### HOUSE OF REPRESENTATIVES COMMITTEE ON COMMUNITY AFFAIRS ANALYSIS

BILL #: HB 0039

- **RELATING TO:** Emergency Management Planning
- **SPONSOR(S)**: Representatives Ogles and others

TIED 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. <u>SUMMARY</u>:

This bill revises provisions relating to registration of persons requiring special needs assistance during an emergency or disaster and 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. This bill also includes minimum requirements for home health agencies, hospice, and nurse registries comprehensive emergency management plans with annual updates. The Agency for Health Care Administration is authorized to establish uniform standards of care for special needs shelters. The bill provides appropriations from General Revenue of \$4,034,524 to implement the act.

#### II. SUBSTANTIVE ANALYSIS:

#### A. DOES THE BILL SUPPORT THE FOLLOWING PRINCIPLES:

1.	Less Government	Yes []	No [X]	N/A []
2.	Lower Taxes	Yes []	No []	N/A [X]
3.	Individual Freedom	Yes []	No []	N/A [X]
4.	Personal Responsibility	Yes [X]	No []	N/A []
5.	Family Empowerment	Yes []	No []	N/A [X]

For any principle that received a "no" above, please explain:

- 1. The bill authorizes more government in the following ways:
  - Authorizes the following full-time equivalent positions:

**Section 13:** The Department of Health to create 2 full-time-equivalent positions; 57 full-time-equivalent positions for County Health Departments; The Department of Children and Family Services 1 full-time-equivalent position; The Department of Elder Affairs 1 full-time-equivalent position; and The Agency for Health Care Administration 1 full-time-equivalent position.

• Authorizes the following agencies to adopt rules or adjudicate disputes:

**Section 2:** Requires the Department of Health to adopt rules necessary for the implement of the coordination of the recruitment of health care practitioners to staff special needs shelters in times of emergency or disaster. The rule should also provide for the coordination and implementation of 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.

• Authorizes new responsibilities, obligations, or work for other governmental or private organizations or individuals:

**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.

• Authorizes an entitlement to a service or commodity provided by the government:

This bill authorizes special needs persons to specific and continued care in the event of an emergency or disaster subject to certain specified limitations.

**B. PRESENT SITUATION:** 

### Background:

Florida has large numbers of people with special needs who need access to special needs shelters during emergencies. Special needs shelters are staffed with nurses and are supplied with medial equipment and pharmaceuticals. Because of general population growth, the number of persons needing such care during emergencies is growing.

Local emergency management agencies have the overall responsibility of overseeing the preparedness and operational capacity of special needs shelters. However, they lack the resources to carry out response operations and many lack the expertise to arrange for health care services to be provided in special needs shelters. This bill resolves these problems by placing the responsibility to coordinate the staffing and management of shelters with county health departments. This would also enable the Department of Health to standardize staffing requirements.

Currently, hospitals and nursing homes are required to have disaster plans and to provide continuous care to their patients during emergencies. Florida law does not, however, require home health agencies, nurse registries or hospices to prepare disaster plans, nor does it require them to provide continuous care during emergencies, although their patients are dependent upon them for their well being. In addition, providers under contract with state agencies who care for persons with special needs also do not have a statutory obligation to provide continuous care during emergencies.

No agency at this time has rule making authority for special needs shelters. This bill gives the Department of Health that authority.

### 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 with 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 Elder 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 Elder 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.

C. 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 Elder Affairs to include components for a comprehensive emergency management plan in its rules establishing minimum standards for a hospice;
- Requires 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.
- D. SECTION-BY-SECTION ANALYSIS:

**Section 1:** Amends section 252.355, Florida Statutes; updates statutory language and requires the Department of 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 and 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 nursed, 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-timeequivalent 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-timeequivalent position.

