from the date of the beginning of the discontinuance, that internship will be cancelled by the Board, and the AIT intern/trainee shall be required to reapply to the Board for a new internship and pay all applicable fees.~~

(d) ~~Only one discontinuance is allowed.~~

(e) ~~560 hour internships shall be completed in not less than fourteen over the course of (14) consecutive weeks nor and not more than twelve (12) consecutive months. 700 hour internships shall be completed in not less than over the course of seventeen and a half (17.5) consecutive weeks nor and not more than fifteen (15) consecutive months. months (where no No more than 40 hours during in any one week of the program is ever permitted). permitted.~~

(f) ~~This section shall be subject to the requirements of any other provisions of law.~~

(d) ~~An applicant may apply for a one-time extension for the twenty-four (24) month timeline.~~

~~Approval is at the discretion of the Department.~~

(g) (e) ~~The intern/trainee must complete the internship must be completed in a facility or facilities that is (are)-licensed in Oklahoma for the level of care equivalent to the administrators license/certification license or certification being sought.~~

### **310:679-10-42. AIT Internship exempt status exemption**

The Board ~~Department~~, in its sole discretion, may waive the AIT internship requirement, ~~entirely, or portions thereof wholly or in part, for those applicants who show evidence of who have provided documentation demonstrating the successful completion of a formal internship program that meets or exceeds Board Department requirements, such as in another state or in a NAB accredited long term long-term care degree program.~~

### **310:679-10-43. Refusal to approve or renew preceptor or intern assignment**

The Board ~~Department~~ may, at its sole discretion, refuse to approve or renew a preceptor certification or may refuse to approve an assignment of an intern/trainee to a preceptor.

### **310:679-10-44. Supervision of AIT interns/trainees Maximum preceptor oversight**

A preceptor shall not concurrently supervise more than may not oversee more than two (2) AIT interns/trainees unless otherwise approved by the Board at a time.

## **PART 10. STANDARDS FOR ADMINISTRATORS**

### **310:679-10-50. Administrator Code of Ethics**

(a) ~~The Board is committed to ethical professional conduct and therefore adopts the following standards to establish and maintain a high degree of integrity and dignity in the profession and to protect the public against unprofessional conduct on the part of long term care administrators. All long term Long-term care administrators and AITs shall be are encouraged to participate in their a professional association, the American College of Health Care Administrators (ACHCA and often referred to as "the college") as a means of continually improving themselves as long term care professionals and another~~

source for CEUs. CEUs may be approved when offered by a professional organization related to the field of licensure.

(b) The American College of Health Care Administrators Code of Ethics is adopted as follows: successful discharge of the professional responsibilities of all long term health care administrators. This

(1) Preamble: The preservation of the highest standards of integrity and ethical principles is vital to the Code of Ethics has been promulgated by the American College of Health Care Administrators (ACHCA) in an effort to stress the fundamental rules considered essential to this basic purpose. It shall be the obligation of members to seek to avoid not only conduct specifically proscribed by the code, but also conduct that is inconsistent with its spirit and purpose. Failure to specify any particular responsibility or practice in this Code of Ethics should not be construed as denial of the existence of other responsibilities or practices. Recognizing that the ultimate responsibility for applying standards and ethics falls upon the individual, the ACHCA establishes the following Code of Ethics to make clear its expectation of the membership.

(2) Expectation I: Individuals shall hold paramount the welfare of persons for whom care is provided.

(A) Prescriptions: The Health Care Administrator shall:

(i) Strive to provide to all those entrusted to his or her care the highest quality of appropriate services possible in light of resources or other constraints.

(ii) Operate the facility consistent with laws, regulations, and standards of practice recognized in the field of health care administration.

(iii) Consistent with law and professional standards, protect the confidentiality of information regarding individual recipients of care.

(iv) Perform administrative duties with the personal integrity that will earn the confidence, trust, and respect of the general public.

(v) Take appropriate steps to avoid discrimination on the basis of race, color, religion, sex, pregnancy, sexual orientation, citizenship status, national origin, age, physical or mental disability, past, present or future status in the U.S. uniformed services, genetics, or any other characteristic protected under applicable law.

(B) Proscription: The Health Care Administrator shall not: Disclose professional or personal information regarding recipients of service to unauthorized personnel unless required by law or to protect the public welfare.

(3) Expectation II: Individuals shall maintain high standards of professional competence.

