HOUSE AMENDMENT 705-165AXC-08 Bill No. HB 703 Amendment No. \_\_\_\_ (for drafter's use only) CHAMBER ACTION Senate House 1 2 3 4 5 ORIGINAL STAMP BELOW 6 7 8 9 10 11 Representative(s) Green offered the following: 12 13 Amendment (with title amendment) Remove everything after the enacting clause 14 15 16 and insert: 17 Section 1. Subsection (4) of section 20.41, Florida Statutes, is amended to read: 18 19 20.41 Department of Elderly Affairs.--There is created a Department of Elderly Affairs. 20 (4) The department shall administer administratively 21 22 house the State Long-Term Care Ombudsman Council, created by 23 s. 400.0067, and the local long-term care ombudsman councils, 24 created by s. 400.0069 and shall, as required by s. 712 of the federal Older Americans Act of 1965, ensure that both the 25 26 state and local long-term care ombudsman councils operate in compliance with the Older Americans Act. The councils in 27 performance of their duties shall not be subject to control, 28 supervision, or direction by the department. 29 30 Section 2. Subsection (1) and paragraph (b) of 31 subsection (2) of section 400.0063, Florida Statutes, are 1 File original & 9 copies hbd0005 03/11/02 04:21 pm 00703-0075-805735

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amended to read: 1 2 400.0063 Establishment of Office of State Long-Term 3 Care Ombudsman; designation of ombudsman and legal advocate .--4 There is created an Office of State Long-Term Care (1)5 Ombudsman, which shall be located for administrative purposes 6 in the Department of Elderly Affairs. 7 (2)(b) The State Long-Term Care Ombudsman shall be 8 9 appointed by and shall serve at the pleasure of the Secretary 10 of Elderly Affairs State Long-Term Care Ombudsman Council. No person who has a conflict of interest, or has an immediate 11 12 family member who has a conflict of interest, may be involved 13 in the designation of the ombudsman. 14 Section 3. Paragraphs (c) and (f) of subsection (2) 15 and subsection (3) of section 400.0065, Florida Statutes, are 16 amended to read: 17 400.0065 State Long-Term Care Ombudsman; duties and responsibilities; conflict of interest.--18 19 (2) The State Long-Term Care Ombudsman shall have the 20 duty and authority to: 21 (c) Within the limits of federal and state funding authorized and appropriated, employ such personnel, including 22 staff for local ombudsman councils, as are necessary to 23 24 perform adequately the functions of the office and provide or 25 contract for legal services to assist the state and local ombudsman councils in the performance of their duties. Staff 26 27 positions for each local ombudsman council may be established 28 as career service positions, and shall be filled by the 29 ombudsman after approval by the secretary consultation with 30 the respective local ombudsman council. (f) Annually prepare a budget request that shall be 31 2

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1 submitted to the Governor by the department for transmittal to 2 the Legislature. 3 (3) The State Long-Term Care Ombudsman shall not: 4 (a) Have a direct involvement in the licensing or 5 certification of, or an ownership or investment interest in, a 6 long-term care facility or a provider of a long-term care 7 service. 8 Be employed by, or participate in the management (b) 9 of, a long-term care facility. 10 (c) Receive, or have a right to receive, directly or 11 indirectly, remuneration, in cash or in kind, under a 12 compensation agreement with the owner or operator of a 13 long-term care facility. 14 15 The Department of Elderly Affairs, in consultation with the 16 ombudsman, shall adopt rules to establish procedures to 17 identify and eliminate conflicts of interest as described in 18 this subsection. Paragraphs (c), (d), (f), and (g) of 19 Section 4. 20 subsection (2) and paragraph (b) of subsection (3) of section 21 400.0067, Florida Statutes, are amended to read: 22 400.0067 Establishment of State Long-Term Care 23 Ombudsman Council; duties; membership.--24 (2) The State Long-Term Care Ombudsman Council shall: 25 (c) Assist the ombudsman to discover, investigate, and determine the existence of abuse or neglect in any long-term 26 27 care facility.and to develop procedures, in consultation with 28 The Department of Elderly Affairs shall develop procedures-29 relating to such investigations. Investigations may consist, 30 in part, of one or more onsite administrative inspections. (d) Assist the ombudsman in eliciting, receiving, 31 3

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1 responding to, and resolving complaints made by or on behalf 2 of long-term care facility residents and in developing 3 procedures, in consultation with the Department of Elderly 4 Affairs,relating to the receipt and resolution of such 5 complaints. The secretary shall approve all such procedures. 6 (f) Be authorized to call upon appropriate agencies of

7 state government for such professional assistance as may be
8 needed in the discharge of its duties, including assistance
9 from the adult protective services program of the Department
10 of Children and Family Services.

(f)(g) Prepare an annual report describing the 11 12 activities carried out by the ombudsman and the State 13 Long-Term Care Ombudsman Council in the year for which the 14 report is prepared. The State Long-Term Care Ombudsman 15 Council shall submit the report to the Secretary of Elderly Affairs. The secretary shall in turn submit the report to the 16 17 Commissioner of the United States Administration on Aging, the Governor, the President of the Senate, the Speaker of the 18 House of Representatives, the minority leaders of the House 19 and Senate, the chairpersons of appropriate House and Senate 20 committees, the Secretary of Secretaries of Elderly Affairs 21 and Children and Family Services, and the Secretary of Health 22 Care Administration. The report shall be submitted by the 23 24 Secretary of Elderly Affairs at least 30 days before the 25 convening of the regular session of the Legislature and shall, at a minimum: 26

Contain and analyze data collected concerning
 complaints about and conditions in long-term care facilities.
 Evaluate the problems experienced by residents of
 long-term care facilities.

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3. Contain recommendations for improving the quality

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of life of the residents and for protecting the health,
 safety, welfare, and rights of the residents.

3 4. Analyze the success of the ombudsman program during 4 the preceding year and identify the barriers that prevent the 5 optimal operation of the program. The report of the program's 6 successes shall also address the relationship between the 7 state long-term care ombudsman program, the Department of Elderly Affairs, the Agency for Health Care Administration, 8 9 and the Department of Children and Family Services, and an 10 assessment of how successfully the state long-term care ombudsman program has carried out its responsibilities under 11 12 the Older Americans Act.

