

1 BOARDS AND COMMISSIONS

2 KENTUCKY BOARD OF LICENSURE FOR LONG-TERM CARE ADMINISTRATORS

3 (Amendment)

4 201 KAR 6:020. Other requirements for licensure.

5 RELATES TO: KRS 216A.070(1), 216A.080(1)

6 STATUTORY AUTHORITY: KRS 216A.070, 216A.080

7 NECESSITY, FUNCTION, AND CONFORMITY: KRS 216A.070 requires the Kentucky Board  
8 of Licensure for Long-Term Care Administrators to develop, impose, and enforce standards for  
9 licensure, and authorizes the Board to promulgate administrative regulations necessary for the  
10 proper performance of its duties. KRS 216A.080 authorizes the board to promulgate administrative  
11 regulations to establish requirements for applicants seeking licensure. This administrative  
12 regulation establishes-requirements for examination and licensure.

13 Section 1. Examination. (1) The examination administered and verified by the National  
14 Association of Long-Term Care Administrator Boards (NAB) shall serve as the board approved  
15 examination required by KRS 216A.080(d).

16 Section 2. Requirements. An applicant for a long-term care administrator license shall, in  
17 addition to meeting all of the requirements set forth in KRS 216A.080(1):

18 (1) Have satisfactorily completed a course of study for, and have been awarded a baccalaureate  
19 degree from, an accredited college or university accredited by an agency recognized by the United  
20 States Department of Education;

21 (2) Submit to the Board of Licensure for Long-Term Care Administrators documentation of a

1 passing NAB exam score, as defined by NAB for the period in which the exam was completed.  
2 Passing scores may be from up to two (2) years before or one (1) year following the filing of an  
3 application for licensure or reinstatement;

4 (3)(a) Have a bachelor’s or master’s degree from an academic program accredited by NAB which  
5 was awarded within two (2) years of the date of the application; or

6 (b) Have completed an internship, that is at least 1,000 hours in length, which is a part of a degree  
7 in long-term care administration or a related field; or

8 (c) Have six (6) months of continuous management experience in a long-term care facility. If part-  
9 time, not less than 1,000 hours of management experience within a twenty-four (24) month period.  
10 This experience shall be completed up to two (2) years before or one (1) year following the date  
11 of application. The management experience shall include evidence of responsibility for:

- 12 1. Personnel management;
- 13 2. Budget preparation;
- 14 3. Fiscal management;
- 15 4. Public relations; and
- 16 5. Regulatory compliance and quality improvement.

17 ~~[(b) An internship, that is at least 1,000 hours in length, which is a part of a degree in long-term~~  
18 ~~care administration or a related field; or~~

19 ~~—(c) A bachelor’s or master’s degree from an academic program accredited by NAB which was~~  
20 ~~awarded within two (2) years of the date of the application;]~~

21 (4) Submit two (2) professional letters of reference; and

22 (5) Submit Form 1, [an]“Application for Licensure[-]” and Form 2, a “Work Verification Form”,  
23 if required.

1 Section 3. Qualification. An applicant currently holding a Health Services Executive (HSE)  
2 qualification from NAB shall be considered to have met the requirements of Section 2 of this  
3 administrative regulation and~~[Applicants]~~ shall submit documentation of a current HSE  
4 qualification from NAB.

5 Section 4. Any application not completed within one (1) year of the date of application shall be  
6 deemed incomplete and withdrawn.

7 Section 5. Notification. A licensee shall provide the board with written notification within thirty  
8 (30) days of the occurrence of any of the following:

9 (1) Change of home address;

10 (2) Change of employer;

11 (3) Conviction of a felony or misdemeanor:

12 (a) A licensee providing notice of a conviction shall provide a copy of the judgment in the case.

13 (b) A plea of nolo contendere or an Alford plea shall not absolve the licensee of an obligation to  
14 report a conviction; or

15 (4) Immediate Jeopardy or Substandard Level of Care notice received from the Cabinet for Health  
16 and Family Services by the long-term care facility at which the licensee serves as the administrator  
17 of record. A licensee providing notice of a citation shall provide a copy of the inspection report  
18 and submitted plan of correction.

