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ST - C0000 - Initial Comments

Title Initial Comments

Rule

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

ST - C100 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.900(b)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Background Check - (b) The provisions of 7 AAC 10.900 - 7 AAC 10.990 apply to an entity or individual service provider seeking licensure, certification, approval, or a finding of eligibility to receive payments from the department. Each individual who is to be associated with the entity or provider in a manner described in this subsection must have a valid criminal history check conducted under 7 AAC 10.900 - 7 AAC 10.990 if that individual is 16 years of age or older and will be associated with the entity or provider as

(1) an administrator or operator;

(2) an individual service provider;

(3) an employee, an independent contractor, an unsupervised volunteer, or a board member if that individual has

(A) regular contact with recipients of services;

(B) access to personal or financial records maintained by the entity or provider regarding recipients of

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services; or

(C) control over or impact on the financial well-being of recipients of services, unless the only recipient whose financial well-being is affected is a

(i) relative of the individual who has authorized that individual to make financial decisions for that relative;

(ii) recipient who has executed a power of attorney for that individual to make financial decisions for that recipient; or

(iii) recipient for whom a court has authorized that individual to make financial decisions;

(4) an officer, director, partner, member, or principal of the business organization that owns an entity, if that individual has

(A) regular contact with recipients of services;

(B) access to personal or financial records maintained by the entity or provider regarding recipients of services; or

(C) control over or impact on the financial well-being of recipients of services, unless the only recipient whose financial well-being is affected is a

(i) relative of the individual who has authorized that individual to make financial decisions for that relative;

(ii) recipient who has executed a power of attorney for that individual to make financial decisions for that recipient; or

(iii) recipient for whom a court has authorized that individual to make financial decisions;

(5) except as provided in (c) and (d)(10) of this section, an individual who resides in a part of an entity, including a residence if services are provided in the residence, if the individual remains, or intends to remain, in the entity for 45 days or more, in total, in a 12-month period; or

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(6) except as provided in (c) and (d) of this section, any other individual who is present in the entity and would have regular contact with recipients of services.

ST - C101 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.900(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Background Check - (c) A criminal history check under 7 AAC 10.900 - 7 AAC 10.990 is not required for a recipient of services, unless that individual is also associated with the entity or individual service provider in any manner described in (b)(1) - (4) of this section.		

ST - C102 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.900(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Background Check - (d) A criminal history check under 7 AAC 10.900 - 7 AAC 10.990 is not required for the following individuals, if supervised access is provided in accordance with (e) of this section: (1) a relative of a recipient of services, unless that relative is also associated with the entity or provider in any manner described in (b)(1) - (5) of this section; (2) a visitor of a recipient of services, unless that visitor is also associated with the entity or provider in any manner described in (b)(1) - (4) of this section;		

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(3) an individual for whom the entity or provider submits evidence to the department of a fingerprint-based background check

(A) conducted and implemented under a process that meets or exceeds the standards of 7 AAC 10.900 - 7 AAC 10.990; and

(B) that is required

(i) as a condition for obtaining a professional license or certification under AS 08;

(ii) by federal law for an entity or individual service provider described in AS 47.05.300; or

(iii) as a condition of employment or association that is imposed by an entity or individual service provider described in AS 47.05.300;

(4) an employee, independent contractor, unsupervised volunteer, board member, officer, director, partner, member, or principal of the business organization that owns an entity if that individual is not associated with the entity or an individual service provider in any manner described in (b)(1) - (4) of this section;

(5) an approved relative provider under 7 AAC 41.200(e);

(6) a personal physician, an infant learning teacher, an attendant for a child with special needs as described in 7 AAC 57.940, a licensor, a fire marshal, a food services sponsor, or another similar individual who

(A) is not associated with the entity or provider under (b) of this section; and

(B) provides support services to the entity or provider or to a recipient of services;

(7) an individual who is a vendor or an industry representative, or who provides delivery, installation, maintenance, or repair services;

(8) an individual who resides in any part of an entity, including a residence if services are provided in the residence, if the individual remains in the entity or residence for less than

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45 days, in total, in a 12-month period;

(9) a parent's designee to drop off and pick up a child in care, unless the designee is also associated in a manner described in (b) of this section with the entity providing child care;

(10) a parent who receives money from the department for purposes of paying an approved in-home child care provider under 7 AAC 41.370, and any other individual who resides in that parent's household; however, the exemption in this paragraph does not apply to an approved in-home child care provider who resides in the household;

(11) an occasional guest of the administrator or operator of an entity or of a provider.

ST - C103 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.900(e) - (f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Background Check - (e) An entity or individual service provider must provide supervised access for an individual exempted under (d) of this section if the individual is present in the entity during hours of operation. Supervised access is not required in a residence where in-home child care is provided under 7 AAC 41.370. (f) For purposes of (b)(5) and (d)(8) of this section, "individual who resides in any part of an entity" means an individual who dwells continuously in, or legally occupies, the premises housing the entity or provider, as evidenced by (1) the individual's address on the individual's permanent fund dividend received under AS 43.23, driver's license, fishing or hunting license, or other official record; or (2) observation by another individual of the individual occupying the premises. (Eff. 2/9/2007, Register 181)		

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ST - C104 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.910(a)

Type Rule

Regulation Definition

Background Check - Request for criminal History Check. (a) An entity or individual service provider that is subject to AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990 must request a criminal history check under this section, or provide proof of a valid fingerprint-based criminal history check, for each individual to be associated, or to remain associated, with the entity or provider in a manner described in 7 AAC 10.900(b). An entity or individual must request a criminal history check.

(1) when the entity or provider submits an initial application for a license, certification, approval, or finding of eligibility to receive payments from the department;

(2) for a new owner, officer, director, partner, member, or principal of the business organization if there is a change in ownership of the business organization, or if an officer, director, partner, member, or principal of the business organization is replaced; the criminal history check must be completed before the individual begins association unless the department issues notice of a provisional valid criminal history check under 7 AAC 10.920;

(3) except as provided otherwise in this section, if the entity or provider wishes to hire or retain an employee, independent contractor, or unsupervised volunteer described in 7 AAC 10.900(b)(3); the criminal history check must be completed before hiring unless the department issues notice of a provisional valid criminal history check under 7 AAC 10.920;

(4) for an individual 16 years of age or older who is not a

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recipient of services, and who wishes to reside in the entity or to be present as described in 7 AAC 10.900(b)(5) or (6); the criminal history check must be completed before the individual begins association unless

(A) the department issues notice of a provisional valid criminal history check under 7 AAC 10.920; or

(B) the individual is residing in the entity before that individual's 16th birthday; for an individual described in this subparagraph, the entity or provider must submit the information required under (b) of this section within 30 days before the individual's 16th birthday;

(5) at any time requested by the department

(A) to show compliance with 7 AAC 10.900 - 7 AAC 10.990 during inspection, monitoring, or investigation; or

(B) for an individual if the department has good cause to believe that the individual ' s criminal history has changed; or

(6) on or before April 10, 2007, for each individual who is associated with an entity or provider operating under a current license, certification, approval, or finding of eligibility to receive payments, and who

(A) does not have a valid criminal history check; or

(B) passed a criminal history check conducted before February 9, 2007 that

(i) was not fingerprint-based; or

(ii) was fingerprint-based and conducted more than six years before February 9, 2007.

ST - C105 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.910(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Background Check - Request for criminal History Check. (c)		

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Unless a more frequent fingerprint-based criminal history check is required under federal law, or for certain entities and providers under (f) of this section, a fingerprint-based criminal history check is valid for six years from the date the check became valid under (h) of this section for an individual who

(1) remains associated with an entity or provider in a manner described in 7 AAC 10.900(b), subject to verification under (d) of this section;

(2) becomes re-associated with the same entity or provider in a manner described in 7 AAC 10.900(b) within 100 days after terminating association with that entity or provider, subject to verification under (e) of this section; or

(3) becomes associated with another entity or provider in a manner described in 7 AAC 10.900(b) within 100 days after terminating association with a previous entity or provider, subject to verification under (e) of this section.

ST - C106 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.910(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Background Check - Request for criminal History Check. (d) Upon renewal of a license, certification, or approval, or when a finding is made for continued eligibility to receive payments, an entity or individual service provider must provide to the department proof that an individual described in (c)(1) of this section has a valid criminal history check. If the department determines that the criminal history check is not valid, the department will notify the entity or provider that a request for a new criminal history check must be submitted under this section.		

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ST - C107 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.910(f)

Type Rule

Regulation Definition

Criminal history check - (f) Except as provided otherwise in this subsection, and unless the department granted a variance under 7 AAC 10.935, a new criminal history check is not required if a person associated with an entity or provider in a manner described in 7 AAC 10.900(b) is transferred from one site operated by the entity or provider to another site operated by that entity or provider, if all sites are identified in the request for a criminal history check. Before October 1, 2007, an entity or provider must submit the items required under (b) of this section for an individual described in the following list, each time that individual changes employment, regardless of what entities or providers were listed on the request for a criminal history check:

(1) an individual associated with

(A) a nursing facility;

(B) a hospital that provides swing-bed services or that is reimbursed under 7 AAC 43 for treatment described in the definition of "swing-bed day" set out in 7 AAC 43.709; for purposes of this subparagraph,

(i) "hospital that provides swing-bed services" has the meaning given "swing-bed hospital" in 42 C.F.R. 413.114(b); and

(ii) the definition of "swing-bed hospital" in 42 C.F.R. 413.114(b), as revised as of October 1, 2006, is adopted by reference;

(C) an intermediate care facility for the mentally retarded or persons with related conditions;

(D) an assisted living home;

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(E) a hospice agency;
(F) a home and community-based services provider as defined in 7 AAC 43.1110;
(G) a home health agency; or
(H) a personal care agency enrolled under 7 AAC 43.786 or 7 AAC 43.787;
(2) an individual providing care coordination, case management, adult day services, or respite care services.