5. Provide policy and regulatory and legislative recommendations to solve identified problems; resolve residents' complaints; improve the quality of care and life of the residents; protect the health, safety, welfare, and rights of the residents; and remove the barriers to the optimal operation of the state long-term care ombudsman program.

19 6. Contain recommendations from the local ombudsman20 councils regarding program functions and activities.

7. Include a report on the activities of the legal
advocate and other legal advocates acting on behalf of the
local and state councils.

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(3)

(b)1. The ombudsman, in consultation with the secretary and the state ombudsman council, shall submit to the Governor a list of at least eight names of persons who are not serving on a local council.

29 2. The Governor shall appoint three members chosen
30 from the list, at least one of whom must be over 60 years of
31 age.

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If the Governor's appointments are not made within 1 3. 2 60 days after the ombudsman submits the list, the ombudsman, 3 in consultation with the secretary State Long-Term Care 4 Ombudsman Council, shall appoint three members, one of whom 5 must be over 60 years of age. Section 5. Subsection (1) of section 400.0071, Florida б 7 Statutes, is amended to read: 8 400.0071 Complaint procedures.--(1) The state ombudsman council shall recommend to the 9 10 ombudsman and the secretary establish state and local procedures for receiving complaints against a nursing home or 11 12 long-term care facility or its employee. The procedures shall 13 be implemented after the approval of the ombudsman and the 14 secretary. 15 Section 6. Subsections (1) and (2) of section 16 400.0087, Florida Statutes, are amended to read: 17 400.0087 Agency oversight .--The Department of Elderly Affairs shall monitor 18 (1)the local ombudsman councils responsible for carrying out the 19 duties delegated by s. 400.0069 and federal law. 20 The 21 department, in consultation with the ombudsman and the State Long-Term Care Ombudsman Council, shall adopt rules to 22 establish the policies and procedures for the monitoring of 23 24 local ombudsman councils. (2) The department is responsible for ensuring that 25 the Office of State Long-Term Care Ombudsman prepares its 26 27 annual report; provides information to public and private agencies, legislators, and others; provides appropriate 28 training to representatives of the office or of the state or 29 30 local long-term care ombudsman councils; and coordinates ombudsman services with the Advocacy Center for Persons with 31 6

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Disabilities and with providers of legal services to residents 1 2 of long-term care facilities in compliance with state and 3 federal laws. 4 Section 7. Section 400.0089, Florida Statutes, is 5 amended to read: 400.0089 Agency reports. -- The State Long-Term Care б 7 Ombudsman Council, shall, in cooperation with the Department of Elderly Affairs shall, maintain a statewide uniform 8 9 reporting system to collect and analyze data relating to 10 complaints and conditions in long-term care facilities and to residents, for the purpose of identifying and resolving 11 12 significant problems. The State Long-Term Care Ombudsman 13 Council shall submit such data as part of its annual report required pursuant to s. 400.0067(2)(q) to the Agency for 14 15 Health Care Administration, the Department of Children and 16 Family Services, the Florida Statewide Advocacy Council, the 17 Advocacy Center for Persons with Disabilities, the 18 Commissioner for the United States Administration on Aging, the National Ombudsman Resource Center, and any other state or 19 20 federal entities that the ombudsman determines appropriate. Section 8. Subsections (2) and (3) of section 21 22 400.0066, Florida Statutes, are repealed. Section 9. Section 409.221, Florida Statutes, is 23 24 created to read: 25 409.221 Consumer-directed care program.--SHORT TITLE.--This section may be cited as the 26 (1)27 "Florida Consumer-Directed Care Act." (2) LEGISLATIVE FINDINGS. -- The Legislature finds that 28 29 alternatives to institutional care, such as in-home and 30 community-based care, should be encouraged. The Legislature finds that giving recipients of in-home and community-based 31 7 03/11/02 04:21 pm File original & 9 copies hbd0005 00703-0075-805735

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services the opportunity to select the services they need and 1 2 the providers they want, including family and friends, 3 enhances their sense of dignity and autonomy. The Legislature 4 also finds that providing consumers choice and control, as tested in current research and demonstration projects, has 5 6 been beneficial and should be developed further and 7 implemented statewide. 8 (3) LEGISLATIVE INTENT.--It is the intent of the 9 Legislature to nurture the autonomy of those citizens of the 10 state, of all ages, who have disabilities by providing the 11 long-term care services they need in the least restrictive, 12 appropriate setting. It is the intent of the Legislature to 13 give such individuals more choices in and greater control over 14 the purchased long-term care services they receive. 15 (4) CONSUMER-DIRECTED CARE.--(a) Program established. -- The Agency for Health Care 16 17 Administration shall establish the consumer-directed care 18 program which shall be based on the principles of consumer choice and control. The agency shall implement the program 19 upon federal approval. The agency shall establish interagency 20 cooperative agreements with and shall work with the 21 Departments of Elderly Affairs, Health, and Children and 22 Family Services to implement and administer the program. The 23 24 program shall allow enrolled persons to choose the providers of services and to direct the delivery of services, to best 25 meet their long-term care needs. The program must operate 26 27 within the funds appropriated by the Legislature. (b) Eligibility and enrollment.--Persons who are 28 enrolled in one of the Medicaid home and community-based 29 30 waiver programs and are able to direct their own care, or to 31 designate an eligible representative, may choose to 8

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participate in the consumer-directed care program. 1 2 (C) Definitions.--For purposes of this section, the 3 term: 4 "Budget allowance" means the amount of money made 1. 5 available each month to a consumer to purchase needed 6 long-term care services, based on the results of a functional 7 needs assessment. 2. "Consultant" means an individual who provides 8 technical assistance to consumers in meeting their 9 10 responsibilities under this section. 11 3. "Consumer" means a person who has chosen to 12 participate in the program, has met the enrollment 13 requirements, and has received an approved budget allowance. "Fiscal intermediary" means an entity approved by 14 4. 15 the agency that helps the consumer manage the consumer's budget allowance, retains the funds, processes employment 16 17 information, if any, and tax information, reviews records to 18 ensure correctness, writes paychecks to providers, and delivers paychecks to the consumer for distribution to 19 providers and caregivers. 20 5. "Provider" means: 21 A person licensed or otherwise permitted to render 22 a. services eligible for reimbursement under this program for 23 24 whom the consumer is not the employer of record; or 25 b. A consumer-employed caregiver for whom the consumer is the employer of record. 26 27 "Representative" means an uncompensated individual 6. designated by the consumer to assist in managing the 28 29 consumer's budget allowance and needed services. 30 (d) Budget allowances.--Consumers enrolled in the program shall be given a monthly budget allowance based on the 31 9 File original & 9 copies 03/11/02 hbd0005 04:21 pm 00703-0075-805735