(A) Prescriptions: The Health Care Administrator shall:

(i) Possess and maintain the competencies necessary to effectively perform his or her responsibilities.

(ii) Practice administration in accordance with capabilities and proficiencies and, when appropriate, seek counsel from qualified others.

(iii) Actively strive to enhance knowledge of and expertise in long term care administration through continuing education and professional development.

(iv) Demonstrate conduct that is in the best interest of the profession.

(B) Proscriptions: The Health Care Administrator shall not:

(i) Misrepresent qualifications, education, experience, or affiliations.

(ii) Provide services other than those for which he or she is prepared and qualified to perform.

(iii) Conduct themselves in a manner detrimental to the best interest of the profession.

(4) Expectation III: Individuals shall strive, in all matters relating to their professional functions, to maintain a professional posture that places paramount the interests of the facility and its residents.

(A) Prescriptions: The Health Care Administrator shall:

(i) Avoid partisanship and provide a forum for the fair resolution of any disputes which may arise in service delivery or facility management.

- (ii) ~~Disclose to the governing body or other authority as may be appropriate, any actual or potential circumstance concerning him or her that might reasonably be thought to create a conflict of interest or have a substantial adverse impact on the facility or its residents.~~
- (B) ~~Proscriptions: The Health Care Administrator shall not: Participate in activities that reasonably may be thought to create a conflict of interest or have the potential to have a substantial adverse impact on the facility or its residents.~~
- (5) ~~Expectation IV: Individuals shall honor their responsibilities to the public, their profession, and their relationships with colleagues and members of related professions.~~
  - (A) ~~Prescriptions: The Health Care Administrator shall:~~
    - (i) ~~Foster increased knowledge within the profession of health care administration and support research efforts toward this end.~~
    - (ii) ~~Participate with others in the community to plan for and provide a full range of health care services.~~
    - (iii) ~~Share areas of expertise with colleagues, students, and the general public to increase awareness and promote understanding of health care in general and the profession in particular.~~
    - (iv) ~~Inform the ACHCA Standards and Ethics Committee of actual or potential violations of this Code of Ethics, and fully cooperate with the ACHCA's sanctioned inquiries into matters of professional conduct related to this Code of Ethics.~~
  - (B) ~~Proscription: The Health Care Administrator shall not: Defend, support, or ignore unethical conduct perpetrated by colleagues, peers or students.~~
- (e) ~~The Board adopts the following as an addition to the code of ethics: Administrators have a fiduciary duty to the facility and cannot serve as guardian of the person or of the estate or hold a durable power of attorney or power of attorney for any resident of a facility of which they are an administrator.~~
- (d) ~~Licensees shall place a copy of the Administrator Code of Ethics approved by the Board in a conspicuous location in a public area in the place of business requiring such license.~~
- (b) Ethical standards such as those found in the American College of Health Care Administrators Code of Ethics should be used as a minimum threshold for ethical standards.
- (c) Licensed administrators should also report any unethical conduct to the appropriate licensure boards.
- (d) Licensed administrators may not serve as a guardian, estate representative, hold a durable power of attorney, or power of attorney for any resident of a facility of which they are an administrator.

### **310:679-10-51. Administrator responsibilities**

- (a) It is the responsibility of the long term care administrator, as the managing officer of the facility to plan, organize, direct, and control the day-to-day functions of a facility and to maintain the facility's compliance with applicable laws, rules, and regulations. The administrator shall be vested with adequate authority to comply with the laws, rules, and regulations relating to the management of the facility. The long-term care administrator will manage the planning, organization, direction, and control of the day-to-day functions of the facility in which they are the licensed administrator. The administrator must comply with laws, rules, and regulations related to the management of the facility.
- (b) ~~Long term care administrators licensed/certified by the Board shall adhere to the Administrator Code of Ethics as adopted by the Board.~~
- (e) Nursing home administrators licensed by the Board/Department shall not concurrently serve as the administrator-of-record (AOR) of more than one long-term long-term care facility except as otherwise permitted in this Chapter. A licensed nursing home administrator may serve as the administrator of more than one intermediate care facility for the mentally retarded individuals with intellectual disabilities with sixteen or fewer beds (ICF/MR-16) (ICF/IID-16), only if such facilities are located within a circle that has a radius of not more than fifteen (15) miles, and the total number of facilities and beds does not exceed the lesser of six (6) facilities or total licensed capacity of sixty-four (64) beds.

An NHA may not concurrently serve as the Director of Nursing (DON) of a facility while serving as the facility's AOR.

~~(1) An NHA may not concurrently serve as AOR of more than one long term care facility except where authorized in statute and this chapter. Exceptions are discussed at OAC 490:10-13-2(e) as it relates to ICF/MR-16; OAC 490:10-13-2(d) as it relates to Assisted Living facilities; OAC 490:10-13-2(e) as it relates to an NHA concurrently serving as AOR of a SNF/NF and another facility which includes an Assisted Living Facility, a Residential Care Facility and/or an Adult Day Care Facility; and OAC 490:10-13-3 as it relates to the use of a CAA).~~

~~(2) An NHA may not concurrently serve as the Director of Nursing (DON) of a facility while serving as the AOR of a nursing facility.~~

~~(3) When functioning under one of these exceptions, the requirement to designate a person in the facility to act on the AOR's behalf during their absence must be strictly adhered to (see OAC 310, Chapter 675, paragraph (a) for this requirement).~~

~~(d) NHA and RCAL Administrators are limited to serving concurrently as AOR of two (2) Assisted Living Facilities, with the requirement that the facilities are The facilities must be located within sixty (60) miles of each other and have less than one hundred and thirty (130) occupied beds.~~

~~(e) An NHA may concurrently serve as the AOR of a SNF/NF and one other facility (Assisted Living, Residential Care or Adult Day Care) provided that if the two facilities have the same owner, the facilities are within 15 miles, and the number of occupied beds (or occupied beds and participants) does not exceed 130.~~

~~(f) Every person licensed/certified as an administrator and licensed or certified administrator and assistant administrator designated as the "Administrator-of-Record" (AOR) shall display the appropriate "Certificate of or "License" the license or certificate in a conspicuous place in the facility or place of business requiring such license/certification. Certified Assistant Administrators (CAAs), where utilized in this capacity, shall display their certification.~~

~~(g) Each licensed/certified administrator shall update their licensure record, online, within fifteen (15) calendar days following the change of his name, business and/or personal mailing address, change in employment or change in employment status, online in the manner as prescribed or as may be prescribed by the Board. The Board will assess a late fee as prescribed at OAC 490:1-7-2 if it is determined that the administrator failed to provide current contact information within this fifteen day period. Licensed/certified administrators shall update their information with the Department within fifteen (15) calendar days for each of the following:~~

~~(1) Name change;~~

~~(2) Business address change;~~

~~(3) Personal address change;~~

~~(4) Change in employment status; and/or~~

~~(5) Change of employer.~~

~~(h) Upon receipt of satisfactory evidence that "Certificate" or "License" has been lost, mutilated, or destroyed, the Board may issue a duplicate replacement license upon payment of a fee as prescribed by the Board at OAC 490:1-7-2.~~

~~(i) To change his name on a "Certificate of License", the licensee must provide legal proof of the name change (e.g., copy of marriage certificate, divorce decree, etc.) before a replacement "Certificate of License" will be issued upon payment of a fee as prescribed by the Board at OAC 490:1-7-2. Legal proof of a name change will be required prior to a replacement document being issued with the new name.~~

~~(j) (i) An administrator shall not knowingly initiate contact with an Administrators may not contact any individual currently residing in a long term long-term care facility, or knowingly initiate contact with the family or guardian of an individual currently residing in a long term long-term care facility, for the purpose of attempting to persuade a change in that individual's residence persuading a move by the resident to another long term long-term care facility.~~

~~(k) (j) An administrator shall not knowingly solicit or permit an employee to solicit clients for his long term care facility through engage in or allow an employee to engage in the coercion or harassment to solicit clients for a long-term care facility. If an administrator has knowledge of such actions by an employee, the administrator shall take such steps as are reasonable and necessary to stop such conduct.~~

~~(4) (k) Administrators and administrator applicants must:~~

~~(1) Respond to requests for information made by the Department, other governmental agencies with authority, or a designated representative thereof;~~

~~(2) Be truthful in all responses to inquiries by the Department, other governmental agencies with authority, or a designated representative thereof; and~~

~~(3) Disclose all facts and information necessary for all matters under investigation. An Administrator, or applicant for Administrator licensure/certification, in connection with a license/certificate application or an investigation conducted by the Board or an investigation conducted by the Oklahoma State Department of Health, the Oklahoma Department of Human Services, the Oklahoma Health Care Authority, or any other agency of the State or federal government having regulatory responsibility over or relating to the delivery of care to persons in a facility operated or managed by the Administrator, shall not:~~

