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Via Email: DSchless@seniorshousing.org

David S. Schless, President
American Seniors Housing Association
5225 Wisconsin Avenue, NW
Suite 502
Washington, DC 20015

Re: **Argentum Application to American National Standards Institute**

Dear David:

On behalf of the American Seniors Housing Association (ASHA), you asked us to develop this Q & A memorandum to provide understanding and guidance to ASHA members about the potential development and adoption of national voluntary consensus standards (referred to as consensus standards) in the senior living industry. The genesis for this request is Argentum's Application for Accreditation as a Standards Developer by the American National Standards Institute. This memorandum presents background about the standards development process, the current state regulatory landscape, and some of the intended and unintended consequences of standards use, such as higher insurance premiums and increased litigation. It is intended to be viewed as neutral information, not as legal advice or recommendation.

Background:

In April 2019 Argentum submitted an application to the American National Standards Institute (ANSI) to become an accredited standards development organization (SDO). Founded in 1918, ANSI is the foremost nonprofit membership organization in the United States that facilitates the development of American National Standards (ANS) in the areas of technology, safety, construction, products, and practices. ANSI itself does not develop standards. Rather, ANSI accredits organizations that use the ANSI consensus process in their standards development work. ANSI also approves standards that are created by non-accredited organizations that use the ANSI consensus process in their standards development work. The difference is the pre-approval of an SDO to develop standards rather than the post-approval of such standards. The ANSI process is further described below.

As stated in its application, Argentum seeks to lead an effort to develop industry standards for independent living (IL), assisted living (AL), memory care (MC), and continuing care retirement communities (CCRCs) in the following areas: (1) Safeguarding Senior Living Residents, (2) Emergency Preparedness, (3) Memory Care, (4) Medication Management, (5) Resident Centered Care, (6) Life Safety, (7) Stability (Falls) Management, and (8) Consumer Disclosure.

The rationale for seeking status as an SDO: Argentum states in its application that a substantial degree of variation in state regulations makes it more burdensome for senior living operators, increases the cost of senior living, and makes regulatory compliance more difficult and less consistent. In addition, they cite that industry interest for national standards has been demonstrated in their internal program launched in 2015 to pilot industry standards that relied on self-attestation with no reporting requirements or independent third-party review. Argentum reports that over 2,000 Argentum senior living communities adopted the standards. Argentum represents an estimated 12,000 senior living communities. Since only approximately 1/6 of Argentum members adopted the Argentum standards, there is a question as to whether there is really a need or broad industry-based demand for national standards, such as those approved by ANSI. Some might suggest that data from this pilot program cannot be interpreted to indicate a demand for more standards. Further, it is important to differentiate between the industry standards Argentum initiated in 2015 and ANSI consensus standards, which are described below.

ASHA's Position:

As a significant stakeholder in the industry, ASHA had the obligation to its members to respond to the Argentum application during the 30-day open comment period that ran from April 6, 2019 to May 6, 2019. Unfortunately, ASHA did not learn of the application until April 23, 2019, leaving insufficient time to assess its implications to the industry and offer meaningful input into the process. Therefore, ASHA's comments were limited to a request that Argentum delay the application process beyond the May 6, 2019 comment period deadline in order to allow key industry stakeholders the opportunity to fully assess and weigh in on the impact of Argentum becoming an ANSI accredited SDO. ASHA also requested a meeting with Argentum leaders to learn more about the initiative and the rationale for this approach.

Separately, ASHA engaged Howe & Hutton to review the issues associated with pursuing consensus standards, including assessing the need for uniform mandated standards for senior living; identifying any potential benefits gained from the development and adoption of such standards; exploring the potential for unintended consequences of increased liability and costs, such as litigation risk and related insurance impact; spotting duplication to existing standards; and considering the alternatives to ANSI which are more closely aligned with the senior living industry such as existing accreditation opportunities offered through a respected independent organization, CARF. These issues are addressed below.

ANSI Process, Legal Analysis and Impacts of Standards:

The following is an analysis of the issues associated with the development of ANSI approved senior living standards presented in a Q & A format. It is intended to provide ASHA members with key information to consider relative to the Argentum application.

What are standards in general?