ST - C108 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.915(f) - (h)

Type Rule

Regulation Definition

(f) Except as provided otherwise in this subsection, an entity or provider must, within 24 hours after receiving notification under (d) or (e) of this section, terminate association with the individual in accordance with 7 AAC 10.960. If the entity or provider requests a variance under 7 AAC 10.930, or if the individual requests reconsideration under 7 AAC 10.950, the individual may remain associated with the entity or provider, pending a decision on the request, if
(1) the individual is removed from direct contact with recipients of services; and
(2) the entity or provider ensures that the individual is provided with direct supervision if the individual is present in any area where services are provided, during hours of operation.
(g) If an individual remains out of association with an entity or provider for 100 days or longer, the department will revoke a valid criminal history check without prior notice. A new criminal history check is required if the individual wishes to become associated with any entity or provider in a manner described in 7 AAC 10.900(b).

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(h) If an individual with a valid criminal history check ceases to be associated with an entity or provider, and wishes to have the individual's name unmarked in APSIN, the individual shall submit a written request to the department that the valid criminal history check be rescinded. The department will send a written acknowledgment of the rescission to the individual and to the entity or provider with whom the individual was most recently associated. (Eff. 2/9/2007, Register 181)

ST - C109 - Monitoring And Notification

Title Monitoring And Notification

Rule 7 AAC 10.925(a) - (b)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Monitoring and notification requirements. (a) An entity or provider shall monitor to ensure that all individuals associated with the entity or provider in a manner described in 7 AAC 10.900(b) continue to meet the applicable requirements of AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990. The entity or provider shall require each individual for whom a criminal history check is required to report to the entity or provider within 24 hours, or the next business day if the individual is

(1) charged with, convicted of, found not guilty by reason of insanity for, or adjudicated as a delinquent for, a barrier crime listed in 7 AAC 10.905; or

(2) is the subject of a matter that must be reported under 7 AAC 10.955(c) for the centralized registry.

(b) In addition to the reporting requirements of 7 AAC 10.955(c) for the centralized registry, the entity or provider shall notify the department by telephone, by electronic mail, by facsimile, by letter, or in person within

(1) 24 hours, or the next business day, after the entity or provider has knowledge that an individual associated with the

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entity or provider has been

(A) arrested for, charged with, convicted of, found not guilty by reason of insanity for, or adjudicated as a delinquent for, a barrier crime listed in 7 AAC 10.905; or

(B) is the subject of a matter that must be reported under 7 AAC 10.955(c) for the centralized registry; or

(2) 14 days after any change in association with the entity or provider for an individual who has a valid criminal history check or is the subject of a provisional valid criminal history check, including a change that involves an individual

(A) whose association described in 7 AAC 10.900(b) has been terminated; or

(B) who has not been associated with the entity or provider for 61 days or more, but becomes re-associated within 100 days.

ST - C110 - Monitoring And Notification

Title Monitoring And Notification

Rule 7 AAC 10.925(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Monitoring and notification requirements. (c) Failure to notify the department as required under this section may result in an enforcement action, including suspension or revocation of the license, certification, approval, or finding of eligibility to receive payments. (Eff. 2/9/2007, Register 181)		

ST - C111 - Criminal History Check New Request

Title Criminal History Check New Request

Rule 7 AAC 10.930(d)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Request for variance - (d) If the department granted a variance for an offense revealed in a fingerprint-based criminal history check conducted six or more years before February 9, 2007, and if the offense for which the variance was granted is not a permanent barrier under 7 AAC 10.905, the entity or provider must submit a new request for a variance, if allowed under this section, at the time of application for renewal of that entity's current license, certification, approval, or finding of eligibility to receive payments. Except as provided in (h) and (i) of this section, if the offense for which the department granted the variance is a permanent barrier under 7 AAC 10.905, the variance is void and the entity must terminate association with the individual in accordance with 7 AAC 10.960.		

ST - C112 - Criminal History Check

Title Criminal History Check

Rule 7 AAC 10.930(e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
(e) If the department granted a variance for a barrier condition described in 7 AAC 10.955 six or more years before February 9, 2007, the entity or provider must submit a new request for a variance at the time of application for renewal of that entity's current license, certification, approval, or finding of eligibility to receive payments.		

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ST - C113 - Posting Of Variance Decision Required

Title Posting Of Variance Decision Required

Rule 7 AAC 10.940

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Posting of variance decision required - If the department grants a variance under 7 AAC 10.935, the entity or individual service provider shall post a copy of the variance decision with the copy of the license, certification, approval, or finding of eligibility to receive payments that was issued by the department, in a conspicuous place where the copy of the variance can be readily viewed by persons interested in obtaining the services offered by the entity or provider. (Eff. 2/9/2007, Register 181)		

ST - C114 - Terminatiion Of Association

Title Terminatiion Of Association

Rule 7 AAC 10.960(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Termination of Association - (a) Except as provided in (b) and (c) of this section, if an entity or provider is required to terminate association with an individual, the entity or provider shall (1) notify the individual that the individual's employment, volunteer services, or other association with the entity or provider under 7 AAC 10.900(b) is ended, effective immediately, unless the entity or provider takes immediate action under (2) of this subsection; the entity or provider must		

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notify the individual under this paragraph
(A) immediately, if the individual is present at the entity or premises where the provider is providing services; or
(B) before or upon the individual's next arrival at the entity; or
(2) if the entity or provider intends to request a variance under 7 AAC 10.930, immediately reassign the duties and responsibilities of that individual so that the individual
(A) does not have contact with recipients of services;
(B) cannot access personal or financial records maintained by the entity or provider regarding recipients of services;
(C) has no control over or impact on the financial well-being of a recipient of services, unless the only recipient whose financial well-being is affected is a
(i) relative of the individual who has authorized that individual to make financial decisions for that relative;
(ii) recipient who has executed a power of attorney for that individual to make financial decisions for that recipient; or
(iii) recipient for whom a court has authorized that individual to make financial decisions; and
(D) is provided with direct supervision if present in the entity or premises where the provider is providing services during hours of operation.

ST - C115 - Terminatiion Of Association

Title Terminatiion Of Association

Rule 7 AAC 10.960(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Termination of Association - (b) If the entity or provider is required to terminate association with an individual who is subject to a union agreement or employment contract that		

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requires more notice than allowed under (a) of this section, the entity or provider shall, within 24 hours after receiving notice to terminate association, deliver a copy of the relevant language of the agreement or contract to the department. The entity or provider shall cooperate with the department in developing an appropriate termination plan for the individual that includes the measures set out in (a)(2)(A) - (D) of this section during the notice period mandated by the agreement or contract.

ST - C116 - Terminatiion Of Association

Title Terminatiion Of Association

Rule 7 AAC 10.960(c)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Termination of Association - (c) If the individual for whom termination of association is required is a relative of the operator, administrator, or provider, and resides in the entity or premises where services are provided, termination of association must occur within 24 hours, and the entity or provider shall ensure that the individual

(1) does not have contact with recipients of services; and

(2) is provided with direct supervision if, during that 24-hour period, the individual is present in the entity or premises where the provider is providing services during hours of operation. (Eff. 2/9/2007, Register 181)

ST - C117 - Grant Or Denial Of General Variance

Title Grant Or Denial Of General Variance

Rule 7 AAC 10.9525(b)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Variance Review - (b) Grant or denial of a general variance Subject to (c) of this section, the department may grant a general variance, for a period that does not exceed one year, if the department determines that the entity (1) is unable to comply with the requirement from which the variance is sought; (2) has an effective plan for achieving compliance during the term of the variance; and (3) is able to adequately provide for the health, safety, and welfare of recipients of services during the term of the variance.		

ST - C118 - Grant Or Denial of General Variance

Title Grant Or Denial of General Variance

Rule 7AAC 10.9525(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Variance Review - (c) The department may grant a general variance for a longer period than allowed under (b) of this section if the department determines (1) that (A) strict compliance with the requirement from which the variance is sought cannot be accomplished without a substantial economic, technological, programmatic, legal, or medical hardship; or (B) the variance will maintain or improve the quality of services for recipients of services; and (2) that the entity has an effective plan for meeting the goal of the requirement from which the variance is sought, and that the plan adequately protects the health, safety, and welfare of recipients of services and otherwise meets all applicable statutory or regulatory standards.		

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ST - C119 - Posting Of General Variance

Title Posting Of General Variance

Rule 7 AAC 10.9530(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Posting of a general variance. (a) If the department grants a request for a general variance, the entity shall post a copy of the general variance decision in a conspicuous place, with the entity's license as required by AS 47.32.080 , during the period the variance is in effect, and shall make it available to any person who wishes to review it. A general variance remains in effect for the duration stated, unless the department revokes the variance under (b) of this section.		

ST - C120 - General Variance

Title General Variance

Rule 7 AAC 10.9530(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
(b) The department will revoke a general variance if the department finds that the entity is not following its plan for achieving compliance, or is no longer able to adequately provide for the health, safety, and welfare of recipients of services during the term of the variance. If the department decides to revoke a variance, it will provide written notice of revocation to the entity, setting out the reasons for the department's decision. The department will advise the entity of its right to request reconsideration under 7 AAC 10.9535. A notice of revocation issued under this subsection is effective		

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30 days after it is received by the entity unless a request for reconsideration is submitted. Nothing in this subsection precludes the department from issuing a notice of immediate revocation if the department finds that the life, health, safety, or welfare of recipients of services is threatened.

ST - C121 - Plan Of Correction

Title Plan Of Correction

Rule 7 AAC 10.9610(a)(1)-(4)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Plan of correction - (a) The plan of correction required under AS 47.32.140 (b) must contain the following information for each violation identified in the report issued under AS 47.32.120 (a): (1) each action that will be taken to correct the violation (2) each measure that will be taken or change that will made to ensure the violation does not recur; (3) how the entity will monitor each corrective action to ensure the violation is cured and will not recur; (4) the date on or before which the violation will be cured.		

ST - C122 - Plan Of Correction

Title Plan Of Correction

Rule 7 ACC 10.9610(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Plan of correction - (b) The plan of correction must be signed by the administrator or another person responsible for operation of the entity.		

