

STORAGE NAME: H0039.ca

DATE: September 6, 1999

**HOUSE OF REPRESENTATIVES
COMMITTEE ON
COMMUNITY AFFAIRS
ANALYSIS**

BILL #: HB 39

RELATING TO: Emergency Management Planning

SPONSOR(S): Representative Ogles and other

COMPANION BILL(S): None

ORIGINATING COMMITTEE(S)/COMMITTEE(S) OF REFERENCE:

- (1) COMMUNITY AFFAIRS (PRC)
- (2) HEALTH CARE & LICENSING & REGULATION (HFC)
- (3) HEALTH & HUMAN SERVICES APPROPRIATIONS (FRC)
- (4)
- (5)

I. SUMMARY:

House Bill 39 revises provisions relating to registration of persons requiring special needs assistance during an emergency or disaster. The bill provides for recruitment of health care practitioners to staff special needs shelters during emergencies or disasters. The Department of Health is authorized to maintain practitioner registries and provide certain compensation for care provided at special needs shelters. The bill provides for establishment of a special needs shelter interagency committee.

The bill specifies minimum requirements for home health agency and hospice comprehensive emergency management plans, and provides for plan review and approval. Nurse registries are required to assist at-risk clients with special needs registration and to prepare a comprehensive emergency management plan. Plans must be updated annually. Inclusion of emergency care information in hospice patients' medical records is required.

The bill authorizes the Agency for Health Care Administration to establish uniform standards of care for special needs shelters. Emergency and disaster planning provisions in certain state agency contracts are required.

Provides appropriations from General Revenue of \$4,034,524 to implement the act.

II. SUBSTANTIVE ANALYSIS:

A. PRESENT SITUATION:

Background:

Florida began to address coastal management, disaster preparedness, and hazard mitigation systematically during the 1970's in response to a growing awareness that the state was highly vulnerable to coastal storms and to several federal government mandates. Among the most important new federal laws were:

- 1) The Coastal Zone Management Act of 1972 (P.L. 92-583), which authorized the creation of state coastal management plans;
- 2) The Flood Disaster Protection Act of 1973 (P.L. 93-234), which provided incentives for participation in the National Flood Insurance Program and sanctions for nonparticipation; and
- 3) The Disaster Relief Act of 1974 (P.L. 93-288), which required hazard mitigation for recipients of federal disaster assistance, and the implementation of Section 406 of the Disaster Relief Act in 1980 which made disaster assistance contingent on hazard mitigation planning.

By 1981, in response to an executive directive to investigate and make recommendations concerning state hazard mitigation policy, the Department of Community Affairs (DCA) concluded that the state needed a coordinated approach to hazard mitigation. Up to that time, hazard mitigation programs had been fragmented, emphasizing either human resources problems or natural resource problems, but rarely both. To overcome past weaknesses in coordination, DCA recommended that the state adopt a program of Comprehensive Emergency Management (CEM). CEM divides management into four phases of activity: mitigation, preparedness, response, and recovery. In addition, it identifies how federal, state, and local governments can address and coordinate their emergency and disaster efforts. The final recommendation of DCA was a proposed state hazard mitigation program to be managed by Bureau of Disaster Preparedness (now the Division of Emergency Management) within DCA. It contained three elements:

- 1) Hurricane evacuation planning;
- 2) The development and maintenance of the Florida Comprehensive Emergency Management Plan; and
- 3) The development of administrative rules to define procedures which must be followed by local governments to produce uniformly developed local and state emergency management plans and a state plan review process.

In July, 1989, the Florida Speaker of the House appointed "a Task Force on Emergency Preparedness to review the current system of emergency management in Florida". *Speaker's Task Force On Emergency Preparedness, 1990, page iii*. Key findings of the Task Force included, in part, the following:

- There were insufficient shelter spaces for potential evacuees from coastal storms;
- The population contained a large number of people with special needs, especially the elderly and the infirm in hospitals, mass residential facilities, and chronic care facilities; and
- Potential shelters, schools and churches, were not suitably equipped or designed to act as emergency shelters.

