By Senator Grimsley

26-00254A-17

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1	A bill to be entitled
2	An act relating to hospice care; amending s. 400.6005,
3	F.S.; revising legislative findings and intent;
4	amending s. 400.601, F.S.; redefining the term
5	"hospice"; defining the terms "hospice program" and
6	"seriously ill"; amending s. 400.60501, F.S.;
7	requiring the Department of Elderly Affairs, in
8	conjunction with the Agency for Health Care
9	Administration, to adopt by rule certain outcome
10	measures by a specified date; requiring the
11	department, in conjunction with the agency, to adopt
12	national hospice outcome measures and develop a system
13	for publicly reporting the measures; creating s.
14	400.6093, F.S.; authorizing hospices, or providers
15	operating under contract with a hospice, to provide
16	palliative care to seriously ill persons and their
17	family members; providing construction; amending s.
18	400.6095, F.S.; making technical changes; creating s.
19	400.6096, F.S.; authorizing a hospice to assist in the
20	disposal of certain prescribed controlled substances;
21	requiring a hospice that chooses to assist in the
22	disposals of certain prescribed controlled substances
23	to establish policies, procedures, and systems for the
24	disposals; authorizing a hospice physician, nurse, or
25	social worker to assist in the disposals of certain
26	prescribed controlled substances; providing
27	requirements for such disposals; providing an
28	effective date.
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30	Be It Enacted by the Legislature of the State of Florida:
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32	Section 1. Section 400.6005, Florida Statutes, is amended

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33	to read:
34	400.6005 Legislative findings and intentThe Legislature
35	finds that <u>a</u> terminally ill <u>patient</u> individuals and their
36	families, who is are no longer pursuing curative medical
37	<code>treatment_</code> and the <code>patient's family</code> should have the opportunity
38	to select a support system that <u>allows</u> <del>permits</del> the patient to
39	exercise maximum independence and dignity during the final days
40	of life. The Legislature also finds that a seriously ill person
41	and the person's family should have the opportunity to select a
42	support system that provides palliative care and supportive care
43	and allows the person to exercise maximum independence while
44	receiving such care. The Legislature finds that hospice care
45	provides a cost-effective and less intrusive form of medical
46	care while meeting the social, psychological, and spiritual
47	needs of <del>terminally ill</del> patients and their families <u>and</u>
48	seriously ill persons and their families. The intent of this
49	part is to provide for the development, establishment, and
50	enforcement of basic standards to ensure the safe and adequate
51	care of persons receiving hospice services.
52	Section 2. Section 400.601, Florida Statutes, is amended to
53	read:
54	400.601 Definitions.—As used in this part, the term:
55	(1) "Agency" means the Agency for Health Care
56	Administration.
57	(2) "Department" means the Department of Elderly Affairs.
58	(3) "Hospice" means a centrally administered corporation or
59	a limited liability company that provides a continuum of
60	palliative <u>care</u> and supportive care for <u>a</u> <del>the</del> terminally ill
61	patient and his or her family <u>or a seriously ill person and his</u>
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26-00254A-17 62 or her family. 63 (4) "Hospice care team" means an interdisciplinary team of

64 qualified professionals and volunteers who, in consultation with a the patient, the patient's family, and the patient's primary 65 66 or attending physician, collectively assess, coordinate, and 67 provide the appropriate palliative care and supportive care to 68 hospice patients and their families.

69 (5) "Hospice program" means a program offered by a hospice 70 which provides a continuum of palliative care and supportive 71 care for a patient and his or her family or a seriously ill 72 person and his or her family.

(6) (5) "Hospice residential unit" means a homelike living 73 74 facility, other than a facility licensed under other parts of 75 this chapter, under chapter 395, or under chapter 429, which 76 that is operated by a hospice for the benefit of its patients 77 and is considered by a patient who lives there to be his or her 78 primary residence.

79 (7) (6) "Hospice services" means items and services 80 furnished to a patient and family by a hospice, or by others 81 under arrangements with such a program, in a place of temporary or permanent residence used as the patient's home for the 82 83 purpose of maintaining the patient at home; or, if the patient 84 needs short-term institutionalization, the services shall be 85 furnished in cooperation with those contracted institutions or 86 in the hospice inpatient facility.

(8) (7) "Palliative care" means services or interventions 87 that which are not curative but are provided for the reduction 88 89 or abatement of pain and human suffering.

