

1 A bill to be entitled

2 An act relating to assisted living facilities;
3 amending s. 394.4574, F.S.; providing that Medicaid
4 managed care plans are responsible for enrolled mental
5 health residents; providing that managing entities
6 under contract with the Department of Children and
7 Families are responsible for mental health residents
8 who are not enrolled with a Medicaid managed care
9 plan; deleting a provision to conform to changes made
10 by the act; requiring that the community living
11 support plan be completed and provided to the
12 administrator of a facility within a specified period
13 after the resident's admission; requiring the
14 community living support plan to be updated when there
15 is a significant change to the mental health
16 resident's behavioral health; requiring the case
17 manager assigned to a mental health resident of an
18 assisted living facility that holds a limited mental
19 health license to keep a record of the date and time
20 of face-to-face interactions with the resident and to
21 make the record available to the responsible entity
22 for inspection; requiring that the record be
23 maintained for a specified period; requiring the
24 responsible entity to ensure that there is adequate
25 and consistent monitoring and implementation of
26 community living support plans and cooperative

27 | agreements and that concerns are reported to the
28 | appropriate regulatory oversight organization under
29 | certain circumstances; amending s. 400.0074, F.S.;
30 | requiring that an administrative assessment conducted
31 | by a local council be comprehensive in nature and
32 | focus on factors affecting the rights, health, safety,
33 | and welfare of nursing home residents; requiring a
34 | local council to conduct an exit consultation with the
35 | facility administrator or administrator designee to
36 | discuss issues and concerns in areas affecting the
37 | rights, health, safety, and welfare of residents and
38 | make recommendations for improvement; amending s.
39 | 400.0078, F.S.; requiring that a resident or a
40 | representative of a resident of a long-term care
41 | facility be informed that retaliatory action cannot be
42 | taken against a resident for presenting grievances or
43 | for exercising any other resident right; amending s.
44 | 429.07, F.S.; requiring that an extended congregate
45 | care license be issued to certain facilities that have
46 | been licensed as assisted living facilities under
47 | certain circumstances and authorizing the issuance of
48 | such license if a specified condition is met;
49 | providing the purpose of an extended congregate care
50 | license; providing that the initial extended
51 | congregate care license of an assisted living facility
52 | is provisional under certain circumstances; requiring

53 a licensee to notify the Agency for Health Care
54 Administration if it accepts a resident who qualifies
55 for extended congregate care services; requiring the
56 agency to inspect the facility for compliance with the
57 requirements of an extended congregate care license;
58 requiring the issuance of an extended congregate care
59 license under certain circumstances; requiring the
60 licensee to immediately suspend extended congregate
61 care services under certain circumstances; requiring a
62 registered nurse representing the agency to visit the
63 facility at least twice a year, rather than quarterly,
64 to monitor residents who are receiving extended
65 congregate care services; authorizing the agency to
66 waive one of the required yearly monitoring visits
67 under certain circumstances; authorizing the agency to
68 deny or revoke a facility's extended congregate care
69 license; requiring a registered nurse representing the
70 agency to visit the facility at least annually, rather
71 than twice a year, to monitor residents who are
72 receiving limited nursing services; providing that
73 such monitoring visits may be conducted in conjunction
74 with other agency inspections; authorizing the agency
75 to waive the required yearly monitoring visit for a
76 facility that is licensed to provide limited nursing
77 services under certain circumstances; amending s.
78 429.075, F.S.; requiring an assisted living facility

79 | that serves one or more mental health residents to
80 | obtain a limited mental health license; amending s.
81 | 429.14, F.S.; revising the circumstances under which
82 | the agency may deny, revoke, or suspend the license of
83 | an assisted living facility and impose an
84 | administrative fine; requiring the agency to deny or
85 | revoke the license of an assisted living facility
86 | under certain circumstances; requiring the agency to
87 | impose an immediate moratorium on the license of an
88 | assisted living facility under certain circumstances;
89 | deleting a provision requiring the agency to provide a
90 | list of facilities with denied, suspended, or revoked
91 | licenses to the Department of Business and
92 | Professional Regulation; exempting a facility from the
93 | 45-day notice requirement if it is required to
94 | relocate some or all of its residents; amending s.
95 | 429.178, F.S.; conforming cross-references; amending
96 | s. 429.19, F.S.; revising the amounts and uses of
97 | administrative fines; requiring the agency to levy a
98 | fine for violations that are corrected before an
99 | inspection if noncompliance occurred within a
100 | specified period of time; deleting factors that the
101 | agency is required to consider in determining
102 | penalties and fines; amending s. 429.256, F.S.;
103 | revising the term "assistance with self-administration
104 | of medication" as it relates to the Assisted Living

105 Facilities Act; amending s. 429.27, F.S.; revising the
106 amount of cash for which a facility may provide
107 safekeeping for a resident; amending s. 429.28, F.S.;
108 providing notice requirements to inform facility
109 residents that the identity of the resident and
110 complainant in any complaint made to the State Long-
111 Term Care Ombudsman Program or a local long-term care
112 ombudsman council is confidential and that retaliatory
113 action cannot be taken against a resident for
114 presenting grievances or for exercising any other
115 resident right; requiring that a facility that
116 terminates an individual's residency after the filing
117 of a complaint be fined if good cause is not shown for
118 the termination; amending s. 429.34, F.S.; requiring
119 certain persons to report elder abuse in assisted
120 living facilities; requiring the agency to regularly
121 inspect every licensed assisted living facility;
122 requiring the agency to conduct more frequent
123 inspections under certain circumstances; requiring the
124 licensee to pay a fee for the cost of additional
125 inspections; requiring the agency to annually adjust
126 the fee; amending s. 429.41, F.S.; providing that
127 certain staffing requirements apply only to residents
128 in continuing care facilities who are receiving the
129 relevant service; amending s. 429.52, F.S.; requiring
130 each newly hired employee of an assisted living

131 facility to attend a preservice orientation provided
 132 by the assisted living facility; requiring the
 133 employee and administrator to sign a statement that
 134 the employee completed the required pre-service
 135 orientation and keep the signed statement in the
 136 employee's personnel record; requiring additional
 137 hours of training for assistance with medication;
 138 conforming a cross-reference; creating s. 429.55,
 139 F.S.; requiring the Office of Program Policy Analysis
 140 and Government Accountability to study the reliability
 141 of facility surveys and submit to the Governor and the
 142 Legislature its findings and recommendations;
 143 requiring the agency to implement a rating system of
 144 assisted living facilities by a specified date, adopt
 145 rules, and create content for the agency's website
 146 that makes available to consumers information
 147 regarding assisted living facilities; providing
 148 criteria for the content; providing an effective date.

149
 150 Be It Enacted by the Legislature of the State of Florida:

151
 152 Section 1. Section 394.4574, Florida Statutes, is amended
 153 to read:

154 394.4574 ~~Department~~ Responsibilities for coordination of
 155 services for a mental health resident who resides in an assisted
 156 living facility that holds a limited mental health license.—

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

157 (1) As used in this section, the term "mental health
 158 resident," ~~for purposes of this section,~~ means an individual who
 159 receives social security disability income due to a mental
 160 disorder as determined by the Social Security Administration or
 161 receives supplemental security income due to a mental disorder
 162 as determined by the Social Security Administration and receives
 163 optional state supplementation.

164 (2) Medicaid managed care plans are responsible for
 165 Medicaid enrolled mental health residents, and managing entities
 166 under contract with the department are responsible for mental
 167 health residents who are not enrolled in a Medicaid health plan.
 168 A Medicaid managed care plan or a managing entity, as
 169 appropriate, shall ~~The department must~~ ensure that:

170 (a) A mental health resident has been assessed by a
 171 psychiatrist, clinical psychologist, clinical social worker, or
 172 psychiatric nurse, or an individual who is supervised by one of
 173 these professionals, and determined to be appropriate to reside
 174 in an assisted living facility. The documentation must be
 175 provided to the administrator of the facility within 30 days
 176 after the mental health resident has been admitted to the
 177 facility. An evaluation completed upon discharge from a state
 178 mental hospital meets the requirements of this subsection
 179 related to appropriateness for placement as a mental health
 180 resident if it was completed within 90 days before ~~prior to~~
 181 admission to the facility.

182 (b) A cooperative agreement, as required in s. 429.075, is

183 developed by ~~between~~ the mental health care services provider
184 that serves a mental health resident and the administrator of
185 the assisted living facility with a limited mental health
186 license in which the mental health resident is living. ~~Any~~
187 ~~entity that provides Medicaid prepaid health plan services shall~~
188 ~~ensure the appropriate coordination of health care services with~~
189 ~~an assisted living facility in cases where a Medicaid recipient~~
190 ~~is both a member of the entity's prepaid health plan and a~~
191 ~~resident of the assisted living facility. If the entity is at~~
192 ~~risk for Medicaid targeted case management and behavioral health~~
193 ~~services, the entity shall inform the assisted living facility~~
194 ~~of the procedures to follow should an emergent condition arise.~~

195 (c) The community living support plan, as defined in s.
196 429.02, has been prepared by a mental health resident and his or
197 her a mental health case manager ~~of that resident~~ in
198 consultation with the administrator of the facility or the
199 administrator's designee. The plan must be completed and
200 provided to the administrator of the assisted living facility
201 with a limited mental health license in which the mental health
202 resident lives within 30 days after the resident's admission.
203 The support plan and the agreement may be in one document.

204 (d) The assisted living facility with a limited mental
205 health license is provided with documentation that the
206 individual meets the definition of a mental health resident.

207 (e) The mental health services provider assigns a case
208 manager to each mental health resident for whom the entity is

209 responsible ~~who lives in an assisted living facility with a~~
210 ~~limited mental health license.~~ The case manager shall coordinate
211 ~~is responsible for coordinating~~ the development ~~of~~ and
212 implementation of the community living support plan defined in
213 s. 429.02. The plan must be updated at least annually, or when
214 there is a significant change in the resident's behavioral
215 health status, such as an inpatient admission or a change in
216 medication, level of service, or residence. Each case manager
217 shall keep a record of the date and time of any face-to-face
218 interaction with the resident and make the record available to
219 the responsible entity for inspection. The record must be
220 retained for at least 2 years after the date of the most recent
221 interaction.

222 (f) Adequate and consistent monitoring and implementation
223 of community living support plans and cooperative agreements are
224 conducted by the resident's case manager.

225 (g) Concerns are reported to the appropriate regulatory
226 oversight organization if a regulated provider fails to deliver
227 appropriate services or otherwise acts in a manner that has the
228 potential to result in harm to the resident.

229 (3) The Secretary of Children and Families ~~Family~~
230 ~~Services~~, in consultation with the Agency for Health Care
231 Administration, shall ~~annually~~ require each district
232 administrator to develop, with community input, a detailed
233 annual plan that demonstrates detailed plans that demonstrate
234 how the district will ensure the provision of state-funded

235 mental health and substance abuse treatment services to
 236 residents of assisted living facilities that hold a limited
 237 mental health license. This plan ~~These plans~~ must be consistent
 238 with the substance abuse and mental health district plan
 239 developed pursuant to s. 394.75 and must address case management
 240 services; access to consumer-operated drop-in centers; access to
 241 services during evenings, weekends, and holidays; supervision of
 242 the clinical needs of the residents; and access to emergency
 243 psychiatric care.

244 Section 2. Subsection (1) of section 400.0074, Florida
 245 Statutes, is amended, and paragraph (h) is added to subsection
 246 (2) of that section, to read:

247 400.0074 Local ombudsman council onsite administrative
 248 assessments.—

249 (1) In addition to any specific investigation conducted
 250 pursuant to a complaint, the local council shall conduct, at
 251 least annually, an onsite administrative assessment of each
 252 nursing home, assisted living facility, and adult family-care
 253 home within its jurisdiction. This administrative assessment
 254 must be comprehensive in nature and must ~~shall~~ focus on factors
 255 affecting residents' ~~the~~ rights, health, safety, and welfare ~~of~~
 256 ~~the residents~~. Each local council is encouraged to conduct a
 257 similar onsite administrative assessment of each additional
 258 long-term care facility within its jurisdiction.

259 (2) An onsite administrative assessment conducted by a
 260 local council shall be subject to the following conditions:

261 (h) The local council shall conduct an exit consultation
 262 with the facility administrator or administrator designee to
 263 discuss issues and concerns in areas affecting residents'
 264 rights, health, safety, and welfare and, if needed, make
 265 recommendations for improvement.

266 Section 3. Subsection (2) of section 400.0078, Florida
 267 Statutes, is amended to read:

268 400.0078 Citizen access to State Long-Term Care Ombudsman
 269 Program services.—

270 (2) ~~Every resident or representative of a resident shall~~
 271 ~~receive,~~ Upon admission to a long-term care facility, each
 272 resident or representative of a resident must receive
 273 information regarding the purpose of the State Long-Term Care
 274 Ombudsman Program, the statewide toll-free telephone number for
 275 receiving complaints, information that retaliatory action cannot
 276 be taken against a resident for presenting grievances or for
 277 exercising any other resident right, and other relevant
 278 information regarding how to contact the program. Each resident
 279 or his or her representative ~~Residents or their representatives~~
 280 must be furnished additional copies of this information upon
 281 request.

