

**Effective 5/10/2016**

## **Part 2 Registration**

### **31A-44-201 Registration required.**

- (1) A person may not provide or offer to provide continuing care unless the person is registered with the department.
- (2) A registration expires on December 31 of a given year, unless a provider renews the provider's registration under Section 31A-44-203.

Enacted by Chapter 270, 2016 General Session

### **31A-44-202 Registration.**

- (1) To register under this part, a person shall:
  - (a) pay an original registration fee established by the department in accordance with Section 63J-1-504; and
  - (b) submit a registration statement, in a form approved by the department, that contains the information described in Subsection (2).
- (2) A provider's registration statement shall include:
  - (a) the provider disclosure described in Section 31A-44-301;
  - (b) a copy of the continuing care contract that the provider will propose to a prospective facility resident;
  - (c) evidence that the provider's facility is located or will be located in a zone that a municipality or county has zoned for continuing care facilities; and
  - (d) information required by the department by rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.
- (3) The department shall accept or deny a registration no later than 180 days after the day on which the provider applies for registration.

Enacted by Chapter 270, 2016 General Session

### **31A-44-203 Renewal process.**

In order to renew a registration under this section, a provider shall:

- (1) pay an annual fee established by the department in accordance with Section 63J-1-504;
- (2) submit an updated provider disclosure statement that complies with Section 31A-44-301;
- (3) submit a copy of the most recent version of the continuing care contract the provider will propose to a prospective facility resident; and
- (4) comply with rules made by the department under Subsection 31A-44-202(2).

Enacted by Chapter 270, 2016 General Session

### **31A-44-204 Actuarial review.**

- (1)
  - (a) This section applies only to a provider that directly or indirectly offers a future guarantee of continuing care that the department determines develops current actuarial liabilities.
  - (b) This section does not apply to a provider that offers continuing care under a fee-for-service model with a required entrance fee.

- (2) A provider subject to this section shall file, with the department, an actuarial review:
  - (a) upon being notified of the department's determination; and
  - (b) on a day designated by the department in the year five years after the day on which the department last received an actuarial review from the provider.
- (3) The department may require an actuarial review in addition to the actuarial reviews required by Subsection (2) if the department determines that the provider shows an indication of financial instability.

Enacted by Chapter 270, 2016 General Session

**31A-44-205 Suspension or revocation of registration.**

The department may suspend or revoke a provider's registration if the provider intentionally violates this chapter.

Enacted by Chapter 270, 2016 General Session

**31A-44-206 Management by others.**

A provider may not contract for total management of a facility unless the provider notifies the department.

Enacted by Chapter 270, 2016 General Session