



RULE-MAKING ORDER PERMANENT RULE ONLY

CR-103P (December 2017)
(Implements RCW 34.05.360)

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: August 25, 2025

TIME: 10:11 AM

WSR 25-18-037

Agency: Department of Social and Health Services, Home and Community Living Administration, RCS

Effective date of rule:

Permanent Rules

- ☐ 31 days after filing.
- ☒ Other (specify) January 1, 2026 (If less than 31 days after filing, a specific finding under RCW 34.05.380(3) is required and should be stated below)

Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?

- ☐ Yes ☒ No If Yes, explain:

Purpose: The purpose of this rulemaking is to comply with Centers for Medicare and Medicaid (CMS) regulations related to Home and Community Based Settings (HCBS) in adult family homes (AFH), assisted living facilities (ALF), and enhanced services facilities (ESF). Compliance with the regulations is necessary to administer the state's Medicaid funded Long-Term Services and Supports programs. RCW 74.09.520(2) and 74.39A.007.

The changes to the chapters create a new requirement for the operators of AFH, ALF, and ESF to enter into a residency agreement with current and new residents with Medicaid as a payor that addresses resident rights in relation to transfer and discharge. The changes require these operators to include, for residents with Medicaid, information upon transfer or discharge that explains the resident's rights, which includes the right to an attorney to represent the resident's interests in response to the transfer or discharge notice. This right is subject to legislative appropriation. The changes make minor updates to existing rules-to include a requirement that the residency agreement for residents with Medicaid must be kept in the resident's record. The new and amended rules will be effective January 1, 2026.

Citation of rules affected by this order:

New: WAC 388-76-10506, 388-76-10617, 388-78A-2651, 388-78A-2661, 388-107-0161, 388-107-0281
Repealed: none
Amended: WAC 388-76-10320, 388-78A-2410, 388-107-0560
Suspended: none

Statutory authority for adoption: RCW 18.20.090, 70.97.230, 70.128.040, 74.09.520(2), and 74.39A.007

Other authority: 42 C.F.R. 441.530(a)(1)(vi)(A) and 42 C.F.R. 441.301.(c)(4)(vi)(A)

PERMANENT RULE (Including Expedited Rule Making)

Adopted under notice filed as WSR 25-11-012 on 05/08/2025 (date).

Describe any changes other than editing from proposed to adopted version: In response to comments we received during the public hearing and formal comment period, we made these changes:

We removed "if applicable" from the rule text in -

- WAC 388-76-10320(12)
- WAC 388-78A-2410(14)
- WAC 388-107-0560(2)(l)

We changed "upon" (transfer or discharge) to "before" in -

- WAC 388-76-10506(2)(c)
- WAC 388-78A-2651(2)(c)
- WAC 388-107-0161(2)(c)

We added "that is signed and dated by both parties" in -

- WAC 388-76-10506(4)
- WAC 388-78A-2651(4)
- WAC 388-107-0161(4)

We added "provided to the resident or their representative" in -

- WAC 388-76-10506(4)(b)
- WAC 388-78A-2651(4) (b)
- WAC 388-107-0161(4) (b)

We added "and date" in the model agreement language in -

- WAC 388-76-10506(5)(d)
- WAC 388-78A-2651(5)(d)

- WAC 388-107-0161(5)(d)

We added “your health, safety, welfare, and rights as a long-term care resident” and removed “other issues”. We added “find out more about” in place of “request assistance from”. We added “contact a long-term care ombuds” in place of “make your request” in -

- WAC 388-76-10617(5)(h)(ii)
- WAC 388-78A-2661(5)(h)(ii)
- WAC 388-107-0281(5)(h)(ii)

We added “You have the right to make a complaint to the” (complaint resolution unit) in -

- WAC 388-76-10617(5)(h)(iv)
- WAC 388-78A-2661(5)(h)(iv)
- WAC 388-107-0281(5)(h)(iv)

Because the Aging and Long-term Support Administration became Home and Community Living Administration on May 1, 2025, we removed “Aging and Long-term Support Administration” and replaced it with “Home and Community Living Administration” in -

- WAC 388-76-10617(5)(h)(iv),
- WAC 388-78A-2661(5)(h)(iv)
- WAC 388-107-0281(5)(h)(iv)