~~(1) knowingly make a false statement of material fact;~~

~~(2) fail to disclose a fact necessary to correct a misrepresentation known by the Administrator or applicant for licensure/certification to have arisen in the application or the matter under investigation; or~~

~~(3) fail to respond to a demand for information made by the Board or such government agency or any designated representative thereof.~~

~~(m) (l) To enable CEU attribution and uploads by NAB approved CEU providers, all All administrators and CAAs will must register with the NAB CE Registry.~~

**310:679-10-53. Requirements for administrators who serve Serving as the Administrator-of-Record of for two (2) or more licensed long-term long-term care (nursing) facilities employing Certified Assistant Administrators**

~~(a) The Administrator-of-Record is responsible for ensuring that must ensure all minimum requirements for individuals wishing to serve as a Certified Assistant Administrator (CAA) delineated herein and in in this rule and the Nursing Home Care Act (see Title 63, Section 1-1943.1) relating to individuals who wish to serve in the capacity of Certified Assistant Administrator (CAA) are met prior to the delegation of duties and responsibilities to such individual the CAA.~~

~~(b) The Administrator-of-Record shall provide qualified individuals serving as a CAA with adequate delegate authority and responsibility to the CAA administer those for all operational aspects of the operations of the facility that are to be delegated to them, including the authority to act in an emergency for which they will be responsible.~~

~~(c) The Administrator-of-Record shall clearly, and in writing, develop a maintain a clear formal job description for the position of CAA, wherein the duties and responsibilities of the individual serving as a CAA are clearly delineated which will include duties and responsibilities.~~

~~(d) The Administrator-of-Record shall provide supervision, training and direction, to the CAA and delegate only those duties and responsibilities that which may safely be performed by the individual filling that role and that are not otherwise proscribed by law, rule or statute CAA.~~

~~(e) The licensed Administrator-of-Record, being licensed by the Board, is legally and ultimately responsible for the management and operation of the facility and, as such, shall maintain sufficient on-site presence in the facility to effectively supervise the CAA.~~

~~(f) The Administrator-of-Record shall ensure the CAA does not concurrently serve as CAA of more than one (1) long-term long-term care facility.~~

~~(g) The Administrator-of-Record shall spend at least ten (10) hours per calendar week on-site in the facility, providing guidance and direction to the CAA, and further, such on-site CAA. On-site supervisory visits shall not be more than ten (10) calendar days apart.~~



~~(h) The Administrator of Record shall establish a clearly written policy delineating who the individual residents, residents' family members and/or guardians, and facility staff should contact when the Administrator of Record is absent from the facility as well as the procedure that is to be utilized that clearly indicates 'when' and 'how' such contact shall be made. The policy and procedure shall be provided to residents, residents' family and/or guardians, and facility staff and shall be posted in a conspicuous place in the facility. An up-to-date family member and/or guardian contact list must be maintained by the Administrator-of-Record and be accessible to staff at all times. A written policy including, at a minimum, when, how, and by whom contact should be made must be provided to family members and/or guardian contacts of all residents.~~

~~(i) The Administrator-of-Record shall not delegate nor cause to be delegated to the CAA any duty or responsibility that has been specified in State or federal law, statute, rule or regulation as being a duty or responsibility that can only be performed by a duly licensed Administrator or any duty or responsibility that is otherwise prohibited by State or federal law, statute, rule or regulation. may not delegate any responsibilities or duties required by State or Federal law, statute, rule or regulation be performed by a licensed Administrator.~~

~~(j) The Administrator of Record shall ensure that no individual serve as the CAA if that individual holds a license granted by this Board, but which license is suspended, revoked or otherwise restricted, or if that individual has been sanctioned (formally excluded from participation in federally funded health programs) by the U.S. Department of Health and Human Services (DHHS), Office of Inspector General (OIG). Individuals may not serve as a CAA if:~~

~~(1) Their license has been suspended, revoked, or otherwise restricted by the Department; and/or~~

~~(2) The license holder has been sanctioned or formally excluded from participation in federally-funded health programs by the U.S. Department of Health and Human Services (DHHS) or the Office of Inspector General (OIG).~~

