STATE OF RHODE ISLAND
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES
APPEALS OFFICE

[redacted]

V. DOCKET NO. 26-2822

[redacted]

[redacted]

I. INTRODUCTION

The Appellant, [redacted], initiated this matter to appeal The Pre-Transfer or Pre-Discharge 30-Day Notice issued by [redacted] (Facility.) A Microsoft Teams hearing on this matter occurred on May 27, 2026, and the Appellant did not elect the option of a video hearing. The Appellant is seeking to have the discharge overturned and remain at the facility. For the reasons discussed in more details below, the Appellant's appeal is granted.

II. JURISDICTION

The Executive Office of Health and Human Services (EOHHS) is authorized and designated by R.I.G.L. § 42-7.2-6.1 and EOHHS regulation 210-RICR-10-05-2 to be the entity responsible for appeals and hearings related to involuntary transfers and discharges for all patients from nursing homes regardless of whether they are on Medicaid or not. The administrative hearing was held in accordance with the Administrative Procedures Act (R.I.G.L. § 42-35.1 et. seq.) and EOHHS regulation 210-RICR-10-05-2.

III. ISSUE

The issue is whether there is sufficient evidence and compliance with State and Federal policies and regulations to permit the involuntary discharge of the Appellant.

IV. PARTIES AND EXHIBITS

Present were Beth Mantia from the Long-Term Care Ombudsman's Office (Alliance), the Appellant's daughter [redacted], and [redacted] and [redacted] were present for the Facility. The following exhibits were submitted:

- Psychiatric evaluation and consultation inclusive of dates March 30, 2026, through April 22, 2026.
- Screenshots of text messages between [redacted] (Administrator), and the Appellant's daughter.
- A list of eight reportable events to The Department of Health (DOH) spanning dates December 22, 2025, through April 29, 2026.
- A list of incidents and grievances spanning dates March 2, 2026, through May 5, 2026.
- A written statement by the Facility stating their concerns and reason for discharge.
- Pre-Transfer or Pre-Discharge 30 Day Notice dated April 29, 2026.

The Alliance presented on behalf of the Appellant and submitted the following exhibit:

- A typed Statement of the reason for the appeal and the reason the Alliance is in disagreement with the discharge.

V. RELEVANT LAW/REGULATIONS

Under 210-RICR-50-00-7, there is a set of requirements, both procedural and substantive, a nursing home must take to involuntarily discharge a patient. This process is not limited to Medicaid patients. Facilities are not allowed to discharge patients involuntarily, except in certain cases. 210-RICR-50-00-7.4(A). These cases include when the health and/or safety of other individuals in the facility are endangered, the health and safety of the resident is endangered by remaining in the facility, or when the discharge is necessary for medical reasons.

Furthermore, 210-RICR-50-00-7.6 outlines several procedural requirements to discharge a patient from a nursing home involuntarily. These include:

1. Written notice being given to the patient and any representative they have. The notice must:
   a. Be in a language and manner the patient understands.
   b. List the reason for the transfer/discharge.
   c. List the effective date of the transfer/discharge.
   d. List the location the patient is being discharged to.
   e. Contains a statement of the patient's appeal rights including the name, mailing address, email address, and telephone number of the entity that receives such appeals.
   f. Contain information on how to obtain the appeal form and how to get assistance in completing the appeal form, if needed.

g. Contain the name, mailing address, email address, and telephone number of the Office of the State Long-Term Care Ombudsman.

h. Be provided at least 30 days in advance of the transfer except in certain cases of:

   i) danger to the safety or health of the individuals in the facility.

   ii) when the patient's health improves sufficiently to allow a more immediate transfer or discharge.

   iii) when a more immediate transfer or discharge is needed based on the patient's urgent medical needs.

   iv) when the patient has not been in the facility for a period of at least 30 days.

i. For intellectually and/or developmentally disabled patients, the notice also needs to include the mailing address, email address, and telephone number of the Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals' Division of Developmental Disabilities.

j. Notification of the pending discharge must be provided to the Office of the State Long-Term Care Ombudsman. The Ombudsman is part of and operates out of the Alliance for Better Long-Term Care.

k. The patient also needs to receive a notice of appeal rights at the time of the discharge notice.

Finally, there is a requirement for the discharge to be a safe discharge. Federally, 42 C. F. R. § 483.15(c)(7) requires the facility must provide (and document) sufficient preparation and orientation to the patient to ensure a safe and orderly transfer or discharge. This must be in a form and matter that the patient can understand. On the State level, 210-RICR-50-00-7.5(B) lays out the requirements of a safe discharge. This includes 1) contact information for the practitioner responsible for the patient's care, 2) the patients' representatives' information, including contact information, 3) any advance directives of the patient 4) any special instructions or precautions for ongoing care, 5) comprehensive care plan goals, and 6) all other necessary information and documentation to ensure a safe and effective transition of care. This includes a copy of the discharge summary.

VI. FINDINGS OF FACT

- The Appellant has been a resident at [redacted] since November 7, 2025.
- Psychiatric evaluations reveal the Appellant is capable of making her own decisions regarding her care.

