1 A bill to be entitled 2 An act relating to certified geriatric 3 specialty nursing; providing a short title; 4 requiring the Agency for Workforce Innovation 5 to establish a pilot program for delivery of 6 certified geriatric specialty nursing 7 education; specifying eligibility requirements for certified nursing assistants to obtain 8 9 certified geriatric specialty nursing education; specifying requirements for the 10 education of certified nursing assistants to 11 12 prepare for certification as a certified geriatric specialist; creating a Certified 13 14 Geriatric Specialty Nursing Initiative Steering 15 Committee; providing for the composition of and manner of appointment to the Certified 16 17 Geriatric Specialty Nursing Initiative Steering Committee; providing responsibilities of the 18 19 steering committee; providing for reimbursement for per diem and travel expenses; requiring the 20 21 Agency for Workforce Innovation to conduct or contract for an evaluation of the pilot program 22 23 for delivery of certified geriatric specialty nursing education; requiring the evaluation to 24 include recommendations regarding the expansion 25 26 of the delivery of certified geriatric 27 specialty nursing education in nursing homes; 28 requiring the Agency for Workforce Innovation 29 to report to the Governor and Legislature 30 regarding the status and evaluation of the pilot program; creating s. 464.0125, F.S.; 31

1 providing definitions; providing requirements 2 for persons to become certified geriatric 3 specialists; specifying fees; providing for 4 articulation of geriatric specialty nursing 5 coursework and practical nursing coursework; 6 providing practice standards and grounds for 7 which certified geriatric specialists may be subject to discipline by the Board of Nursing; 8 9 creating restrictions on the use of professional nursing titles; prohibiting the 10 use of certain professional titles; providing 11 12 penalties; authorizing approved nursing programs to provide education for the 13 14 preparation of certified geriatric specialists 15 without further board approval; authorizing certified geriatric specialists to supervise 16 17 the activities of others in nursing home facilities according to rules by the Board of 18 19 Nursing; revising terminology relating to nursing to conform to the certification of 20 21 geriatric specialists; amending s. 381.00315, 22 F.S.; revising requirements for the 23 reactivation of the licenses of specified health care practitioners in the event of 24 public health emergency to include certified 25 26 geriatric specialists; amending s. 400.021, 27 F.S.; including services provided by a 28 certified geriatric specialist within the 29 definition of nursing service; amending s. 400.211, F.S.; revising requirements for 30 persons employed as nursing assistants to 31

1 conform to the certification of certified 2 geriatric specialists; amending s. 400.23, 3 F.S.; specifying that certified geriatric 4 specialists shall be considered licensed 5 nursing staff; authorizing licensed practical 6 nurses to supervise the activities of certified 7 geriatric specialists in nursing home facilities according to rules adopted by the 8 9 Board of Nursing; amending s. 409.908, F.S.; revising the methodology for reimbursement of 10 Medicaid program providers to include services 11 12 of certified geriatric specialists; amending s. 458.303, F.S.; revising exceptions to the 13 14 practice of medicine to include services 15 delegated to a certified geriatric specialist under specified circumstances; amending s. 16 17 1009.65, F.S.; revising eligibility for the Medical Education Reimbursement and Loan 18 19 Repayment Program to include certified geriatric specialists; amending s. 1009.66, 20 21 F.S.; revising eligibility requirements for the 22 Nursing Student Loan Forgiveness Program to 23 include certified geriatric specialists; 24 providing an appropriation; amending s. 464.201, F.S.; defining terms; amending s. 25 26 464.202, F.S.; authorizing the Board of Nursing 27 to adopt rules regarding the practice and 28 supervision of certified nursing assistants; 29 providing an effective date.

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

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Section 1. This act may be cited as the "Clara Ramsey Care of the Elderly Act."