19 Section 6. Incorporation by Reference.

20 (1) The following materials are incorporated by reference:

21 (a) Form 1, "Application for Licensure", June 2021; and~~[May 2018, is incorporated by reference.]~~

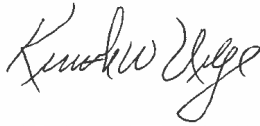
22 (b) Form 2, "Work Verification Form", June 2021.

23 This material may be inspected, copied, or obtained, subject to applicable copyright law, at the

1 Kentucky Board of Licensure for Long-Term Care Administrators, 500 Mero Street, [911  
2 ~~Leewood Drive,~~] Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. and is  
3 available at <https://ltca.ky.gov/>.

201 KAR 6:020

APPROVED BY AGENCY:

A handwritten signature in black ink, appearing to read "Kenneth Urlage", is written over a thin horizontal line.

Kenneth Urlage, Board Chair  
Board of Licensure for Long-term Care Administrators

Date: July 14, 2021

## PUBLIC HEARING AND PUBLIC COMMENT PERIOD

A public hearing on this administrative regulation shall be held at 10:00 AM EST on September 28, 2021, at 500 Mero Street, 127CW, Frankfort, Kentucky 40601. All attendees shall comply with all Executive Orders relating to the State of Emergency as may be in effect on the date of the public hearing, which may be found at: <https://governor.ky.gov/covid-19>. Members of the public may utilize the following link to attend the meeting by video conference:

Topic: LTCA Regulation Public Hearing  
Time: Sep 28, 2021 10:00 AM Eastern Time (US and Canada)

Join from PC, Mac, Linux, iOS or Android:  
<https://us02web.zoom.us/j/87211472129?pwd=SG91VmIxOGlaN3ljeHd6WHhkK2FOQT09>  
Password: 296951

Or Telephone:

Dial:  
USA 713 353 0212  
USA 8888227517 (US Toll Free)  
Conference code: 257130

Find local AT&T

Numbers: <https://www.teleconference.att.com/servlet/glbAccess?process=1&accessNumber=7133530212&accessCode=257130>

Or an H.323/SIP room system:

H.323:  
162.255.37.11 (US West)  
162.255.36.11 (US East)  
115.114.131.7 (India Mumbai)  
115.114.115.7 (India Hyderabad)  
213.19.144.110 (Amsterdam Netherlands)  
213.244.140.110 (Germany)  
103.122.166.55 (Australia Sydney)  
103.122.167.55 (Australia Melbourne)  
149.137.40.110 (Singapore)  
64.211.144.160 (Brazil)  
149.137.68.253 (Mexico)  
69.174.57.160 (Canada Toronto)  
65.39.152.160 (Canada Vancouver)  
207.226.132.110 (Japan Tokyo)  
149.137.24.110 (Japan Osaka)

Meeting ID: 872 1147 2129  
Password: 296951

SIP: [87211472129@zoomcrc.com](mailto:87211472129@zoomcrc.com)  
Password: 296951

Individuals interested in being heard at this hearing shall notify this agency in writing by five (5) workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing is received by that date (September 21), the hearing may be canceled. This hearing is open to the public. Any person who wishes to be heard will be given an opportunity to comment on the proposed administrative regulation. A transcript of the public hearing will not be made unless a written request for a transcript is made.

If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted through 11:59 PM EST on September 30, 2021. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person below.

Contact Person: Leah Cooper Boggs  
Title: General Counsel, Department of Professional Licensing  
Address: 500 Mero Street 237 CW  
Phone: (502) 782-0562 (office)  
Phone: (502) 352-8095 (cell)  
Fax: (502) 564-3969  
Email: [LBoggs@ky.gov](mailto:LBoggs@ky.gov)

## REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Regulation No. 201 KAR 6:020

Contact Person: Leah Cooper Boggs  
Phone: (502) 782-0562 (office)  
Phone Number: 502-352-8095 (cell)  
Email: [lboggs@ky.gov](mailto:lboggs@ky.gov)

(1) Provide a brief summary of:

(a) What this administrative regulation does: This administrative regulation sets forth the requirements to obtain a license for a long-term care administrator.

(b) The necessity of this administrative regulation: This administrative regulation is necessary to update and clarify the requirements to obtain a license and the license application.