Relevant Statutory Authority:

Section 252.355(1), Florida Statutes: Requires each local emergency management agency in the state to maintain a registry of disabled persons located within the jurisdiction of the local agency. Requires the registration to identify those persons in need of assistance and plan for resource allocation to meet those identified needs. Requires the Department of Children and Family Services, Departments of Health, Agency for Health Care Administration and Department

of Elderly Affairs to provide registration information on all of their special needs clients and to all incoming clients as part of the intake process. Requires the registry to be updated annually. Requires the registration program to give disabled persons the option of preauthorizing emergency response personnel to enter their homes during search and rescue operations, if necessary to assure their safety and welfare following disasters.

Section 252.355(3), Florida Statutes: Provides that all records, data, information, correspondence, and communications relating to the registration of disabled persons, as provided in section 252.355(1), Florida Statutes, are confidential and exempt from the provisions of section 119.07(1), Florida Statutes, except that such information must be available to other emergency response agencies, as determined by the local emergency management director.

Section 252.355(4), Florida Statutes: Requires all appropriate agencies and community-based service providers, including home health care providers, to assist emergency management agencies by collecting registration information for people with special needs as part of the program intake process. Requires the agencies and community-based service providers to establish programs to increase the awareness of the registration process, and educate clients about the procedures that may be necessary for their safety during disasters. Requires that clients of state or federally funded service programs with physical or mental handicaps who need assistance in evacuating, or when in shelters, must register indicating special needs.

Section 400.497, Florida Statutes: Provides rulemaking authority for the Agency for Health Care Administration to implement and enforce reasonable and fair minimum standards relating to the scope of home health services.

Section 400.605, Florida Statutes: Provides rulemaking authority for the Department of Elderly Affairs to establish minimum standards and procedures for a hospice including the requirement for a disaster preparedness plan.

Section 400.6095(5), Florida Statutes: Requires each hospice, in collaboration with the patient and patient's primary or attending physician, to prepare and maintain a plan of care for each patient. The plan provided to each patient must be in accordance with the plan of care. The plan of care must be made a part of the patient's medical records and must include certain minimum requirements.

Section 400.610(1), Florida Statutes: Provides for the administration and management of a hospice.

Section 408.15, Florida Statutes: Provides additional specified powers to the Agency for Health Care Administration.

B. EFFECT OF PROPOSED CHANGES:

The bill makes the following changes:

- Revises provisions relating to registration of persons requiring special needs assistance in emergencies;
- Provides for recruitment of health care practitioners for special needs shelters, including reimbursement and funding;
- Provides duties of the Department of Health, the county health departments, and local emergency management agencies;
- Authorizes use of a health care practitioner registry;
- Authorizes establishment of a special needs shelter interagency committee, including membership and responsibilities;
- Provides rulemaking authority for interagency committee;
- Requires home health agencies to prepare a comprehensive emergency management plan and specifies plan requirements;
- Provides minimum requirements for home health agency and hospice comprehensive emergency management plans;
- Provides rulemaking authority and plan review and approval of emergency management plans for home health agencies and hospices operating in more than one county;

- Provides an exception to comprehensive emergency management plan requirements;
- Requires nurse registries to assist at-risk clients with special needs registration and to prepare a comprehensive emergency management plan;
- Provides for plan requirements and plan review of comprehensive emergency management plans;
- Requires the Department of Elderly Affairs to include components for comprehensive emergency management plan in its rules establishing minimum standards for a hospice;
- Requiring that certain emergency care and service information be included in hospice patients' medical records;
- Provides for the establishment of a registry of emergency medical technicians and paramedics for disasters and emergencies;
- Authorizes the Agency for Health Care Administration to establish uniform standards of care for special needs shelters;
- Provides for the establishment of a health practitioner registry for disasters and emergencies;
- Requires emergency and disaster planning provisions in certain state agency provider contract and specifies minimum contract requirements; and
- Provides General Revenue appropriations.

C. APPLICATION OF PRINCIPLES:

1. Less Government:

a. Does the bill create, increase or reduce, either directly or indirectly:

(1) any authority to make rules or adjudicate disputes?