Standards provide benchmarks for people, companies, and organizations to ensure the products, materials, systems, and services provided by different professional industries and product suppliers are safe, uniform, reliable, and functional. A variety of private organizations produce voluntary consensus standards, including industry and trade associations; nonprofit, standards-setting membership organizations; and professional societies. Examples of areas in which

standards impact our daily lives include food safety, toy designs and labeling, infection control, credit card use, personnel services, construction, and education.

What are industry standards?

Industry standards are developed by private-sector bodies, such as trade associations to promote quality and expertise in their profession, services or product offerings. The industry experts work together to develop a scope, definitions, a list of pertinent reference documents, and provisions that may be prescriptive, performance-based, or some combination of the two. They collectively draft the standard and promote it for adoption by its members and others, but may not necessarily adhere to a full consensus process (as defined by ANSI). Adoption of industry standards is voluntary and usually driven by the marketplace.

Examples of industry standards:

1) As referenced in its application, Argentum launched a pilot standards program in 2015 to create senior living standards in twelve key areas including consumer disclosure, resident rights, resident centered care, infrastructure, staff training and more. Companies that choose to adopt these standards indicate compliance through self-attestation on behalf of their communities. 2) The National Association of Realtors has “Standards of Practice” which set out its duties to clients, customers and other real estate licensees and generally purports to set a higher bar than what is called for in state law. Adoption is a condition of membership. 3) The American Nurses Association seeks to elevate the nursing profession through adoption of various standards for specialty practices such as addiction nursing and faith community practices.

What are consensus standards?

Consensus standards are developed through a formal, coordinated, cooperative process of discussion, drafting, and review according to guidelines for due process and open participation of interested parties in an affected industry. The group can include technical experts, providers, designers, producers, consumers, corporate and government purchasing officials, and regulatory authorities. Consensus requires that all views and objections be considered, and that an effort be made toward their resolution. Group members attempt to form consensus on the best specifications to meet customer, industry, and public needs. Consensus implies more than the concept of a simple majority but not necessarily unanimity. ANSI approved standards are voluntary consensus standards, until or unless they are referenced in statutes, codes, or government regulations, at which point they become mandatory standards.

What are mandatory standards?

Mandatory standards are consensus standards that have the force of law. They are no longer voluntary. Once adopted or codified by reference by governments and agencies, they are part of the law for the jurisdiction represented by that authority, such as the Occupational Safety and Health Administration (OSHA), the International Building Code (IBC), or the National Fire Protection Association (NFPA). Noncompliance with mandatory standards generally results in a fine, civil or criminal penalties, or loss of employment.

Many standards developed by SDOs are adapted for the government's purposes. Congress formally recognized the relationship between private-sector standards developers and the public

sector in 1996 when it passed the National Technology Transfer and Advancement Act (NTTAA). When it is in the public interest and compatible with agency goals and budget resources, the government is to participate in standards development. The NTTAA further requires federal agencies and departments to use privately developed voluntary consensus standards in lieu of government-unique standards whenever possible. Doing so eliminates the cost to the government of developing duplicative or redundant standards. See examples below.

Examples of government authorities adopting ANSI consensus standards by reference:

OSHA converted a voluntary standard into a mandatory one by requiring abrasive wheel machinery guards to conform to the ANSI B7.1-1970 standard on abrasive wheels. Various state safety agencies follow the same process as OSHA. For example, California, Oregon and South Carolina all have adopted similar regulations related to the abrasive wheel machinery.

NFPA 1600, Standard on Disaster/Emergency Management and Business Continuity/Continuity of Operations Programs, was an ANSI voluntary consensus standard that was first published in 1995. The National Commission on Terrorist Attacks Upon the United States (the 9/11 Commission) recognized NFPA 1600 as our national preparedness standard. Widely used by public, not-for-profit, nongovernmental, and private entities on a local, regional, national, international and global basis, NFPA 1600 was adopted by the U.S. Department of Homeland Security and carries the force of law.

ANSI standards can also be interpreted as implicit regulations through the legal system. The standards make a wonderful reference on how a machine should be, or more likely in the case of a trial, should have been, guarded. Employers or manufacturers who do not comply have a potential liability exposure if an ANSI standard indicates a method of machine design, operation or safeguarding that may have prevented an injury. It would be difficult to persuade a jury that a document is "just a voluntary standard" while the opposing lawyer advocates it is really the Holy Grail of safeguarding. (Excerpt from an article reprinted by ANSI News and Pubs, 2004).