~~(k) The Administrator-of-record shall ensure that no individual serves as a CAA if the facility at which the Assistant Administrator is to serve is not one of two-or-more facilities at which the Administrator serves as the Administrator-of-Record, that have a total bed complement not to exceed one-hundred-twenty (120) occupied beds and that are located with a fifty (50) mile radius of each other.~~

~~(l) The Administrator of Record shall establish a requirement for the certified assistant administrator to successfully complete no less than twenty four (24) continuing education clock hours during each licensure period as a condition of employment and shall be responsible to ensure the certified assistant administrator(s) working under their license has renewed their certification with the Board by the end of each licensure period.~~

## **SUBCHAPTER 15. ~~LONG TERM~~ LONG-TERM CARE CERTIFIED ASSISTANT ADMINISTRATORS**

### **PART 1. CERTIFICATION OF ~~LONG TERM~~ LONG-TERM CARE ASSISTANT ADMINISTRATORS**

#### **310:679-15-1. Purpose [REVOKED]**

~~This Chapter implements the specific rules allowing the Board to 'certify' that individuals have met certain minimum requirements established by the Board, enabling such individuals to serve as a long term care Certified Assistant Administrator (CAA) in those situations wherein the Administrator of Record (AOR) at the facility in which they are to serve also serves as the Administrator of Record of one or more additional licensed nursing facilities in compliance with the Nursing Home Care Act (Title 63, Section 1-1943.1) requirements. Individuals who serve as Certified Assistant Administrators do so under the direct supervision and license of the licensed long term care Administrator of Record.~~

#### **310:679-15-2. Definitions [REVOKED]**

Definitions set forth in Chapter 1 of this Title shall also apply to this Chapter.

**310:679-15-3. Minimum qualifications for an individual applicant to meet certification requirements for a Certified Assistant Administrator (CAA)**

(a) In addition to the general requirements for administrators found at ~~OAC 490:10-1-2.1~~, each applicant seeking certification as ~~having met the minimum qualifications to be able to serve as a CAA~~ shall meet the requirements in this Section.

(b) In order to qualify to receive certification from the Board that the individual met the minimum qualifications to be able to serve as CAA, each applicant must provide evidence satisfactory to the Board Department to include: of the following:

- (1) Successful completion of a high school education and receipt of a high school diploma, or receipt of his G.E.D.;
- (2) Successful completion of ~~Administrators University (AU) Department-approved training, or presumptively approved NAB approved entry-level training for NHAs,~~ completed within 24 months prior to certification;
- (3) Receipt of a A passing score on the current Oklahoma State Standards examination;
- (4) Receipt of a A passing score on the national "NAB" Core examination conducted by the National Association of Long-Term Long-Term Care Administrator Boards (NAB) as discussed in paragraph ~~10-3-2 OAC 310:679-10-12 of this document;~~ and either
  - (A) One (1) year of current management, leadership or supervisory experience in a long-term long-term care facility; OR
  - (B) Successful completion of Board-sanctioned Completion of a Department-authorized Administrator-in-Training (AIT) program.

**310:679-15-3.1. Evidence requirements**

To satisfy the Board's requirement for evidence indicating experience, the applicant shall submit a declaration CAA applicants must submit a letter on company letterhead, signed by a licensed administrator, of a long-term care facility, facility medical director, facility director of nurses nursing, or registered nurse of a long-term care facility attesting to the number of employees and length of time the applicant supervised. who can attest to the applicant's work and supervisory experience, explicitly stating how many individuals the candidate supervised in his supervisory role(s). The supervision of a program is not considered the same as supervision of personnel.

**310:679-15-4. Conditions of employment for individuals 'certified' by the Board as having met the minimum qualifications required for them to serve as an Certified Assistant Administrator Administrator Scope of Practice**

(a) ~~A Certified Assistant Administrator (CAA) Under the supervision, under the supervision and direction and license of the of a licensed Administrator of Record, it shall be the Administrator of Record may have the responsibility of the CAA to plan, organize, direct, and control these day-to-day functions of a facility delegated to him and to maintain the facility's compliance with applicable laws, rules, and regulations during the absence of the licensed administrator.~~

(b) ~~A CAA shall practice only under the direct supervision and license of a licensed Administrator of Record who is in charge of two or more licensed nursing facilities within a 50-mile radius wherein the total number of occupied beds does not exceed 120, and whose license is active and otherwise unrestricted. A CAA shall not continue to serve at a facility in the CAA capacity if the Administrator of Record is the Administrator of Record at a single nursing facility, the administrator's license is suspended, or revoked, or if the Administrator of Record resigns his employment or his employment is otherwise terminated, until such time as another licensed administrator is designated and begins serving as the Administrator of Record of two or more facilities. These facilities shall be owned/managed by the same owner/corporation.~~