Yes.

Section 2: Requires the Department of Health to adopt rules necessary to implement rules necessary to provide for the coordination of the recruitment of health care practitioners to staff special needs shelters in times of emergency or disaster and to coordinate and implement staffing and medical management requirements for the special needs shelters in conformance with local comprehensive emergency management plans. [See SECTION-BY SECTION ANALYSIS for more detailed information.]

Section 4: Expands the Agency for Health Care Administration's rulemaking authority to include reasonable and fair minimum standards relating to services to be provided during emergency evacuation and sheltering.

Requires the Agency for Health Care Administration to adopt rules establishing minimum criteria for the emergency management plans and plan updates, with the concurrence of the Department of Health and in consultation with the Department of Community Affairs.

Section 5: Requires the Agency for Health Care Administration to adopt rules establishing minimum criteria for the comprehensive emergency management plan and plan updates with the concurrence of the Department of Health and in consultation with the Department of Community Affairs.

Section 6: Expands the rulemaking authority of the Department of Health, in consultation with the Agency for Health Care Administration to establish minimum standards and procedures for a hospice to include components of a comprehensive emergency management plan.

Section 10: Authorizes the Agency for Health Care Administration, in coordination with the Department of Health, to establish uniform standards of care to be provided in special needs units or shelters during the times of emergency or major disaster.

- (2) any new responsibilities, obligations or work for other governmental or private organizations or individuals?

Yes.

Section 2: Designates the Department of Health, through its county health departments, as the lead agency for coordination of the recruitment of health care practitioners to staff special needs shelters in times of emergency or disaster.

Provides that, subject to the appropriation of funds to support medical services disaster coordinator positions in county health departments, the Department of Health must assume lead responsibility for the local coordination of local medical and health care providers, the American Red Cross, and other interested parties in developing a plan for staffing and medical management of special needs shelters.

Requires the county health departments, in conjunction with the local emergency management agencies, to have the lead responsibility for the coordination of the recruitment of health care practitioners to staff local special needs shelters.

Requires county health departments to assign their employees to work in special needs shelters when needed to protect the health of patients.

Requires the appropriate county health department and local emergency management agency to jointly determine who has responsibility for medical supervision in a special needs shelter.

Requires local emergency management agencies to be responsible for the designation and operation of special needs shelters during times of emergency or disaster. Requires county health departments to assist the local emergency management agency with regard to the management of medical services in special needs shelters.

Requires the Department of Health to reimburse, subject to the availability of funds for this purpose, certain health care practitioners, subject to certain limitations.

Permits the Department of Health to establish a special needs shelter interagency committee, subject to certain specified requirements.

Section 3: Requires each home health care agency to prepare and maintain a comprehensive emergency management plan which must be updated annually and is subject to certain requirements.

Requires each patient record for patients who are listed in the registry established pursuant to section 252.355, Florida Statutes, to contain certain specified information.

Requires each home health care agency to maintain a current prioritized list of patients who need continued services during an emergency.

Section 4: Requires the Department of Health to review the comprehensive emergency management plan for any home health agency that operates in more than one county.

Section 5: Requires nurse registries to assist at-risk clients with special needs registration with the appropriate local emergency management agency pursuant to section 252.355, Florida Statutes.

Requires nurse registries to prepare and maintain a comprehensive emergency management plan that is consistent with the local special needs plan. Requires the plan to be updated annually.

Requires each nurse registry to maintain a current prioritized list of patients in private residences who are registered pursuant to section 252.355, Florida Statutes, and are subject to certain other requirements.

Requires certain contract providers to make information available to county health departments and to the local emergency management agencies upon request.

Requires the county health department to ensure that, at a minimum, the local emergency management agency, the Agency for Health Care Administration, and the local chapter of the American Red Cross or other sheltering agency are given the opportunity to review the comprehensive emergency management plan.

Section 8: Requires a hospice to prepare and maintain a comprehensive emergency management plan that provides for continuing hospice services in the event of an emergency that is consistent with local special needs plans.