What role does ANSI play in standard development?

As stated above, ANSI itself does not develop standards. ANSI accredits U.S. organizations that create standards using the consensus procedures set forth in the "ANSI Essential Requirements: Due process requirements for American National Standards" (ANSI Essential Requirements or ANSI process). ANSI also approves standards produced by non-accredited organizations that utilize the ANSI canvass process, which strictly follows the same ANSI Essential Requirements to assure due process and consensus. Accreditation and/or approval is not based on the technical merits of standards but, rather, on the processes and procedures used to develop them. An ANSI standard carries much more weight and significance in the regulatory environment than an industry standard that was not developed using the consensus process. If a government agency adopts a voluntary standard by reference, it is no longer voluntary. Argentum is pursuing accreditation from ANSI to be a SDO for the purpose of developing ANSI accredited senior living standards for IL, AL, MC and CCRCs.

What is the ANSI accreditation process?

An organization that wishes to become an ANSI accredited standards developer must submit an application and satisfy the due process requirements. The application must include the scope and rationale of the standards activity, a detailed outline of the operating process and procedures used to create the standards, a description of standardization efforts and coordination of actions with other organizations, and certification that the standards will satisfy all of the requirements in the ANSI Essential Requirements. The ANSI Essential Requirements are the backbone of the standards development process and mandate the following:

- *Openness: Participation shall be open to all persons who are directly and materially affected by the activity in question.*
- *Lack of dominance: Process shall not be dominated by any single interest category, individual or organization.*
- *Balance: Process should have a balance of interests.*
- *Coordination and harmonization: Resolve potential conflicts between and among existing ANS and candidate ANS standards.*
- *Notification of standards development: Standards activity shall be announced in suitable media as appropriate to encourage participation by all.*
- *Consideration of views and objections from all stakeholders: Prompt consideration shall be given to the written views and objections of all participants.*
- *Consensus vote: Evidence of consensus in accordance with requirements and shall be documented.*
- *Appeals process: Readily available appeals mechanism for the impartial handling of procedural appeals.*

All these principles combine to provide the safeguards for an equal and fair standards development process that may be spearheaded by one organization, but includes contributions by a multitude of stakeholders in any given industry. In the context of ANSI, due process means that “any person (organization, company, government agency, individual, etc.) with a direct and material interest has a right to participate by: a) expressing a position and its basis, b) having that position considered, and c) having the right to appeal. Due process allows for equity and fair play.”

Once approved, an ANS is designated, published, and maintained in accordance with ANSI procedures, and must undergo 5-year periodic reviews.

Will accreditation of Argentum as an ANSI Accredited SDO mean they will develop standards for the entire industry?

If Argentum’s application is approved by ANSI, Argentum will become an accredited SDO and will be on track to start their standard development work. As stated in their application, they will develop standards in at least 8 areas of care and practice for IL, AL, MC, and CCRCs. While the ANSI process calls for participation on Argentum’s Standards Commission to include individuals and entities that are directly and materially affected by senior living standards, regardless of whether they have membership in Argentum, the Argentum Board of Directors

maintains the responsibility for final approval of all proposed Argentum standards. However, the process remains a consensus process.

Will accreditation of Argentum as an ANSI Accredited SDO assure ANSI approval of Argentum's proposed senior living standards for the entire industry?

No. The accreditation of an applicant as an ANSI accredited SDO does not imply approval of any of its proposed documents as an ANS. For each document that an accredited or non-accredited SDO proposes as an ANS, the SDO must follow each and every step of the ANSI Essential Requirements, including early coordination (via the filing of a publicly announced proposal form); formal public review of the proposed draft standard (via the publicly announced procedure); consideration by the SDO of all public and consensus body views and objections in accordance with the accredited procedures; notification of the right to appeal to any unresolved public or consensus body and objectors with completion of any such appeals at the SDO level; and if the standard is approved as an ANS by ANSI's Board of Standards Review (BSR), the opportunity to appeal the BSR's approval decision and, again, another final attempt to the ANSI Appeals Board. (See status of Argentum application below). Therefore, if an organization such as ASHA believed ANSI took action to approve an application that did not meet the due process requirements, it can file an appeal with the Appeals Board.