282 Section 4. Paragraphs (b) and (c) of subsection (3) of
 283 section 429.07, Florida Statutes, are amended to read:

284 429.07 License required; fee.—

285 (3) In addition to the requirements of s. 408.806, each
 286 license granted by the agency must state the type of care for

287 which the license is granted. Licenses shall be issued for one
288 or more of the following categories of care: standard, extended
289 congregate care, limited nursing services, or limited mental
290 health.

291 (b) An extended congregate care license shall be issued to
292 each facility that has been licensed as an assisted living
293 facility for 2 or more years and that provides services
294 ~~facilities providing~~, directly or through contract, ~~services~~
295 beyond those authorized in paragraph (a), including services
296 performed by persons licensed under part I of chapter 464 and
297 supportive services, as defined by rule, to persons who would
298 otherwise be disqualified from continued residence in a facility
299 licensed under this part. An extended congregate care license
300 may be issued to a facility that has a provisional extended
301 congregate care license and meets the requirements for licensure
302 under subparagraph 2. The primary purpose of extended congregate
303 care services is to allow residents the option of remaining in a
304 familiar setting from which they would otherwise be disqualified
305 for continued residency as they become more impaired. A facility
306 licensed to provide extended congregate care services may also
307 admit an individual who exceeds the admission criteria for a
308 facility with a standard license, if he or she is determined
309 appropriate for admission to the extended congregate care
310 facility.

311 1. In order for extended congregate care services to be
312 provided, the agency must first determine that all requirements

313 established in law and rule are met and must specifically
314 designate, on the facility's license, that such services may be
315 provided and whether the designation applies to all or part of
316 the facility. This ~~Such~~ designation may be made at the time of
317 initial licensure or relicensure, or upon request in writing by
318 a licensee under this part and part II of chapter 408. The
319 notification of approval or the denial of the request shall be
320 made in accordance with part II of chapter 408. Each existing
321 facility that qualifies ~~facilities qualifying~~ to provide
322 extended congregate care services must have maintained a
323 standard license and may not have been subject to administrative
324 sanctions during the previous 2 years, or since initial
325 licensure if the facility has been licensed for less than 2
326 years, for any of the following reasons:

- 327 a. A class I or class II violation;
- 328 b. Three or more repeat or recurring class III violations
329 of identical or similar resident care standards from which a
330 pattern of noncompliance is found by the agency;
- 331 c. Three or more class III violations that were not
332 corrected in accordance with the corrective action plan approved
333 by the agency;
- 334 d. Violation of resident care standards which results in
335 requiring the facility to employ the services of a consultant
336 pharmacist or consultant dietitian;
- 337 e. Denial, suspension, or revocation of a license for
338 another facility licensed under this part in which the applicant

339 for an extended congregate care license has at least 25 percent
340 ownership interest; or

341 f. Imposition of a moratorium pursuant to this part or
342 part II of chapter 408 or initiation of injunctive proceedings.

343

344 The agency may deny or revoke a facility's extended congregate
345 care license for not meeting the criteria for an extended
346 congregate care license as provided in this subparagraph.

347 2. If an assisted living facility has been licensed for
348 less than 2 years, the initial extended congregate care license
349 must be provisional and may not exceed 6 months. Within the
350 first 3 months after the provisional license is issued, the
351 licensee shall notify the agency, in writing, when it has
352 admitted at least one extended congregate care resident, after
353 which an unannounced inspection shall be made to determine
354 compliance with requirements of an extended congregate care
355 license. Failure to admit an extended congregate care resident
356 within the first 3 months shall render the extended congregate
357 care license void. A licensee with a provisional extended
358 congregate care license that demonstrates compliance with all of
359 the requirements of an extended congregate care license during
360 the inspection shall be issued an extended congregate care
361 license. In addition to sanctions authorized under this part, if
362 violations are found during the inspection and the licensee
363 fails to demonstrate compliance with all assisted living
364 requirements during a followup inspection, the licensee shall

365 immediately suspend extended congregate care services, and the
366 provisional extended congregate care license expires. The agency
367 may extend the provisional license for not more than 1 month in
368 order to complete a followup visit.

369 3.2. A facility that is licensed to provide extended
370 congregate care services shall maintain a written progress
371 report on each person who receives services which describes the
372 type, amount, duration, scope, and outcome of services that are
373 rendered and the general status of the resident's health. A
374 registered nurse, or appropriate designee, representing the
375 agency shall visit the facility at least twice a year ~~quarterly~~
376 to monitor residents who are receiving extended congregate care
377 services and to determine if the facility is in compliance with
378 this part, part II of chapter 408, and relevant rules. One of
379 the visits may be in conjunction with the regular survey. The
380 monitoring visits may be provided through contractual
381 arrangements with appropriate community agencies. A registered
382 nurse shall serve as part of the team that inspects the
383 facility. The agency may waive one of the required yearly
384 monitoring visits for a facility that has:

385 a. Held an extended congregate care license for at least
386 24 months; ~~been licensed for at least 24 months to provide~~
387 ~~extended congregate care services, if, during the inspection,~~
388 ~~the registered nurse determines that extended congregate care~~
389 ~~services are being provided appropriately, and if the facility~~
390 ~~has~~

391 b. No class I or class II violations and no uncorrected
 392 class III violations; and-

393 c. No ombudsman council complaints that resulted in a
 394 citation for licensure ~~The agency must first consult with the~~
 395 ~~long-term care ombudsman council for the area in which the~~
 396 ~~facility is located to determine if any complaints have been~~
 397 ~~made and substantiated about the quality of services or care.~~
 398 ~~The agency may not waive one of the required yearly monitoring~~
 399 ~~visits if complaints have been made and substantiated.~~

400 4.3. A facility that is licensed to provide extended
 401 congregate care services must:

402 a. Demonstrate the capability to meet unanticipated
 403 resident service needs.

404 b. Offer a physical environment that promotes a homelike
 405 setting, provides for resident privacy, promotes resident
 406 independence, and allows sufficient congregate space as defined
 407 by rule.

408 c. Have sufficient staff available, taking into account
 409 the physical plant and firesafety features of the building, to
 410 assist with the evacuation of residents in an emergency.

411 d. Adopt and follow policies and procedures that maximize
 412 resident independence, dignity, choice, and decisionmaking to
 413 permit residents to age in place, so that moves due to changes
 414 in functional status are minimized or avoided.

415 e. Allow residents or, if applicable, a resident's
 416 representative, designee, surrogate, guardian, or attorney in

417 fact to make a variety of personal choices, participate in
418 developing service plans, and share responsibility in
419 decisionmaking.

420 f. Implement the concept of managed risk.

421 g. Provide, directly or through contract, the services of
422 a person licensed under part I of chapter 464.

423 h. In addition to the training mandated in s. 429.52,
424 provide specialized training as defined by rule for facility
425 staff.