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ST - C123 - Plan Of Correction

Title Plan Of Correction

Rule 7 AAC 10.9610(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Plan of correction - (c) If the department determines that any recipients of services were affected by a violation, the department may also require the entity to describe (1) each corrective action that will be taken with regard to those recipients; and (2) how the entity will identify other recipients of services who might be affected by the violation, and what corrective action will be taken.		

ST - C124 - Plan Of Correction

Title Plan Of Correction

Rule 7AAC 10.9610(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Plan of correction - (d) The entity may request that the plan of correction also act as the allegation of compliance required under 7 AAC 10.9615 if each violation listed in the report has been corrected before submission of the plan of correction.		

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ST - C125 - Plan Of Correction

Title Plan Of Correction

Rule 7 AAC 10.9610(e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Plan of correction - (e) The department will review a plan of correction submitted under (a) - (d) of this section to determine whether the plan is acceptable. If the department determines that the plan is unacceptable, the department may (1) request additional information regarding one or more corrective actions described in the plan; (2) require the entity to amend the plan as directed by the department; (3) require the entity to comply with a plan of correction developed by the department under (g) of this section.		

ST - C126 - Plan Of Correction

Title Plan Of Correction

Rule 7 AAC 10.9610(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Plan of Correction - (f) If the department finds that an entity has failed to correct a violation of an applicable statute or regulation within the time specified by the department under AS 47.32.140 (a), has failed to submit a plan of correction for department approval under AS 47.32.140 (b), or has submitted an unacceptable plan, the department may require the entity to participate in a plan of correction developed by the department under (g) of this section.		

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ST - C127 - Plan Of Correction

Title Plan Of Correction

Rule 7 AAC 10.9610(i)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Plan of Correction - (i) The entity shall keep on the premises a copy of each inspection document described in AS 47.32.180 (b) for at least three years from the date of inspection and shall make each document available to any interested person upon request.		

ST - C128 - Allegation Of Compliance

Title Allegation Of Compliance

Rule 7 AAC 10.9615

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Allegation of compliance. An allegation of compliance required under AS 47.32.140 (c) must describe each action that was taken by the entity to correct each violation, and must include the date the violation was corrected. The allegation must be signed by the administrator or another person responsible for operation of the entity. The department will review the allegation to determine whether it provides enough detail to establish that each violation was corrected by any applicable deadline. The department may also conduct a follow-up inspection to validate the allegation of compliance.		

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ST - C140 - Determination of a frontier extended stay cli

Title Determination of a frontier extended stay cli

Rule 7 AAC 12.450

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Determination of a frontier extended stay clinic - (a) The department will consider a rural health clinic, including a community health center and a federally qualified health center, to be a frontier extended stay clinic subject to the applicable requirements of this chapter if the department finds that the clinic is a permanent entity that is

(1) located

(A) at least 75 miles by public highway from the nearest hospital; or

(B) in an area where the nearest hospital is inaccessible by public highway; and

(2) capable of providing care and extended stay services for individuals who

(A) are seriously ill, critically ill, or seriously injured and who cannot be transferred to a general acute care hospital, rural primary care hospital, or critical access hospital because of adverse weather conditions, unavailability of a transport vehicle, or another similar unavoidable circumstance;

(B) are seriously ill, critically ill, or seriously injured and require transfer to a general acute care hospital, rural primary care hospital, or critical access hospital but exercise the right, against the medical advice of the attending practitioner, not to be transferred, and elect to receive extended stay services appropriate to manage the individual's illness or injuries to the extent possible within the clinic's capability; or

(C) are not in obvious need of medical transport, but require an extended stay for monitoring and observation.

(b) For purposes of this section, the annual average length of

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stay for individuals requiring extended stay may not exceed 48 hours.

ST - C145 - Scope Of Service

Title Scope Of Service

Rule 7 AAC 12.453(a) - (b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Scope of service - (a) In addition to complying with the requirements of 7 AAC 12.600(a) and (h), a frontier extended stay clinic must comply with 7 AAC 12.450 - 7 AAC 12.490. (b) A frontier extended stay clinic must provide medical, radiological, laboratory, extended stay, and emergency services. The clinic must have the staff and resources necessary to provide the care and services offered.		

ST - C146 - Scope Of Service

Title Scope Of Service

Rule 7 AAC 12-453(c) - (d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
(c) The clinic may provide care and services for (1) an extended stay described in 7 AAC 12.450(a)(2)(A) for a patient awaiting requested medical transport to a general acute care hospital, rural primary care hospital, or critical access hospital; or (2) a patient who elects to receive extended stay services as described in 7 AAC 12.450(a)(2)(B). (d) The clinic may provide care and services for an extended stay for monitoring and observation described in 7 AAC		

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12.450(a)(2)(C) if
(1) there is a reasonable expectation that the patient will show significant improvement within 24 hours and that care will be completed within 48 hours;
(2) the clinic can manage common complications associated with the patient's medical condition and presenting problems;
(3) appropriate medical consultation is available to the clinic on site or by telephone; and
(4) a contingency plan is in place for appropriate medical transport to a general acute care hospital, rural primary care hospital, or critical access hospital if necessary.

ST - C147 - Scope Of Service

Title Scope Of Service

Rule 7 AAC 12.453(e)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Scope of service - (e) The clinic must have an agreement with a general acute care hospital, a rural primary care hospital, or a critical access hospital for transfer of patients described in 7 AAC 12.450(a)(2)(A) and (d) of this section who require medical or emergency care beyond the scope of the clinic's ability or license. If the agreement is not in writing, the clinic must provide evidence satisfactory to the department that patients referred by the clinic are being accepted and treated by the hospital.

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ST - C150 - Additional Licensure Requirements

Title Additional Licensure Requirements

Rule 7 AAC 12.457(a)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Additional licensure requirements for frontier extended stay clinics - (a) In addition to complying with the requirements of 7 AAC 12.610, an individual seeking to operate a frontier extended stay clinic must provide, as part of the application for a license,
(1) the name of each individual with ownership or control of the clinic;
(2) a description of the geographic service area to be served;
(3) the applicant's plan for the delivery of health services within the service area;
(4) the applicant's plan for staffing when a patient is admitted for care or services;
(5) an emergency services plan that coordinates the provision of emergency medical services in the service area;
(6) a plan that demonstrates how each physician ' s responsibilities will be accomplished, including record reviews, policy reviews, review of services provided, supervision, and medical direction;
(7) a description of the applicant ' s volume capacity;
(8) a description of the volume capacity of other related health care resources within the service area; and
(9) the distance and travel time to the nearest hospital and other health care resources within the service area.

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ST - C151 - Additional Licensure Requirements

Title Additional Licensure Requirements

Rule 7 AAC 12.457(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
7 AAC 12.457. Additional licensure requirements for frontier extended stay clinics - (b) A licensee must provide, as part of an application for license renewal, (1) the number of patients admitted during the previous 12 months for extended stay, including (A) the number of patients admitted for an extended stay described in 7 AAC 12.450(a)(2)(A); (B) the number of patients admitted for an extended stay described in 7 AAC 12.450(a)(2)(B); (C) the number of patients admitted for monitoring and observation described in 7 AAC 12.450(a)(2)(C); and (D) the average length of stay for each category set out in (A) - (C) of this paragraph; and (2) the plan required under (a)(6) of this section, updated to reflect any changes since the initial plan was submitted.		

ST - C155 - Periodic program evaluation and QA

Title Periodic program evaluation and QA

Rule 7 AAC 12.460(a) - (b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Periodic program evaluation and quality assurance - (a) At least once each year, a frontier extended stay clinic must evaluate, or arrange for evaluation of, its total program to		

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determine whether
(1) the utilization of services was appropriate;
(2) established policies were followed; and
(3) any changes are needed.
(b) The evaluation required under (a) of this section must include review of
(1) the utilization of clinic services, including, at a minimum, the number of patients served, the services provided, and the number of patients who received each service;
(2) all patient care services and other services affecting patient health and safety; and
(3) the clinic's health care policies.

ST - C156 - Periodic program evaluation and QA

Title Periodic program evaluation and QA

Rule 7 AAC 12.460(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Periodic program evaluation and Quality Assurance - (c) The clinic must have an effective quality assurance program to evaluate the quality and appropriateness of diagnoses and treatment provided at the clinic and of treatment outcomes. The quality assurance program must require that (1) at regular intervals, no less than once each year, a physician and a mid-level practitioner, either separately or together, review the records for all patients admitted for an extended stay during the review period, and the records selected under (2) of this subsection; the review under this paragraph must include an evaluation of the appropriateness of the diagnoses and treatment provided, treatment outcomes, and the accuracy of the records; the physician shall document the review and any recommendations; the clinic must provide documentation of the review to the department upon request; (2) for the review described in (1) of this subsection, the		

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clinic develop policies and procedures for the random sampling of medical records for each type of service provided during the review period in addition to extended stay services; this sampling must include
(A) at least 25 of every 1,000 encounters if the number of records for extended stay patients is less than 2.5 percent of the total encounters during the review period; or
(B) at least 10 of every 1,000 encounters if the number of records for extended stay patients is 2.5 percent or more of the total encounters during the review period;
(3) the physician and the mid-level practitioner conducting a review under this subsection be on the clinic ' s staff or under contract with the clinic; and
(4) the clinic staff, after each evaluation
(A) consider the findings and any recommendations of the medical staff and take corrective action if necessary; and
(B) document the outcome of any corrective action.

ST - C160 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (a) A frontier extended stay clinic must have the medical staff necessary to provide the care and services required in 7 AAC 12.453.		

ST - C161 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(b)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (b) The medical staff shall develop, for approval by the governing body of the clinic, bylaws and rules that provide for (1) eligibility for medical staff membership; (2) the biennial recommendation by the medical staff regarding the credentialing and privileges of each member of the medical staff, including establishing standards for (A) assessing the training, experience, and competence of medical staff; (B) a formal process that includes (i) querying the National Practitioner Data Bank; and (ii) verifying that medical staff meet professional licensing requirements; (C) a delineation of privileges as authorized by the governing body, including verification of education and training related to the privileges requested and to the level of care that will be provided; (D) the inclusion of quality assurance findings in ongoing credentialing of medical staff; and (E) the assurance of participation in continuing professional education; (3) quality assurance under 7 AAC 12.460; (4) medical records retention and protection under 7 AAC 12.483; (5) infection control; (6) pharmacy and therapeutics, including (A) development and maintenance of a formulary of drugs; and (B) development and implementation of procedures for the safe and effective control, storage, dispensing, and administration of prescribed drugs, chemicals, and biologicals; and (7) utilization review.		