If Argentum's application is not approved by ANSI, Argentum can still pursue standard development by following the ANSI Essential Requirements process. Once the development process begins, industry or non-Argentum members will have the option to participate.

Status of Argentum Application:

As part of the SDO application process, Argentum received several responses from various industry organizations expressing various levels of concern about the application, including ASHA. Argentum responded to ASHA's comments on June 20, 2019.

According to a spokesperson at ANSI, the application, proposed procedures and all public comments and Argentum's responses are currently under review via letter ballot to ANSI's Executive Standards Council's (ExSC - the accrediting body) Subcommittee on Accreditation (SC-A), until the 3rd week of July. The primary role of the SC-A is to identify any areas of procedural non-compliance with ANSI's accreditation requirements and to ask for the applicant's responses to questions or comments and/or to request revisions to its proposed procedures. The ExSC looks very closely at each and every public comment as part of this review process, and if it does not believe the applicant has adequately responded, may request follow up information from the applicant. Once Argentum provides a response to any SC-A questions/comments, the SC-A will either ask for additional information for further consideration and/or issue its approval recommendation to the full ExSC. The application materials (including all public comments/responses) will then be balloted with the SC-A's recommendation to the full ExSC for further review (one-month ballot). If the ExSC determines that the application meets ANSI's accreditation requirements, the final SDO accreditation approval notice will be formally issued. All public commenters will be formally advised of the ExSC's accreditation decision and will have 15 working days to submit an appeal to the ExSC in accordance with the ExSC's operating procedures, and further on to the ANSI Appeals Board if any appellant is dissatisfied

with the appeals decision of the ExSC. In general, the accreditation process takes about 3-4 months (though large number of public comments/other factors may extend that period). Historically, nearly all applicants have made the changes requested by the ExSC to correct any areas of procedural non-compliance. All ANSI SDOs are also subject to a procedural audit of their accreditation and/or ANS on a 5-year basis following accreditation. The ANS will be withdrawn if it is not revised or reaffirmed at least every 5 years.

How many SDOs and ANSI Standards are there?

As of January 2018, some 237 standards developers were accredited by ANSI; there were more than 11,500 American National Standards. To ASHA's knowledge, the only ANSI standard development activity associated with health care has been in the area of health care records with the SDO Open Source Electronic Health Records Alliance.

What about state oversight? Are ANSI Standards a path to federal oversight?

Industry standards are typically developed to complement and not replace state oversight of an industry. This was one of the stated intentions of Argentum's 2015 standards program and ASHA assumes this will not change in their effort to develop national ANSI consensus standards. However, as described above, it is not out of the realm of possibility for an ANSI Senior Living Standard to be incorporated into a federal statute or code by reference and accordingly become a de facto federal regulation of senior living.

Assisted living was founded on the principle that long-term care for seniors should be centered in a more residential, non-institutional environment. Further, it was thought that differences in approaches taken by the various states would enhance diversification in the offerings available to assisted living residents. Certainly, over the years, we have seen states expand the types of services and programs that can be accommodated within assisted living settings or communities, including dementia care, hospice, care for bedridden residents, and other services. It is questionable whether such variations would have been possible or permitted under uniform national rules. It is important to note that the Argentum application also seeks to set standards for IL, a category of senior living that heretofore has not been regulated.

ASHA has long held the view that the industry is best regulated at the state level. All 50 states and the District of Columbia regulate assisted living. Key elements in state regulations include:

- *Mandatory services, such as personal care, meals, transportation, laundry, activities, housekeeping, medication management and monitoring or resident well-being;*
- *Permitted services, such as assistance with or administration of medications and intermittent nursing care;*
- *Specific requirements for admission agreement contents, handling of resident funds, contents and frequency of care plans, medication storage, dietary/food service programs;*
- *Administrator requirements, such as education and examination prerequisites, continuing education, and minimum hours on the job;*
- *Staffing levels, such as staff-to-resident ratios, minimum required hours, licensed personnel, training requirements;*

- *Mandatory discharge criteria, such as when a resident requires ongoing nursing care or restraints, is a danger to self or others, exceeds the facility's capabilities;*
- *Physical plant requirements, such as minimum unit sizes, maximum occupancy limits, ratios of toilets and baths; fire and life safety, sanitation;*
- *State agency regulation and enforcement, including inspections, fines, license suspension, revocation.*

