

(II) DOES NOT EXECUTE A SEPARATE ASSISTED LIVING AGREEMENT.

(2) IN ADDITION TO ANY OTHER REQUIREMENT OF THIS SECTION, THE DISCLOSURE STATEMENT SHALL CONTAIN THE FOLLOWING INFORMATION ABOUT THE ASSISTED LIVING PROGRAM:

(I) THE NAME AND ADDRESS AND A DESCRIPTION OF EACH FACILITY THAT THE PROVIDER OPERATES;

(II) A STATEMENT REGARDING THE RELATIONSHIP OF THE PROVIDER TO OTHER PROVIDERS OR SERVICES IF THE RELATIONSHIP AFFECTS THE CARE OF THE RESIDENT;

(III) A DESCRIPTION OF ANY SPECIAL PROGRAMMING, STAFFING, AND TRAINING PROVIDED BY THE PROGRAM FOR INDIVIDUALS WITH PARTICULAR NEEDS OR CONDITIONS SUCH AS COGNITIVE IMPAIRMENT;

(IV) NOTICE OF:

1. THE AVAILABILITY OF LOCKS FOR STORAGE;
2. THE AVAILABILITY OF LOCKS FOR THE SUBSCRIBER'S ROOM;
3. THE SECURITY PROCEDURES THAT THE PROVIDER WILL IMPLEMENT TO PROTECT THE SUBSCRIBER AND THE SUBSCRIBER'S PROPERTY; AND
4. THE PROVIDER'S RIGHT, IF ANY, TO ENTER A SUBSCRIBER'S ROOM;

(V) A STATEMENT OF THE OBLIGATIONS OF THE PROVIDER, THE SUBSCRIBER, OR THE SUBSCRIBER'S AGENT FOR:

1. ARRANGING OR OVERSEEING MEDICAL CARE;
2. MONITORING THE SUBSCRIBER'S HEALTH STATUS;
3. PURCHASING OR RENTING ESSENTIAL OR DESIRED EQUIPMENT AND SUPPLIES; AND
4. ASCERTAINING THE COST OF AND PURCHASING DURABLE MEDICAL EQUIPMENT;

(VI) AN EXPLANATION OF THE ASSISTED LIVING PROGRAM'S COMPLAINT OR GRIEVANCE PROCEDURE; AND

(VII) NOTICE OF ANY MATERIAL CHANGES IN THE ASSISTED LIVING PROGRAM.

(3) THE PROVIDER SHALL: