HOUSE AMENDMENT

Bill No. CS/CS/HB 817

Amendment No. ____ (for drafter's use only) CHAMBER ACTION Senate House 1 2 3 4 5 ORIGINAL STAMP BELOW 6 7 8 9 10 Representative(s) Lerner offered the following: 11 12 13 Amendment (with title amendment) On page 2, between lines 7 and 8, 14 15 16 insert: 17 Section 2. The Agency for Health Care Administration shall conduct a study of health care services provided to the 18 19 medically fragile or medical-technology-dependent children in 20 the state and conduct a pilot program in Dade County to provide subacute pediatric transitional care to a maximum of 21 22 30 children at any one time. The purpose of the study and the 23 pilot program are to determine ways to permit medically 24 fragile or medical-technology-dependent children to 25 successfully make a transition from acute care in a health 26 care institution to live with their families when possible, 27 and to provide cost-effective, subacute transitional care 28 services. 29 Section 3. The Agency for Health Care Administration, 30 in cooperation with the Children's Medical Services Program in 31 the Department of Health, shall conduct a study to identify 1 File original & 9 copies hbd0001 03/12/02 01:15 pm 00817-0119-250331

Amendment No. ____ (for drafter's use only)

the total number of medically fragile or 1 medical-technology-dependent children, from birth through age 2 3 21, in the state. By January 1, 2003, the agency must report 4 to the Legislature regarding the children's ages, the locations where the children are served, the types of services 5 received, itemized costs of the services, and the sources of 6 7 funding that pay for the services, including the proportional share when more than one funding source pays for a service. 8 The study must include information regarding medically fragile 9 10 or medical-technology-dependent children residing in hospitals, nursing homes, and medical foster care, and those 11 12 who live with their parents. The study must describe children served in prescribed pediatric extended-care centers, 13 including their ages and the services they receive. The report 14 15 must identify the total services provided for each child and the method for paying for those services. The report must also 16 17 identify the number of such children who could, if appropriate 18 transitional services were available, return home or move to a 19 less-institutional setting. Section 4. (1) Within 30 days after the effective 20 date of this act, the agency shall establish minimum staffing 21 standards and quality requirements for a subacute pediatric 22 transitional care center to be operated as a 2-year pilot 23 24 program in Dade County. The pilot program must operate under 25 the license of a hospital licensed under chapter 395, Florida Statutes, or a nursing home licensed under chapter 400, 26 27 Florida Statutes, and shall use existing beds in the hospital or nursing home. A child's placement in the subacute pediatric 28 29 transitional care center may not exceed 90 days. The center 30 shall arrange for an alternative placement at the end of a child's stay and a transitional plan for children expected to 31 2

File original & 9 copies 03/12/02 hbd0001 01:15 pm

00817-0119-250331

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Amendment No. ____ (for drafter's use only)

remain in the facility for the maximum allowed stay. 1 2 (2) Within 60 days after the effective date of this 3 act, the agency must amend the state Medicaid plan and request 4 any federal waivers necessary to implement and fund the pilot 5 program. 6 (3) The subacute pediatric transitional care center 7 must require level I background screening as provided in chapter 435, Florida Statutes, for all employees or 8 prospective employees of the center who are expected to, or 9 10 whose responsibilities may require them to, provide personal care or services to children, have access to children's living 11 12 areas, or have access to children's funds or personal 13 property. Section 5. (1) The subacute pediatric transitional 14 15 care center must have an advisory board. Membership on the advisory board must include, but need not be limited to: 16 17 (a) A physician and an advanced registered nurse 18 practitioner who is familiar with services for medically fragile or medical-technology-dependent children; 19 (b) A registered nurse who has experience in the care 20 of medically fragile or medical-technology-dependent children; 21 (c) A child development specialist who has experience 22 23 in the care of medically fragile or 24 medical-technology-dependent children and their families; 25 (d) A social worker who has experience in the care of medically fragile or medical-technology-dependent children and 26 27 their families; and 28 (e) A consumer representative who is a parent or 29 guardian of a child placed in the center. 30 (2) The advisory board shall: (a) Review the policy and procedure components of the 31 3 File original & 9 copies 03/12/02