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results of their assessed functional needs and the financial 1 2 resources of the program. Consumers shall receive the budget 3 allowance directly from an agency-approved fiscal 4 intermediary. Each department shall develop purchasing 5 guidelines, approved by the agency, to assist consumers in 6 using the budget allowance to purchase needed, cost-effective 7 services. 8 (e) Services.--Consumers shall use the budget 9 allowance only to pay for home and community-based services 10 that meet the consumer's long-term care needs and are a cost-efficient use of funds. Such services may include, but 11 12 are not limited to, the following: 13 1. Personal care. Homemaking and chores, including housework, meals, 14 2. 15 shopping, and transportation. 3. Home modifications and assistive devices which may 16 17 increase the consumer's independence or make it possible to 18 avoid institutional placement. 19 4. Assistance in taking self-administered medication. 5. Day care and respite care services, including those 20 provided by nursing home facilities pursuant to s. 400.141(6) 21 22 or by adult day care facilities licensed pursuant to s. 23 400.554. 24 6. Personal care and support services provided in an 25 assisted living facility. (f) Consumer roles and responsibilities.--Consumers 26 27 shall be allowed to choose the providers of services, as well as when and how the services are provided. Providers may 28 29 include a consumer's neighbor, friend, spouse, or relative. 30 1. In cases where a consumer is the employer of record, the consumer's roles and responsibilities include, but 31 10 File original & 9 copies 03/11/02 04:21 pm hbd0005 00703-0075-805735

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are not limited to, the following: 1 2 a. Developing a job description. 3 b. Selecting caregivers and submitting information for 4 the background screening as required in s. 435.05. 5 c. Communicating needs, preferences, and expectations 6 about services being purchased. 7 d. Providing the fiscal intermediary with all 8 information necessary for provider payments and tax 9 requirements. 10 e. Ending the employment of an unsatisfactory 11 caregiver. 12 2. In cases where a consumer is not the employer of 13 record, the consumer's roles and responsibilities include, but are not limited to, the following: 14 a. 15 Communicating needs, preferences, and expectations about services being purchased. 16 17 b. Ending the services of an unsatisfactory provider. 18 c. Providing the fiscal agent with all information necessary for provider payments and tax requirements. 19 20 (g) Agency and departments roles and responsibilities.--The agency's and the departments' roles and 21 responsibilities include, but are not limited to, the 22 23 following: 24 1. Assessing each consumer's functional needs, helping 25 with the service plan, and providing ongoing assistance with the service plan. 26 27 2. Offering the services of consultants who shall provide training, technical assistance, and support to the 28 29 consumer. 3. Completing the background screening for providers. 30 31 4. Approving fiscal intermediaries. 11 File original & 9 copies 03/11/02

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5. Establishing the minimum qualifications for all 1 2 caregivers and providers and being the final arbiter of the 3 fitness of any individual to be a caregiver or provider. 4 (h) Fiscal intermediary roles and 5 responsibilities.--The fiscal intermediary's roles and 6 responsibilities include, but are not limited to, the 7 following: 1. Providing recordkeeping services. 8 2. Retaining the consumer-directed care funds, 9 10 processing employment and tax information, reviewing records to ensure correctness, writing paychecks to providers, and 11 delivering paychecks to the consumer for distribution. 12 13 (i) Background screening requirements.--All persons who render care under this section shall comply with the 14 15 requirements of s. 435.05. Persons shall be excluded from employment pursuant to s. 435.06. 16 17 1. Persons excluded from employment may request an 18 exemption from disqualification, as provided in s. 435.07. Persons not subject to certification or professional licensure 19 may request an exemption from the agency. In considering a 20 21 request for an exemption, the agency shall comply with the provisions of s. 435.07. 22 The agency shall, as allowable, reimburse 23 2. 24 consumer-employed caregivers for the cost of conducting 25 background screening as required by this section. 26 (j) Rules; federal waivers.--In order to implement 27 this section: The agency and the Departments of Elderly Affairs, 28 1. 29 Health, and Children and Family Services are authorized to 30 adopt and enforce rules. 31 The agency shall take all necessary action to 2. 12File original & 9 copies 03/11/02 04:21 pm hbd0005 00703-0075-805735

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ensure state compliance with federal regulations. The agency 1 2 shall apply for any necessary federal waivers or waiver 3 amendments needed to implement the program. 4 (k) Reviews and reports. -- The agency and the 5 Departments of Elderly Affairs, Health, and Children and 6 Family Services shall each, on an ongoing basis, review and 7 assess the implementation of the consumer-directed care 8 program. By January 15 of each year, the agency shall submit a written report to the Legislature that includes each 9 10 department's review of the program and contains recommendations for improvements to the program. 11 12 Section 10. (1) Prior to December 1, 2002, the Agency 13 for Health Care Administration in consultation with the Department of Elderly Affairs shall submit to the Governor, 14 15 the President of the Senate, and the Speaker of the House of Representatives a plan to reduce the number of nursing home 16 17 bed days purchased by the state Medicaid program and to 18 replace such nursing home care with care provided in less 19 costly alternative settings. The plan must include specific goals for reducing 20 (2) Medicaid-funded bed days and recommend specific statutory and 21 22 operational changes necessary to achieve such reduction. The plan must include an evaluation of the 23 (3) 24 cost-effectiveness and the relative strengths and weaknesses 25 of programs that serve as alternatives to nursing homes. Section 11. Paragraph (d) of subsection (5) of section 26 27 400.179, Florida Statutes, is amended to read: 400.179 Sale or transfer of ownership of a nursing 28 29 facility; liability for Medicaid underpayments and 30 overpayments. --31 (5) Because any transfer of a nursing facility may 13 03/11/02 04:21 pm File original & 9 copies

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1 expose the fact that Medicaid may have underpaid or overpaid 2 the transferor, and because in most instances, any such 3 underpayment or overpayment can only be determined following a 4 formal field audit, the liabilities for any such underpayments 5 or overpayments shall be as follows:

6 (d) Where the transfer involves a facility that has7 been leased by the transferor:

8 1. The transferee shall, as a condition to being 9 issued a license by the agency, acquire, maintain, and provide 10 proof to the agency of a bond with a term of 30 months, 11 renewable annually, in an amount not less than the total of 3 12 months Medicaid payments to the facility computed on the basis 13 of the preceding 12-month average Medicaid payments to the 14 facility.