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ST - C162 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(c)(1)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (c) The medical staff shall (1) ensure that a physician or a mid-level practitioner with training or experience in emergency care is, on a 24-hour-per-day basis, (A) on call; (B) immediately available by telephone or radio contact; and (C) able to be on site at the frontier extended stay clinic within 30 minutes after an emergency contact;		

ST - C163 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(c)(2)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (c) The medical staff shall (2) ensure that a mid-level practitioner is available on site to provide patient care services at least 60 percent of the time during the clinic's normal hours of operation, or a minimum of 32 hours a week, whichever is less;		

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ST - C164 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(c)(3) - (4)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (c) The medical staff shall (3) require that an order by a practitioner, including a telephonic or other verbal order, be reduced to writing and authenticated within three days after the order was given; the authentication must be signed and dated by the practitioner who gave the verbal order; (4) require that a physician approve each standing order;		

ST - C165 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(c)(5)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (c) The medical staff shall (5) establish procedures for circumstances in which consultation, referral, or transfer is required;		

ST - C166 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(c)(6)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (c) The medical staff shall (6) ensure that the review required under 7 AAC 12.460(c)(1) is conducted at regular intervals, at least annually, and that the clinic maintains accurate medical records;		

ST - C167 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(c)(7)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (c) The medical staff shall (7) establish procedures for selection and supervision of mid-level practitioners; and		

ST - C168 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(c)(8)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (c) The medical staff shall (8) establish procedures for the annual review of policies and procedures, including clinical, administrative, and fiscal policies and procedures, by a group consisting, at a minimum, of a physician, a mid-level practitioner, and one person who is not an employee of the clinic.		

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ST - C169 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(d)

Type Rule

Regulation Definition

Medical Staff - (d) A physician shall be on site for sufficient periods of time, at least once in every three-month period, except in extraordinary circumstances, to provide the medical direction, medical care services, consultation, and supervision described in this section. Any extraordinary circumstance must be documented in the clinic ' s records. A site visit by a physician is not required if no patients have been treated since the last time a physician made a site visit. The clinic must
(1) ensure that, in addition to the site visits required by this subsection, a physician will be
(A) available 24 hours a day through direct radio or telephone communication for consultation, assistance with medical emergencies, or patient referral; and
(B) in contact with the clinic telephonically or through telemedicine at least once in every two-week period;
(2) demonstrate sufficient staffing during periods the physician is not onsite; and
(3) ensure that the physician adheres to the plan submitted under 7 AAC 12.457(a)(6).

Interpretive Guideline

Custom Help

ST - C170 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(e)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Medical Staff - (e) A physician shall (1) provide medical direction, consultation, and medical supervision regarding the clinic's health care activities; (2) at regular intervals, no less than once each year, participate with a mid-level practitioner member of the clinic staff, either separately or together, in (A) developing, executing, and reviewing the clinic's written policies; and (B) the review of services provided to patients through the periodic program evaluation under 7 AAC 12.460(c), unless that review is conducted under contract; (3) review at least quarterly the clinic's patient records; (4) provide medical orders and medical care services to the clinic's patients; and (5) at least quarterly, sign the records of patients cared for by a mid-level practitioner.		

ST - C171 - Medical Staff

Title Medical Staff

Rule 7 AAC 12.465(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Staff - (f) The onsite medical staff of a frontier extended stay clinic may consist exclusively of one or more mid-level practitioners if (1) the mid-level practitioners are subject to the oversight of a physician who is also a member of the clinic's medical staff, even though the physician might not be on site, if (A) that physician is (i) notified by a mid-level practitioner when a patient is admitted for extended stay; and (ii) available 24 hours per day through direct radio or		

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telephone communication for consultation, assistance with medical emergencies, or patient referral; and
(B) each contact with the physician is documented;
(2) each mid-level practitioner participates
(A) in the development, execution, and periodic review of the written policies governing the services provided by the clinic; and
(B) in the periodic review of the medical records of patients with a physician as described in 7 AAC 12.460(c)(1), unless that review is conducted under contract; and
(3) each mid-level practitioner performs the following functions when the functions are not performed by a physician:
(A) provide services in accordance with the clinic's policies;
(B) arrange for, or refer patients to, needed services that cannot be furnished at the clinic;
(C) assure that adequate patient health records are maintained and transferred as required if patients are referred or services are arranged under (B) of this paragraph.

ST - C172 - Medical Saff

Title Medical Saff

Rule 7 AAC 12.465(g)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical staff - (g) A physician or a mid-level practitioner member of the staff may be an owner or employee of the clinic, or may be under contract or agreement with the clinic to carry out the responsibilities described in this section and in 7 AAC 12.470.		

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ST - C180 - Personnel and Staffing

Title Personnel and Staffing

Rule 7 AAC 12.470(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel and staffing - (a) In addition to complying with the requirements of 7 AAC 12.660(c), a frontier extended stay clinic must ensure that mid-level practitioners are involved in the orientation and in-service education program for patient care personnel. The in-service education program must be designed to support the services provided by the clinic and the various levels of staffing required at the clinic.		

ST - C181 - Personnel and Staffing

Title Personnel and Staffing

Rule 7 AAC 12.470(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel and staffing - (b) The clinic must consider the clinic staff availability when determining a patient ' s eligibility for admission for extended stay. A physician, a physician assistant, an advanced nurse practitioner, a registered nurse, a licensed practical nurse, a primary community health aide, or an emergency medical technician must be on duty whenever the clinic has one or more extended stay patients. The number of clinic staff and the level of training required to provide treatment to an extended stay patient is at the discretion of the clinic and the practitioner involved in the patient's care, after determining what is		

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required to meet the patient ' s needs.

ST - C182 - Personnel and Staffing

Title Personnel and Staffing

Rule 7 AAC 12.470(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel and staffing - (c) The clinic must ensure that when a patient is admitted to the clinic for extended stay services by a mid-level practitioner, a physician on the clinic's staff is notified of the admission.		

ST - C183 - Personnel and Staffing

Title Personnel and Staffing

Rule 7 AAC 12.470(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel and staffing - (d) The clinic must have the staff necessary to provide the care and services required in 7 AAC 12.453.		

ST - C184 - Personnel and Staffing

Title Personnel and Staffing

Rule 7 AAC 12.470(e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel and staffing - (e) The clinic staff may also include		

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personnel who provide support services, including bookkeeping, clerical, laundry, and housekeeping services.

ST - C190 - Ancillary Services

Title Ancillary Services

Rule 7 AAC 12.473(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Ancillary services - (a) A frontier extended stay clinic must have ancillary services that include food, laundry, and housekeeping services in accordance with this section.		

ST - C191 - Ancillary Services

Title Ancillary Services

Rule 7 AAC 12.473(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Ancillary services - (b) The clinic must maintain lavatories for handwashing, with hot and cold running water, soap, and disposable towels, conveniently located in the food preparation area.		

ST - C192 - Ancillary Services

Title Ancillary Services

Rule 7 AAC 12.473(c) - (e)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Ancillary services - (c) A clinic for which a food service permit is required by the Department of Environmental Conservation must meet the applicable requirements of 18 AAC 31. A clinic that is exempt from the requirements of 18 AAC 31 must maintain sanitary facilities as applicable for the proper care, storage, refrigeration, and preparation of food. The clinic must ensure that (1) for purposes of AS 17.20.020, any food served to extended stay patients is not adulterated; and (2) fruits and vegetables are thoroughly washed with potable water before use. (d) If food is provided by an outside food establishment, the clinic shall ensure that the requirements of (c)(1) of this section are met. If prepackaged food is used, preparation must be as directed by the manufacturer. (e) If prepackaged food is used, preparation must be as directed by the manufacturer.		

ST - C193 - Ancillary Services

Title Ancillary Services

Rule 7 AAC 12.473(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Ancillary services - (f) The clinic must develop and implement written procedures for the handling, processing, storage, and transportation of linens in a manner that will prevent the spread of infection and assure the maintenance of clean linens.		

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ST - C194 - Ancillary Services

Title Ancillary Services

Rule 7 AAC 12.473(g)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Ancillary services - (g) The clinic shall ensure that laundry equipment is maintained in a sanitary manner and in good repair.		

ST - C200 - Drugs, Chemicals, and Biologicals

Title Drugs, Chemicals, and Biologicals

Rule 7 AAC 12.475(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Drugs, chemicals, and biologicals - (a) A frontier extended stay clinic that dispenses drugs, chemicals, and biologicals must (1) employ a pharmacist on a regular or consultant basis; (2) procure and maintain a sufficient quantity of drugs, chemicals, and biologicals, consistent with the formulary developed and approved under 7 AAC 12.465(b)(6), to meet patient needs, including those drugs, chemicals, and biologicals listed in 7 AAC 12.485(c)(1); (3) inventory emergency drugs, chemicals, and biologicals at least every 30 days and restock, as necessary; (4) dispose of drugs, chemicals, and biologicals that have been discontinued or have expired; (5) ensure that only authorized staff have access to the clinic's stock of drugs, chemicals, and biologicals;		

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(6) ensure that drugs, chemicals, and biologicals are properly labeled regarding their content and strength;
(7) ensure that drugs, chemicals, and biologicals requiring refrigeration are stored separate from food; and
(8) document and evaluate prescribed drug distribution errors to
(A) prevent reoccurrence; and
(B) ensure the accuracy and adequacy of the clinic's prescribed drug distribution system.

ST - C201 - Drugs, Chemicals, and Biologicals

Title Drugs, Chemicals, and Biologicals

Rule 7 AAC 12.475(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Drugs, chemicals, and biologicals - (b) A standing order for a prescribed drug must specify the circumstances for administration, dosage, route, duration, and frequency of administration. The order must be reviewed annually and, if necessary, renewed. When a standing order is implemented for a specific patient, the person who prescribed the order must date and sign the order, and enter it into the patient ' s record within three days.		