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

Name: Colleen Jensen

Address: P.O. Box 45600, Olympia, WA 98504

Phone: 564-999-3182

Fax: N/A

TTY: 711 Relay Service

Email: rcspolicy@dshs.wa.gov

Web site:

Other:

**Note: If any category is left blank, it will be calculated as zero.
No descriptive text.**

**Count by whole WAC sections only, from the WAC number through the history note.
A section may be counted in more than one category.**

The number of sections adopted in order to comply with:

Federal statute:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Federal rules or standards:	New	<u>6</u>	Amended	<u>3</u>	Repealed	<u>0</u>
Recently enacted state statutes:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>

The number of sections adopted at the request of a nongovernmental entity:

New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted on the agency’s own initiative:

New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted in order to clarify, streamline, or reform agency procedures:

New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted using:

Negotiated rule making:	New	2	Amended	1	Repealed	<u>0</u>
Pilot rule making:	New	_____	Amended	_____	Repealed	_____

Date Adopted: August 22, 2025

Name: Lisa Yanagida

Title: DSHS Chief of Staff

Signature:

A handwritten signature in blue ink, appearing to read "Lisa Yanagida", is written over a large, empty rectangular box.

AMENDATORY SECTION (Amending WSR 07-21-080, filed 10/16/07, effective 1/1/08)

WAC 388-76-10320 Resident record—Content. The adult family home must ensure that each resident record contains, at a minimum, the following information:

- (1) Identifying information about the resident;
- (2) The name, address, and telephone number of the resident's:
 - (a) Representative;
 - (b) Health care providers;
 - (c) Significant family members identified by the resident; and
 - (d) Other individuals the resident wants involved or notified.
- (3) Current medical history;
- (4) The resident assessment information;
- (5) The preliminary service plan;
- (6) The negotiated care plan;
- (7) List of resident medications;
- (8) The resident's Social Security number;
- (9) When the resident was:
 - (a) Admitted to the home;
 - (b) Absent from the home; and
 - (c) Discharged from the home.
- (10) A current inventory of the resident's personal belongings dated and signed by:
 - (a) The resident; and
 - (b) The adult family home.
- (11) Financial records.
- (12) The residency agreement for residents with medicaid as a payor.

RESIDENCY AGREEMENT-RESIDENTS WITH MEDICAID

NEW SECTION

WAC 388-76-10506 Written residency agreement-Residents with medicaid as a payor. (1) For the purposes of this section "residency agreement" means a legally enforceable written document prepared by the adult family home that contains the rights and responsibilities of the facility and the resident specific to transfer and discharge and is signed by both parties.

(2) For residents with medicaid as a payor the facility must complete a signed written residency agreement with each resident that:

- (a) Is signed by the resident or their legal representative and the facility upon admission of the resident to the facility;

(b) Requires the facility to agree to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129; and

(c) Requires the facility to provide notice to residents before transfer and discharge that includes information about available legal resources and notice that, subject to legislative appropriation, residents have the right to legal counsel at public expense upon notice of transfer or discharge.

(3) For residents whose payor status changes from medicaid to private pay, a new residency agreement is required if the resident's payor status returns to medicaid.

(4) A copy of the residency agreement that is signed and dated by both parties must be:

(a) Kept in the resident record; and

(b) Provided to the resident or their representative.

(5) The residency agreement must be in substantially the following form:

Residency agreement-residents with medicaid as a payor.

(a) [facility name] agrees to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129.

(b) Subject to legislative appropriation [resident name] has a right to a free lawyer to help them in response to a notice of transfer or discharge. If they want a free lawyer to help them, they must call the long-term care discharge defense screening line at [phone number].

(c) [Signature of resident/legal representative and date].

(d) [Signature of facility and date].