Section 2. <u>Certified Geriatric Specialist Preparation</u>
Pilot Program.--

- (1) The Agency for Workforce Innovation shall establish a pilot program for delivery of geriatric nursing education to certified nursing assistants who wish to become certified geriatric specialists. The agency shall select two pilot sites in nursing homes that have received the Gold Seal designation under section 400.235, Florida Statutes; have been designated as a teaching nursing home under section 430.80, Florida Statutes; or have not received a class I or class II deficiency within the 30 months preceding application for this program.
- (2) To be eligible to receive geriatric nursing education, a certified nursing assistant must have been employed by a participating nursing home for at least 1 year and have received a high school diploma or its equivalent.
- (3) The education shall be provided at the worksite and in coordination with the certified nursing assistant's work schedule.
- (4) Faculty shall provide the instruction under an approved nursing program pursuant to section 464.019, Florida Statutes.
- assistant to meet the requirements for certification as a geriatric specialist. The didactic and clinical education shall include all portions of the practical nursing curriculum pursuant to section 464.019, Florida Statutes, except for pediatric and obstetric/maternal-child education, and shall include additional education in the care of ill, injured, or

1	infirm geriatric patients and the maintenance of health, the
2	prevention of injury, and the provision of palliative care for
3	geriatric patients.
4	Section 3. Certified Geriatric Specialty Nursing
5	Initiative Steering Committee
6	(1) In order to guide the implementation of the
7	Certified Geriatric Specialist Preparation Pilot Program,
8	there is created a Certified Geriatric Specialty Nursing
9	Initiative Steering Committee. The steering committee shall be
LO	<pre>composed of the following members:</pre>
L1	(a) The chair of the Board of Nursing or his or her
L2	designee;
L3	(b) A representative of the Agency for Workforce
L4	Innovation, appointed by the Director of Workforce Innovation;
L5	(c) A representative of Workforce Florida, Inc.,
L6	appointed by the chair of the Board of Directors of Workforce
L7	Florida, Inc.;
L8	(d) A representative of the Department of Education,
L9	appointed by the Secretary of Education;
20	(e) A representative of the Agency for Health Care
21	Administration, appointed by the Secretary of Health Care
22	Administration;
23	(f) The Director of the Florida Center for Nursing;
24	<u>and</u>
25	(g) A representative of a Gold Seal nursing home that
26	is not one of the pilot program sites, appointed by the
27	Secretary of Health Care Administration.
28	(2) The steering committee shall:
29	(a) Provide consultation and guidance to the Agency
30	for Workforce Innovation on matters of policy during the
31	implementation of the pilot program; and

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(b) Provide oversight to the evaluation of the pilot
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   program.
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          (3) Members of the steering committee are entitled to
   reimbursement for per diem and travel expenses under section
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    112.061, Florida Statutes.
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          (4) The steering committee shall complete its
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    activities by June 30, 2006, and the authorization for the
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    steering committee ends on that date.
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           Section 4. Evaluation of the Certified Geriatric
    Specialist Preparation Pilot Program. -- The Agency for
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    Workforce Innovation, in consultation with the Certified
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    Geriatric Specialty Nursing Initiative Steering Committee,
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    shall conduct, or contract for an evaluation of the pilot
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   program. The agency shall ensure that an evaluation report is
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    submitted to the Governor, the President of the Senate, and
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    the Speaker of the House of Representatives by January 1,
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    2006. The evaluation must address the experience and success
    of the certified nursing assistants in the pilot program and
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   must contain recommendations regarding the expansion of the
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    delivery of geriatric nursing education in nursing homes.
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           Section 5. Reports. -- The Agency for Workforce
    Innovation shall submit status reports and recommendations
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    regarding legislation necessary to further the implementation
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    of the pilot program to the Governor, the President of the
    Senate, and the Speaker of the House of Representatives on
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    January 1, 2004, January 1, 2005, and January 1, 2006.
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           Section 6. Section 464.0125, Florida Statutes, is
    created to read:
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           464.0125 Certified geriatric specialists;
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    certification requirements .--
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          (1) DEFINITIONS; RESPONSIBILITIES. --
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- (a) As used in this section, the term:
- 1. "Certified geriatric specialist" means a person who meets the qualifications specified in this section and who is certified by the board to practice as a certified geriatric specialist.
- 2. "Geriatric patient" means any patient who is 60 years of age or older.
- "Practice of certified geriatric specialty nursing" means the performance of selected acts in facilities licensed under part II or part III of chapter 400, including the administration of treatments and medications, in the care of ill, injured, or infirm geriatric patients and the promotion of wellness, maintenance of health, and prevention of illness of geriatric patients under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist. The scope of practice of a certified geriatric specialist includes the practice of practical nursing as defined in s. 464.003 for geriatric patients only, except for any act in which instruction and clinical knowledge of pediatric nursing or obstetric/maternal-child nursing is required. A certified geriatric specialist, while providing nursing services in facilities licensed under part II or part III of chapter 400, may supervise the activities of certified nursing assistants and other unlicensed personnel providing services in such facilities in accordance with rules adopted by the board.
- (b) The certified geriatric specialist shall be responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in performing certified geriatric specialty nursing.

