# Louisiana

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**Opening Statement**

The Louisiana Department of Health, Health Standards Section, licenses four levels of adult residential care: personal care homes (Level 1), shelter care homes (Level 2), assisted living facilities (Level 3), and adult residential care (Level 4).

**Licensure Term**

Adult Residential Care Provider

**Definition**

Adult residential care provider (ARCP) means a facility, agency, institution, society, corporation, partnership, company, entity, residence, person or persons, or any other group that provides adult residential care for compensation to two or more adults who are unrelated to the licensee or operator. Adult residential care services includes but is not limited to the following services: lodging, meals, medication administration, intermittent nursing services, assistance with personal hygiene, assistance with transfers and ambulation, assistance with dressing, housekeeping, and laundry  RS 40:2166.3

Level 1 ARCP – an ARCP that provides adult residential care for compensation to two or more residents but no more than eight who are unrelated to the licensee or operator in a setting that is designed similarly to a single-family dwelling.

Level 2 ARCP – an ARCP that provides adult residential care for compensation to nine or more residents but no more than 16 who are unrelated to the licensee or operator in a congregate setting that does not provide independent apartments equipped with kitchenettes, whether functional or rendered nonfunctional for reasons of safety.

Level 3 ARCP – an ARCP that provides adult residential care for compensation to 17 or more residents who are unrelated to the licensee or operator in independent apartments equipped with kitchenettes, whether functional or rendered nonfunctional for reasons of safety.

Level 4 ARCP – an ARCP that provides adult residential care for compensation to 17 or

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more residents who are unrelated to the licensee or operator in independent apartments equipped with kitchenettes, whether functional or rendered nonfunctional for reasons of safety.

**Regulatory and Legislative Update**

Following are links to current legislative changes in 2026 with rule promulgation in process for which all facilities must be in compliance by July 1, 2027.
Background checks expanded to include convictions for "similar crimes' in another state or federal level
Requirement for backup generator for the facility in the event of loss of power - a stakeholder advisory group has been convened to carry out discussion etc and rule making.

Communication requirements between hospice and the discharging and receiving facilities.

https://www.legis.la.gov/legis/ViewDocument.aspx?d=1479979
https://www.legis.la.gov/Legis/ViewDocument.aspx?d=1477485
https://www.legis.la.gov/Legis/ViewDocument.aspx?d=1480174

**Move-in Requirements Including Required Disclosures/Notifications**

The ARCP shall provide to prospective residents written information regarding conditions for residency, services, costs, fees and policies/procedures. This written information shall include, but is not limited to the following:
(1) The application process and the possible reasons for rejection of an application;
(2) Types of residents suitable to the facility;
(3) Services offered and allowed in the facility;
(4) Resident's responsibilities;
(5) Policy regarding smoking;
(6) Policy regarding pets;
(7) Fee structure, including but not limited to any additional costs for providing services to residents during natural disasters; and
(8) Criteria for termination of residency agreement.

**Facility Scope of Care**

The ARCP must provide or coordinate, to the extent needed or desired by each resident, the following services: assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs); meals; laundry; opportunities for individual and group socialization including regular access to the community resources; transportation; housekeeping services essential for health and comfort of the resident, and a recreational program. It is the facility's responsibility to ensure that needed services are provided, even if those services are provided by the resident's family or by a third party or contracted provider.

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Intermittent nursing services may be provided by level 4 ARCPs only.

Based on 2026 legislation rules are under development regarding hospice care in inpatient facilities including ALFs and LRCSs. Rule promulgation is in process.
https://www.legis.la.gov/Legis/ViewDocument.aspx?d=1480174

**Limitations of Services**

There are individuals who are not eligible for residency in ARCPs because their conditions and care needs are beyond the scope of the ARCP's capacity to deliver services and ensure residents' health, safety, and welfare. ARCPs may not enter into agreements with residents with such conditions. These prohibited health conditions include:

1. unstageable, stage 3, or stage 4 pressure ulcers;
2. use of feeding tubes, including but not limited to, nasogastric or gastrostomy tubes;
3. ventilator dependency;
4. dependency on BiPap, CPAP or other positive airway pressure device without the ability to self-administer at all times:
   a. exception. The resident may remain in the ARCP when a third party is available at all times to administer the positive airway pressure device during the hours of use;
5. coma;
6. continuous IV/TPN therapy;
7. wound vac therapy;
8. active communicable tuberculosis; or
9. any condition requiring chemical or physical restraints.