NEW SECTION

WAC 388-76-10617 Resident rights-Transfer and discharge notice-Residents with medicaid as a payor. For residents with medicaid as a payor, in addition to the requirements in WAC 388-76-10616, the adult family home must do the following when issuing a written notice of transfer or discharge:

(1) Include in the notice contact information provided by the department for the legal services agencies assigned to provide legal counsel;

(2) Clearly state in the notice that, subject to legislative appropriation, legal counsel at public expense is available to represent the resident's interests in the transfer or discharge process. This language must be substantially in the following form: "Subject to legislative appropriation you have a right to a free lawyer to help you respond to a notice of transfer or discharge. If you want a free lawyer to help you, please call the long-term care discharge defense screening line at [phone number].";

(3) Within three calendar days of issuing the notice, provide a copy of the notice to the resident's assigned department case manager;

(4) Within three calendar days of issuing the notice, provide a copy of the notice to the Washington state long-term care ombudsman program; and

(5) Issue the transfer and discharge notice in substantially the following form:

Notice of transfer or discharge-residents with medicaid as a pay-or:

- (a) Resident information;
 - (i) Resident name;
 - (ii) Resident address;
- (b) Facility information;
 - (i) Facility name;
 - (ii) Facility address;
 - (iii) Contact person's name;
- (c) Date notice given;
- (d) Effective date: Effective date must be at least 30 days from the date notice is given unless an exception applies according to RCW 70.129.110;
- (e) Location to where resident is transferred or discharged:
 - (i) Name;
 - (ii) Address;
 - (iii) Phone;
- (f) Reason for transfer or discharge: The specific reason for the transfer or discharge must be one or more of the reasons in (i)-(v) of this subsection:
 - (i) Transfer or discharge is necessary for the resident's welfare and the residents' needs cannot be met in the facility;
 - (ii) The safety of individuals in the facility is endangered;
 - (iii) The health of individuals in the facility would otherwise be endangered;
 - (iv) The resident has failed to make the required payment for their stay;
 - (v) The facility ceases to operate.
- (g) Copy of notice given within three days to:
 - (i) Department case manager;
 - (ii) Washington state long-term care ombudsman program;
 - (h) Your rights and resources.
- (i) Legal counsel: Subject to legislative appropriation, you have a right to a free lawyer to help you respond to a notice of transfer or discharge. If you want a free lawyer to help you, please call the long-term care discharge defense screening line at [phone number].
- (ii) Washington state ombuds: The Washington state long-term care ombudsman program is available to answer questions and provide assistance regarding this notice and your health, safety, welfare, and rights as a long-term care resident. If you wish to find out more about the long-term care ombuds, call 1-800-562-6028. You may also contact a long-term care ombuds in writing, by fax at (253) 815-8173, email at ltcop@mschelp.org, or mail at PO Box 23699, Federal Way, WA 98093-0699.
- (iii) Disability rights Washington: If you have a diagnosis of a mental illness or an intellectual disability, you may contact disability rights Washington 1-800-562-2702 or (206) 324-1521. You may also make your request in writing by fax at (206) 957-0729, email at info@dr-wa.org or mail at Disability rights Washington, 315 5th Ave S, Suite 850, Seattle WA, 98104.
- (iv) DSHS home and community living administration (HCLA): You have the right to make a complaint to the complaint resolution unit (CRU/complaint hotline) 1-800-562-6078.

WAC 388-78A-2410 Content of resident records. The assisted living facility must organize and maintain resident records in a format that the assisted living facility determines to be useful and functional to enable the effective provision of care and services to each resident. Active resident records must include the following:

- (1) Resident identifying information, including resident's:
 - (a) Name;
 - (b) Birth date;
 - (c) Move-in date; and
 - (d) Sleeping room identification.
- (2) Current name, address, and telephone number of:
 - (a) Resident's primary health care provider;
 - (b) Resident's representative, if the resident has one;
 - (c) Individual(s) to contact in case of emergency, illness, or death; and
 - (d) Family members or others, if any, the resident requests to be involved in the development or delivery of services for the resident.
- (3) Resident's written acknowledgment of receipt of:
 - (a) Required disclosure information prior to moving into the assisted living facility; and
 - (b) Information required by long-term care resident rights per RCW 70.129.030.
- (4) The resident's assessment and reassessment information.
- (5) Clinical information such as admission weight, height, blood pressure, temperature, blood sugar, and other laboratory tests required by the negotiated service agreement.
- (6) The resident's negotiated service agreement consistent with WAC 388-78A-2140.
- (7) Any orders for medications, treatments, and modified or therapeutic diets, including any directions for addressing a resident's refusal of medications, treatments, and prescribed diets.
- (8) Medical and nursing services provided by the assisted living facility for a resident, including:
 - (a) A record of providing medication assistance and medication administration, which contains:
 - (i) The medication name, dose, and route of administration;
 - (ii) The time and date of any medication assistance or administration;
 - (iii) The signature or initials of the person providing any medication assistance or administration; and
 - (iv) Documentation of a resident choosing to not take ((his or her)) their medications.
 - (b) A record of any nursing treatments, including the signature or initials of the person providing them.
- (9) Documentation consistent with WAC 388-78A-2120 monitoring resident well-being.
- (10) Staff interventions or responses to subsection (9) of this section, including any modifications made to the resident's negotiated service agreement.
- (11) Notices of and reasons for relocation as specified in RCW 70.129.110.
- (12) The individuals who were notified of a significant change in the resident's condition and the time and date of the notification.

- (13) When available, a copy of any legal documents in which:
- (a) The resident has appointed another individual to make ((his or her)) their health care, financial, or other decisions;
 - (b) The resident has created an advance directive or other legal document that establishes a surrogate decision maker in the future ((and/)) or provides directions to health care providers or both; and
 - (c) A court has established guardianship on behalf of the resident.
- (14) The residency agreement for residents with medicaid as a payor.

Residency Agreement-Residents with Medicaid

NEW SECTION

WAC 388-78A-2651 Written residency agreement-Residents with medicaid as a payor. (1) For the purposes of this section "residency agreement" means a legally enforceable written document prepared by the assisted living facility that contains the rights and responsibilities of the facility and the resident specific to transfer and discharge and is signed by both parties.

(2) For residents with medicaid as a payor the facility must complete a signed written residency agreement with each resident that:

(a) Is signed by the resident or their legal representative and the facility upon admission of the resident to the facility;

(b) Requires the facility to agree to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129; and

(c) Requires the facility to provide notice to residents before transfer and discharge that includes information about available legal resources, and notice that, subject to legislative appropriation, residents have the right to legal counsel at public expense upon notice of transfer or discharge.

(3) For residents whose payor status changes from medicaid to private pay, a new residency agreement is required if the resident's payor status returns to medicaid.

(4) A copy of the residency agreement that is signed and dated by both parties must be:

(a) Kept in the resident record; and

(b) Provided to the resident or their representative.

(5) The residency agreement must be in substantially the following form:

Residency agreement-residents with medicaid as a payor.

(a) [facility name] agrees to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129.

(b) Subject to legislative appropriation [resident name] has a right to a free lawyer to help them in response to a notice of trans-

fer or discharge. If they want a free lawyer to help them, they must call the long-term care discharge defense screening line at [phone number].

(c) [Signature of resident/legal representative and date].

(d) [Signature of facility and date].

NEW SECTION

WAC 388-78A-2661 Resident rights-Transfer and discharge notice-Residents with medicaid as a payor. For residents with medicaid as a payor, in addition to the requirements in WAC 388-78A-2660, the assisted living facility must do the following when issuing a written notice of transfer or discharge:

(1) Include in the notice contact information provided by the department for the legal services agencies assigned to provide legal counsel;

(2) Clearly state in the notice that, subject to legislative appropriation, legal counsel at public expense is available to represent the resident's interests in the transfer or discharge process. This language must be substantially in the following form: "Subject to legislative appropriation you have a right to a free lawyer to help you respond to a notice of transfer or discharge. If you want a free lawyer to help you, please call the long-term care discharge defense screening line at [phone number].";

(3) Within three calendar days of issuing the notice, provide a copy of the notice to the resident's assigned department case manager;

(4) Within three calendar days of issuing the notice, provide a copy of the notice to the Washington state long-term care ombudsman program; and

(5) Issue the transfer and discharge notice in substantially the following form:

Notice of transfer or discharge-residents with medicaid as a payor:

(a) Resident information;

(i) Resident name;

(ii) Resident address;

(b) Facility information;

(i) Facility name;

(ii) Facility address;

(iii) Contact person's name;

(c) Date notice given;