(2) CERTIFICATION. --

- (a) Any certified nursing assistant desiring to be certified as a certified geriatric specialist shall apply to the department and submit proof that he or she holds a current certificate as a certified nursing assistant under this part and has satisfactorily completed the following requirements:
- 1. Is in good mental and physical health, is a recipient of a high school diploma or its equivalent and has completed the requirements for graduation from an approved program for nursing or its equivalent, as determined by the board, for the preparation of licensed practical nurses, except for instruction and clinical knowledge of pediatric nursing or obstetric/maternal-child nursing. Any program that is approved on July 1, 2003, by the board for the preparation of registered nurses or licensed practical nurses may provide education for the preparation of certified geriatric specialists without further board approval.
- 2. Has the ability to communicate in the English language, which may be determined by an examination given by the department.
- 3. Has provided sufficient information, which must be submitted by the department for a statewide criminal records correspondence check through the Department of Law Enforcement.
- (b) Each applicant who meets the requirements of this subsection shall, unless denied pursuant to s. 464.018, be entitled to certification as a certified geriatric specialist. The board shall certify, and the department shall issue a certificate to practice as a certified geriatric specialist to, any certified nursing assistant meeting the qualifications in this section. The board shall establish an application fee

not to exceed \$100 and a biennial renewal fee not to exceed \$50. The board may adopt rules to administer this section.

- (c) A person receiving certification under this
 section shall:
- 1. Work only within the confines of a facility licensed under part II or part III of chapter 400.
 - 2. Care for geriatric patients only.
- 3. Comply with the minimum standards of practice for nurses and be subject to disciplinary action for violations of s. 464.018.
- (3) ARTICULATION.--Any certified geriatric specialist who completes the additional instruction and coursework in an approved nursing program pursuant to s. 464.019 for the preparation of practical nursing in the areas of pediatric nursing and obstetric/maternal-child nursing shall, unless denied pursuant to s. 464.018, be entitled to licensure as a licensed practical nurse if the applicant otherwise meets the requirements of s. 464.008.
- (4) TITLES AND ABBREVIATIONS; RESTRICTIONS; PENALTIES.--
- (a) Only persons who hold certificates to practice as certified geriatric specialists in this state or who are performing services within the practice of certified geriatric specialty nursing pursuant to the exception set forth in s. 464.022(8) shall have the right to use the title "Certified Geriatric Specialist" and the abbreviation "C.G.S."
- (b) No person shall practice or advertise as, or assume the title of, certified geriatric specialist or use the abbreviation "C.G.S." or take any other action that would lead the public to believe that person was certified as such or is performing services within the practice of certified geriatric

specialty nursing pursuant to the exception set forth in s. 464.022(8), unless that person is certified to practice as such.

- (c) A violation of this subsection is a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.
- (5) VIOLATIONS AND PENALTIES.--Practicing certified geriatric specialty nursing, as defined in this section, without holding an active certificate to do so constitutes a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

Section 7. Paragraph (b) of subsection (1) of section 381.00315, Florida Statutes, is amended to read:

381.00315 Public health advisories; public health emergencies.—The State Health Officer is responsible for declaring public health emergencies and issuing public health advisories.

- (1) As used in this section, the term:
- (b) "Public health emergency" means any occurrence, or threat thereof, whether natural or man made, which results or may result in substantial injury or harm to the public health from infectious disease, chemical agents, nuclear agents, biological toxins, or situations involving mass casualties or natural disasters. Prior to declaring a public health emergency, the State Health Officer shall, to the extent possible, consult with the Governor and shall notify the Chief of Domestic Security Initiatives as created in s. 943.03. The declaration of a public health emergency shall continue until the State Health Officer finds that the threat or danger has been dealt with to the extent that the emergency conditions no longer exist and he or she terminates the declaration.