15 2. The leasehold operator may meet the bond
16 requirement through other arrangements acceptable to the
17 department.

3. All existing nursing facility licensees, operating the facility as a leasehold, shall acquire, maintain, and provide proof to the agency of the 30-month bond required in subparagraph 1., above, on and after July 1, 1993, for each license renewal.

4. It shall be the responsibility of all nursing
facility operators, operating the facility as a leasehold, to
renew the 30-month bond and to provide proof of such renewal
to the agency annually at the time of application for license
renewal.

5. Any failure of the nursing facility operator to acquire, maintain, renew annually, or provide proof to the agency shall be grounds for the agency to deny, cancel, revoke, or suspend the facility license to operate such

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facility and to take any further action, including, but not 1 2 limited to, enjoining the facility, asserting a moratorium, or 3 applying for a receiver, deemed necessary to ensure compliance 4 with this section and to safeguard and protect the health, safety, and welfare of the facility's residents. 5 б 7 However, notwithstanding any provision of this section to the 8 contrary, a lease agreement required as a condition of bond financing or refinancing under s. 154.213 by a health 9 10 facilities authority or under s. 159.30 by a county or 11 municipality is not considered to be a leasehold and, 12 therefore, is not subject to the bond requirements of this 13 paragraph. Section 12. Section 408.034, Florida Statutes, is 14 15 amended to read: 16 408.034 Duties and responsibilities of agency; 17 rules.--The agency is designated as the single state 18 (1) agency to issue, revoke, or deny certificates of need and to 19 20 issue, revoke, or deny exemptions from certificate-of-need review in accordance with the district plans and present and 21 22 future federal and state statutes. The agency is designated as the state health planning agency for purposes of federal 23 24 law. (2) In the exercise of its authority to issue licenses 25 to health care facilities and health service providers, as 26 27 provided under chapters 393, 395, and parts II and VI of chapter 400, the agency may not issue a license to any health 28 care facility, health service provider, hospice, or part of a 29 30 health care facility which fails to receive a certificate of 31 need or an exemption for the licensed facility or service. 15

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The agency shall establish, by rule, uniform need 1 (3) 2 methodologies for health services and health facilities. In 3 developing uniform need methodologies, the agency shall, at a 4 minimum, consider the demographic characteristics of the 5 population, the health status of the population, service use 6 patterns, standards and trends, geographic accessibility, and 7 market economics. 8 (4) Prior to determining that there is a need for additional community nursing facility beds in any area of the 9 10 state, the agency shall determine that the need cannot be met through the provision, enhancement, or expansion of home and 11 12 community-based services. In determining such need, the agency 13 shall examine nursing home placement patterns and demographic 14 patterns of persons entering nursing homes and the 15 availability of and effectiveness of existing home-based and community-based service delivery systems at meeting the 16 17 long-term care needs of the population. The agency shall 18 recommend to the Office of Long-Term Care Policy changes that could be made to existing home-based and community-based 19 20 delivery systems to lessen the need for additional nursing 21 facility beds. 22 (5) (4) The agency shall establish by rule a nursing-home-bed-need methodology that reduces the community 23 24 nursing home bed need for the areas of the state where the 25 agency establishes pilot community diversion programs through the Title XIX aging waiver program. 26 27 (6) (5) The agency may adopt rules necessary to implement ss. 408.031-408.045. 28

29Section 13. Present subsections (13) through (39) of30section 409.912, Florida Statutes, are renumbered as

31 subsections (14) through (40), respectively, and subsection

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1 (13) is added to said section, to read:

2 409.912 Cost-effective purchasing of health care.--The agency shall purchase goods and services for Medicaid 3 4 recipients in the most cost-effective manner consistent with 5 the delivery of quality medical care. The agency shall maximize the use of prepaid per capita and prepaid aggregate б 7 fixed-sum basis services when appropriate and other alternative service delivery and reimbursement methodologies, 8 9 including competitive bidding pursuant to s. 287.057, designed 10 to facilitate the cost-effective purchase of a case-managed continuum of care. The agency shall also require providers to 11 12 minimize the exposure of recipients to the need for acute inpatient, custodial, and other institutional care and the 13 inappropriate or unnecessary use of high-cost services. The 14 15 agency may establish prior authorization requirements for 16 certain populations of Medicaid beneficiaries, certain drug 17 classes, or particular drugs to prevent fraud, abuse, overuse, and possible dangerous drug interactions. The Pharmaceutical 18 and Therapeutics Committee shall make recommendations to the 19 20 agency on drugs for which prior authorization is required. The agency shall inform the Pharmaceutical and Therapeutics 21 22 Committee of its decisions regarding drugs subject to prior 23 authorization. 24 (13)(a) The agency shall operate the Comprehensive 25 Assessment and Review (CARES) nursing facility preadmission screening program to ensure that Medicaid payment for nursing 26

27 <u>facility care is made only for individuals whose conditions</u>

28 require such care and to ensure that long-term care services

29 are provided in the setting most appropriate to the needs of

30 the person and in the most economical manner possible. The

31 CARES program shall also ensure that individuals participating

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in Medicaid home and community-based waiver programs meet 1 criteria for those programs, consistent with approved federal 2 3 waivers. 4 The agency may operate the CARES program using its (b) 5 own staff or may contract with another state agency or other 6 provider. If the agency contracts for the operation of the 7 program, the agency must maintain policy control of all 8 operations of the program, including the criteria applied and forms used, and perform regular monitoring to ensure effective 9 10 and efficient operation of the program and ensure that the 11 operation of the program is consistent with state and federal 12 law and rules. (c) The agency shall develop performance standards for 13 14 the CARES program. 15 (d) Prior to making payment for nursing facility services for a Medicaid recipient, the agency must verify that 16 17 the nursing facility preadmission screening program has 18 determined that the individual requires nursing facility care and that the individual cannot be safely served in 19 community-based programs. The nursing facility preadmission 20 21 screening program shall refer a Medicaid recipient to a community-based program if the individual could be safely 22 served at a lower cost and the recipient chooses to 23 24 participate in such program. (e) By January 1 of each year, the agency shall submit 25 a report to the Legislature and the Office of Long-Term Care 26 27 Policy describing the operations of the CARES program. The report must describe: 28 29 1. Rate of diversion to community alternative 30 programs. 2. CARES program staffing needs to achieve additional 31 18 File original & 9 copies 03/11/02 04:21 pm hbd0005