(e) An individual serving as a CAA shall be employed by the facility full time in that capacity, regularly scheduled for 40 hours per calendar week; shall not concurrently serve as the CAA of more than one (1) nursing facility; and shall spend at least eighty (80%) percent of his working time on-site at the facility, equitably distributing his on-site time throughout each calendar week, with emphasis placed on weekdays, Monday through Friday, between the hours of 9:00 a.m. and 5:00 p.m.

(b) A CAA:

- (1) May serve at only one (1) nursing facility at a time;
- (2) Must spend at least 80% of working time on-site at the facility;
- (3) Must equitably distribute on-site time throughout each calendar week at the facility;
- (4) Place emphasis on weekdays, Monday through Friday, between 9:00 a.m. and 5:00 p.m. for on-site hours.

### **PART 3. APPLICATION FOR CERTIFICATION AND REQUIREMENTS FOR CONTINUED ELIGIBILITY**

#### **310:679-15-8. Application process**

(a) ~~Applicants for approval as a certified assistant administrator (CAA) applicants must shall complete required training, fill out the online application completely and correctly, upload required documentation, and pay the applicable application fee. apply online, supplying all required documentation and shall pay a non-refundable application fee. Once the application is complete and the applicant has completed the required training and passed the appropriate examination(s), the applicant will be required to pay the non-refundable fee referenced at OAC 490:1-7-2(x) before being placed on the agenda for Board certification determination.~~

(b) ~~An application for 'certifying' an individual to serve in the capacity of a CAA is valid consistent with the time constraints for NHA licensure following completion of training (see OAC 490:10-1-3 and 10-3-1).~~

(c) ~~An application shall be determined complete when:~~

- ~~(1) the criminal background check is received;~~
- ~~(2) all documentation required for the application has been received; and~~
- ~~(3) the application fee prescribed at OAC 490:1-7-2 has been remitted and the monies credited to the Board's account with the State Treasurer.~~

(d) ~~Once an application is determined complete, the applicant must then meet the remaining requirements for certification found in this Chapter.~~

#### **310:679-15-9. Approval process [REVOKED]**

(a) ~~Upon verification of compliance with all requirements, the Board shall 'certify' an individual as having met, as of the date of the certification, the minimum requirements to be eligible to serve as a CAA within a single nursing facility, one which is administered by a licensed nursing home administrator who is serving as the administrator of record for that facility and for one or more additional licensed facilities within a 50-mile radius of each other and wherein the total number of occupied beds at all such facilities administered by this Administrator of Record does not exceed 120.~~

(b) ~~The applicant shall be presented to the Board for consideration at the next Board meeting.~~

~~Applicants are encouraged to attend the Board meeting.~~

(c) ~~Certified applicants will receive a certificate documenting the Board's decision at the Board meeting if they are present or it will be mailed within 7 business days.~~

(d) ~~As of the date the Board 'certifies' that an individual applicant meets the minimum requirements for that individual to serve in the capacity of an Assistant Administrator, the individual may serve in such an unlicensed capacity. However, it shall be the obligation of the Administrator of Record to subsequently verify that the individual serving as an Assistant Administrator continues to meet the minimum qualifications for continued certification (i.e. criminal background check and current~~

employment in the industry as a supervisor). The administrator of record shall also require completion of CEUs in accordance with provisions in OAC 490:1-9-4, as a condition of employment, and a mechanism to ensure the assistant is current and professionally trained.

**310:679-15-10. Requirements for certified assistant administrators**

(a) ~~As of the effective date of these rules, an individual A certified as an assistant administrator is required to continue to meet the minimum requirements to maintain their certification. They shall be is~~ required to renew their certification annually during the Board's annual renewal period, starting in 2012, following Board established renewal processes and paying the prescribed renewal fees. Failure to renew shall be treated in the same manner as lapsed licenses are treated by the Board and the certification vacated following this same process.

(b) ~~Certified Assistant Administrators CAAs who are not working as certified assistant administrators are responsible for accomplishing~~ must complete the minimum annual CEU ~~employment~~ requirements to remain qualified and ~~are responsible to renew their own certification with the Board.~~