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(9) (8) "Patient" means the terminally ill individual

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91	receiving hospice services.
92	(10) <del>(9)</del> "Plan of care" means a written assessment by the
93	hospice of each patient's and family's needs and preferences,
94	and the services to be provided by the hospice to meet those
95	needs.
96	(11) "Seriously ill" means that the person has a persistent
97	medical condition that materially and adversely affects the
98	person's quality of life; that is burdensome in its symptoms,
99	pain, or caregiver stress; and that may be managed through
100	palliative care.
101	(12) (10) "Terminally ill" means that the patient has a
102	medical prognosis that his or her life expectancy is 1 year or
103	less if the illness runs its normal course.
104	Section 3. Section 400.60501, Florida Statutes, is amended
105	to read:
106	400.60501 Outcome measures; adoption of <u>federal quality</u>
107	<pre>measures; public reporting national initiatives; annual report</pre>
108	(1) No later than December 31, $2019$ $2007$ , the department <del>of</del>
109	Elderly Affairs, in conjunction with the agency for Health Care
110	Administration, shall adopt develop outcome measures to
111	determine the quality and effectiveness of hospice care for
112	hospices licensed in the state. <del>At a minimum, these outcome</del>
113	measures shall include a requirement that 50 percent of patients
114	who report severe pain on a 0-to-10 scale must report a
115	reduction to 5 or less by the end of the 4th day of care on the
116	hospice program.
117	(2) For hospices licensed in the state, the department <del>of</del>
118	Elderly Affairs, in conjunction with the agency for Health Care
119	Administration, shall:

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120	(a) <del>Consider and</del> Adopt <del>national initiatives, such as those</del>
121	developed by the national hospice outcome measures found in 42
122	C.F.R. part 418 and Palliative Care Organization, to set
123	benchmarks for measuring the quality of hospice care provided in
124	the state.
125	(b) Develop a system for publicly reporting these national
126	hospice outcome measures identified as useful consumer
127	information.
128	<u>(c)</u> Develop an annual report that analyzes and evaluates
129	the information collected under this act and any other data
130	collection or reporting provisions of law.
131	Section 4. Section 400.6093, Florida Statutes, is created
132	to read:
133	400.6093 Community palliative care services
134	Notwithstanding any other provision of law, a hospice may
135	provide palliative care to a seriously ill person and his or her
136	family members. Such care may be provided directly by the
137	hospice or by other providers under contract with the hospice.
138	This section does not preclude the provision of palliative care
139	to seriously ill persons by any other health care provider or
140	health care facility that is otherwise authorized to provide
141	such care. This section does not mandate or prescribe additional
142	Medicaid coverage.
143	Section 5. Subsections (1) and (2) of section 400.6095,
144	Florida Statutes, are amended to read:
145	400.6095 Patient admission; assessment; plan of care;
146	discharge; death
147	(1) Each hospice shall make its services available to all
148	<u>patients</u> <del>terminally ill persons</del> and their families without
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149	regard to age, gender, national origin, sexual orientation,
150	disability, diagnosis, cost of therapy, ability to pay, or life
151	circumstances. A hospice <u>may</u> <del>shall</del> not impose any value or
152	belief system on its patients or their families and shall
153	respect the values and belief systems of its patients and their
154	families.
155	(2) Admission of a patient with a terminal illness to a
156	hospice program shall be made upon a diagnosis and prognosis of
157	terminal illness by a physician licensed pursuant to chapter 458
158	or chapter 459 and must shall be dependent on the expressed
159	request and informed consent of the patient.
160	Section 6. Section 400.6096, Florida Statutes, is created
161	to read:
162	400.6096 Disposal of prescribed controlled substances
163	following the death of a patient in the home
164	(1) A hospice that assists in the disposal of a prescribed
165	controlled substance in the patient's home under this section
166	must establish clearly defined policies, procedures, and systems
167	for acceptable disposal methods.
168	(2) A hospice physician, nurse, or social worker, upon the
169	patient's death and with the permission of a family member or a
170	caregiver of the patient, is authorized to assist in the
171	disposal in the patient's home of an unused controlled substance
172	prescribed to the decedent pursuant to the procedures
173	established under subsection (1).
174	(3) Established disposal procedures must be carried out in
175	the patient's home. Hospice staff and volunteers are not
176	authorized to remove a prescribed controlled substance from the
177	patient's home.

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