ST - C202 - Drugs, Chemicals, and Biologicals

Title Drugs, Chemicals, and Biologicals

Rule 7 AAC 12.475(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Drugs, chemicals, and biologicals - (c) A verbal order for a		

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prescribed drug may be given only to an individual who is authorized by the clinic ' s medical staff to receive orders given by a person legally authorized to prescribe drugs. An individual who receives a verbal order must promptly record the order in the patient's medical record, identify the name of the person who prescribed the order, and sign the record.

ST - C203 - Drugs, Chemicals, and Biologicals

Title Drugs, Chemicals, and Biologicals

Rule 7 AAC 12.475(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Drugs, Chemicals, and Biologicals - (d) Before allowing a patient to leave or be transferred out of the clinic, the clinic must ensure that each prescribed drug supplied by the clinic is properly labeled and prepared in accordance with state and federal law for use outside of the clinic.		

ST - C210 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological service - (a) Radiology services furnished at a frontier extended stay clinic must be provided as direct services by clinic staff who have been trained, and are competent, in the proper and safe use of radiological equipment.		

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ST - C211 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological Service - (b) Radiological services may be performed only upon the order of the attending physician or practitioner.		

ST - C212 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological Service - (c) If an x-ray examination is to be provided to a patient, a request by the attending physician or practitioner for the examination must contain a diagnosis or a tentative diagnosis, or a concise statement of the reasons for the x-ray examination.		

ST - C213 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological Service - (d) A report of a radiological		

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examination must be filed in the patient's medical record and maintained in the radiology unit.

ST - C214 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological Service - (e) The clinic must maintain patient x-rays for at least five years.		

ST - C215 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological Service - (f) The clinic must ensure that individuals who are employed or involved in providing radiological services or who may be exposed to radiation wear devices that monitor radiation exposure.		

ST - C216 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(g)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological Service - (g) The clinic must keep records		

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identifying employees who have been exposed to radiation and the amount of exposure for each employee.

ST - C217 - Radiological Service

Title Radiological Service

Rule 7 AAC 12.477(h)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Radiological Service - (h) A clinic that uses x-ray equipment must ensure that the equipment is calibrated, used, and maintained in accordance with the manufacturer ' s instructions. The clinic must document calibration and maintenance.		

ST - C220 - Laboratory Service

Title Laboratory Service

Rule 7 AAC 12.480

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Laboratory Service - A frontier extended stay clinic must have an approved laboratory and provide laboratory services essential to the immediate diagnosis and treatment of patients. The clinic must comply with the applicable requirements of 7 AAC 12.790 - 7 AAC 12.850. The services provided must at a minimum include (1) chemical examination of urine by stick or tablet method or both, including urine ketones; (2) hemoglobin or hematocrit; (3) blood glucose; (4) electrolytes;		

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(5) white blood count with differential;
(6) cardiac enzymes;
(7) liver function;
(8) kidney function;
(9) examination of stool specimens for occult blood;
(10) pregnancy tests; and
(11) primary culturing for transmittal to an approved laboratory; the clinic must collect the culture in the proper container for shipping to the approved laboratory for processing.

ST - C221 - Laboratory Service

Title Laboratory Service

Rule 7 AAC 12.790(a) - (c)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Laboratory Service - (a) A facility that provides laboratory services must comply with 7 AAC 12.790 - 7 AAC 12.850 and must meet the requirements of 42 C.F.R. Part 493, Laboratory Requirements, as revised as of October 1, 2005, and adopted by reference.
(b) A facility must have and maintain written procedures on the scope of onsite laboratory services necessary to support the facility's emergency and patient care services. For laboratory tests not performed in the facility, the facility must make arrangements with an approved laboratory to meet the requirements of this section. Information specifying the laboratory tests performed at the facility, and laboratory tests available under arrangement, must be provided to the medical staff.
(c) A laboratory that provides blood or blood products must
(1) have those products onsite or readily available from another source; and
(2) maintain storage areas for those products under adequate

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control and supervision.

ST - C222 - Laboratory Service

Title Laboratory Service

Rule 7 AAC 12.830

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Laboratory Service - A laboratory specimen may be referred and mailed only to an approved laboratory. The mailing containers to be used must be provided by the laboratory to which the specimens are sent.		

ST - C223 - Laboratory Service

Title Laboratory Service

Rule 7 AAC 12.840(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Laboratory Service - (a) A laboratory must be under the supervision and direction of a hysician, a laboratory specialist, or a medical technologist who (1) meets the applicable qualification requirements of 42 C.F.R. Part 493, adopted by reference in 7 AAC 12.790; and (2) is either employed by the laboratory or under contract to the laboratory.		

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ST - C224 - Laboratory Service

Title Laboratory Service

Rule 7 AAC 12.840(b) - (c)

Type Rule

Regulation Definition

Laboratory Service - (b) If a medical technologist supervises the laboratory under contract, a consulting physician or laboratory specialist supervising the laboratory under contract must make quarterly visits to the laboratory and prepare a written evaluation with recommendations to the administrator and medical staff of the facility after each visit. For a consulting physician, up to two of the required visits and evaluations each year may be made by the physician ' s representative, who must be a medical technologist competent in one or more laboratory specialties. If a medical technologist supervises a laboratory as an employee of the laboratory, a consulting physician or a laboratory specialist under contract must make at least biannual visits to the laboratory and prepare a written evaluation and recommendations after each visit.

(c) In this section, "laboratory specialties" include microbiology, serology, chemistry, hematology, and immunohematology.

Interpretive Guideline

Custom Help

ST - C230 - Medical Records

Title Medical Records

Rule 7 AAC 12.483(a) - (b)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Medical Records - (a) In addition to the applicable requirements of 7 AAC 12.770 (Medical Record Service), a frontier extended stay clinic must meet the requirements of this section. (b) The clinic must maintain its clinical record system in accordance with written policies and procedures, including policies and procedures governing the use and removal of records from the clinic and the conditions for release of information.		

ST - C231 - Medical Records

Title Medical Records

Rule 7 AAC 12.483(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Records - (c) A designated member of the clinic staff shall maintain the records and ensure that they are completely and accurately documented, readily accessible, and systematically organized.		

ST - C232 - Medical Records

Title Medical Records

Rule 7 AAC 12.483(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Records - (d) For each patient receiving health care services, the clinic shall maintain a record that includes, as applicable,		

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(1) identification, including the patient's name, age, sex, and address;
(2) evidence of informed consent, pertinent medical history, assessment of the health status and health care needs of the patient, and a brief summary of the episode and the initial disposition;
(3) pertinent history of the patient ' s current condition;
(4) the time and means by which the patient arrived, including by whom transported;
(5) the diagnosis and treatment given;
(6) reports of physical examinations, diagnostic and laboratory test results, and consultative findings;
(7) the patient ' s condition on discharge or transfer;
(8) physician's orders, reports of treatment and medication, and other pertinent information necessary to monitor the patient's progress;
(9) final disposition, including instructions given to the patient or the patient ' s family regarding necessary follow-up care; and
(10) the signature of each physician or other health care professional involved; for purposes of this paragraph, "health care professional" includes a physician or other practitioner, an emergency medical technician, a social worker, or a primary community health aide.

ST - C233 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Record Service - (a) Each facility, with the exception of home health agencies, intermediate care facilities for the mentally retarded, and birth centers, must have a medical record service that complies with the applicable provisions of		

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this section. A frontier extended stay clinic must comply with (b), (d), (g), and (i) - (k) of this section in addition to the requirements of 7 AAC 12.483.

ST - C234 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(b)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Medical Record Service - (b) A facility must keep records on all patients admitted or accepted for treatment. The medical records, including x-ray films, are the property of the facility and are maintained for the benefit of the patients, the medical staff, and the facility. Medical records are subject to the requirements of AS 18.05.042, 7 AAC 43.030, and 7 AAC 43.032. This section does not affect other statutory or regulatory requirements regarding access to, use of, disclosure of, confidentiality of, or retention of record contents, or regarding maintenance of health information in patients ' records by health care providers. A facility must maintain originals or accurate reproductions of the contents of the originals of all records, including x-rays, consultation reports, and laboratory reports, in a form that is legible and readily available
(1) upon request, to the attending physician or other practitioner responsible for treatment, a member of the facility's medical staff, or a representative of the department; and
(2) upon the patient's written request, to another practitioner.

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ST - C235 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Record Service - (d) A facility must maintain procedures to protect the information in medical records from loss, defacement, tampering, or access by unauthorized persons. A patient's written consent is required for release of information that is not authorized to be released without consent. A facility may not use or disclose protected health information except as required or permitted by 45 C.F.R. Part 160, subpart C, and 45 C.F.R. Part 164, subpart E, revised as of October 1, 2005, and adopted by reference.		

ST - C236 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(g)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Record Service - (g) The facility must ensure that a transfer summary, signed by the physician or other practitioner responsible for treatment, accompanies the patient, or is sent by electronic mail or facsimile transmission to the receiving facility or unit, if the patient is transferred to another facility or is transferred to a nursing or intermediate care service unit within the same facility. The transfer summary must include essential information relative to the patient's diagnosis, condition, medications, treatments, dietary requirement,		

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known allergies, and treatment plan.

ST - C237 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(i)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Record Service - (i) The facility must safely preserve patient records for at least seven years after discharge of the patient, except that (1) x-ray films or reproductions of films must be kept for at least five years after discharge of the patient; and (2) the records of minors must be kept until the minor has reached the age of 21 years, or seven years after discharge, whichever is longer.		

ST - C238 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(j)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Record Service - (j) If a facility ceases operation, the facility must inform the department within 48 hours before ceasing operations of the arrangements made for safe preservation of patient records as required in this section. The facility must have a policy for the preservation of patients ' medical records in the event of the closure of the facility.		