Further, states inspect communities with regularity and can suspend or revoke a license or impose penalties for violations or non-compliance. States also have a Long-Term Care Ombudsman to advocate on behalf of residents and can investigate complaints. In fact, the states have so "comprehensively regulated" the field of assisted living that the industry regulation preempts otherwise applicable laws, such as landlord-tenant, public health regulation of restaurants, and rent control. Despite Argentum's statement otherwise, it is arguable whether differences among the states' regulations cause any burden for industry operators or significantly influence the delivery of quality care. If the industry maintains that the current state regulatory framework is adequate and appropriate, it is reasonable to question whether the effort to pursue national industry standards will place the industry on the path to federal oversight or create conflicts with state laws and regulations.

What are the alternatives to the ANSI National Standards?

As part of this analysis it is prudent to consider alternative approaches to enhance quality in senior living. Accreditation is one voluntary means to that end. There are currently two other options available to the senior living industry:

- 1) **CARF** was founded in 1966. CARF International is an independent, nonprofit accreditor of health and human services including independent living, assisted living and CCRCs. The CARF standards have been developed over 50 years by independent international teams of service providers, policy makers, payers, family members, and consumers. These standards have also been submitted to the public for review to validate relevancy and ensure input from all interested stakeholders. The process is rigorous and consultative in its approach centered on the onsite survey. Through interviews of staff, persons served and families, and observed organizational practices, documentation and suggestions for improvement of operations and services, CARF renders an accreditation decision. It delivers a report that identifies the service provider's strengths and areas for improvement and its level of demonstrated conformance to the standards. Some of the stated benefits of conformance to CARF standards by those who have sought and received the status include: 1) enhanced risk management; 2) ease of reimbursement from regulators, funders, payers; and 3) greater access to capital from lenders. The CARF process is not only intended to measure and accredit communities that offer a high level of resident care, but also to attest to their status as well-managed communities overall. It is also noteworthy that a growing number of states accept CARF accreditation in lieu of a required state inspection. Most recently Idaho enacted a law to this effect in 2019.

- 2) **The Joint Commission** is a leading healthcare self-regulatory agency with a focus on hospital accreditation and other health care settings including long term care facilities. While the Joint Commission pondered a program in assisted living in the late 1990's, it abandoned that effort. However, it does examine the nursing home portion of CCRCs. The Joint Commission sets its standards and establishes elements of performance based on the Center for Medicare/Medicaid Services (CMS) standards. CMS has approved The Joint Commission as having standards and a survey process that meets or exceeds established federal requirements. The Joint Commission essentially oversees quality for all U.S. hospitals. NOTE: While this option is not available to senior living outside of the CCRC nursing home component, it is conceivable the senior living industry could initiate dialogue with The Joint Commission related to assisted living accreditation.

Federal Oversight Concerns:

Historically, the assisted living industry has been concerned about the adoption of federal regulations. There is general agreement that federal regulation of the skilled nursing industry has played a central role in its decline as a care option of choice for most consumers. Federal nursing regulations and requirements are so extensive and detailed that many skilled nursing staff complain that they do not have enough time to provide care due to the extensive federal regulatory paperwork requirements.

Although litigation and political climates vary among the states, such that providers of assisted living may consider it more difficult to do business in some states versus others, the amount and extent of regulation does not vary widely. In other words, the greater risk of liability or aggressive regulatory enforcement in some states does not stem so much from differences in regulations as from the customs and practices of the plaintiff's state bar and the regulatory agencies. The level of activity by state-based consumer groups is also a factor.

While generally covering the same subjects, state regulations differ widely in how they handle those subjects. For example, some states prohibit the delivery of nursing care in assisted living, while others may allow varying degrees of temporary nursing care. State regulations also vary widely with regard to experience, training and continuing education requirements for administrators and staff. Some prescribe specific staff-to-resident ratios and others do not. Some states permit assisted living providers to limit their liability with a "negotiated risk agreement," while others prohibit them. This variation and diversity of approaches among the states would likely be lost with a national standard.

Regulation and oversight are important to the promotion of basic standards of quality and safety. However, the differences between well-run and poorly operated care communities have little or nothing to do with the degree of regulation or government oversight. Better quality operations are founded upon the integrity and skill of, and resources available to, the care providers. Such providers probably would seek to comply with industry-created standards but should not need national standards to provide high-quality services. In fact, the pursuit of one-size-fits-all standards may distract from the direct provision of care and stifle creativity and new innovative approaches to care-giving.