(c) How this administrative regulation conforms to the content of the authorizing statutes: The Board is required by KRS 216A.070 to regulate the practice of long-term care administration and promulgate administrative regulations regarding how to obtain a license. KRS 216A.080 also authorizes the Board to promulgate administrative regulations regarding licensure.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: The proposed regulation clarifies the requirements to obtain a license and simplifies the license application.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation: See (1)(d).

(b) The necessity of the amendment to this administrative regulation: See (1)(b).

(c) How the amendment conforms to the content of the authorizing statutes: See (1)(c).

(d) How the amendment will assist in the effective administration of the statutes: See (1)(d).

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: This regulation will affect the 976 individuals licensed by the Board and anyone interested in obtaining a license from the Board.

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment: None. It only simplifies and clarifies the requirements to obtain a license in the Commonwealth of Kentucky.



(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3): None. It only simplifies and clarifies the requirements to obtain a license in the Commonwealth of Kentucky.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3): It will assist licensees and prospective licensees in understanding the requirements to obtain a license.

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:

(a) Initially: None. It only simplifies and clarifies the requirements to obtain a license in the Commonwealth of Kentucky.

(b) On a continuing basis: None.

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: Current Board funding will be used to implement and enforce this administrative regulation.

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: No additional funding or increase in fees is needed.

(8) State whether or not this administrative regulation established any fees or directly or indirectly increased any fees: No fees are directly or indirectly established or increased by the administrative regulation.

(9) TIERING: Is tiering applied? (Explain why or why not): Tiering is not applicable as the proposed language will be applied equally to all entities impacted by it.

## FISCAL NOTE ON STATE OR LOCAL GOVERNMENT

Regulation No. 201 KAR 6:020

Contact Person: Leah Cooper Boggs

Phone: (502) 782-0562 (office)

Phone Number: 502-352-8095 (cell)

Email: [lboggs@ky.gov](mailto:lboggs@ky.gov)

1. What units, parts or divisions of state or local government (including cities, counties, fire departments, or school districts) will be impacted by this administrative regulation? The Board of Licensure for Long-term Care Administrators.

2. Identify each state or federal statute or federal regulation that requires or authorizes the action taken by the administrative regulation. KRS 216A.070 and 216A.080

3. Estimate the effect of this administrative regulation on the expenditures and revenues of a state or local government agency (including cities, counties, fire departments, or school districts) for the first full year the administrative regulation is to be in effect. The administrative regulation will not create any additional expenses or revenues for any state or local government agency after implementation.

(a) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fires, or school districts) for the first year? No revenues are expected to be generated by the provisions of this administrative regulation.

(b) How much revenue will this administrative regulation generate for the state or local government (including cities, counties, fire departments, or school districts) for subsequent years? None.

(c) How much will it cost to administer this program for the first year? There are no additional costs.

(d) How much will it cost to administer this program for subsequent years? See 3(c).

Note: If specific dollar estimates cannot be determined, provide a brief narrative to explain the fiscal impact of the administrative regulation.

Revenues (+/-):

Expenditures (+/-):

Other Explanation:

## SUMMARY OF CHANGES TO MATERIAL INCORPORATED BY REFERENCE

Regulation No. 201 KAR 6:020

Contact Person: Leah Cooper Boggs  
Phone: (502) 782-0562 (office)  
Phone Number: 502-352-8095 (cell)  
Email: [lboggs@ky.gov](mailto:lboggs@ky.gov)

“Form 1, Application for Licensure,” June 2021, is a six (6) page form used by applicants seeking licensure by the Kentucky Board of Long-Term Care Administrators. It amends the “Licensure Application,” 05/2018. The proposed amendments to this form makes the following changes: (1) simplifies the title of the form; (2) clarifies the fee for initial or renewal license; (3) delineates requests for business and personal address, phone, and email; (4) that the applicant must provide a home office physical location as well as business premises and contact information; (4) clarifies questions regarding US citizenship; (5) clarifies questions regarding licensure in other states and previous licensure in Kentucky; (6) clarifies questions regarding education and experience; (7) clarifies questions regarding employment history; (8) clarifies questions regarding temporary permits; (8) clarifies questions for reinstatement and reactivation; (9) separates the “work verification” information into a separate form, since that information is not required from every applicant; and (10) changes the revision date.

“Form 2, Work Verification Form,” June 2021, is a two (2) page form, which requests the information required by 201 KAR 6:020 Sec. 2(3)(c).