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ST - C239 - Medical Record Service

Title Medical Record Service

Rule 7 AAC 12.770(k)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Medical Record Service - (k) If ownership of the facility changes, the previous licensee and the new licensee shall, before the change of ownership, provide the department with written documentation that (1) the new licensee will have custody of the patient ' s records upon transfer of ownership, and that the records are available to both the new and former licensee and other authorized persons; or (2) arrangements have been made for the safe preservation of patients ' records, as required in this section, and the records are available to the new and former licensees and other authorized persons.		

ST - C245 - Emergency Services

Title Emergency Services

Rule 7 AAC 12.485(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Emergency Services - (a) A frontier extended stay clinic must provide emergency services necessary to meet the needs of its extended stay patients and outpatients.		

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ST - C246 - Emergency Services

Title Emergency Services

Rule 7 AAC 12.485(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Emergency Services - (b) Emergency services must be available 24 hours a day.		

ST - C247 - Emergency Services

Title Emergency Services

Rule 7 AAC 12.485(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Emergency Services - (c) Equipment, supplies, drugs, chemicals, and biologicals used in treating emergency cases must be kept at the clinic and must be readily available. The items available must include, at a minimum, (1) drugs, chemicals, and biologicals commonly used in life-saving procedures, including analgesics, local anesthetics, antibiotics, anticonvulsants, antidotes and emetics, serums and toxoids, antiarrythmics, cardiac glycosides, antihypertensives, diuretics, and electrolytes and replacement solutions; and (2) equipment and supplies commonly used in life-saving procedures, including (A) airways; (B) endotracheal tubes; (C) bag valve mask (BVM) resuscitators; (D) oxygen; (E) tourniquets;		

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(F) immobilization devices;
(G) nasogastric tubes;
(H) splints;
(I) intravenous (IV) therapy supplies, including D5 normal, D5 quarter normal, and normal saline solutions or lactated ringers solutions;
(J) central line venous access kits or their equivalent;
(K) a suction machine;
(L) a defibrillator;
(M) a cardiac monitor;
(N) chest tubes for pediatrics and adults;
(O) assorted over the needle catheters; and
(P) indwelling urinary catheters.

ST - C248 - Emergency Services

Title Emergency Services

Rule 7 AAC 12.485(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Emergency Services - (d) The clinic may not provide, directly or otherwise, services for the procurement, storage, or transfusion of blood.		

ST - C249 - Emergency Services

Title Emergency Services

Rule 7 AAC 12.485(e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Emergency Services - (e) In addition to complying with the requirements of 7 AAC 12.465(c), the clinic must ensure that,		

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if not already on site, a registered nurse, a licensed practical nurse, a primary community health aide, or an emergency medical technician is, on a 24-hour-a-day basis,
(1) on call;
(2) immediately available by telephone or radio contact; and
(3) available to be on site within 30 minutes after an emergency contact.

ST - C250 - Emergency Services

Title Emergency Services

Rule 7 AAC 12.485(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Emergency Services - (f) The clinic must establish procedures, in coordination with emergency response systems in the area, under which a physician is immediately available by telephone or radio contact on a 24-hour-a-day basis to (1) receive emergency calls; (2) provide information on treatment of emergency patients; and (3) refer patients to appropriate locations for treatment.		

ST - C255 - Physical Plant

Title Physical Plant

Rule 7 AAC 12.487(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Physical Plant - (a) Any renovation, expansion, or new construction of a frontier extended stay clinic must comply with		

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(1) AS 18.60.580 - 18.60.660;
(2) AS 18.60.705 - 18.60.740;
(3) the International Building Code, as adopted by reference in, and revised under, 13 AAC 50.020; and
(4) the International Mechanical Code, as adopted by reference in, and revised under, 13 AAC 50.023.

ST - C256 - Physical Plant

Title Physical Plant

Rule 7 AAC 12.487(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Physical Plant - (b) A clinic must comply with (1) municipal fire safety regulations; (2) 13 AAC 50 - 13 AAC 55; and (3) applicable National Fire Protection Association (NFPA) standards, as follows, which are adopted by reference: (A) NFPA 13: Standard for the Installation of Sprinkler Systems, 2002 edition; (B) NFPA 25: Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems, 2002 edition; (C) NFPA 10: Standard for Portable Fire Extinguishers, 2002 edition; (D) NFPA 99: Standard for Health Care Facilities, 2005 edition; (E) NFPA 101: Life Safety Code, 2000 edition; if a waiver is issued by the Centers for Medicare and Medicaid Services for a requirement of NFPA 101, the waiver will be considered a waiver of that requirement for purposes of this paragraph.		

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ST - C257 - Physical Plant

Title Physical Plant

Rule 7 AAC 12.487(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Physical Plant - (c) The department may waive compliance with a requirement of this section if the commissioner determines that an equivalent alternative is provided and the safety and well-being of patients is assured. To obtain a waiver from the department, the owner or governing body of a clinic must apply in writing to the commissioner and must include in the application (1) justification for the waiver; (2) an explanation of why the particular requirement cannot be satisfied; (3) a description of the equivalent alternative proposed; and (4) if the application for waiver involves fire safety or other municipal or state requirements, evidence that it has been reviewed by each appropriate municipal or state authority.		

ST - C300 - Scope

Title Scope

Rule 7 AAC 12.600(a), (g) and (h)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Scope - (a) Unless indicated otherwise in this chapter, a facility required to be licensed under AS 47.32 and this chapter must comply with the provisions of 7 AAC 10.9500 - 7 AAC 10.9535 (General Variance Procedures), 7 AAC		

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10.9600 - 7 AAC 10.9620 (Inspections and Investigations), 7 AAC 12.600, 7 AAC 12.605, 7 AAC 12.610, 7 AAC 12.620, and 7 AAC 12.920, and with the applicable provisions of this section for each type of facility. A critical access hospital must also comply with 7 AAC 12.612.

(g) A facility licensed under this chapter, with the exception of a home health agency, that provides a service described in 7 AAC 12.670 - 7 AAC 12.720, 7 AAC 12.780, 7 AAC 12.790 - 7 AAC 12.850, 7 AAC 12.870, or 7 AAC 12.880 must comply with the section of this chapter governing the provision of that service, unless otherwise indicated.

(h) A frontier extended stay clinic must comply with 7 AAC 12.450 - 7 AAC 12.490, and the applicable provisions of 7 AAC 12.630 - 7 AAC 12.660, 7 AAC 12.730, 7 AAC 12.750, 7 AAC 12.760, 7 AAC 12.770, 7 AAC 12.860, 7 AAC 12.890, and 7 AAC 12.910.

ST - C301 - Criminal History Check Requirements

Title Criminal History Check Requirements

Rule 7 AAC 12.605

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Criminal History Check Requirements - An entity listed in AS 47.32.010(b) that is required to be licensed under AS 47.32 and this chapter must also comply with the applicable requirements of AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990 (Barrier Crimes, Criminal History Checks, and Centralized Registry).

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ST - C302 - Licensure

Title Licensure

Rule 7 AAC 12.610

Type Rule

Regulation Definition

Licensure - (a) Unless exempt under 7 AAC 12.611, before an individual or entity may operate a facility subject to AS 47.32 and this chapter, the individual or entity must obtain a license from the department under AS 47.32 and this section. The department may bring an action to enjoin the operation of a facility that has failed to obtain a license as required under AS 47.32 and this chapter.
(b) An application for an initial license must be submitted on a form supplied by the department. Within 30 days after receipt of an application, the department will review the application for completeness. If the application is incomplete, the department will return it to the applicant for additional information. If the application is complete, the department will conduct an onsite review and inspection of the facility. If, after the onsite review and inspection, and review of the application, the department determines that the applicant meets the applicable requirements of AS 47.32 and this chapter, the department will issue a provisional license in accordance with AS 47.32.050(a). If the department determines that the applicant does not meet the applicable requirements of AS 47.32 and this chapter, the department will deny the application and issue the notice as required under AS 47.32.070.
(c) If the department determines that the applicant is temporarily unable to comply with one or more applicable requirements and is taking appropriate steps to achieve compliance, the department will extend the application review period under (b) of this section for an additional 90 days.

Interpretive Guideline

Custom Help

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(d) An application for renewal of a biennial license must be submitted, and will be reviewed, in accordance with AS 47.32.060. In addition to any noncompliance with the applicable provisions of AS 47.32 and this chapter, grounds for nonrenewal include
(1) submission of false or fraudulent information to the department;
(2) failure or refusal to provide required information to the department;
(3) noncompliance that threatens the health, welfare, or safety of patients;
(4) the facility or individual, or an employee of the facility or individual,
(A) permitting, aiding, or abetting the commission of a criminal act under AS 11, AS 21, AS 28, or AS 47 related to facility operations covered by the license;
(B) engaging in conduct or practices detrimental to the health, welfare, or safety of patients, clients, or employees; or
(C) participating in, offering to participate, or implying an offer to participate in rebate, kickback, or fee-splitting arrangements or substantially similar arrangements; and
(5) an insufficient number of staff at the facility with the training, experience, or judgment to provide adequate care.

ST - C305 - Exemptions From Licensure

Title Exemptions From Licensure

Rule 7 AAC 12.611

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Exemptions from licensure - (a) Unless operating as a frontier extended stay clinic under 7 AAC 12.450 - 7 AAC 12.490, a rural health clinic, including a community health center and a federally qualified health center, is exempt from the licensure requirements of AS 47.32 and this chapter.		

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(b) A facility owned and operated by the United States Indian Health Service, or a facility owned and operated by a tribal organization, as defined in 25 U.S.C. 450b(l), under a funding agreement under 25 U.S.C. 458aaa-4 (Indian Self-Determination and Education Assistance Act and Tribal Self-Governance Amendments of 2000) is exempt from the requirement to obtain a license under AS 47.32 and this chapter. However, a facility described in this subsection must meet the applicable licensure requirements set out in AS 47.32 and this chapter.

ST - C320 - Governing Body

Title Governing Body

Rule 7 AAC 12.630(a)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Governing Body - (a) Each facility, with the exception of birth centers and intermediate care facilities for the mentally retarded, must have a governing body that assumes responsibility for implementing and monitoring policies that govern the facility ' s operation and for ensuring that those policies are administered in a manner that provides quality health care in a safe environment. The facility must provide to the department the name, title, and mailing address for
(1) each owner of the facility;
(2) each person who is principally responsible for directing facility operations; and
(3) the person responsible for medical direction.

