

By the Committees on Appropriations; Health, Aging and Long-Term Care; and Senator Silver

309-2043-02

1 A bill to be entitled

2 An act relating to subacute pediatric

3 transitional care; requiring the Agency for

4 Health Care Administration to conduct a study

5 of health care services provided to medically

6 fragile or medical-technology-dependent

7 children; requiring the Agency for Health Care

8 Administration to conduct a pilot program for a

9 subacute pediatric transitional care center;

10 requiring background screening of center

11 personnel; requiring the agency to amend the

12 Medicaid state plan and seek federal waivers as

13 necessary; requiring the center to have an

14 advisory board; providing for membership on the

15 advisory board; providing requirements for the

16 admission, transfer, and discharge of a child

17 to the center; requiring the agency to submit

18 certain reports to the Legislature; providing

19 an effective date.

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21 Be It Enacted by the Legislature of the State of Florida:

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23 Section 1. The Agency for Health Care Administration

24 shall conduct a study of health care services provided to the

25 medically fragile or medical-technology-dependent children in

26 the state and conduct a pilot program in Dade County to

27 provide subacute pediatric transitional care to a maximum of

28 30 children at any one time. The purposes of the study and the

29 pilot program are to determine ways to permit medically

30 fragile or medical-technology-dependent children to

31 successfully make a transition from acute care in a health

1 care institution to live with their families when possible,
2 and to provide cost-effective, subacute transitional care
3 services.

4 Section 2. The Agency for Health Care Administration,
5 in cooperation with the Children's Medical Services Program in
6 the Department of Health, shall conduct a study to identify
7 the total number of medically fragile or
8 medical-technology-dependent children, from birth through age
9 21, in the state. By January 1, 2003, the agency must report
10 to the Legislature regarding the children's ages, the
11 locations where the children are served, the types of services
12 received, itemized costs of the services, and the sources of
13 funding that pay for the services, including the proportional
14 share when more than one funding source pays for a service.
15 The study must include information regarding medically fragile
16 or medical-technology-dependent children residing in
17 hospitals, nursing homes, and medical foster care, and those
18 who live with their parents. The study must describe children
19 served in prescribed pediatric extended-care centers,
20 including their ages and the services they receive. The report
21 must identify the total services provided for each child and
22 the method for paying for those services. The report must also
23 identify the number of such children who could, if appropriate
24 transitional services were available, return home or move to a
25 less-institutional setting.

26 Section 3. (1) Within 30 days after the effective
27 date of this act, the agency shall establish minimum staffing
28 standards and quality requirements for a subacute pediatric
29 transitional care center to be operated as a 2-year pilot
30 program in Dade County. The pilot program must operate under
31 the license of a hospital licensed under chapter 395, Florida

1 Statutes, or a nursing home licensed under chapter 400,
2 Florida Statutes, and shall use existing beds in the hospital
3 or nursing home. A child's placement in the subacute pediatric
4 transitional care center may not exceed 90 days. The center
5 shall arrange for an alternative placement at the end of a
6 child's stay and a transitional plan for children expected to
7 remain in the facility for the maximum allowed stay.

8 (2) Within 60 days after the effective date of this
9 act, the agency must amend the state Medicaid plan and request
10 any federal waivers necessary to implement and fund the pilot
11 program.

12 (3) The subacute pediatric transitional care center
13 must require level I background screening as provided in
14 chapter 435, Florida Statutes, for all employees or
15 prospective employees of the center who are expected to, or
16 whose responsibilities may require them to, provide personal
17 care or services to children, have access to children's living
18 areas, or have access to children's funds or personal
19 property.

20 Section 4. (1) The subacute pediatric transitional
21 care center must have an advisory board. Membership on the
22 advisory board must include, but need not be limited to:

23 (a) A physician and an advanced registered nurse
24 practitioner who is familiar with services for medically
25 fragile or medical-technology-dependent children;

26 (b) A registered nurse who has experience in the care
27 of medically fragile or medical-technology-dependent children;

28 (c) A child development specialist who has experience
29 in the care of medically fragile or
30 medical-technology-dependent children and their families;

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1 (d) A social worker who has experience in the care of
2 medically fragile or medical-technology-dependent children and
3 their families; and

4 (e) A consumer representative who is a parent or
5 guardian of a child placed in the center.

6 (2) The advisory board shall:

7 (a) Review the policy and procedure components of the
8 center to assure conformance with applicable standards
9 developed by the Agency for Health Care Administration; and

10 (b) Provide consultation with respect to the
11 operational and programmatic components of the center.

12 Section 5. (1) The subacute pediatric transitional
13 care center must have written policies and procedures
14 governing the admission, transfer, and discharge of children.

15 (2) The admission of each child to the center must be
16 under the supervision of the center nursing administrator or
17 his or her designee, and must be in accordance with the
18 center's policies and procedures.

19 (3) Each child admitted to the center shall be
20 admitted upon prescription of a prescribing physician or
21 advanced registered nurse practitioner and the child shall
22 remain under the care of the licensed primary physician or
23 advanced registered nurse practitioner for the duration of his
24 or her stay in the center.

25 (4) Each child admitted to the center must meet at
26 least the following criteria:

27 (a) The child must be medically fragile or
28 medical-technology-dependent.

29 (b) The child may not, prior to admission, present
30 significant risk of infection to other children or personnel.

31 The medical and nursing directors shall review, on a

1 case-by-case basis, the condition of any child who is
2 suspected of having an infectious disease to determine whether
3 admission is appropriate.

4 (c) The child must be medically stabilized and require
5 skilled nursing care or other interventions.

6 (5) If the child meets the criteria specified in
7 paragraphs (4)(a), (b), and (c), the medical director or
8 nursing director of the center shall implement a preadmission
9 plan that delineates services to be provided and appropriate
10 sources for such services.

11 (a) If the child is hospitalized at the time of
12 referral, preadmission planning must include the participation
13 of the child's parent or guardian and relevant medical,
14 nursing, social services, and developmental staff to assure
15 that the hospital's discharge plans will be implemented
16 following the child's placement in the center.

17 (b) A consent form, outlining the purpose of the
18 center, family responsibilities, authorized treatment,
19 appropriate release of liability, and emergency disposition
20 plans, must be signed by the parent or guardian and witnessed
21 before the child is admitted to the center. The parent or
22 guardian shall be provided a copy of the consent form.

23 Section 6. By January 1, 2003, the Agency for Health
24 Care Administration shall report to the Legislature concerning
25 the progress of the pilot program. By January 1, 2004, the
26 agency shall submit to the Legislature a report on the success
27 of the pilot program.

28 Section 7. This act shall take effect October 1, 2002.
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STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
COMMITTEE SUBSTITUTE FOR
CS/SB 484

Specifies that the pilot program is to be conducted in Dade County.

Provides that the center must arrange for an alternative placement at the end of a child's stay and that a transitional plan must be arranged for children expected to stay the maximum 90 days allowed.

Revises membership on the advisory board to include a physician and an advanced registered nurse practitioner.