However, a declaration of a public health emergency may not continue for longer than 60 days unless the Governor concurs in the renewal of the declaration. The State Health Officer, upon declaration of a public health emergency, may take actions that are necessary to protect the public health. Such actions include, but are not limited to:

- 1. Directing manufacturers of prescription drugs or over-the-counter drugs who are permitted under chapter 499 and wholesalers of prescription drugs located in this state who are permitted under chapter 499 to give priority to the shipping of specified drugs to pharmacies and health care providers within geographic areas that have been identified by the State Health Officer. The State Health Officer must identify the drugs to be shipped. Manufacturers and wholesalers located in the state must respond to the State Health Officer's priority shipping directive before shipping the specified drugs.
- 2. Notwithstanding chapters 465 and 499 and rules adopted thereunder, directing pharmacists employed by the department to compound bulk prescription drugs and provide these bulk prescription drugs to physicians and nurses of county health departments or any qualified person authorized by the State Health Officer for administration to persons as part of a prophylactic or treatment regimen.
- 3. Notwithstanding s. 456.036, temporarily reactivating the inactive license of the following health care practitioners, when such practitioners are needed to respond to the public health emergency: physicians licensed under chapter 458 or chapter 459; physician assistants licensed under chapter 458 or chapter 459; certified geriatric specialists certified under part I of chapter 464; licensed

practical nurses, registered nurses, and advanced registered nurse practitioners licensed under part I of chapter 464; respiratory therapists licensed under part V of chapter 468; and emergency medical technicians and paramedics certified under part III of chapter 401. Only those health care practitioners specified in this paragraph who possess an unencumbered inactive license and who request that such license be reactivated are eligible for reactivation. An inactive license that is reactivated under this paragraph shall return to inactive status when the public health emergency ends or prior to the end of the public health emergency if the State Health Officer determines that the health care practitioner is no longer needed to provide services during the public health emergency. Such licenses may only be reactivated for a period not to exceed 90 days without meeting the requirements of s. 456.036 or chapter 401, as applicable.

- 4. Ordering an individual to be examined, tested, vaccinated, treated, or quarantined for communicable diseases that have significant morbidity or mortality and present a severe danger to public health. Individuals who are unable or unwilling to be examined, tested, vaccinated, or treated for reasons of health, religion, or conscience may be subjected to quarantine.
- a. Examination, testing, vaccination, or treatment may be performed by any qualified person authorized by the State Health Officer.
- b. If the individual poses a danger to the public health, the State Health Officer may subject the individual to quarantine. If there is no practical method to quarantine the

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individual, the State Health Officer may use any means necessary to vaccinate or treat the individual. 2 3 4 Any order of the State Health Officer given to effectuate this 5 paragraph shall be immediately enforceable by a law 6 enforcement officer under s. 381.0012. 7 Section 8. Subsection (14) of section 400.021, Florida 8 Statutes, is amended to read: 9 400.021 Definitions.--When used in this part, unless the context otherwise requires, the term: 10 (14) "Nursing service" means such services or acts as 11 12 may be rendered, directly or indirectly, to and in behalf of a 13 person by individuals as defined in ss.s.464.003 and 14 464.0125. 15 Section 9. Subsection (1) of section 400.211, Florida 16 Statutes, is amended to read: 17 400.211 Persons employed as nursing assistants; 18 certification requirement .--19 (1) To serve as a nursing assistant in any nursing 20 home, a person must be certified as a nursing assistant under part II of chapter 464, unless the person is a registered 21 nurse, a or practical nurse, or a certified geriatric 22 23 specialist certified or licensed in accordance with part I of chapter 464 or an applicant for such licensure who is 24 permitted to practice nursing in accordance with rules adopted 25 26 by the Board of Nursing pursuant to part I of chapter 464. 27 Section 10. Paragraphs (a) and (c) of subsection (3) of section 400.23, Florida Statutes, are amended to read: 28 29 400.23 Rules; evaluation and deficiencies; licensure 30 status.--31