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ST - C322 - Governing Body

Title Governing Body

Rule 7 AAC 12.630(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Governing Body - (b) The governing body shall (1) adopt, and revise when necessary, written bylaws providing for (A) election or appointment of officers and committees; (B) appointment of a local advisory board if the governing body is outside the state; and (C) frequency of meetings; (2) appoint an administrator, in accordance with written criteria; (3) maintain written records on the appointment of members to the medical staff, and the granting of privileges based on the recommendations of the medical staff; (4) require medical staff to sign an agreement to follow the bylaws of the medical staff; (5) establish appeal procedures for applicants for and members of the medical staff; (6) provide resources and personnel as necessary to meet patient needs; and (7) provide adequate equipment and supplies for the facility.		

ST - C323 - Governing Body

Title Governing Body

Rule 7 AAC 12.630(c)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Governing Body - (c) In addition to meeting the responsibilities of a governing body set out at (b) of this section, the governing body of a critical access hospital shall (1) make agreements with one or more appropriate entities identified in 42 C.F.R. 485.603(c), as amended through July 1, 1999 and adopted by reference, for credentialing of medical staff and for review of the quality and effectiveness of the diagnosis and treatment furnished by medical staff at the hospital; and (2) if the hospital provides inpatient care through mid-level practitioners under the offsite supervision of a physician, participate in a rural health network as described in 42 C.F.R. 485.603(a), as amended through July 1, 1999 and adopted by reference, and enter agreements with other members of the network addressing the subjects described in 42 C.F.R. 485.603(b), as amended through July 1, 1999 and adopted by reference.		

ST - C330 - Administration

Title Administration

Rule 7 AAC 12.640(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Administration - a) Each facility, with the exception of birth centers, intermediate care facilities for the mentally retarded, home health agencies, and ambulatory surgical facilities must comply with the provisions of this section.		

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ST - C331 - Administration

Title Administration

Rule 7 AAC 12.640(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Administration - (b) A facility must have an administrator, who is directly responsible to the governing body. The administrator shall (1) coordinate staff services; (2) provide liaison between the governing body and facility staff; (3) report to the governing body regularly and at least annually on facility operations; (4) provide written notice to medical staff of initial and annual or, if approved by the governing body, biennial appointments; (5) evaluate for implementation recommendations of the facility's committees and consultants; (6) ensure that the facility complies with program standards; and (7) delineate responsibility and accountability of each service component of the facility to the administration.		

ST - C332 - Administration

Title Administration

Rule 7 AAC 12.640(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Administration - (c) Each facility must have an institutional budget plan which includes an annual operating budget and a		

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capital expenditure plan for a projected three-year period. A committee comprised of representatives of the governing body and administrative staff shall prepare the plan.

ST - C340 - Employee Health Program

Title Employee Health Program

Rule 7 AAC 12.650

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help

Employee Health Program - (a) Each facility must have an employee health program that
(1) requires each employee to be evaluated within the first two weeks of employment and, except as provided otherwise in this paragraph, annually after that, to detect active cases of pulmonary tuberculosis, as follows:
(A) an employee who has never had a positive tuberculin skin test result shall obtain a tuberculin Mantoux skin test; if the tuberculin skin test result is negative, the employee does not need to have further annual tuberculosis evaluation under this paragraph if the employee's duties never require him or her to be in a room where patients or residents might enter, and if the employee does not handle clinical specimens or other material from patients or from their rooms; an example of such an employee is an administrative person or research worker whose place of work is remote from patient or residential care areas and who does not come in contact with clinical specimens;
(B) an employee who has previously had a positive tuberculin skin test result, or an employee whose tuberculin skin test obtained under (A) of this paragraph has a positive result,
(i) shall have a health evaluation by a health care provider to identify symptoms suggesting that tuberculosis disease is present; the health evaluation must also include evaluation for the presence of any of the following risk factors: evidence of

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inadequately treated past tuberculosis disease, history of close exposure to a case of communicable pulmonary tuberculosis within the previous two years, history of a negative tuberculin test within the previous two years, diabetes mellitus (severe or poorly controlled), diseases associated with severe immunologic deficiencies, immunosuppressive therapy, silicosis, gastrectomy, excessive alcohol intake, or human immunodeficiency virus infection; if symptoms suggesting tuberculosis disease are present, or if any of the risk factors is present, a chest x-ray shall be obtained as part of the health evaluation and the health care provider shall report the case to the section of epidemiology, division of public health; and
(ii) if the employee has previously received appropriate antituberculosis chemotherapy and has no symptoms suggesting that tuberculosis is present, the employee need not have further annual tuberculosis evaluation under this paragraph; and
(2) requires evidence of immunization against rubella by
(A) a valid immunization certificate signed by a physician listing the date of rubella vaccination;
(B) a copy of a record from a clinic or health center showing the date of vaccination; or
(C) the result of a serologic test approved by the department showing the employee is immune.
(b) The requirement of (a)(2) of this section does not apply to home health agencies, nursing homes, or ambulatory surgical facilities, and, for employees of other facilities, may be waived if a physician signs a certificate that there are medical reasons which dictate that an employee should not be vaccinated against rubella.

ST - C350 - Personnel

Title Personnel

Rule 7 AAC 12.660(a)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Personnel - a) A facility must plan and retain records of employee orientation, in-service training programs, and employee supervision. In addition, the facility must maintain for each employee a file that includes (1) a current job description; (2) a copy of the employee's current license or certification, if a license or certification is required by statute for the employee's profession; (3) a summary of the employee's education, training, and experience; and (4) evidence of the employee ' s compliance with the employee health requirements of 7 AAC 12.650. (5) evidence of compliance with the applicable requirements of AS 47.05.300 - 47.05.390 and 7 AAC 10.900 - 7 AAC 10.990 (Barrier Crimes, Criminal History Checks, and Centralized Registry).		

ST - C351 - Personnel

Title Personnel

Rule 7 AAC 12.660(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel - (b) If required by AS 08, patient care personnel must be currently licensed, certified, authorized, or registered in the state for the practice of their particular profession.		

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ST - C352 - Personnel

Title Personnel

Rule 7 AAC 12.660(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel - (c) Physicians, licensed nurses, pharmacists, physical therapists, dietitians, and social workers must be involved in the orientation and in-service education program for patient care personnel.		

ST - C353 - Personnel

Title Personnel

Rule 7 AAC 12.660(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Personnel - (d) The facility shall (1) document in personnel files that each employee has completed all required orientation, education, and training; and (2) establish and implement personnel policies requiring an annual evaluation of each employee ' s performance.		

ST - C385 - Physical Therapy Service

Title Physical Therapy Service

Rule 7 AAC 12.690

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Physical Therapy Service - (a) A facility which provides physical therapy services must retain a physical therapist as an employee or consultant of the facility. The physical therapist shall supervise all treatments rendered by physical therapy assistants. (b) A physical therapist may evaluate a patient and establish a treatment program upon written or verbal instructions from the treating physician. A treatment program and any modification to it must be approved by the referring physician. A physical therapist may accept a verbal order of a physician. (c) A physical therapist shall enter each treatment into the patient's medical record.		

ST - C390 - Social Work Service

Title Social Work Service

Rule 7 AAC 12.700

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Social Work Service - (a) A facility which provides social work services must retain a social worker as an employee or consultant of the facility. (b) A facility that provides social work services must identify and provide interventions in response to the medically-related mental, behavioral, psychosocial, and advocacy needs of a patient. Social work services must assist staff, patients, and patients' families to understand and cope with emotional and social problems associated with health care.		

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ST - C396 - Occupational Therapy Service

Title Occupational Therapy Service

Rule 7 AAC 12.710

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Occupational Therapy Service - (a) A facility which provides occupational therapy services must retain an occupational therapist as an employee or consultant of the facility. (b) Repealed 5/28/92. (c) An occupational therapist shall directly supervise assistants.		

ST - C420 - Central Service

Title Central Service

Rule 7 AAC 12.730(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Central Service - (a) If a facility processes sterilized instruments and supplies, it must meet the requirements in this section. If a facility receives sterilized instruments and supplies from another entity through contract or agreement, the facility must ensure the contractor meets the requirements in this section.		

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ST - C421 - Central Service

Title Central Service

Rule 7 AAC 12.730(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Central Service - (b) A facility must maintain a separate area for processing, decontamination, if necessary, and storage of sterile supplies and materials.		

ST - C422 - Central Service

Title Central Service

Rule 7 AAC 12.730(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Central Service - (c) A facility must develop and implement written policies and procedures for the cleaning, antimicrobial processing, and storage of supplies and equipment to prevent the transmission of infection through their use.		

ST - C424 - Central Service

Title Central Service

Rule 7 AAC 12.7309e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Central Service - (e) Shipping cartons may not be stored with sterile products.		

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ST - C425 - Central Service

Title Central Service

Rule 7 AAC 12.730(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Central Service - (f) A facility must retain records of bacteriological efficiency monitoring of autoclaves at recommended frequency for three years.		

ST - C426 - Central Service

Title Central Service

Rule 7 AAC 12.730(g)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Central Service - (g) Instructions for the operation of autoclaves must be posted near the equipment.		

ST - C427 - Central Service

Title Central Service

Rule 7 AAC 12.730(h)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Central Service - (h) Each facility must maintain a retrieval system for supplies whose sterility is questionable.		

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ST - C440 - Housekeeping Service

Title Housekeeping Service

Rule 7 AAC 12.750(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Housekeeping Service - (a) Each facility, with the exception of home health agencies and intermediate care facilities for the mentally retarded, must provide a housekeeping service.		

ST - C441 - Housekeeping Service

Title Housekeeping Service

Rule 7 AAC 12.750(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Housekeeping Service - (b) A facility must have routine cleaning procedures for furniture, floors, walls, ceilings, supply and exhaust grills, and lighting fixtures.		