(d) Effective date: Effective date must be at least 30 days from the date notice is given unless an exception applies according to RCW 70.129.110;

(e) Location to where resident is transferred or discharged:

(i) Name;

(ii) Address;

(iii) Phone;

(f) Reason for transfer or discharge: The specific reason for the transfer or discharge must be one or more of the reasons in (i)-(v) of this subsection:

(i) Transfer or discharge is necessary for the resident's welfare and the residents' needs cannot be met in the facility;

(ii) The safety of individuals in the facility is endangered;

(iii) The health of individuals in the facility would otherwise be endangered;

(iv) The resident has failed to make the required payment for their stay;

(v) The facility ceases to operate.

(g) Copy of notice given within three days to:

(i) Department case manager;

(ii) Washington state long-term care ombudsman program;

(h) Your rights and resources;

(i) Legal counsel: Subject to legislative appropriation, you have a right to a free lawyer to help you respond to a notice of transfer or discharge. If you want a free lawyer to help you, please call the long-term care discharge defense screening line at [phone number].

(ii) Washington state ombuds: The Washington state long-term care ombudsman program is available to answer questions and provide assistance regarding this notice and your health, safety, welfare, and rights as a long-term care resident. If you wish to find out more about the long-term care ombuds, call 1-800-562-6028. You may also contact a long-term care ombuds in writing, by fax at (253) 815-8173, email at ltcop@mschelp.org, or mail at PO Box 23699, Federal Way, WA 98093-0699.

(iii) Disability rights Washington: If you have a diagnosis of a mental illness or an intellectual disability, you may contact disability rights Washington 1-800-562-2702 or (206) 324-1521. You may also make your request in writing by fax at (206) 957-0729, email at info@dr-wa.org or mail at disability rights Washington, 315 5th Ave S, Suite 850, Seattle WA, 98104.

(iv) DSHS home and community living administration (HCLA): You have the right to make a complaint to the complaint resolution unit (CRU/complaint hotline) 1-800-562-6078.

RESIDENCY AGREEMENT-RESIDENTS WITH MEDICAID

NEW SECTION

WAC 388-107-0161 Written residency agreement-Residents with medicaid as a payor. (1) For the purposes of this section "residency agreement" means a legally enforceable written document prepared by the enhanced services facility that contains the rights and responsibilities of the facility and the resident specific to transfer and discharge and is signed by both parties.

(2) For residents with medicaid as a payor the facility must complete a signed written residency agreement with each resident that:

(a) Is signed by the resident or their legal representative and the facility upon admission of the resident to the facility;

(b) Requires the facility to agree to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129; and

(c) Requires the facility to provide notice to residents before transfer and discharge that includes information about available legal resources, and notice that, subject to legislative appropriation, residents have the right to legal counsel at public expense upon notice of transfer or discharge.

(3) For residents whose payor status changes from medicaid to private pay, a new residency agreement is required if the resident's payor status returns to medicaid.

(4) A copy of the residency agreement that is signed and dated by both parties must be:

(a) Kept in the resident record; and

(b) Provided to the resident or their representative.

(5) The residency agreement must be in substantially the following form:

Residency agreement-residents with medicaid as a payor.

(a) [facility name] agrees to comply with the long-term care residents rights statute transfer and discharge requirements pursuant to RCW 70.129.

(b) Subject to legislative appropriation [resident name] has a right to a free lawyer to help them in response to a notice of transfer or discharge. If they want a free lawyer to help them, they must call the long-term care discharge defense screening line at [phone number].

(c) [Signature of resident/legal representative and date].

(d) [Signature of facility and date].