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diversions. 1 2 3. Reasons the program is unable to place individuals 3 in less restrictive settings when such individuals desired 4 such services and could have been served in such settings. 5 4. Barriers to appropriate placement, including 6 barriers due to policies or operations of other agencies or 7 state-funded programs. 8 5. Statutory changes necessary to ensure that individuals in need of long-term care services receive care in 9 10 the least restrictive environment. Section 14. Section 430.03, Florida Statutes, is 11 12 amended to read: 13 430.03 Purposes.--The purposes of the Department of 14 Elderly Affairs are to: 15 (1) Serve as the primary state agency responsible for administering human services programs for the elderly and for 16 17 developing policy recommendations for long-term care. Combat ageism and create public awareness and 18 (2) understanding of the potentials and needs of elderly persons. 19 20 (3) Study and plan for programs and services to meet identified and projected needs and to provide opportunities 21 for personal development and achievement of persons aged 60 22 23 years and older. 24 (4) Advocate quality programs and services for the 25 state's elderly population and on behalf of the individual citizen's needs. 26 27 (5) Coordinate interdepartmental policy development and program planning for all state agencies that provide 28 29 services for the elderly population in order to prevent 30 duplicative efforts, to maximize utilization of resources, and to ensure cooperation, communication, and departmental 31 19 03/11/02 04:21 pm File original & 9 copies

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linkages. 1 2 (6) Recommend state and local level organizational 3 models for the planning, coordination, implementation, and 4 evaluation of programs serving the elderly population. 5 (5) (7) Oversee implementation of federally funded and 6 state-funded programs and services for the state's elderly 7 population. 8 (6)(8) Recommend legislative budget requests for 9 programs and services for the state's elderly population. 10 (7) (9) Serve as a state-level information 11 clearinghouse and encourage the development of local-level 12 identifiable points of information and referral regarding all 13 federal, state, and local resources of assistance to elderly citizens. 14 15 (8)(10) Assist elderly persons to secure needed 16 services in accordance with personal choice and in a manner 17 that achieves or maintains autonomy and prevents, reduces, or 18 eliminates dependency. (9)(11) Promote the maintenance and improvement of the 19 20 physical well-being and mental health of elderly persons. 21 (10)(12) Promote opportunities for volunteerism among 22 the elderly population. (11)(13) Promote the prevention of neglect, abuse, or 23 24 exploitation of elderly persons unable to protect their own 25 interests. (12)(14) Eliminate and prevent inappropriate 26 27 institutionalization of elderly persons by promoting 28 community-based care, home-based care, or other forms of less 29 intensive care. 30 (13) (13) (15) Aid in the support of families and other 31 caregivers of elderly persons. 20

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(14)(16) Promote intergenerational relationships. 1 2 (17) Oversee aging research conducted or funded by any 3 state agency to ensure that such activities are coordinated 4 and directed to fulfill the intent and purposes of this act. Section 15. Section 430.04, Florida Statutes, is 5 6 amended to read: 7 430.04 Duties and responsibilities of the Department 8 of Elderly Affairs. -- The Department of Elderly Affairs shall: 9 (1) Administer human services and long-term care 10 programs, including programs funded under the federal Older Americans Act of 1965, as amended, and other programs that are 11 12 assigned to it by law. 13 (2) Be responsible for ensuring that each area agency 14 on aging operates in a manner to ensure that the elderly of 15 this state receive the best services possible. The department 16 shall rescind designation of an area agency on aging or take 17 intermediate measures against the agency, including corrective action, unannounced special monitoring, temporary assumption 18 of operation of one or more programs by the department, 19 placement on probationary status, imposing a moratorium on 20 agency action, imposing financial penalties for 21 nonperformance, or other administrative action pursuant to 22 chapter 120, if the department finds that: 23 24 (a) An intentional or negligent act of the agency has 25 materially affected the health, welfare, or safety of clients, or substantially and negatively affected the operation of an 26 27 aging services program. The agency lacks financial stability sufficient to 28 (b) 29 meet contractual obligations or that contractual funds have 30 been misappropriated. The agency has committed multiple or repeated 31 (C) 21 File original & 9 copies hbd0005 03/11/02 04:21 pm

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violations of legal and regulatory requirements or department 1 2 standards. 3 (d) The agency has failed to continue the provision or 4 expansion of services after the declaration of a state of 5 emergency. (e) The agency has failed to adhere to the terms of б 7 its contract with the department. 8 (f) The agency has failed to implement and maintain a 9 department-approved client grievance resolution procedure. 10 (3) Prepare and submit the state plan as required by 11 the United States Administration on Aging.to the Governor, 12 each Cabinet member, the President of the Senate, the Speaker 13 of the House of Representatives, the minority leaders of the 14 House and Senate, and chairpersons of appropriate House and 15 Senate committees a master plan for policies and programs in 16 the state related to aging. The plan must identify and assess 17 the needs of the elderly population in the areas of housing, 18 employment, education and training, medical care, long-term 19 care, preventive care, protective services, social services, 20 mental health, transportation, and long-term care insurance, 21 and other areas considered appropriate by the department. The plan must assess the needs of particular subgroups of the 22 23 population and evaluate the capacity of existing programs, 24 both public and private and in state and local agencies, to 25 respond effectively to identified needs. If the plan 26 recommends the transfer of any program or service from the 27 Department of Children and Family Services to another state department, the plan must also include recommendations that 28 29 provide for an independent third-party mechanism, as currently 30 exists in the Florida advocacy councils established in ss. 402.165 and 402.166, for protecting the constitutional and 31 22