01:15 pm

hbd0001

Amendment No. ____ (for drafter's use only)

center to assure conformance with applicable standards 1 2 developed by the Agency for Health Care Administration; and 3 Provide consultation with respect to the (b) 4 operational and programmatic components of the center. 5 Section 6. (1) The subacute pediatric transitional 6 care center must have written policies and procedures 7 governing the admission, transfer, and discharge of children. (2) The admission of each child to the center must be 8 under the supervision of the center nursing administrator or 9 10 his or her designee, and must be in accordance with the center's policies and procedures. Each Medicaid admission must 11 12 be approved by the Department of Health, Children's Medical 13 Services Multidisciplinary Assessment Team, in conjunction 14 with the Agency for Health Care Administration, as appropriate 15 for placement in the facility. (3) Each child admitted to the center shall be 16 17 admitted upon prescription of the Medical Director of the 18 center, licensed pursuant to chapter 458 or 459, and the child shall remain under the care of the medical director and 19 advanced registered nurse practitioner for the duration of his 20 21 or her stay in the center. (4) Each child admitted to the center must meet at 22 least the following criteria: 23 24 The child must be medically fragile or (a) medical-technology-dependent. 25 The child may not, prior to admission, present 26 (b) 27 significant risk of infection to other children or personnel. 28 The medical and nursing directors shall review, on a 29 case-by-case basis, the condition of any child who is 30 suspected of having an infectious disease to determine whether 31 admission is appropriate.

03/12/02 01:15 pm File original & 9 copies

hbd0001

4

Amendment No. ____ (for drafter's use only)

The child must be medically stabilized and require 1 (C) 2 skilled nursing care or other interventions. If the child meets the criteria specified in 3 (5) 4 paragraphs (4)(a), (b), and (c), the medical director or 5 nursing director of the center shall implement a preadmission 6 plan that delineates services to be provided and appropriate 7 sources for such services. (a) If the child is hospitalized at the time of 8 referral, preadmission planning must include the participation 9 10 of the child's parent or guardian and relevant medical, nursing, social services, and developmental staff to assure 11 12 that the hospital's discharge plans will be implemented following the child's placement in the center. 13 (b) A consent form, outlining the purpose of the 14 15 center, family responsibilities, authorized treatment, appropriate release of liability, and emergency disposition 16 17 plans, must be signed by the parent or guardian and witnessed 18 before the child is admitted to the center. The parent or guardian shall be provided a copy of the consent form. 19 Section 7. The provisions of this pilot program shall 20 21 be implemented to the extent available appropriations contained in the annual General Appropriations Act are 22 specifically designated for the purposes contained within the 23 24 pilot program. Section 8. By January 1, 2003, the Agency for Health 25 26 Care Administration shall report to the Legislature concerning 27 the progress of the medically fragile or 28 medical-technology-dependent children pilot program. By 29 January 1, 2004, the agency shall submit to the Legislature a 30 report on the success of the pilot program. 31

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1 ========= T I T L E A M E N D M E N T ========= 2 And the title is amended as follows: 3 On page 1, line 9, after the semicolon, 4 5 insert: 6 requiring the Agency for Health Care 7 Administration to conduct a study of health 8 care services provided to medically fragile or 9 medical-technology-dependent children; 10 requiring the Agency for Health Care Administration to conduct a pilot program for a 11 12 subacute pediatric transitional care center; 13 requiring background screening of center 14 personnel; requiring the agency to amend the 15 Medicaid state plan and seek federal waivers as 16 necessary; requiring the center to have an 17 advisory board; providing for membership on the advisory board; providing requirements for the 18 admission, transfer, and discharge of a child 19 20 to the center; requiring the agency to submit certain reports to the Legislature; 21 22 23 24 25 26 27 28 29 30 31 6

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03/12/02 01:15 pm

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