NEW SECTION

WAC 388-107-0281 Transfer and discharge notice-Residents with medicaid as a payor. For residents with medicaid as a payor, in addition to the requirements in WAC 388-107-0280, the enhanced services facility must do the following when issuing a written notice of transfer or discharge:

(1) Include in the notice contact information provided by the department for the legal services agencies assigned to provide legal counsel;

(2) Clearly state in the notice that, subject to legislative appropriation, legal counsel at public expense is available to represent the resident's interests in the transfer or discharge process. This language must be substantially in the following form: "Subject to legislative appropriation you have a right to a free lawyer to help you respond to a notice of transfer or discharge. If you want a free lawyer to help you, please call the long-term care discharge defense screening line at [phone number].";

(3) Within three calendar days of issuing the notice, provide a copy of the notice to the resident's assigned department case manager;

(4) Within three calendar days of issuing the notice, provide a copy of the notice to the Washington state long-term care ombudsman program; and

(5) Issue the transfer and discharge notice in substantially the following form:

Notice of transfer or discharge-residents with medicaid as a payor:

(a) Resident information;

- (i) Resident name;
- (ii) Resident address;
- (b) Facility information;
 - (i) Facility name;
 - (ii) Facility address;
 - (iii) Contact person's name;
- (c) Date notice given;
- (d) Effective date: Effective date must be at least 30 days from the date notice is given unless an exception applies according to RCW 70.129.110;
- (e) Location to where resident is transferred or discharged:
 - (i) Name;
 - (ii) Address;
 - (iii) Phone;
- (f) Reason for transfer or discharge: The specific reason for the transfer or discharge must be one or more of the reasons in (i)-(v) of this subsection:
 - (i) Transfer or discharge is necessary for the resident's welfare and the residents' needs cannot be met in the facility;
 - (ii) The safety of individuals in the facility is endangered;
 - (iii) The health of individuals in the facility would otherwise be endangered;
 - (iv) The resident has failed to make the required payment for their stay;
 - (v) The facility ceases to operate.
- (g) Copy of notice given within three days to:
 - (i) Department case manager;
 - (ii) Washington state long-term care ombudsman program;
- (h) Your rights and resources:
 - (i) Legal counsel: Subject to legislative appropriation, you have a right to a free lawyer to help you respond to a notice of transfer or discharge. If you want a free lawyer to help you, please call the long-term care discharge defense screening line at [phone number].
 - (ii) Washington state ombuds: The Washington state long-term care ombudsman program is available to answer questions and provide assistance regarding this notice and your health, safety, welfare, and rights as a long-term care resident. If you wish to find out more about the long-term care ombuds, call 1-800-562-6028. You may also contact a long-term care ombuds in writing, by fax at (253) 815-8173, email at ltcop@mschelp.org, or mail at PO Box 23699, Federal Way, WA 98093-0699.
 - (iii) Disability rights Washington: If you have a diagnosis of a mental illness or an intellectual disability, you may contact disability rights Washington 1-800-562-2702 or (206) 324-1521. You may also make your request in writing by fax at (206) 957-0729, email at info@dr-wa.org or mail at disability rights Washington, 315 5th Ave S, Suite 850, Seattle WA, 98104.
 - (iv) DSHS home and community living administration (HCLA): You have the right to make a complaint to the complaint resolution unit (CRU/complaint hotline) 1-800-562-6078.

WAC 388-107-0560 Resident records—Clinical records. (1) The enhanced services facility must:

(a) Maintain clinical records on each resident in accordance with accepted professional standards and practices that are:

- (i) Complete;
- (ii) Accurately documented;
- (iii) Readily accessible; and
- (iv) Systematically organized;

(b) Safeguard clinical record information against alteration, loss, destruction, and unauthorized use; and

(c) Keep confidential all information contained in the resident's records, regardless of the form or storage method of the records, except when release is required by:

- (i) Transfer to another health care institution;
- (ii) Law; or
- (iii) The resident.

(2) The enhanced services facility must ensure the clinical record of each resident includes a minimum of the following:

(a) Resident identification and sociological data, including the name and address of the individual or individuals the resident designates as significant;

- (b) Medical information;
- (c) Physician's orders;
- (d) Assessments;
- (e) Person-centered service plans;
- (f) Services provided;
- (g) Progress notes;
- (h) Medications administered;
- (i) Consents, authorizations, releases;
- (j) Allergic responses;
- (k) Laboratory, X-ray, and other findings;

(l) The residency agreement for residents with medicaid as a payor; and

~~((1))~~ (m) Other records as appropriate.

(3) The enhanced services facility must maintain resident records and preserve their confidentiality in accordance with applicable state and federal statutes and rules, including ~~((chapters))~~ chapter 70.02 ~~((and 70.96A))~~ RCW.