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human rights of recipients of departmental services. The plan 1 2 must include policy goals and program strategies designed to 3 respond efficiently to current and projected needs. The plan 4 must also include policy goals and program strategies to 5 promote intergenerational relationships and activities. Public hearings and other appropriate processes shall be б 7 utilized by the department to solicit input for the 8 development and updating of the master plan from parties 9 including, but not limited to, the following: 10 (a) Elderly citizens and their families and 11 caregivers. 12 (b) Local-level public and private service providers, 13 advocacy organizations, and other organizations relating to 14 the elderly. 15 (c) Local governments. 16 (d) All state agencies that provide services to the 17 elderly. (e) University centers on aging. 18 19 Area agency on aging and community care for the <del>(f)</del> 20 elderly lead agencies. (4) Serve as an information clearinghouse at the state 21 level, and assist local-level information and referral 22 resources as a repository and means for dissemination of 23 24 information regarding all federal, state, and local resources 25 for assistance to the elderly in the areas of, but not limited to, health, social welfare, long-term care, protective 26 27 services, consumer protection, education and training, housing, employment, recreation, transportation, insurance, 28 29 and retirement. 30 (5) Recommend guidelines for the development of roles 31 for state agencies that provide services for the aging, review 23 File original & 9 copies hbd0005 03/11/02 04:21 pm 00703-0075-805735

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plans of agencies that provide such services, and relay these 1 2 plans to the Governor, each Cabinet member, the President of 3 the Senate, the Speaker of the House of Representatives, the 4 minority leaders of the House and Senate, and chairpersons of 5 appropriate House and Senate committees. (6) Recommend to the Governor, each Cabinet member, б 7 the President of the Senate, the Speaker of the House of 8 Representatives, the minority leaders of the House and Senate, and chairpersons of appropriate House and Senate committees an 9 10 organizational framework for the planning, coordination, implementation, and evaluation of programs related to aging, 11 12 with the purpose of expanding and improving programs and 13 opportunities available to the state's elderly population and enhancing a continuum of long-term care. This framework must 14 15 assure that: 16 (a) Performance objectives are established. 17 (b) Program reviews are conducted statewide. 18 (c) Each major program related to aging is reviewed 19 every 3 years. 20 (d) Agency budget requests reflect the results and 21 recommendations of such program reviews. 22 (e) Program decisions lead to the distinctive roles established for state agencies that provide aging services. 23 24 (7) Advise the Governor, each Cabinet member, the 25 President of the Senate, the Speaker of the House of Representatives, the minority leaders of the House and Senate, 26 27 and the chairpersons of appropriate House and Senate committees regarding the need for and location of programs 28 29 related to aging. 30 (8) Review and coordinate aging research plans of all 31 state agencies to ensure the conformance of research 24 File original & 9 copies hbd0005 03/11/02 04:21 pm

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objectives to issues and needs addressed in the master plan 1 2 for policies and programs related to aging. The research 3 activities that must be reviewed and coordinated by the 4 department include, but are not limited to, contracts with 5 academic institutions, development of educational and training curriculums, Alzheimer's disease and other medical research, 6 7 studies of long-term care and other personal assistance needs, and design of adaptive or modified living environments. 8 (9) Review budget requests for programs related to 9 10 aging for compliance with the master plan for policies and programs related to aging before submission to the Governor 11 12 and the Legislature. 13 (10) Update the master plan for policies and programs 14 related to aging every 3 years. 15 (11) Review implementation of the master plan for programs and policies related to aging and annually report to 16 17 the Governor, each Cabinet member, the President of the Senate, the Speaker of the House of Representatives, the 18 minority leaders of the House and Senate, and the chairpersons 19 of appropriate House and Senate committees the progress 20 towards implementation of the plan. 21 (12) Request other departments that administer 22 programs affecting the state's elderly population to amend 23 24 their plans, rules, policies, and research objectives as 25 necessary to conform with the master plan for policies and programs related to aging. 26 27 (5)(13) Hold public meetings regularly throughout the state for purposes of receiving information and maximizing the 28 visibility of important issues. 29 30 (6)(14) Conduct policy analysis and program evaluation studies assigned by the Legislature. 31 25

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(7)(15) Assist the Governor, each Cabinet member, the 1 2 President of the Senate, the Speaker of the House of 3 Representatives, the minority leaders of the House and Senate, 4 and the chairpersons of appropriate House and Senate committees in the conduct of their responsibilities in such 5 6 capacities as they consider appropriate. 7 (8)(16) Call upon appropriate agencies of state government for such assistance as is needed in the discharge 8 9 of its duties. All agencies shall cooperate in assisting the 10 department in carrying out its responsibilities as prescribed by this section. However, no provision of law with respect to 11 12 confidentiality of information may be violated. Section 16. Section 430.041, Florida Statutes, is 13 created to read: 14 15 430.041 Office of Long-Term Care Policy.--16 (1) There is established within the Department of 17 Elderly Affairs the Office of Long-Term Care Policy to analyze 18 the state's long-term care system and increase the availability and the use of noninstitutional settings to 19 provide care to the elderly and to ensure coordination among 20 the agencies responsible for the long-term care continuum. The 21 Department of Elderly Affairs shall provide administrative 22 support and service to the Office of Long-Term Care Policy. 23 24 The office is not subject to control, supervision, or 25 direction by the Department of Elderly Affairs in the performance of its duties. 26 27 (2) The Office of Long-Term Care Policy shall: (a) Ensure close communication and coordination among 28 state agencies involved in developing and administering a more 29 30 efficient and coordinated long-term care service delivery 31 system in this state.