- The Appellant has voiced several allegations of abuse and/or neglect since her admission, resulting in multiple different interventions to attempt to rectify her concerns, including changes in her plan of care, staffing adjustments, and staff re-education.
- The Appellant has made multiple grievances to (DOH), all of which were unsubstantiated.
- Per DOH recommendations, the Facility has implemented 15 minute checks and having two staff during all interactions with the Appellant to safeguards against false accusations.
- Clinically, the Appellant does not require two staff for these interactions.
- The Appellant does not want certain staff members interacting with her; all staff choices are presented to her and her family for approval. This is due to the Appellant making claims that staff are mistreating her.
- The Facility operates typically at a ratio of 6.5 residents per one staff member. The Facility has the staffing level to accommodate the Appellant's expectations.
- The Appellant is reportedly amenable to having a room with a camera to monitor the goings on in her room. The required forms were submitted to the Facility but were not signed by the Appellant as required, they were signed by another person.

VII. DISCUSSION

The Appellant, as well as her daughter, have expressed dissatisfaction with the staffing choices that are presented to her, which causes disturbances at the Facility.

The Appellants' medical and psychiatric needs are being met at the Facility. The option to choose which staff work with her is not offered to other residents, it is to accommodate this Appellant's desires. Two staff are required in order to minimize any false accusations that may occur. The Facility's position is that the number of "acceptable" staff is decreasing and therefore they are not able to meet the Appellant's needs.

The Appellant has looked into alternative facilities and prefers either [redacted] or [redacted]. She would like to remain easily accessible to her family, which is understandable.

The Facility has not demonstrated an inability to meet the Appellant's needs, the record is void of documentation the Appellant's needs are not being met. While they are not able to accommodate her staffing expectations, which is a totally separate issue. 42 C. F. R. § 483.25 outlines what a facility must provide in order to meet a resident's needs. The regulation lists several categories of medical and psychiatric needs which must be met, and the Facility is in accordance with those regulation. This is a facility the Appellant chose to be admitted to, and given that, she needs to accommodate the staffing

patterns the Facility has in place. Should the Appellant feel the staff are mistreating her, she has the option of completing the consent paperwork for a camera in her room in a manner that is in line with the DOH regulations. In addition, if the Appellant remains dissatisfied with the treatment she is receiving at the Facility, it is her right to relocate to another facility. The Appellant's expectations that the Facility needs to assign her staff in accordance with her personal preferences is unreasonable, the Facility can only assign staff as they are scheduled.

VIII. CONCLUSION OF LAW

After careful review of the testimony and evidence presented at the Administrative Hearing, it is clear by a preponderance of evidence that:

1. The evidence does not support the Facility's inability to meet the Appellant's needs.
2. The Appellant is not a danger to the health and/or well-being of herself or other residents and staff at the Facility.
3. The Appellant reserves the right to relocate to another facility if she remains dissatisfied with her care at the Facility.
4. The Facility may not involuntarily discharge the Appellant.

IX. DECISION

Based on the foregoing Findings of Fact, Conclusions of Law, evidence, and testimony, it is found that a final order be entered that there is not sufficient evidence to support the involuntary discharge of the Appellant.

APPEAL GRANTED

Jillian R. Rivers,

Appeals Officer

NOTICE OF APPELLATE RIGHTS

This decision is a final order under R.I.G.L. § 42-35-12. Under R.I.G.L. § 42-35-15, this Order may be appealed to court within thirty (30) days of the mailing of this decision. Such appeal, if taken, must be completed by filing a complaint in court. The filing of the complaint does not itself stay enforcement of this order. The agency may grant, or the reviewing court may order, a stay upon the appropriate terms.

Appeals are generally filed in the Providence County Superior Court. However, appeals affecting or concerning children under the age of eighteen (18) and/or appeals of a DCYF action may need to be filed in Providence Family Court. If you have any questions about which court a complaint for appeal should be made, you should seek the advice of an attorney, Rhode Island Legal Services, or the clerk of the court where you wish to file your appeal. The courts' contact information can be found on the judiciary's website (https://www.courts.ri.gov). Copies of the appeal must be served upon all parties in your case within ten (10) days of the filing of your appeal.

If you exercise any of these appellate rights, please inform the EOHHS appeals office of this so we can prepare a copy of the record for the court. You can contact the Appeals Office at OHHS.AppealsOffice@ohhs.ri.gov, 401.462.2132 (Phone), 401.462.0458 (Fax), or at 3 West Road, Virks Building, Cranston, RI 02908.

CERTIFICATION

I hereby certify that I mailed, via regular mail, postage prepaid, a true copy of the foregoing to [redacted], and her Authorized Representative Beth Mantia, C/O Alliance for Better Long Term Care, 422 Post Road, Suite 204, Warwick, RI 02888; copies were sent, via email, to Bath Mantia at beth@alliancebltc.org, and [redacted] at [redacted] on this 3rd day of June, 2026.

Rebecca L Ahn