Requires the Department of Health to review the comprehensive emergency management plan for any hospice that operates in more than one county.

Section 9: Requires the Department of Health to include on its forms for the certification and recertification of emergency medical technicians and paramedics a question asking if the practitioner would be available to provide health care services in special needs shelters or to help staff disaster medical assistance teams during times of emergency or major disaster. Requires the Department of Health to maintain a registry of available emergency medical technicians and paramedics who answer affirmatively.

Section 11: Requires the Department of Health to include on its forms for the licensure or certification of specified medical personnel a question asking who could assist the department in the event of a disaster to provide health care services in special needs shelters or to help staff disaster medical assistance teams during times of emergency or major disaster. Requires the department to maintain a registry of specified medical personnel who answer affirmatively.

(3) any entitlement to a government service or benefit?

Yes. Special needs persons are entitled to specific and continued care in the event of an emergency or disaster subject to certain specified limitations.

b. If an agency or program is eliminated or reduced:

(1) what responsibilities, costs and powers are passed on to another program, agency, level of government, or private entity?

N/A

(2) what is the cost of such responsibility at the new level/agency?

N/A

(3) how is the new agency accountable to the people governed?

N/A

2. Lower Taxes:

a. Does the bill increase anyone's taxes?

N/A

b. Does the bill require or authorize an increase in any fees?

N/A

c. Does the bill reduce total taxes, both rates and revenues?

N/A

d. Does the bill reduce total fees, both rates and revenues?

N/A

e. Does the bill authorize any fee or tax increase by any local government?

N/A

3. Personal Responsibility:

a. Does the bill reduce or eliminate an entitlement to government services or subsidy?

N/A

b. Do the beneficiaries of the legislation directly pay any portion of the cost of implementation and operation?

N/A

4. Individual Freedom:

a. Does the bill increase the allowable options of individuals or private organizations/associations to conduct their own affairs?

b. Does the bill prohibit, or create new government interference with, any presently lawful activity?

N/A

5. Family Empowerment:

a. If the bill purports to provide services to families or children:

(1) Who evaluates the family's needs?

N/A

(2) Who makes the decisions?

N/A

(3) Are private alternatives permitted?

N/A

(4) Are families required to participate in a program?

N/A

(5) Are families penalized for not participating in a program?

N/A

- b. Does the bill directly affect the legal rights and obligations between family members?

N/A

- c. If the bill creates or changes a program providing services to families or children, in which of the following does the bill vest control of the program, either through direct participation or appointment authority:

- (1) parents and guardians?

N/A

- (2) service providers?

N/A

- (3) government employees/agencies?

N/A

D. STATUTE(S) AFFECTED:

Sections 252.355, 400.492, 400.497, 400.610, 400.506, 400.605, 400.6095, and 408.15, Florida Statutes.

E. SECTION-BY-SECTION ANALYSIS:

Section 1: Amends section 252.355, Florida Statutes; updates statutory language and requires the Department Labor and Employment Security to assist the local emergency management agency in identifying persons with special needs. [Note: Currently, The Department of Children and Family Services, Department of Health, and Agency for Health Care Administration are required to assist the local emergency management agency in identifying such persons.]

Section 2: Creates section 381.0303, Florida Statutes, providing a Legislative purpose and makes the following changes:

- Permits county health departments to continue to enter into agreements with local emergency management agencies;
- Requires the Department of Health to assume lead responsibility for coordinating local medical and health care providers in developing a plan for staffing and medical management of special needs shelters under specific fiscal circumstances;
- Requires the county health departments, in concert with the local emergency management agencies, to assume the lead responsibility for coordinating the recruitment of health care practitioners;
- Requires county health departments to assign their employees to work in special needs shelters when needed to protect the health of patients;
- Requires appropriate county health department and local emergency management agencies to jointly determine who has responsibility for medical supervision in a special needs shelter;
- Provides for the reimbursement of certain health care providers under certain conditions;
- Establishes the formula for calculating reimbursements;
- Requires the department to submit to the Cabinet or Legislature, as appropriate, a budget amendment to obtain reimbursement from the working capital fund;
- Provides for travel expense ad per diem costs;
- Establishes a health care practitioner registry;
- Provides the Department of Health the option to establish a special needs shelter interagency committee;
- Establishes the purpose, duties, and responsibilities of the special needs shelter interagency committee; and
- Authorizes the Department of Health to adopt rules necessary to implement the provisions relating to the special needs shelter interagency committee.