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(3)(a) The agency shall adopt rules providing for the minimum staffing requirements for nursing homes. These requirements shall include, for each nursing home facility, a minimum certified nursing assistant staffing of 2.3 hours of direct care per resident per day beginning January 1, 2002, increasing to 2.6 hours of direct care per resident per day beginning January 1, 2003, and increasing to 2.9 hours of direct care per resident per day beginning January 1, 2004. Beginning January 1, 2002, no facility shall staff below one certified nursing assistant per 20 residents, and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident per day but never below one licensed nurse per 40 residents. For purposes of computing nursing staffing minimums and ratios, certified geriatric specialists shall be considered licensed nursing staff. Nursing assistants employed under s. 400.211(2) may be included in computing the staffing ratio for certified nursing assistants only if they provide nursing assistance services to residents on a full-time basis. Each nursing home must document compliance with staffing standards as required under this paragraph and post daily the names of staff on duty for the benefit of facility residents and the public. The agency shall recognize the use of licensed nurses for compliance with minimum staffing requirements for certified nursing assistants, provided that the facility otherwise meets the minimum staffing requirements for licensed nurses and that the licensed nurses so recognized are performing the duties of a certified nursing assistant. Unless otherwise approved by the agency, licensed nurses counted towards the minimum staffing requirements for certified nursing assistants must exclusively perform the duties of a certified nursing assistant for the entire shift and shall not

also be counted towards the minimum staffing requirements for licensed nurses. If the agency approved a facility's request to use a licensed nurse to perform both licensed nursing and certified nursing assistant duties, the facility must allocate the amount of staff time specifically spent on certified nursing assistant duties for the purpose of documenting compliance with minimum staffing requirements for certified and licensed nursing staff. In no event may the hours of a licensed nurse with dual job responsibilities be counted twice.

(c) Licensed practical nurses licensed under chapter 464 who are providing nursing services in nursing home facilities under this part may supervise the activities of other licensed practical nurses, certified geriatric specialists, certified nursing assistants, and other unlicensed personnel providing services in such facilities in accordance with rules adopted by the Board of Nursing.

Section 11. Paragraph (b) of subsection (2) of section 409.908, Florida Statutes, is amended to read:

409.908 Reimbursement of Medicaid providers.--Subject to specific appropriations, the agency shall reimburse Medicaid providers, in accordance with state and federal law, according to methodologies set forth in the rules of the agency and in policy manuals and handbooks incorporated by reference therein. These methodologies may include fee schedules, reimbursement methods based on cost reporting, negotiated fees, competitive bidding pursuant to s. 287.057, and other mechanisms the agency considers efficient and effective for purchasing services or goods on behalf of recipients. If a provider is reimbursed based on cost reporting and submits a cost report late and that cost report

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would have been used to set a lower reimbursement rate for a rate semester, then the provider's rate for that semester shall be retroactively calculated using the new cost report, and full payment at the recalculated rate shall be affected retroactively. Medicare-granted extensions for filing cost reports, if applicable, shall also apply to Medicaid cost reports. Payment for Medicaid compensable services made on behalf of Medicaid eligible persons is subject to the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216. Further, nothing in this section shall be construed to prevent 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.

(2)

- (b) Subject to any limitations or directions provided for in the General Appropriations Act, the agency shall establish and implement a Florida Title XIX Long-Term Care Reimbursement Plan (Medicaid) for nursing home care in order to provide care and services in conformance with the applicable state and federal laws, rules, regulations, and quality and safety standards and to ensure that individuals eligible for medical assistance have reasonable geographic access to such care.
- 1. Changes of ownership or of licensed operator do not qualify for increases in reimbursement rates associated with the change of ownership or of licensed operator. The agency shall amend the Title XIX Long Term Care Reimbursement Plan to

provide that the initial nursing home reimbursement rates, for the operating, patient care, and MAR components, associated with related and unrelated party changes of ownership or licensed operator filed on or after September 1, 2001, are equivalent to the previous owner's reimbursement rate.