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

### III. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT:

### A. FISCAL IMPACT ON STATE GOVERNMENT:

1. <u>Revenues</u>:

Non-recurring Effects:

<u>Revenue</u> General Revenue Fund	2000-2001 \$ 441,320	
Recurring Effects:		
<u>Revenue</u> : General Revenue	2000-2001 \$2,630,819	2001-2002 \$3,450,143

2. Expenditures:

A 25% lapse applies to year 1 except for OCO; Year 2 figures are increased by 3%.

### Non-recurring effects:

<b>Department of Health</b> Expense (2 FTEs) Operating Capital Outlay (2 FTEs) 57 County Health Department Positions	\$   8,360 6,600 238,260
Agency for Health Care Administration Expenses (1 FTE) Operating Capital Outlay (1 FTE)	3,135 3,300
<b>Department of Children and Family Ser</b> Expenses (1 FTE) Operating Capital Outlay	r <b>vices</b> 3,135 3,300
<b>Department of Elder Affairs</b> Expenses (1 FTE) Operating Capital Outlay	3,135 3,300
<b>Department of Community Affairs</b> Expenses (1 FTE) Operating Capital Outlay	3,135 3,300

# Recurring Effects:

<b>Department of Health</b> Expense (2 FTEs) Expenses CHDs Salaries and Benefits (2 FTEs) Salary and Benefits (CHDs)	24,758 476,150 73,862 1,866,103	33,010 634,867 98,485 2,488,137		
Agency for Health Care Administra Salary and Benefits (1 FTE)	<b>tion</b> 47,330	63,524		
<b>Department of Children and Family</b> Salary and Benefits (1 FTE)	<b>Services</b> 47,330	63,524		
<b>Department of Elder Affairs</b> Salary and Benefits (1 FTE)	47,330	63,524		
<b>Department of Community Affairs</b> Salary and Benefits (1 FTE)	47,330	63,524		
Total Expenditures:				
<b>Department of Health</b> General Revenue Fund	3,072,139	3,450,143		
Agency for Health Care Administra General Revenue Fund	tion 53,765	63,524		
<b>Department of Children and Family</b> General Revenue Fund	<b>Services</b> 53,765	63,524		
<b>Department of Elder Affairs</b> General Revenue Fund	53,765	63,524		
Department of Community Affairs General Revenue Fund	53,765	63,524		

# B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. <u>Revenues</u>:

This bill should have little, if any, impact on local government revenues.

2. Expenditures:

According to the Department of Health, fiscal impact on local governments as a whole cannot be determined. However, this bill will reduce costs to those units of local government who now assume responsibility for staffing special needs shelters.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

According to the Department of Health, costs to develop emergency management plans for each home health agency, hospice, and nurse registry will vary depending upon the size of the organization. Those that are currently accredited by the Joint Commission for the Accreditation of Healthcare Organizations (JCAHO) will require minimal additional expenditures, if any. Additional costs will be incurred by some organizations in providing continuous care during emergencies.

D. FISCAL COMMENTS:

Salaries are at the minimum inflated 3%. CHD staff expenses are based on minimum travel. Headquarters staff expenses are based on maximum travel.

According to the bill analysis prepared by the Department of Health compared with the fiscal notes for this bill prepared last year, costs are lower because: 1) salaries are not calculated at 10% above minimum; )2 CHD travel costs are now calculated at the minimum; and 3) fringe benefit costs are lower because of a reduction in the state retirement contribution.

# 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.

- V. <u>COMMENTS</u>:
  - A. CONSTITUTIONAL ISSUES:

None.

B. RULE-MAKING AUTHORITY:

**Section 2:** Requires the Department of Health to adopt rules necessary to implement 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.

**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 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.

C. OTHER COMMENTS:

HB 705 (1999 Session), by Representative Ogles mirror 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 offer a technical amendment correcting a scriverner's error. The sponsor has withdrawn a "stike-everything" amendment.

VII. <u>SIGNATURES</u>:

COMMITTEE ON COMMUNITY AFFAIRS: Prepared by:

Staff Director:

Tonya Sue Chavis, Esq.

Joan Highsmith-Smith