426 5.4. A facility that is licensed to provide extended
427 congregate care services is exempt from the criteria for
428 continued residency set forth in rules adopted under s. 429.41.
429 A licensed facility must adopt its own requirements within
430 guidelines for continued residency set forth by rule. However,
431 the facility may not serve residents who require 24-hour nursing
432 supervision. A licensed facility that provides extended
433 congregate care services must also provide each resident with a
434 written copy of facility policies governing admission and
435 retention.

436 ~~5. The primary purpose of extended congregate care~~
437 ~~services is to allow residents, as they become more impaired,~~
438 ~~the option of remaining in a familiar setting from which they~~
439 ~~would otherwise be disqualified for continued residency. A~~
440 ~~facility licensed to provide extended congregate care services~~
441 ~~may also admit an individual who exceeds the admission criteria~~
442 ~~for a facility with a standard license, if the individual is~~

443 ~~determined appropriate for admission to the extended congregate~~
 444 ~~care facility.~~

445 6. Before the admission of an individual to a facility
 446 licensed to provide extended congregate care services, the
 447 individual must undergo a medical examination as provided in s.
 448 429.26(4) and the facility must develop a preliminary service
 449 plan for the individual.

450 7. If ~~When~~ a facility can no longer provide or arrange for
 451 services in accordance with the resident's service plan and
 452 needs and the facility's policy, the facility must ~~shall~~ make
 453 arrangements for relocating the person in accordance with s.
 454 429.28(1)(k).

455 ~~8. Failure to provide extended congregate care services~~
 456 ~~may result in denial of extended congregate care license~~
 457 ~~renewal.~~

458 (c) A limited nursing services license shall be issued to
 459 a facility that provides services beyond those authorized in
 460 paragraph (a) and as specified in this paragraph.

461 1. In order for limited nursing services to be provided in
 462 a facility licensed under this part, the agency must first
 463 determine that all requirements established in law and rule are
 464 met and must specifically designate, on the facility's license,
 465 that such services may be provided. This ~~Such~~ designation may be
 466 made at the time of initial licensure or licensure renewal
 467 ~~relicensure~~, or upon request in writing by a licensee under this
 468 part and part II of chapter 408. Notification of approval or

469 denial of such request shall be made in accordance with part II
470 of chapter 408. An existing facility that qualifies ~~facilities~~
471 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
472 maintained a standard license and may not have been subject to
473 administrative sanctions that affect the health, safety, and
474 welfare of residents for the previous 2 years or since initial
475 licensure if the facility has been licensed for less than 2
476 years.

477 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide
478 limited nursing services shall maintain a written progress
479 report on each person who receives such nursing services. The,
480 ~~which~~ report must describe ~~describes~~ the type, amount, duration,
481 scope, and outcome of services that are rendered and the general
482 status of the resident's health. A registered nurse representing
483 the agency shall visit the facility ~~such facilities~~ at least
484 annually ~~twice a year~~ to monitor residents who are receiving
485 limited nursing services and to determine if the facility is in
486 compliance with applicable provisions of this part, part II of
487 chapter 408, and related rules. The monitoring visits may be
488 provided through contractual arrangements with appropriate
489 community agencies. A registered nurse shall also serve as part
490 of the team that inspects such facility. Visits may be in
491 conjunction with other agency inspections. The agency may waive
492 the required yearly monitoring visit for a facility that has:

493 a. Had a limited nursing services license for at least 24
494 months;

495 b. No class I or class II violations and no uncorrected
 496 class III violations; and

497 c. No ombudsman council complaints that resulted in a
 498 citation for licensure.

499 3. A person who receives limited nursing services under
 500 this part must meet the admission criteria established by the
 501 agency for assisted living facilities. When a resident no longer
 502 meets the admission criteria for a facility licensed under this
 503 part, arrangements for relocating the person shall be made in
 504 accordance with s. 429.28(1)(k), unless the facility is licensed
 505 to provide extended congregate care services.

506 Section 5. Section 429.075, Florida Statutes, is amended
 507 to read:

508 429.075 Limited mental health license.—An assisted living
 509 facility that serves one ~~three~~ or more mental health residents
 510 must obtain a limited mental health license.

511 (1) To obtain a limited mental health license, a facility
 512 must hold a standard license as an assisted living facility,
 513 must not have any current uncorrected ~~deficiencies or~~
 514 violations, and must ensure that, within 6 months after
 515 receiving a limited mental health license, the facility
 516 administrator and the staff of the facility who are in direct
 517 contact with mental health residents must complete training of
 518 no less than 6 hours related to their duties. This ~~Such~~
 519 designation may be made at the time of initial licensure or
 520 relicensure or upon request in writing by a licensee under this

521 part and part II of chapter 408. Notification of approval or
522 denial of such request shall be made in accordance with this
523 part, part II of chapter 408, and applicable rules. This
524 training must ~~will~~ be provided by or approved by the Department
525 of Children and Families ~~Family Services~~.

526 (2) A facility that is ~~Facilities~~ licensed to provide
527 services to mental health residents must ~~shall~~ provide
528 appropriate supervision and staffing to provide for the health,
529 safety, and welfare of such residents.

530 (3) A facility that has a limited mental health license
531 must:

532 (a) Have a copy of each mental health resident's community
533 living support plan and the cooperative agreement with the
534 mental health care services provider. The support plan and the
535 agreement may be combined.

536 (b) Have documentation ~~that is~~ provided by the Department
537 of Children and Families ~~Family Services~~ that each mental health
538 resident has been assessed and determined to be able to live in
539 the community in an assisted living facility that has ~~with~~ a
540 limited mental health license.

541 (c) Make the community living support plan available for
542 inspection by the resident, the resident's legal guardian or
543 ~~the resident's~~ health care surrogate, and other individuals who
544 have a lawful basis for reviewing this document.

545 (d) Assist the mental health resident in carrying out the
546 activities identified in the individual's community living

547 support plan.

548 (4) A facility that has ~~with~~ a limited mental health
 549 license may enter into a cooperative agreement with a private
 550 mental health provider. For purposes of the limited mental
 551 health license, the private mental health provider may act as
 552 the case manager.

553 Section 6. Section 429.14, Florida Statutes, is amended to
 554 read:

555 429.14 Administrative penalties.—

556 (1) In addition to the requirements of part II of chapter
 557 408, the agency may deny, revoke, and suspend any license issued
 558 under this part and impose an administrative fine in the manner
 559 provided in chapter 120 against a licensee for a violation of
 560 any provision of this part, part II of chapter 408, or
 561 applicable rules, or for any of the following actions by a
 562 licensee, ~~for the actions of~~ any person subject to level 2
 563 background screening under s. 408.809, or ~~for the actions of~~ any
 564 facility staff ~~employee~~:

565 (a) An intentional or negligent act seriously affecting
 566 the health, safety, or welfare of a resident of the facility.

567 (b) A ~~The~~ determination by the agency that the owner lacks
 568 the financial ability to provide continuing adequate care to
 569 residents.