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Ensure that state agencies involved in developing 1 (b) 2 long-term care policy have considered the preferences of 3 consumers, providers, and local elected officials. 4 Study and plan for programs to meet identified and (C) 5 projected needs of people who need long-term care. 6 Develop a State Long-Term Care Plan and policy (d) 7 recommendations to ensure that appropriate long-term care is available in institutional and community-based settings. 8 9 Update the State Long-Term Care Plan every 3 (e) 10 years. 11 (f) Recommend state and local organizational models 12 for the planning, coordination, implementation, and evaluation 13 of programs serving people with long-term care needs. 14 Make recommendations to agencies for budget (q) 15 requests for long-term care programs to ensure consistency 16 with the State Long-Term Care Plan. 17 (h) Develop and recommend strategies for ensuring compliance with all federal requirements regarding access to 18 and choice of services and providers. 19 Identify duplication and unnecessary service 20 (i) 21 provision in the long-term care system and make recommendations to decrease inappropriate service provision. 22 (j) Make recommendations to increase consistency in 23 24 administering the state's long-term care programs. Ensure regular periodic evaluations of all 25 (k) 26 programs providing long-term care services to determine 27 whether the programs are cost-effective, of high quality, operating efficiently, and consistent with state policy. 28 29 Monitor characteristics of people applying for and (1)30 entering institutional and community-based long-term care, and changes to these characteristics over time, to determine the 31 27 03/11/02 04:21 pm File original & 9 copies

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reasons and causes for changing levels of state expenditures 1 2 and to determine services that the state's system of community-based care could provide to lessen the need for 3 4 facility-based care. 5 (m) Recommend changes to the preadmission screening 6 system of state nursing homes to ensure that individuals in 7 need of long-term care are served in settings most appropriate 8 to their needs. (n) Recommend mechanisms to encourage families and 9 10 other caregivers to assist people in need of long-term care 11 services to remain as independent as possible. 12 (o) Analyze waiting lists for long-term care services 13 and recommend strategies to reduce the time applicants wait 14 for services. 15 (p) Oversee research on aging conducted or funded by any state agency to ensure that such research is coordinated 16 17 and directed to fulfill the intent and purposes of this act. 18 (3) The director of the Office of Long-Term Care Policy shall be appointed by and serve at the pleasure of the 19 Governor. The director of the Office of Long-Term Care Policy 20 21 shall report to the Governor. 22 (4) The Office of Long-Term Care Policy shall have an advisory board, whose chair is to be selected by the board. 23 24 The board shall consist of: 25 (a) A member of the Senate, appointed by the President 26 of the Senate. 27 (b) A member of the House of Representatives, appointed by the Speaker of the House of Representatives. 28 29 The Secretary of Health Care Administration. (C) The Secretary of Elderly Affairs. 30 (d) 31 (e) The state Medicaid Director. 28 03/11/02 04:21 pm File original & 9 copies hbd0005 00703-0075-805735

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Two representatives of providers of long-term care 1 (f) services for elderly persons, appointed by the Governor. 2 3 Two representatives of people receiving long-term (g) 4 care services, appointed by the Governor from groups 5 representing elderly persons. 6 (5) Members of the advisory board shall serve without 7 compensation, but are entitled to receive reimbursement for travel and per diem as provided in s. 112.061. 8 The advisory board shall meet at least monthly or 9 (6) 10 more often at the call of its chair or at the request of a 11 majority of its members. 12 (7) The office shall submit a report of its policy, legislative, and funding recommendations to the Governor and 13 the Legislature by January 1 of each year. 14 15 (8) Personnel who are solely under the direction of 16 the Office of Long-Term Care Policy shall be provided by the 17 Agency for Health Care Administration and the Department of 18 Elderly Affairs. The office shall call upon appropriate agencies of state government, including the centers on aging 19 in the State University System, for assistance needed in 20 discharging its duties. All agencies shall assist the office 21 22 in carrying out its responsibilities prescribed by this 23 section. Section 17. Section 430.7031, Florida Statutes, is 24 25 created to read: 430.7031 Nursing home transition program.--The 26 27 department and the Agency for Health Care Administration: (1) Shall implement a system of care designed to 28 29 assist individuals residing in nursing homes to regain 30 independence and to move to less costly settings. Shall collaboratively work to identify long-stay 31 (2) 29 File original & 9 copies 03/11/02 hbd0005 04:21 pm 00703-0075-805735

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nursing home residents who are able to move to community 1 2 placements, and to provide case management and supportive services to such individuals while they are in nursing homes 3 4 to assist such individuals in moving to less expensive and 5 less restrictive settings. (3) Shall modify existing service delivery systems or б 7 develop new service delivery systems to economically and 8 efficiently meet such individuals' care needs. (4) Shall offer such individuals priority placement 9 10 and services in all home-based and community-based care 11 programs, and shall ensure that funds are available to provide 12 services to individuals to whom services are offered. (5) May seek federal waivers necessary to administer 13 14 this section. 15 Section 18. Subsection (4) of section 409.908, Florida 16 Statutes, is amended to read: 17 409.908 Reimbursement of Medicaid providers.--Subject 18 to specific appropriations, the agency shall reimburse Medicaid providers, in accordance with state and federal law, 19 20 according to methodologies set forth in the rules of the agency and in policy manuals and handbooks incorporated by 21 reference therein. These methodologies may include fee 22 schedules, reimbursement methods based on cost reporting, 23 24 negotiated fees, competitive bidding pursuant to s. 287.057, 25 and other mechanisms the agency considers efficient and effective for purchasing services or goods on behalf of 26 27 recipients. Payment for Medicaid compensable services made on behalf of Medicaid eligible persons is subject to the 28 29 availability of moneys and any limitations or directions 30 provided for in the General Appropriations Act or chapter 216. 31 Further, nothing in this section shall be construed to prevent 30

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or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or making any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act, provided the adjustment is consistent with legislative intent.

7 (4) Subject to any limitations or directions provided 8 for in the General Appropriations Act, alternative health 9 plans, health maintenance organizations, and prepaid health 10 plans shall be reimbursed a fixed, prepaid amount negotiated, or competitively bid pursuant to s. 287.057, by the agency and 11 12 prospectively paid to the provider monthly for each Medicaid 13 recipient enrolled. The amount may not exceed the average amount the agency determines it would have paid, based on 14 15 claims experience, for recipients in the same or similar category of eligibility. The agency shall calculate 16 17 capitation rates on a regional basis and, beginning September 1, 1995, shall include age-band differentials in such 18 calculations. Effective July 1, 2001, the cost of exempting 19 statutory teaching hospitals, specialty hospitals, and 20 community hospital education program hospitals from 21 reimbursement ceilings and the cost of special Medicaid 22 payments shall not be included in premiums paid to health 23 24 maintenance organizations or prepaid health care plans. Each 25 rate semester, the agency shall calculate and publish a Medicaid hospital rate schedule that does not reflect either 26 27 special Medicaid payments or the elimination of rate reimbursement ceilings, to be used by hospitals and Medicaid 28 health maintenance organizations, in order to determine the 29 30 Medicaid rate referred to in ss. 409.912(17)409.912(16), 409.9128(5), and 641.513(6). 31

