

HOUSE MESSAGE SUMMARY

[s1202.hms.doc]

BILL: CS/CS/CS/SB 1202

SPONSOR: Appropriations Committee, Judiciary Committee, Health, Aging and Long-Term Care Committee and Senator Brown-Waite

SUBJECT: Long-Term Care

PREPARED BY: Senate Committee on Health, Aging and Long-term Care

DATE: May 2, 2001

I. Amendments Contained in Message:

House Amendment 1-341895 (body with title)

II. Summary of Amendments Contained in Message:

House Amendment 1 Makes the following changes to CS/CS/CS/SB 1202:

Provides that half of all punitive damages awarded under chapter 400, F.S., shall be paid into the Quality of Long-Term Care Facility Improvement Trust Fund. (House pp. 23 and 100-101) (This trust fund was passed by the House in HB 1861. There is no Senate companion).

Requires nursing homes to maintain an internal grievance procedure. (House p. 34)

Modifies the Medicaid "Up and Out" pilot project to remove intent language and authority for AHCA to contract to provide oversight services where there is no Evercare demonstration project, and a requirement that AHCA and the statewide public guardianship office develop a system to identify individuals who cannot make their own decisions in order to give such residents priority for publicly funded guardianship services. (Senate p. 60, House p. 49)

Removes the Senate language requiring training of long term care facility staff who care for persons with Alzheimer's disease. (Senate p. 60, House p. 51)

Requires staffing of 2.6 CNA hrs/resident/day effective January 1, 2002, increasing to 2.9 hrs beginning January 1, 2003. Requires 1 CNA per 20 residents beginning January 1, 2002. Allows facilities free of class I or II violations for the past 30 months to provide a minimum of 2.3 CNA hours per resident per day until January 1, 2003. (House p. 58)

Extends the length of time from 30 days to 45 days for notice to residents when an assisted living facility intends to close. (House p. 85)

Modifies language pertaining to prohibitions on rate increases for changes of ownership to include changes of licensed operator. Initial rates will not change from previous owner rates for changes filed after July 1, 2001. Requires separate cost ceilings for direct and indirect patient

care subcomponents of the patient care component of the Medicaid rate. The direct care subcomponent is limited by the cost-based class ceiling, and the indirect care subcomponent is limited by the lower of the cost-based class ceiling, the target rate, or the individual provider target. The former case-mix adjustment is included as part of the direct care subcomponent. References to the report for FY 1999 and 2000 to the Legislature regarding the cost of liability insurance for nursing homes is removed. References to case-mix adjustments are removed. (Senate p. 116, House p. 106)

Adds a requirement for an evaluation of the Medicaid Long Term Care Community Diversion projects and a report by February 15, 2002. (House p. 109)

Amends the language establishing a moratorium on agency approval of certificate-of-need applications until July 1, 2006, to limit the moratorium to community nursing home beds and exempt non-Medicaid beds in a continuing care retirement facility. (Senate p.121, House p. 115)

Removes from the Senate Bill the Joint Underwriting Association (JUA) provisions. (Senate pp. 132-138)

Requires that AHCA develop a standardized chart of accounts for nursing home cost reports. The Auditor General is to approve this chart of accounts. The chart of accounts may not be revised without consent of the Auditor General. (House p. 127)

Requires that nursing home cost reports contain detailed information on salaries, benefits, overtime costs, and hours for direct care staff. (House p. 128)

Requires that nursing home cost reports filed with AHCA for periods ending on or after December 31, 2003, be filed electronically in a format and manner prescribed by AHCA. (House p. 128)

Requires that the Office of the State Long Term Care Ombudsman be responsible for the cost of leasing its office space, provided that it shall not be co-located with the headquarters offices of the Department of Elderly Affairs. (House p. 127)

Removes the \$500,000 appropriation for the JUA. (Senate p. 139)

The appropriation for AHCA is increased to \$5,602,460 and 79 FTEs. (House p. 128)