Another concern about adopting national standards to supplement state regulation is that providers have a wide range of policies and practices they have developed for their own organizations that define their product type and the character of their brand. Requiring them to restructure their offerings or way of doing business to conform to national standards may reduce their ability to maintain their unique styles and methods of doing business. A move toward uniformity is not necessarily an improvement over the current variety of operational styles that are in the marketplace. National standards could likely result in more uniformity and less variety in the range of services available to seniors. Regulators and governments often rely on standards to draft regulations and legislation. To develop a single, nationwide set of industry voluntary standards may nevertheless lead to federal oversight.

Unintended Consequences of Adopting an ANSI Standard

Open Process Can Mobilize Consumer Advocates Seeking Stronger Oversight:

The ANSI Essential Requirements call for an open balanced process, including the opportunity for public comments in the standards development process. Like the application stage, which was open for comment, each standard proposed must also allow parties with a direct and material interest in an affected industry to weigh in. While critical to the goal of ANSI accreditation, the industry must also prepare to engage the advocacy community, including those who espouse extreme perspectives, who may call for dramatically more oversight and regulation of the industry at both the state and federal levels.

For example, it is not unreasonable to assume that efforts will be made to institute staffing ratios or minimum staff hours requirements in any proposed standard. A recent report from the Long-Term Care Community Coalition entitled, “Assisted Living: Promising Practices for Improving Resident Health, Quality of Life, and Safety,” was directed at consumers, providers and policymakers. The report offers best practices and policies for assisted living in at least 13 areas including calling for staffing ratios and the presence of a full time Registered Nurse, among many other requirements that might be considered unnecessary in every community.

Insurance Impacts:

When underwriters measure risk, they look at a company’s policies and procedures as well as guidelines for training, hiring, and performance. They consider quality of care and living environments. They monitor the activity of the plaintiffs’ bar in particular states or jurisdictions. They closely review multiple factors to assess and price risk for the companies they insure.

When the subject was posed to two major industry insurers, there was general agreement that ANSI standards would almost certainly have no beneficial impact on the insurance underwriting of senior living. In fact, both believe ANSI standards would likely increase the number of lawsuits in an already highly litigious area. They would provide the plaintiffs’ bar with additional ammunition to attack the senior living landscape. Both noted that increased litigation translates into higher insurance costs because underwriters price that risk into their insurance coverage. Premiums reflect risk – not better living conditions or senior care services.

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Increased Risk of Litigation:

Adoption of standards may create confusion with existing state regulations, and therefore increase the opportunities for litigation. One reason for that is standards sometimes look just like statutes. However, there are important differences, as previously discussed. A statute typically provides the general outline to protect against risks or unsafe conditions. A standard usually goes into greater detail. It may specify the technical elements missing from the statute, sometimes diminishing the opportunities for creativity and innovation.

Standards provide another set of guidelines that the plaintiffs' bar can utilize when making a case for their clients. For example, the plaintiffs' bar may argue that the ANSI standard establishes the minimum level of care the provider should meet (without specifying how) to provide a basic standard of quality and safety. Even though these standards are not legally required, they represent a consensus on what experts consider quality care, safety, or service.

Self-administered standards programs present additional challenges. If the provider is allowed to self-report compliance, there is the likelihood that the plaintiffs' bar will argue that the reported information was not reliable because it was not verified by an independent third-party.

Although an ANSI standard is voluntary, it becomes mandatory when it is cited in a statute or code that says you have to follow it. Not complying with state regulations can result in loss of licensure and fines. Not complying with standards, even voluntary standards, can result in more and costly lawsuits.

Next Steps:

This analysis is intended to identify the important issues, the process and impacts relative to Argentum's application to become an accredited ANSI SDO. We encourage ASHA's leadership to share this memorandum with their appropriate staff and/or counsel. We understand that ASHA will continue to evaluate the benefits as well as risks of moving toward the adoption of ANSI Standards and/or other industry standards or best practice guidelines for the senior living industry, as proposed by Argentum in its April 7, 2019 application.

If we can provide any additional information, please let us know.

Sincerely,

HOWE & HUTTON, LTD.


Naomi R. Angel, Partner

cc: ASHA Executive Committee