Section 3: Creates s. 400.492, Florida Statutes; making the following changes:

- Requires home health agencies to prepare and maintain a comprehensive emergency management plan that is consistent with national standards;
- Requires the home health services to update the comprehensive emergency management plan, annually;
- Requires certain emergency care description, relating to continued care instructions in the event of an emergency be included in each patient record for patients listed in the registry of persons with special needs;
- Requires each home health agency to maintain a current prioritized list of patients who need continued services during an emergency and how those services must be continued;
- Releases home health agencies from health care responsibility in emergency situations that are beyond their control and that make it impossible to provide services; and
- Permits home health agencies to provide services in a special needs shelter located in any county.

Section 4: Amends s. 400.497, Florida Statutes, requires that the Agency for Health Care Administration's rules must provide reasonable and fair minimum standards relating to the following: (1) scope of home health services to be provided particularly during emergency evacuation and sheltering, (2) preparation of a comprehensive emergency management plan; requires such plans to be reviewed and is subject to approval by the county health department; requires the county health department to give specific health care related entities an opportunity to review the plan; and directs the county health department to complete its review within 60 days after receipt of the plan.

Section 5: Amends s. 400.506, Florida Statutes, as follows:

- Requires nurse registries to assist at-risk clients with special needs registration with the appropriate local emergency management agency;
- Requires each nurse registry to prepare and maintain a comprehensive emergency management plan that is consistent with specified criteria and with the local special needs plan;
- Requires the plan to be updated annually;
- Requires the plan to specify how the nurse registry must facilitate the provision of continuous care by persons referred for contract to certain registered persons during an emergency that interrupts the provision of care or services in private residences;
- Requires that all persons referred for contract who care for certain registered persons must include in the patient record a description of how care will be continued during a disaster or emergency that interrupts the provision of care in the patient's home;
- Provides that it is the responsibility of the person referred for contract to ensure that continuous care is provided;
- Requires each nurse registry to maintain a current prioritized list of certain patients in private residences and who are under the care of persons referred for contract and who need continued services during an emergency;
- Requires nurse registries list to indicate, for each patient, if the client is to be transported to a special needs shelter and if the patient is receiving skilled nursing services;
- Requires nurse registries to make the list available to county health departments and to local emergency management agencies upon request;
- Requires each person referred for contract who is caring for a patient who is registered to provide a list of the patient's medication and equipment needs to the nurse registry and make this information available to county health departments and to local emergency management agencies upon request;
- Provides that each person referred for contract is not required to continue to provide care to patients in emergency situations that are beyond the person's control and that make it impossible to provide services, such as when roads are impassable or when patients do not go to the location specified in their patient records;
- Provides for the review and approval of the required comprehensive emergency management plan by the county health department;
- Requires the county health department to review the plan to ensure that, at a minimum, the local emergency management agency, the Agency for Health Care Administration, and the local chapter of the American Red Cross or other lead sheltering agency are given the opportunity to review the plan;

- Requires the county health department to complete its review of the plan within 60 days after receipt of the plan and to either approve the plan or advise the nurse registry of necessary revisions; and
- Requires the Agency for Health Care Administration to adopt rules establishing minimum criteria for the comprehensive emergency management plan and plan updates, with the concurrence of the Department of Health and in consultation with the Department of Community Affairs.

Section 6: Amends section 400.605, Florida Statutes, requiring the Department of Health's rules establishing minimum standards and procedures for hospices to include components of a comprehensive emergency management plan, developed in consultation with the Department of Health and the Department of Community Affairs.

Section 7: Amends section 400.6095, Florida Statutes, requiring each hospice to include in the plan of care for each patient a description of how needed care and services will be provided in the event of an emergency.