570 (c) Misappropriation or conversion of the property of a
 571 resident of the facility.

572 (d) Failure to follow the criteria and procedures provided

573 under part I of chapter 394 relating to the transportation,
 574 voluntary admission, and involuntary examination of a facility
 575 resident.

576 (e) A citation for ~~of~~ any of the following violations
 577 ~~deficiencies~~ as specified in s. 429.19:

- 578 1. One or more cited class I violations ~~deficiencies~~.
- 579 2. Three or more cited class II violations ~~deficiencies~~.
- 580 3. Five or more cited class III violations ~~deficiencies~~
 581 that have been cited on a single survey and have not been
 582 corrected within the times specified.

583 (f) Failure to comply with the background screening
 584 standards of this part, s. 408.809(1), or chapter 435.

585 (g) Violation of a moratorium.

586 (h) Failure of the license applicant, the licensee during
 587 relicensure, or a licensee that holds a provisional license to
 588 meet the minimum license requirements of this part, or related
 589 rules, at the time of license application or renewal.

590 (i) An intentional or negligent life-threatening act in
 591 violation of the uniform firesafety standards for assisted
 592 living facilities or other firesafety standards which ~~that~~
 593 threatens the health, safety, or welfare of a resident of a
 594 facility, as communicated to the agency by the local authority
 595 having jurisdiction or the State Fire Marshal.

596 (j) Knowingly operating any unlicensed facility or
 597 providing without a license any service that must be licensed
 598 under this chapter or chapter 400.

599 (k) Any act constituting a ground upon which application
600 for a license may be denied.

601 (2) Upon notification by the local authority having
602 jurisdiction or by the State Fire Marshal, the agency may deny
603 or revoke the license of an assisted living facility that fails
604 to correct cited fire code violations that affect or threaten
605 the health, safety, or welfare of a resident of a facility.

606 (3) The agency may deny or revoke a license of an ~~to any~~
607 applicant or controlling interest as defined in part II of
608 chapter 408 which has or had a 25 percent ~~25 percent~~ or greater
609 financial or ownership interest in any other facility that is
610 licensed under this part, or in any entity licensed by this
611 state or another state to provide health or residential care, if
612 that ~~which~~ facility or entity during the 5 years prior to the
613 application for a license closed due to financial inability to
614 operate; had a receiver appointed or a license denied,
615 suspended, or revoked; was subject to a moratorium; or had an
616 injunctive proceeding initiated against it.

617 (4) The agency shall deny or revoke the license of an
618 assisted living facility if:

619 (a) There are two moratoria, issued pursuant to this part
620 or part II of chapter 408, within a 2-year period which are
621 imposed by final order;

622 (b) The facility is cited for two or more class I
623 violations arising from unrelated circumstances during the same
624 survey or investigation; or

625 (c) The facility is cited for two or more class I
 626 violations arising from separate surveys or investigations
 627 within a 2-year period ~~that has two or more class I violations~~
 628 ~~that are similar or identical to violations identified by the~~
 629 ~~agency during a survey, inspection, monitoring visit, or~~
 630 ~~complaint investigation occurring within the previous 2 years.~~

631 (5) An action taken by the agency to suspend, deny, or
 632 revoke a facility's license under this part or part II of
 633 chapter 408, in which the agency claims that the facility owner
 634 or an employee of the facility has threatened the health,
 635 safety, or welfare of a resident of the facility, must be heard
 636 by the Division of Administrative Hearings of the Department of
 637 Management Services within 120 days after receipt of the
 638 facility's request for a hearing, unless that time limitation is
 639 waived by both parties. The administrative law judge shall ~~must~~
 640 render a decision within 30 days after receipt of a proposed
 641 recommended order.

642 (6) As provided under s. 408.814, the agency shall impose
 643 an immediate moratorium on an assisted living facility that
 644 fails to provide the agency with access to the facility or
 645 prohibits the agency from conducting a regulatory inspection.
 646 The licensee may not restrict agency staff from accessing and
 647 copying records or from conducting confidential interviews with
 648 facility staff or any individual who receives services from the
 649 facility ~~provide to the Division of Hotels and Restaurants of~~
 650 ~~the Department of Business and Professional Regulation, on a~~

651 ~~monthly basis, a list of those assisted living facilities that~~
652 ~~have had their licenses denied, suspended, or revoked or that~~
653 ~~are involved in an appellate proceeding pursuant to s. 120.60~~
654 ~~related to the denial, suspension, or revocation of a license.~~

655 (7) Agency notification of a license suspension or
656 revocation, or denial of a license renewal, shall be posted and
657 visible to the public at the facility.

658 (8) If a facility is required to relocate some or all of
659 its residents due to agency action, that facility is exempt from
660 the 45-days' notice requirement imposed under s. 429.28(1)(k).
661 This subsection does not exempt the facility from any deadlines
662 for corrective action set by the agency.

663 Section 7. Paragraphs (a) and (b) of subsection (2) of
664 section 429.178, Florida Statutes, are amended to read:

665 429.178 Special care for persons with Alzheimer's disease
666 or other related disorders.—

667 (2)(a) An individual who is employed by a facility that
668 provides special care for residents who have ~~with~~ Alzheimer's
669 disease or other related disorders, and who has regular contact
670 with such residents, must complete up to 4 hours of initial
671 dementia-specific training developed or approved by the
672 department. The training must ~~shall~~ be completed within 3 months
673 after beginning employment and satisfy ~~shall satisfy~~ the core
674 training requirements of s. 429.52(3)(g) ~~429.52(2)(g)~~.

675 (b) A direct caregiver who is employed by a facility that
676 provides special care for residents who have ~~with~~ Alzheimer's

677 disease or other related disorders, and ~~who~~ provides direct care
 678 to such residents, must complete the required initial training
 679 and 4 additional hours of training developed or approved by the
 680 department. The training must ~~shall~~ be completed within 9 months
 681 after beginning employment and satisfy ~~shall satisfy~~ the core
 682 training requirements of s. 429.52(3)(g) ~~429.52(2)(g)~~.

683 Section 8. Section 429.19, Florida Statutes, is amended to
 684 read:

685 429.19 Violations; imposition of administrative fines;
 686 grounds.—

687 (1) In addition to the requirements of part II of chapter
 688 408, the agency shall impose an administrative fine in the
 689 manner provided in chapter 120 for the violation of any
 690 provision of this part, part II of chapter 408, and applicable
 691 rules by an assisted living facility, for the actions of any
 692 person subject to level 2 background screening under s. 408.809,
 693 for the actions of any facility employee, or for an intentional
 694 or negligent act seriously affecting the health, safety, or
 695 welfare of a resident of the facility.