Residents with a prohibited condition may remain in residence for up to 90 days provided that certain conditions are met.

Residents must be discharged/involuntarily terminated if they are a danger to themselves or others or if the resident is transferred to another institution during which payment is not made to retain their bed at the facility. Residents must also be discharged if their mental or physical condition deteriorates to a level requiring services that cannot be provided in accordance with the licensing regulations or exceeding those agreed upon in the residency agreement and person-centered service plan; however, ARCPs may accept or retain residents in need of additional care beyond routine personal care if the resident can provide or arrange for his/her own care and this care can be provided through appropriate private-duty personnel. Additionally, the level of care required in order to accommodate the resident's additional needs must not amount to continuous nursing care (e.g., does not exceed 90 days).

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**Resident Assessment Requirements and Frequency**

An assessment shall be initiated upon entry to the ARCP and completed within seven calendar days of the date that the resident moves into the ARCP to determine the service needs and preferences of the resident. The ARCP shall complete and maintain a pre-residency screening of prospective residents to assess their needs and appropriateness of residency. The assessment must include, for example, a screening of the resident's physical and mental status, need for personal assistance, and need for assistance with ADLs and IADLs. Within 30 calendar days after the date the resident moves in, the ARCP designated staff in conjunction with the resident or the resident's representative, if applicable, shall develop a PCSP using information from the assessment.

**Medication Management**

Staff may supervise the self-administration of prescription and nonprescription medication. This assistance shall be limited to reminders, cueing, opening containers, assistance in pouring medication, and bringing containers of oral medications to residents. Assistance with self-administration may be provided by staff members who hold no professional licensure, as long as that employee has documented training on the policies and procedures for medication assistance, including the limitations of assistance, and this training must be completed at least annually.

Staff administration of medications may be provided by all levels of facilities. The facility shall administer medications to residents in accordance with their plan. Medications shall be administered only by an individual who is currently licensed to practice medicine or osteopathy by the appropriate licensing agency for the state, or by an individual who is currently licensed as a registered nurse (RN) or licensed practical nurse (LPN) by the appropriate state agency. However, intravenous therapy may be administered on a time limited basis by staff under the supervision of a licensed RN, physician, or advanced practice nurse in a level facility 4 only.

The ARCP, the resident, or the resident's representative, if applicable, may contract with an individual or agency to administer resident's prescribed medications. The ARCP shall ensure that medications shall be administered by an individual who is currently professionally licensed in Louisiana to administer medications.

**Staff Scheduling Requirements**

Alzheimer's Special Care Unit (ASCU) means any adult residential care provider that segregates or provides a special program or special unit for residents with a diagnosis of probable Alzheimer's disease or other dementia so as to prevent or limit access by a resident to areas outside the designated or separated area, or that advertises, markets, or otherwise promotes the facility as providing specialized

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Alzheimer's/dementia care services.

If an ARCP accepts residents with dementia or residents at risk of wandering, an enclosed area shall be provided adjacent to the facility so that the residents may go outside safely. Door locking arrangements to create secured areas may be permitted where the clinical needs of the residents require specialized protective measures for their safety, provided that such locking arrangements are approved by and satisfy requirements of the state.

Staff of adult residential care providers that operate Alzheimer's units or market a facility as providing Alzheimer's/dementia care must have specified training. Staff who provide direct face-to-face care to residents shall be required to obtain at least eight hours of dementia-specific training within 90 days of employment and eight hours of dementia-specific training annually. Employees who have regular contact with residents, but who do not provide direct face-to-face care, shall be required to obtain at least four hours of dementia-specific training within 90 days of employment and two hours of dementia training annually.

ARCPs shall be staffed to properly safeguard the health, safety, and welfare of the residents and to meet the scheduled and unscheduled needs of residents. There are no staffing ratios. At a minimum, facilities shall have a director, a designated recreational/activity staff person, and a direct care staff person; however, one person may occupy more than one position, though not on the same shift at a level 2 through level 4 facility.

In ARCPs that offer staff medication administration and level 4 facilities, the ARCP shall provide a sufficient number of RNs and LPNs to provide services to all residents in accordance with each resident’s plan. Level 4 ARCPs must employ or contract with at least one RN to serve as the nursing director and manage the nursing services. The nursing director need not be physically present at all times; however, the nursing director or his or her designee shall be on call and readily accessible 24 hours a day. For employees who do not provide care in a special dementia care program, but who provide direct face-to-face care to residents are required to obtain at least two hours of dementia-specific training annually.