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Section 19. Section 430.708, Florida Statutes, is 1 2 amended to read: 3 430.708 Certificate of need.--To ensure that Medicaid 4 community diversion pilot projects result in a reduction in 5 the projected average monthly nursing home caseload, the agency shall, in accordance with the provisions of s. б 7 408.034(5)<del>s. 408.034(4)</del>: 8 (1) Reduce the projected nursing home bed need in each certificate-of-need batching cycle in the community diversion 9 10 pilot project areas. 11 (2) Reduce the conditions imposed on existing nursing 12 homes or those to be constructed, in accordance with the 13 number of projected community diversion slots. 14 (3) Adopt rules to reduce the number of beds in 15 Medicaid-participating nursing homes eligible for Medicaid, through a Medicaid-selective contracting process or some other 16 17 appropriate method. (4) Determine the feasibility of increasing the 18 nursing home occupancy threshold used in determining nursing 19 home bed needs under the certificate-of-need process. 20 Section 20. Subsection (4) of section 641.386, Florida 21 22 Statutes, is amended to read: 23 641.386 Agent licensing and appointment required; 24 exceptions. --25 (4) All agents and health maintenance organizations shall comply with and be subject to the applicable provisions 26 27 of ss. 641.309 and 409.912(19)409.912(18), and all companies and entities appointing agents shall comply with s. 626.451, 28 29 when marketing for any health maintenance organization 30 licensed pursuant to this part, including those organizations 31 under contract with the Agency for Health Care Administration 32

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to provide health care services to Medicaid recipients or any 1 2 private entity providing health care services to Medicaid 3 recipients pursuant to a prepaid health plan contract with the 4 Agency for Health Care Administration. 5 Section 21. This act shall take effect July 1, 2002. 6 7 ============ ТТТГ. Е 8 AMENDMENT ============== 9 And the title is amended as follows: 10 remove: the entire title 11 12 and insert: A bill to be entitled 13 14 An act relating to long-term care; amending s. 15 20.41, F.S.; providing for administration of the State Long-Term Care Ombudsman Council by 16 17 the Department of Elderly Affairs; amending s. 400.0063, F.S.; locating the Office of the 18 State Long-Term Care Ombudsman in the 19 20 department; providing for appointment of the ombudsman by the Secretary of Elderly Affairs; 21 amending s. 400.0065, F.S.; requiring the 22 secretary's approval of staff for the local 23 24 ombudsman councils; deleting requirement that 25 the ombudsman prepare an annual legislative budget request; revising rulemaking authority; 26 27 amending s. 400.0067, F.S.; revising duties of the State Long-Term Care Ombudsman Council; 28 providing duties of the department and 29 30 secretary; amending s. 400.0071, F.S.; revising 31 procedures relating to complaints; amending s. 33

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400.0087, F.S.; revising provisions relating to 1 2 agency oversight; amending s. 400.0089, F.S.; 3 revising reporting responsibilities; repealing 4 s. 400.0066(2) and (3), F.S., relating to 5 administrative support for the ombudsman program and interference with ombudsman staff 6 or volunteers; creating s. 409.221, F.S.; 7 creating the "Florida Consumer-Directed Care 8 Act"; providing legislative findings; providing 9 10 legislative intent; establishing the consumer-directed care program; providing for 11 12 consumer selection of certain long-term care 13 services and providers; providing for 14 interagency agreements between the Agency for 15 Health Care Administration and the Department of Elderly Affairs, the Department of Health, 16 17 and the Department of Children and Family Services; providing for program eligibility and 18 enrollment; providing definitions; providing 19 for consumer budget allowances and purchasing 20 guidelines; specifying authorized services; 21 providing roles and responsibilities of 22 consumers, the agency and departments, and 23 24 fiduciary intermediaries; providing background 25 screening requirements for persons who render care under the program; providing rulemaking 26 27 authority of the agency and departments; requiring the agency to apply for federal 28 29 waivers as necessary; requiring ongoing program 30 reviews and annual reports; requiring the 31 Agency for Health Care Administration and the

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Department of Elderly Affairs to submit a plan 1 2 to the Governor and Legislature for reducing 3 nursing home bed days funded under the Medicaid 4 program; amending s. 400.179, F.S.; providing 5 an exception from a bond requirement for certain mortgage arrangements; amending s. 6 7 408.034, F.S.; providing additional requirements for the Agency for Health Care 8 Administration in determining the need for 9 10 additional nursing facility beds; amending s. 409.912, F.S.; requiring the Agency for Health 11 12 Care Administration to establish a nursing facility preadmission screening program; 13 14 authorizing the agency to operate the program 15 by contract; requiring an annual report to the Legislature and the Office of Long-Term Care 16 17 Policy; amending s. 430.03, F.S.; revising the purposes of the Department of Elderly Affairs 18 with respect to developing policy, making 19 recommendations, coordinating activities, and 20 overseeing research; amending s. 430.04, F.S.; 21 revising the duties of the Department of 22 Elderly Affairs with respect to developing 23 24 programs and policies related to aging; creating s. 430.041, F.S.; establishing the 25 Office of Long-Term Care Policy within the 26 27 Department of Elderly Affairs; requiring the office to develop a State Long-Term Care Plan; 28 requiring the office to make recommendations 29 30 for coordinating the services provided by state 31 agencies; providing for appointment of the

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director of the Office of Long-Term Care 1 2 Policy; providing for the appointment of an 3 advisory board to the Office of Long-Term Care 4 Policy; specifying membership in the advisory 5 board; providing for reimbursement of per diem and travel expenses for members of the advisory 6 7 board; requiring that the office submit an annual report to the Governor and Legislature; 8 9 requiring the Agency for Health Care 10 Administration and the Department of Elderly Affairs to provide staff and support services 11 12 for the Office of Long-Term Care Policy; creating s. 430.7031, F.S.; requiring the 13 Department of Elderly Affairs and the Agency 14 15 for Health Care Administration to implement a 16 nursing home transition program; providing 17 requirements for the program; amending ss. 409.908, 430.708, and 641.386, F.S., relating 18 to reimbursement of Medicaid providers, 19 certificates of need, and agent licensing and 20 appointment; conforming cross references to 21 changes made by the act; providing an effective 22 23 date. 24 25 26 27 28 29 30 31 36

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