696 (2) Each violation of this part and adopted rules must
 697 ~~shall~~ be classified according to the nature of the violation and
 698 the gravity of its probable effect on facility residents. The
 699 agency shall indicate the classification on the written notice
 700 of the violation as follows:

701 (a) Class "I" violations are defined in s. 408.813. The
 702 agency shall impose an administrative fine of \$7,500 for each a

703 cited class I violation in a facility that is licensed for fewer
704 than 100 beds at the time of the violation in an amount not less
705 than \$5,000 and not exceeding \$10,000 for each violation. The
706 agency shall impose an administrative fine of \$11,250 for each
707 cited class I violation in a facility that is licensed for 100
708 or more beds at the time of the violation. If the agency has
709 knowledge of a class I violation which occurred within 12 months
710 before an inspection, a fine must be levied for that violation,
711 regardless of whether the noncompliance is corrected before the
712 inspection.

713 (b) Class "II" violations are defined in s. 408.813. The
714 agency shall impose an administrative fine of \$3,000 for each a
715 cited class II violation in a facility that is licensed for
716 fewer than 100 beds at the time of the violation in an amount
717 not less than \$1,000 and not exceeding \$5,000 for each
718 violation. The agency shall impose an administrative fine of
719 \$4,500 for each cited class II violation in a facility that is
720 licensed for 100 or more beds at the time of the violation.

721 (c) Class "III" violations are defined in s. 408.813. The
722 agency shall impose an administrative fine of \$500 for each a
723 cited class III violation in a facility that is licensed for 6
724 or fewer beds at the time of the violation in an amount not less
725 than \$500 and not exceeding \$1,000 for each violation. The
726 agency shall impose an administrative fine of \$750 for each
727 cited class III violation in a facility that is licensed for 7
728 to 24 beds at the time of the violation. The agency shall impose

729 an administrative fine of \$1,000 for each cited class III
730 violation in a facility that is licensed for 25 to 99 beds at
731 the time of the violation. The agency shall impose an
732 administrative fine of \$1,125 for each cited class III violation
733 in a facility that is licensed for 100 or more beds at the time
734 of the violation.

735 (d) Class "IV" violations are defined in s. 408.813. The
736 agency shall impose an administrative fine of \$100 for each a
737 cited class IV violation in a facility that is licensed for 6 or
738 fewer beds at the time of the violation ~~in an amount not less~~
739 ~~than \$100 and not exceeding \$200 for each violation.~~ The agency
740 shall impose an administrative fine of \$150 for each cited class
741 IV violation in a facility that is licensed for 7 to 24 beds at
742 the time of the violation. The agency shall impose an
743 administrative fine of \$200 for each cited class IV violation in
744 a facility that is licensed for 25 to 99 beds at the time of the
745 violation. The agency shall impose an administrative fine of
746 \$225 for each cited class IV violation in a facility that is
747 licensed for 100 or more beds at the time of the violation.

748 (e) Any fine imposed for a class I violation or a class II
749 violation must be doubled if a facility was previously cited for
750 one or more class I or class II violations during the agency's
751 last licensure inspection or any inspection or complaint
752 investigation since the last licensure inspection.

753 (f) Notwithstanding s. 408.813(2)(c) and (d) and s.
754 408.832, a fine may be imposed for each class III or class IV

755 violation, regardless of correction, if a facility was
 756 previously cited for one or more class III or class IV
 757 violations during the agency's last licensure inspection for a
 758 comparable violation.

759 (g) Regardless of the class of violation cited, instead of
 760 the fine amounts listed in paragraphs (a)-(d), the agency shall
 761 impose an administrative fine of \$500 if a facility is found not
 762 to be in compliance with the background screening requirements
 763 as provided in s. 408.809.

764 ~~(3) For purposes of this section, in determining if a~~
 765 ~~penalty is to be imposed and in fixing the amount of the fine,~~
 766 ~~the agency shall consider the following factors:~~

767 ~~(a) The gravity of the violation, including the~~
 768 ~~probability that death or serious physical or emotional harm to~~
 769 ~~a resident will result or has resulted, the severity of the~~
 770 ~~action or potential harm, and the extent to which the provisions~~
 771 ~~of the applicable laws or rules were violated.~~

772 ~~(b) Actions taken by the owner or administrator to correct~~
 773 ~~violations.~~

774 ~~(c) Any previous violations.~~

775 ~~(d) The financial benefit to the facility of committing or~~
 776 ~~continuing the violation.~~

777 ~~(e) The licensed capacity of the facility.~~

778 (3)(4) Each day of continuing violation after the date
 779 established by the agency fixed for correction termination of
 780 the violation, as ordered by the agency, constitutes an

781 additional, separate, and distinct violation.

782 (4)~~(5)~~ An Any action taken to correct a violation shall be
783 documented in writing by the owner or administrator of the
784 facility and verified through followup visits by agency
785 personnel. The agency may impose a fine and, in the case of an
786 owner-operated facility, revoke or deny a facility's license
787 when a facility administrator fraudulently misrepresents action
788 taken to correct a violation.

789 (5)~~(6)~~ A Any facility whose owner fails to apply for a
790 change-of-ownership license in accordance with part II of
791 chapter 408 and operates the facility under the new ownership is
792 subject to a fine of \$5,000.

793 (6)~~(7)~~ In addition to any administrative fines imposed,
794 the agency may assess a survey fee, equal to the lesser of one
795 half of the facility's biennial license and bed fee or \$500, to
796 cover the cost of conducting initial complaint investigations
797 that result in the finding of a violation that was the subject
798 of the complaint or monitoring visits conducted under s.
799 429.28(3)(c) to verify the correction of the violations.

800 (7)~~(8)~~ During an inspection, the agency shall make a
801 reasonable attempt to discuss each violation with the owner or
802 administrator of the facility, prior to written notification.

803 (8)~~(9)~~ The agency shall develop and disseminate an annual
804 list of all facilities sanctioned or fined for violations of
805 state standards, the number and class of violations involved,
806 the penalties imposed, and the current status of cases. The list

807 shall be disseminated, at no charge, to the Department of
 808 Elderly Affairs, the Department of Health, the Department of
 809 Children and Families ~~Family Services~~, the Agency for Persons
 810 with Disabilities, the area agencies on aging, the Florida
 811 Statewide Advocacy Council, and the state and local ombudsman
 812 councils. The Department of Children and Families ~~Family~~
 813 ~~Services~~ shall disseminate the list to service providers under
 814 contract to the department who are responsible for referring
 815 persons to a facility for residency. The agency may charge a fee
 816 commensurate with the cost of printing and postage to other
 817 interested parties requesting a copy of this list. This
 818 information may be provided electronically or through the
 819 agency's website ~~Internet site~~.