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**Administrator/Director Education and Training Requirements**

Directors shall be at least 21 years of age. For levels 1 and 2, the director must meet at least one of the following criteria upon date of hire:
(1) At least an Associate's degree from an accredited college plus one year of experience in the fields of health, social services, geriatrics, management or administration;
(2) Three years of experience in health, social services, geriatrics, management, administration; or
(3) A Bachelor's degree in geriatrics, social services, nursing, health care administration or related field.
For levels 3 and 4, the director must meet at least one of the following criteria upon date of hire:
(1) A Bachelor's degree plus two years of administrative experience in the fields of health, social services, geriatrics, management or administration;
(2) Six years of administrative experience in health, social services, geriatrics, management or administration;
(3) A master's degree in geriatrics, health care, human service related field, management or administration; or
(4) Be a licensed nursing facility administrator.
For level 4 ARCPs, the director shall have successfully completed an adult residential care/assisted living director certification/training program consisting of, at a minimum, 12 hours of training that has been approved by any one of the following organizations: Louisiana Board of Examiners of Nursing Facility Administrators; Louisiana Assisted Living Association; LeadingAge Gulf States; Louisiana Nursing Home Association; or any of the national assisted living associations, (e.g., National Center for Assisted Living, Argentum; LeadingAge; or National Association of Long Term Care Administrators Board).

**Direct Care Staff Education and Training Requirements**

Orientation for all staff must be completed within seven days; orientation and annual training thereafter must cover specified topics. All direct care staff shall receive certification in CPR and adult first aid within the first 90 days of employment. Direct-care workers shall complete 12 hours of in-service training each year in areas relating to the facility's policies and procedures; emergency and evacuation procedures; residents' rights; first aid; procedures and legal requirements concerning the reporting of abuse and critical incidents; resident care services; infection control; and any specialized training to meet residents' needs.

**Quality Requirements**

Each ARCP shall have an identifiable governing body with responsibility for, and authority over, the policies and activities of the ARCP and ultimate authority for: 1. the overall operation of the ARCP; 2. the adequacy and quality of care; 3. the financial solvency of the ARCP and the appropriate use of its funds; 4. the implementation of the standards set

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forth in these regulations; and 5. the adoption, implementation and maintenance, in accordance with the requirement of state and federal laws and regulations and these licensing standards, of adult residential care and administrative policies governing the operation of the ARCP.

**Infection Control Requirements**

The ARCP shall have written policies and procedures approved by the governing body that address infection control measures, including but not limited to the use of personal protective equipment (PPE), as appropriate.

The ARCP shall provide a sanitary environment to avoid sources and transmission of infections and communicable diseases which meet or exceed the latest criteria established by the CDC, Occupational Safety and Health Administration (OSHA), and State Sanitary Code.

**Emergency Preparedness Requirements**

An ARCP facility shall comply with any Louisiana state health officer (SHO) order or emergency notice regarding visitation in ARCPs during a declared Public Health Emergency.

The ARCP shall have an emergency preparedness plan designed to manage the consequences of all hazards, declared disasters or other emergencies that have the potential to disrupt the ARCP's ability to provide care and treatment and/or threatens the lives or safety of the residents. The ARCP shall follow and execute its emergency preparedness plan in the event or occurrence of a disaster or emergency.

Emergency events include, but are not limited to hurricanes, floods, fires, chemical or biological hazards, power outages, tornados, tropical storms and severe weather.

The ARCP will work in concert with the local parish Office of Emergency Preparedness (OEP) in developing plans.

Upon the department's request, an ARCP shall present its plan for review.

2026 legislation has approved the requirement for generators or a resource for generators. See https://www.legis.la.gov/Legis/ViewDocument.aspx?d=1477485 rule making is in progress and facilities are required to comply by 070127

**Medicaid Policy and Reimbursement**

Medicaid does not cover home and community-based services in adult residential care facilities.

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**Citations**

http://www.lnha.org
https://ldh.la.gov/subhome/32
https://ldh.la.gov/page/adult-residential-care-provider-arcp
https://ldh.la.gov/assets/medicaid/hss/docs/ARCP/ARCP_Chapter_68_LAC_5.10.24.pdf 5

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