ST - C442 - Housekeeping Service

Title Housekeeping Service

Rule 7 AAC 12.750(c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Housekeeping Service - (c) A facility must have written procedures for cleaning all areas of the facility, including cleaning of a patient unit following discharge of a patient.		

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ST - C444 - Housekeeping Service

Title Housekeeping Service

Rule 7 AAC 12.750(e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Housekeeping Service - (e) A facility must maintain sufficient housekeeping cleaning supplies and equipment. Separate equipment must be provided, as applicable, for operating rooms, delivery rooms, the nursery, and the dietary area. Housekeeping equipment and cleaning supplies, other than those in bulk, must be stored in designated housekeeping supply rooms. A detergent germicide must be used for all cleaning and dusting purposes. Mop heads must be removable and must be changed at least daily.		

ST - C445 - Housekeeping Service

Title Housekeeping Service

Rule 7 AAC 12.750(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Housekeeping Service - (f) Each facility must provide a sufficient housekeeping service to maintain the interior of the facility in a safe, clean, orderly and attractive manner and free from offensive odors.		

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ST - C450 - Infection Control

Title Infection Control

Rule 7 AAC 12.760(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Infection Control - (a) Each facility, with the exception of home health agencies, must have an infection control committee.		

ST - C451 - Infection Control

Title Infection Control

Rule 7 AAC 12.760(b) - (f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Infection Control - (b) The administrator or medical staff shall appoint an infection control committee composed of representatives of the medical staff, administration, nursing, and other services, that is responsible for maintenance and supervision of an infection control program. (c) The infection control committee shall establish and maintain, as part of the infection control program, (1) specific procedures for diagnosing, reporting, investigating, reviewing, and maintaining records of infection of residents and personnel, such as the procedures set out in the federal Centers for Disease Control guidelines; (2) written procedures for all departments incorporating principles or practices that reduce the risk of infection in all patient care services and areas; (3) a system for reporting communicable diseases in		

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accordance with 7 AAC 27.005 - 7 AAC 27.010; and
(4) written isolation and body substance isolation techniques for known or suspected communicable diseases or infections.
(d) The infection control committee shall meet not less than quarterly, and shall retain written minutes of all meetings for at least three years.
(e) Infectious wastes must be disposed of in an incinerator which provides complete combustion.
(f) The infection control committee shall approve proposed disinfectant-detergent formulations and policies and procedures for their use.

ST - C510 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(1)

Type Rule

Regulation Definition | **Interpretive Guideline** | **Custom Help**

Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has
(1) provision for monitoring, evaluating, identifying, correcting, and reassessing care practices that negatively affect quality of care and services provided or result in accident or injury to a patient, resident, or staff, and provisions for documenting deficiencies found and remedial actions taken;

ST - C511 - Risk Management

Title Risk Management

Rule 7 aac 12.860(2)

Type Rule

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Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (2) a preventive maintenance program that is designed to ensure the proper functioning, safety and performance of all electrical and mechanical equipment used in the care, diagnosis, and treatment of patients or residents, and for the physical plant including the electrical, plumbing, heating, and ventilation systems and their parts, including (A) implementation of policies that specify procedures and frequencies for the maintenance of all equipment and systems and all their parts, that meets or exceeds manufacturers' recommendations, and (B) documentation of the preventive maintenance that has occurred;		

ST - C512 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(3)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (3) a procedure to investigate, analyze, and respond to patient or resident grievances that relate to patient or resident care;		

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ST - C513 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(4)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (4) a job-specific orientation program and an in-service training program for each employee that provides annual instruction in (A) policies and procedures for that service; (B) the employee's job responsibilities and the skills necessary to meet those responsibilities; (C) safety, fire, and disaster plans; and (D) principles and techniques of infection control;		

ST - C515 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(6)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (6) quarterly fire drills for each work shift, a record showing when each drill was held, and coordination with community or area mass casualty drills;		

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ST - C516 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(7)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (7) an annual review of written policies and procedures approved, signed, and dated by the administrator or the administrator's designee;		

ST - C517 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(8)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (8) a training program by an instructor certified in cardiopulmonary resuscitation (CPR) for all personnel who are engaged in patient care; the training program must include certification of employees by an approved organization; and		

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ST - C518 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(9)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (9) a method of ensuring safe storage and transportation of gas cylinder tanks.		

ST - C519 - Risk Management

Title Risk Management

Rule 7 AAC 12.860(10)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Risk Management - A facility, with the exception of home health agencies and birth centers, must have a risk management program that has (10) a disaster plan developed in coordination with the local community to address the facility's response in case of a disaster; the plan must include community and state resources for staffing and supplies, and prioritized options to account for staffing shortages, disruptions in the supply line, community allocation of staff resources, telephone triage, and plans for establishing and maintaining communication with local, state, and federal emergency response agencies; the disaster plan must be in place on or before January 1, 2007, and must address response to		

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(A) an earthquake, flood, major fire, tsunami, or other potential disaster relative to the area; and
(B) a pandemic influenza outbreak; the plan must include plans for
(i) separate entrances to buildings, and segregated seating, for patients with influenza-like illness; and
(ii) other measures to contain or prevent transmission of the illness.

ST - C540 - Outpatient Services

Title Outpatient Services

Rule 7 AAC 12.880(a)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Outpatient Services - (a) If a facility provides outpatient service, the responsibility of the outpatient service to the medical staff and the administration of the facility must be defined in writing.		

ST - C541 - Outpatient Services

Title Outpatient Services

Rule 7 AAC 12.880(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Outpatient Services - (b) The outpatient service must develop a written plan describing its treatment philosophy, objectives, and organization.		

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ST - C543 - Outpatient Services

Title Outpatient Services

Rule 7 AAC 12.880(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Outpatient Services - (d) A medical record must be maintained for each patient who receives care in the outpatient service.		

ST - C544 - Outpatient Services

Title Outpatient Services

Rule 7 AAC 12.880(e)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Outpatient Services - (e) If outpatient psychiatric followup treatment is provided, the outpatient service must comply with 7 AAC 12.215(d) (3).		

ST - C545 - Outpatient Services

Title Outpatient Services

Rule 7 AAC 12.880(f)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Outpatient Services - (f) If outpatient substance abuse followup treatment is provided, the outpatient service must comply with 7 AAC 12.220(c) (5) and 7 AAC 33.005 - 7 AAC 33.165.		

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ST - C550 - Rights

Title Rights

Rule 7 AAC 12.890(a)

Type Rule

Regulation Definition

Rights - (a) Except as otherwise provided in AS 47.30.825 , a patient or a nursing facility resident has rights that include the following:
(1) to associate and communicate privately with persons of the patient's or resident's choice;
(2) to have reasonable access to a telephone to make and receive confidential calls;
(3) to mail and receive unopened correspondence;
(4) to be informed of the facility's grievance procedure for handling complaints relating to patient or resident care;
(5) to be free from physical or chemical restraints except as specified in AS 47.30.825 or 7 AAC 12.258;
(6) to be treated with consideration and recognition of the patient's or resident's dignity and individuality;
(7) to confidentiality of the patient's or resident's medical records and treatment;
(8) to be free from unnecessary or excessive medications;
(9) to private visits by the patient's or resident's spouse, except in a general acute care hospital, and, in a nursing facility, to share a room if both spouses are residents in the home, unless medical reasons or space problems require separation;
(10) to be informed in a language that the patient or resident understands, before or at the time of admission and during the patient's or resident's stay, of services that are available in the facility and their cost, including any costs for services or personal care items not covered by the facility's basic per diem rate or not covered under Titles XVIII or XIX of the Social Security Act;

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(11) to be informed by a physician of the patient's or resident's medical condition, in a language that the patient or resident understands;
(12) to refuse to participate in experimental research, psychosurgery, lobotomy, electroconvulsive therapy, or aversive conditioning;
(13) to participate in the development of a plan of care, or discharge plan, and to receive instructions for self-care and treatment that include explanation of adverse symptoms and necessary precautions, as appropriate; and
(14) to be informed of the rights listed in (a) of this section and of all the rules and regulations governing patient or resident conduct and responsibility in a language the patient or resident understands.

ST - C551 - Rights

Title Rights

Rule 7 AAC 12.890(b)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Rights - (b) A written notice that sets out the rights listed in (a) of this section must be posted in a conspicuous location, and a copy must be given to a patient, a resident, family member, or the legal representative of the patient or resident and, at cost, to a member of the public.		

ST - C552 - Rights

Title Rights

Rule 7 AAC 12.890(c)

Type Rule

Aspen State Regulation Set: C 001 Frontier Extended Stay Clinic

Regulation Definition	Interpretive Guideline	Custom Help
Rights - (c) A written notice that sets out the facility procedures for receipt and safe keeping of patients" or residents" money and valuables. A receipt for safeguarded money and valuables must be provided by the facility to the patient or resident at the time of admission and following changes in the facility's procedures.		

ST - C553 - Rights

Title Rights

Rule 7 AAC 12.890(d)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Rights - (d) A facility must establish written procedures to assure delivery of complaints by patients or residents to the facility's administration, that shall acknowledge receipt of a patient's or resident's complaint, and take appropriate action.		

ST - C570 - Contracts

Title Contracts

Rule 7 AAC 12.910(a) - (c)

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Contracts - a) A facility may contract with another facility or agent to perform services or provide resources to the facility. (b) Services regulated under this chapter which are provided by contract must meet the requirements of this chapter. (c) Contracts for resources or services required by regulation and not provided directly by a facility must		

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(1) specify the respective functions and responsibilities of the contractor and the facility, and the frequency of on-site consultation by the contractor;
(2) repealed 9/1/2000;
(3) be in writing, dated and signed by both parties; and
(4) include the current license or registration number, if required by state law, of the contractor.

ST - C575 - Applicable Laws and Regulations

Title Applicable Laws and Regulations

Rule 7 AAC 12.920

Type Rule

Regulation Definition	Interpretive Guideline	Custom Help
Applicable Laws and Regulations - A facility must comply with all applicable federal, state, and local laws and regulations. If a conflict or inconsistency exists between codes or standards, the more restrictive provision applies.		