820 Section 9. Subsection (3) and paragraph (c) of subsection
 821 (4) of section 429.256, Florida Statutes, are amended to read:

822 429.256 Assistance with self-administration of
 823 medication.—

824 (3) Assistance with self-administration of medication
 825 includes:

826 (a) Taking the medication, in its previously dispensed,
 827 properly labeled container, including an insulin syringe that is
 828 prefilled with the proper dosage by a pharmacist and an insulin
 829 pen that is prefilled by the manufacturer, from where it is
 830 stored, and bringing it to the resident.

831 (b) In the presence of the resident, reading the label,
 832 opening the container, removing a prescribed amount of

833 medication from the container, and closing the container.

834 (c) Placing an oral dosage in the resident's hand or
835 placing the dosage in another container and helping the resident
836 by lifting the container to his or her mouth.

837 (d) Applying topical medications.

838 (e) Returning the medication container to proper storage.

839 (f) Keeping a record of when a resident receives
840 assistance with self-administration under this section.

841 (g) Assisting with the use of a nebulizer, including
842 removing the cap of a nebulizer, opening the unit dose of
843 nebulizer solution, and pouring the prescribed premeasured dose
844 of medication into the dispensing cup of the nebulizer.

845 (h) Using a glucometer to perform blood-glucose level
846 checks.

847 (i) Assisting with putting on and taking off antiembolism
848 stockings.

849 (j) Assisting with applying and removing an oxygen cannula
850 but not with titrating the prescribed oxygen settings.

851 (k) Assisting with the use of a continuous positive airway
852 pressure device but not with titrating the prescribed setting of
853 the device.

854 (l) Assisting with measuring vital signs.

855 (m) Assisting with colostomy bags.

856 (4) Assistance with self-administration does not include:

857 ~~(c) Administration of medications through intermittent~~
858 ~~positive pressure breathing machines or a nebulizer.~~

859 Section 10. Subsection (3) of section 429.27, Florida
860 Statutes, is amended to read:

861 429.27 Property and personal affairs of residents.—

862 (3) A facility, upon mutual consent with the resident,
863 shall provide for the safekeeping in the facility of personal
864 effects not in excess of \$500 and funds of the resident not in
865 excess of \$500 ~~\$200~~ cash, and shall keep complete and accurate
866 records of all such funds and personal effects received. If a
867 resident is absent from a facility for 24 hours or more, the
868 facility may provide for the safekeeping of the resident's
869 personal effects in excess of \$500.

870 Section 11. Subsections (2), (5), and (6) of section
871 429.28, Florida Statutes, are amended to read:

872 429.28 Resident bill of rights.—

873 (2) The administrator of a facility shall ensure that a
874 written notice of the rights, obligations, and prohibitions set
875 forth in this part is posted in a prominent place in each
876 facility and read or explained to residents who cannot read. The
877 ~~This~~ notice must ~~shall~~ include the name, address, and telephone
878 numbers of the local ombudsman council, the ~~and~~ central abuse
879 hotline, and, if ~~when~~ applicable, Disability Rights Florida ~~the~~
880 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
881 ~~Florida local advocacy council~~, where complaints may be lodged.
882 The notice must state that a complaint made to the Office of
883 State Long-Term Care Ombudsman or a local long-term care
884 ombudsman council, the names and identities of the residents

885 involved in the complaint, and the identity of complainants are
 886 kept confidential pursuant to s. 400.0077 and that retaliatory
 887 action cannot be taken against a resident for presenting
 888 grievances or for exercising any other resident right. The
 889 facility must ensure a resident's access to a telephone to call
 890 the local ombudsman council, central abuse hotline, and
 891 Disability Rights Florida ~~Advocacy Center for Persons with~~
 892 ~~Disabilities, Inc., and the Florida local advocacy council.~~

893 (5) A ~~No~~ facility or employee of a facility may not serve
 894 notice upon a resident to leave the premises or take any other
 895 retaliatory action against any person who:

896 (a) Exercises any right set forth in this section.
 897 (b) Appears as a witness in any hearing, inside or outside
 898 the facility.

899 (c) Files a civil action alleging a violation of the
 900 provisions of this part or notifies a state attorney or the
 901 Attorney General of a possible violation of such provisions.

902 (6) A ~~Any~~ facility that ~~which~~ terminates the residency of
 903 an individual who participated in activities specified in
 904 subsection (5) must ~~shall~~ show good cause in a court of
 905 competent jurisdiction. If good cause is not shown, the agency
 906 shall impose a fine of \$2,500 in addition to any other penalty
 907 assessed against the facility.

908 Section 12. Section 429.34, Florida Statutes, is amended
 909 to read:

910 429.34 Right of entry and inspection.—

911 (1) In addition to the requirements of s. 408.811, any
 912 duly designated officer or employee of the department, the
 913 Department of Children and Families ~~Family Services~~, the
 914 Medicaid Fraud Control Unit of the Office of the Attorney
 915 General, the state or local fire marshal, or a member of the
 916 state or local long-term care ombudsman council has ~~shall have~~
 917 the right to enter unannounced upon and into the premises of any
 918 facility licensed pursuant to this part in order to determine
 919 the state of compliance with ~~the provisions of~~ this part, part
 920 II of chapter 408, and applicable rules. Data collected by the
 921 state or local long-term care ombudsman councils or the state or
 922 local advocacy councils may be used by the agency in
 923 investigations involving violations of regulatory standards. A
 924 person specified in this section who knows or has reasonable
 925 cause to suspect that a vulnerable adult has been or is being
 926 abused, neglected, or exploited shall immediately report such
 927 knowledge or suspicion to the central abuse hotline pursuant to
 928 chapter 415.

929 (2) The agency shall inspect each licensed assisted living
 930 facility at least once every 24 months to determine compliance
 931 with this chapter and related rules. If an assisted living
 932 facility is cited for one or more class I violations or two or
 933 more class II violations arising from separate surveys within a
 934 60-day period or due to unrelated circumstances during the same
 935 survey, the agency must conduct an additional licensure
 936 inspection within 6 months. In addition to any fines imposed on

937 the facility under s. 429.19, the licensee shall pay a fee for
938 the cost of the additional inspection equivalent to the standard
939 assisted living facility license and per-bed fees, without
940 exception for beds designated for recipients of optional state
941 supplementation. The agency shall adjust the fee in accordance
942 with s. 408.805.