Section 8: Amends 400.610, Florida Statutes, requiring the governing body of a hospice to do the following;

- Prepare and maintain a comprehensive emergency management plan that provides for continuing hospice services in the event of an emergency that is consistent with local special needs plans;
- Specifies criteria for the plans;
- Specifies that the plan is subject to review and approval by the county health department, subject to a specified exception for hospices providing services in more than one county;
- Provides that during the plan review, the county health department must ensure that the Department of Health, the Agency for Health Care Administration, and the local chapter of the American Red Cross or other lead sheltering agency have an opportunity to review and comment on the plan;
- Requires the county health department to complete its review within 60 days after receipt of the plan and shall either approve the plan or advise the hospice of necessary revisions;
- Provides that any hospice that operates in more than one county, the Department of Health must review the plan, after consulting with all of the county health departments, the Agency for Health Care Administration, and all the local chapters of the American Red Cross or other lead sheltering agency in the areas of operation for that particular hospice;
- Requires the Department of Health to complete its review within 90 days after receipt of the plan and to approve the plan or advise the hospice of necessary revisions; and
- Requires the Department of Health to make every effort to avoid imposing on the hospice differing requirements based on differences between counties.

Section 9: Creates section 401.273, Florida Statutes, requiring the Department of Health to include on its forms for the certification or recertifications of emergency medical technicians and paramedics who could assist the department in the event of disaster a question asking if the practitioner would be available to provide health care services in special needs shelters or to help staff disaster medical assistance teams during the times of emergency or disaster. Requires the department to maintain a registry for disasters and emergencies the names of those medical technicians and paramedics who answered affirmatively.

Section 10: Adds subsection (12) to section 408.15, Florida Statutes, authorizing the Agency for Health Care Administration to establish, in coordination with the Department of Health, uniform standards of care to be provided in special needs units or shelters during times of emergency or major disaster.

Section 11: Creates section 455.276, Florida Statutes, requiring the Department of Health to include on its forms for the licensure or certification of physicians, physician assistants, certified nursing assistants, licensed practical nurses, registered nurses, nurse practitioners, respiratory therapists, and other health care practitioners who could assist the department in the event of a disaster a question asking if the practitioner would be available to provide health care services in special needs shelters or to help staff disaster medical assistance teams during times of emergency or major disaster. Requires the department to maintain a registry of practitioners who answered affirmatively for disasters and emergencies.

Section 12: Requires state agencies that contract with providers for the care of persons with disabilities or limitations that make such persons dependent upon the care of others must include emergency and disaster planning provisions in such contracts at the time the contracts are initiated or upon renewal. Provisions must include, but are not limited to:

- The designation of an emergency coordinating officer;
- A procedure to contact all at-risk provider clients, on a priority basis, prior to and immediately following an emergency or disaster;
- A procedure to help at-risk clients register with the special needs registry of the local emergency management agency;
- A procedure to dispatch the emergency coordinating officer or other staff members to special needs shelters to assist clients with special needs, if necessary; and
- A procedure for providing the essential services the organization currently provides to special needs clients in preparation for, and during and following, a disaster.

Section 13: Appropriates from the General Revenue Fund, to implement this act, the following:

- To the Department of Health the sum of \$3,798,932 and 2 full-time-equivalent positions;
- To the Department of Children and Family Services the sum of \$58,898 and 1 full-time-equivalent position;
- To the Department of Elder Affairs the sum of \$58,898 and one full-time-equivalent position;
- To the Agency for Health Care Administration the sum of \$58,898 and one-full-time equivalent position; and
- To the Department of Community Affairs the sum of \$58,898 and one full-time-equivalent position.

Section 14: Provides an effective date of October 1, 2000.

III. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT:

A. FISCAL IMPACT ON STATE AGENCIES/STATE FUNDS:

1. Non-recurring Effects:

<u>Revenue:</u>	2000-2001
General Revenue Fund	-0-
 <u>Expenditures:</u>	
Department of Health	
Expense (2 FTE's)	\$ 5,710
Operating Capital Outlay (2 FTE's)	7,954
57 County Health Department Positions	168,445
 Agency for Health Care Administration	
Expenses (1 FTE)	2,132
Operating Capital Outlay (1 FTE)	3,167
 Department of Children and Family Services	
Expenses (1 FT)	unknown
Operating Capital Outlay (1 FTE)	unknown
 Department of Elderly Affairs	
Expenses (1 FTE)	unknown
Operating Capital Outlay (1 FTE)	unknown
 Department of Community Affairs	
Expenses (1 FTE)	unknown
Operating Capital Outlay (1 FTE)	unknown

2. Recurring Effects:Revenue:

General Revenue	2000-01	2001-02
	\$ -0-	\$-0-

Expenditures:**Department of Health**

General Revenue:

Expense (2 FTE's)	31,466	32,410
Expense (health services/CHD)	928,247	956,094
Salaries and Benefits (2 FTE's)	88,853	112,577
Salary and Benefits (health services/CHD)	2,143,668	2,758,720
Training for CHD nurses and other shelter staff	189,946	195,644

Agency for Health Care Administration

General Revenue:

Salary and Benefits (1 FTE: Program Administrator)	41,405	55,206
Expense Package (1 FTE)	11,057	11,057
Additional Travel Expense	4,676	4,676

Department of Children and Family Services

General Revenue:

Salary and Benefits (1 FTE)	58,898	58,898
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Department of Elderly Affairs

General Revenue:

Salary and Benefits (1 FTE)	58,898	58,898
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Department of Community Affairs

General Revenue:

Salary and Benefits (1 FTE)	58,898	58,898
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3. Long Run Effects Other Than Normal Growth:

None.

4. Total Revenues and Expenditures:Revenues:

General Revenue Funds	\$ -0-	\$ -0-
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Expenditures:**Department of Health**

General Revenue Fund	3,798,932	4,055,445
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Agency for Health Care Administration

General Revenue Fund	62,437	70,939
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Department of Children and Family Services

General Revenue Fund	58,898	58,898
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Department of Elder Affairs

General Revenue Fund	58,898	58,898
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Department of Community Affairs

General Revenue Fund	58,898	58,898
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B. FISCAL IMPACT ON LOCAL GOVERNMENTS AS A WHOLE:

1. Non-recurring Effects:

Indeterminate.

2. Recurring Effects:

Indeterminate.

3. Long Run Effects Other Than Normal Growth:

None

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

1. Direct Private Sector Costs:

Indeterminate.

2. Direct Private Sector Benefits:

Unknown.

3. Effects on Competition, Private Enterprise and Employment Markets:

According to the Department of Health, private health care provider enterprises are not currently providing services in this area and may not be willing to do so unless financial reimbursements were available.

D. FISCAL COMMENTS:

The fiscal analysis uses the agencies numbers provided last year for HB 705 by Representative Ogles. That bill died in Health and Human Services Appropriations.

IV. CONSEQUENCES OF ARTICLE VII, SECTION 18 OF THE FLORIDA CONSTITUTION:

A. APPLICABILITY OF THE MANDATES PROVISION:

This bill does not require counties or municipalities to expend funds or take action requiring the expenditure of funds.

B. REDUCTION OF REVENUE RAISING AUTHORITY:

This bill does not reduce the authority that municipalities or counties have to raise revenues in the aggregate.

C. REDUCTION OF STATE TAX SHARED WITH COUNTIES AND MUNICIPALITIES:

This bill does not reduce the percentage of state tax shared with counties or municipalities.

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V. COMMENTS:

HB 705 (1999 Session) by Representative Ogles mirrors many of the same provisions of this bill. HB 705 died in the House Health and Human Services Appropriations Committee.

VI. AMENDMENTS OR COMMITTEE SUBSTITUTE CHANGES:

The sponsor will be offering a technical amendment correcting a scrivener's error.

VII. SIGNATURES:

COMMITTEE ON COMMUNITY AFFAIRS:

Prepared by:

Staff Director:

Tonya Sue Chavis, Esq.

Joan Highsmith-Smith