943 Section 13. Subsection (2) of section 429.41, Florida
944 Statutes, is amended to read:

945 429.41 Rules establishing standards.-

946 (2) In adopting any rules pursuant to this part, the
947 department, in conjunction with the agency, shall make distinct
948 standards for facilities based upon facility size; the types of
949 care provided; the physical and mental capabilities and needs of
950 residents; the type, frequency, and amount of services and care
951 offered; and the staffing characteristics of the facility. Rules
952 developed pursuant to this section may ~~shall~~ not restrict the
953 use of shared staffing and shared programming in facilities that
954 are part of retirement communities that provide multiple levels
955 of care and otherwise meet the requirements of law and rule. If
956 a continuing care facility licensed under chapter 651 or a
957 retirement community offering multiple levels of care licenses a
958 building or part of a building designated for independent living
959 for assisted living, staffing requirements established in rule
960 apply only to residents who receive personal, limited nursing,
961 or extended congregate care services under this part. Such
962 facilities shall retain a log listing the names and unit number

963 for residents receiving these services. The log must be
964 available to surveyors upon request. Except for uniform
965 firesafety standards, the department shall adopt by rule
966 separate and distinct standards for facilities with 16 or fewer
967 beds and for facilities with 17 or more beds. The standards for
968 facilities with 16 or fewer beds must ~~shall~~ be appropriate for a
969 noninstitutional residential environment; however, provided
970 ~~that~~ the structure may not be ~~is no~~ more than two stories in
971 height and all persons who cannot exit the facility unassisted
972 in an emergency must reside on the first floor. The department,
973 in conjunction with the agency, may make other distinctions
974 among types of facilities as necessary to enforce the provisions
975 of this part. Where appropriate, the agency shall offer
976 alternate solutions for complying with established standards,
977 based on distinctions made by the department and the agency
978 relative to the physical characteristics of facilities and the
979 types of care offered ~~therein~~.

980 Section 14. Subsections (1) through (11) of section
981 429.52, Florida Statutes, are renumbered as subsections (2)
982 through (12), respectively, a new subsection (1) is added to
983 that section, and present subsections (5) and (9) of that
984 section are amended, to read:

985 429.52 Staff training and educational programs; core
986 educational requirement.—

987 (1) Effective October 1, 2014, each new assisted living
988 facility employee who has not previously completed core training

989 must attend a preservice orientation provided by the facility
 990 before interacting with residents. The preservice orientation
 991 must be at least 2 hours in duration and cover topics that help
 992 the employee provide responsible care and respond to the needs
 993 of facility residents. Upon completion, the employee and the
 994 administrator of the facility must sign a statement that the
 995 employee completed the required pre-service orientation. The
 996 facility must keep the signed statement in the employee's
 997 personnel record.

998 (6)~~(5)~~ Staff involved with the management of medications
 999 and assisting with the self-administration of medications under
 1000 s. 429.256 must complete a minimum of 6 ~~4~~ additional hours of
 1001 training provided by a registered nurse, licensed pharmacist, or
 1002 department staff. The department shall establish by rule the
 1003 minimum requirements of this additional training.

1004 (10)~~(9)~~ The training required by this section other than
 1005 the preservice orientation must ~~shall~~ be conducted by persons
 1006 registered with the department as having the requisite
 1007 experience and credentials to conduct the training. A person
 1008 seeking to register as a trainer must provide the department
 1009 with proof of completion of the minimum core training education
 1010 requirements, successful passage of the competency test
 1011 established under this section, and proof of compliance with the
 1012 continuing education requirement in subsection (5) ~~(4)~~.

1013 Section 15. The Legislature finds that consistent
 1014 regulation of assisted living facilities benefits residents and

1015 operators of such facilities. To determine whether surveys are
1016 consistent between surveys and surveyors, the Office of Program
1017 Policy Analysis and Government Accountability shall conduct a
1018 study of intersurveyor reliability for assisted living
1019 facilities. By November 1, 2014, the Office of Program Policy
1020 Analysis and Government Accountability shall submit a report of
1021 its findings to the Governor, the President of the Senate, and
1022 the Speaker of the House of Representatives and make any
1023 recommendations for improving intersurveyor reliability.

1024 Section 16. The Legislature finds that consumers need
1025 additional information on the quality of care and service in
1026 assisted living facilities in order to select the best facility
1027 for themselves or their loved ones. Therefore, the Agency for
1028 Health Care Administration shall:

1029 (1) Implement a rating system for assisted living
1030 facilities by March 1, 2015. The agency shall adopt rules to
1031 administer this subsection.

1032 (2) By November 1, 2014, create content that is easily
1033 accessible through the front page of the agency's Internet
1034 website either directly or indirectly through a link to another
1035 established website or websites of the agency's choosing. The
1036 website must be searchable by facility name, city, or zip code.
1037 At a minimum, the content must include:

1038 (a) Information on each licensed assisted living facility,
1039 including, but not limited to:

1040 1. The name and address of the facility.

- 1041 2. The number and type of licensed beds in the facility.
- 1042 3. The types of licenses held by the facility.
- 1043 4. The facility's license expiration date and status.
- 1044 5. Proprietary or nonproprietary status of the licensee.
- 1045 6. Any affiliation with a company or other organization
 1046 owning or managing more than one assisted living facility in
 1047 this state.
- 1048 7. The total number of clients that the facility is
 1049 licensed to serve and the most recently available occupancy
 1050 levels.
- 1051 8. The number of private and semiprivate rooms offered.
- 1052 9. The bed-hold policy.
- 1053 10. The religious affiliation, if any, of the assisted
 1054 living facility.
- 1055 11. The languages spoken by the staff.
- 1056 12. Availability of nurses.
- 1057 13. Forms of payment accepted, including, but not limited
 1058 to, Medicaid, Medicaid long-term managed care, private
 1059 insurance, health maintenance organization, Veterans
 1060 Administration, CHAMPUS program, or workers' compensation
 1061 coverage.
- 1062 14. Indication if the licensee is operating under
 1063 bankruptcy protection.
- 1064 15. Recreational and other programs available.
- 1065 16. Special care units or programs offered.
- 1066 17. Whether the facility provides mental health services,

1067 as defined in s. 394.67, Florida Statutes, to residents with
 1068 mental illness and the number of mental health residents.

1069 18. Whether the facility is a part of a retirement
 1070 community that offers other services pursuant to part II or part
 1071 III of chapter 400, part I or part III of chapter 429, or
 1072 chapter 651, Florida Statutes.

1073 19. Links to the State Long-Term Care Ombudsman Program
 1074 website and the program's statewide toll-free telephone number.

1075 20. Links to the Internet websites of the providers or
 1076 their affiliates.

1077 21. Other relevant information that the agency currently
 1078 collects.

1079 (b) Survey and violation information for the facility,
 1080 including a list of the facility's violations committed during
 1081 the previous 60 months, which upon the effective date of this
 1082 act may include violations committed on or after July 1, 2009.

1083 The list shall be updated monthly and include for each
 1084 violation:

1085 1. A summary of the violation, including all licensure,
 1086 revisit, and complaint survey information, presented in a manner
 1087 understandable by the general public.

1088 2. Any sanctions imposed by final order.

1089 3. The date the corrective action was confirmed by the
 1090 agency.

1091 (c) Links to inspection reports that the agency has on
 1092 file.

CS/HB 573

2014

1093

Section 17. This act shall take effect July 1, 2014.