- The agency shall amend the long-term care reimbursement plan and cost reporting system to create direct care and indirect care subcomponents of the patient care component of the per diem rate. These two subcomponents together shall equal the patient care component of the per diem rate. Separate cost-based ceilings shall be calculated for each patient care subcomponent. The direct care subcomponent of the per diem rate shall be limited by the cost-based class ceiling, and the indirect care subcomponent shall be limited by the lower of the cost-based class ceiling, by the target rate class ceiling, or by the individual provider target. The agency shall adjust the patient care component effective January 1, 2002. The cost to adjust the direct care subcomponent shall be net of the total funds previously allocated for the case mix add-on. The agency shall make the required changes to the nursing home cost reporting forms to implement this requirement effective January 1, 2002.
- 3. The direct care subcomponent shall include salaries and benefits of direct care staff providing nursing services including registered nurses, licensed practical nurses, certified geriatric specialists, certified under part I of chapter 464, and certified nursing assistants who deliver care directly to residents in the nursing home facility. This excludes nursing administration, MDS, and care plan coordinators, staff development, and staffing coordinator.

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4. All other patient care costs shall be included in

On July 1 of each year, the agency shall report to

the indirect care cost subcomponent of the patient care per

allocated to the direct care subcomponent from a home office

diem rate. There shall be no costs directly or indirectly

the Legislature direct and indirect care costs, including

average direct and indirect care costs per resident per

facility and direct care and indirect care salaries and

In order to offset the cost of general and

professional liability insurance, the agency shall amend the

increases in the cost of general or professional liability

It is the intent of the Legislature that the reimbursement

plan achieve the goal of providing access to health care for nursing home residents who require large amounts of care while

encouraging diversion services as an alternative to nursing

community. The agency shall base the establishment of any

maximum rate of payment, whether overall or component, on the

available moneys as provided for in the General Appropriations

Act. The agency may base the maximum rate of payment on the

results of scientifically valid analysis and conclusions

derived from objective statistical data pertinent to the

particular maximum rate of payment.

home care for residents who can be served within the

benefits per category of staff member per facility.

plan to allow for interim rate adjustments to reflect

insurance for nursing homes. This provision shall be

implemented to the extent existing appropriations are

Section 12. Subsection (2) of section 458.303, Florida Statutes, is amended to read:

458.303 Provisions not applicable to other

458.303 Provisions not applicable to other practitioners; exceptions, etc.--

(2) Nothing in s. 458.301, s. 458.303, s. 458.305, s. 458.307, s. 458.309, s. 458.311, s. 458.313, s. 458.319, s. 458.321, s. 458.327, s. 458.329, s. 458.331, s. 458.337, s. 458.339, s. 458.341, s. 458.343, s. 458.345, or s. 458.347 shall be construed to prohibit any service rendered by a registered nurse, or a licensed practical nurse, or a certified geriatric specialist certified under part I of chapter 464, if such service is rendered under the direct supervision and control of a licensed physician who provides specific direction for any service to be performed and gives final approval to all services performed. Further, nothing in this or any other chapter shall be construed to prohibit any service rendered by a medical assistant in accordance with the provisions of s. 458.3485.

Section 13. Subsection (1) and paragraph (a) of subsection (2) of section 1009.65, Florida Statutes, are amended to read:

1009.65 Medical Education Reimbursement and Loan Repayment Program.--

(1) To encourage qualified medical professionals to practice in underserved locations where there are shortages of such personnel, there is established the Medical Education Reimbursement and Loan Repayment Program. The function of the program is to make payments that offset loans and educational expenses incurred by students for studies leading to a medical or nursing degree, medical or nursing licensure, or advanced registered nurse practitioner certification or physician

assistant licensure. The following licensed or certified health care professionals are eligible to participate in this program: medical doctors with primary care specialties, doctors of osteopathic medicine with primary care specialties, physician's assistants, certified geriatric specialists certified under part I of chapter 464, licensed practical nurses and registered nurses, and advanced registered nurse practitioners with primary care specialties such as certified nurse midwives. Primary care medical specialties for physicians include obstetrics, gynecology, general and family practice, internal medicine, pediatrics, and other specialties which may be identified by the Department of Health.

- (2) From the funds available, the Department of Health shall make payments to selected medical professionals as follows:
- (a) Up to \$4,000 per year for certified geriatric specialists certified under part I of chapter 464, licensed practical nurses, and registered nurses, up to \$10,000 per year for advanced registered nurse practitioners and physician's assistants, and up to \$20,000 per year for physicians. Penalties for noncompliance shall be the same as those in the National Health Services Corps Loan Repayment Program. Educational expenses include costs for tuition, matriculation, registration, books, laboratory and other fees, other educational costs, and reasonable living expenses as determined by the Department of Health.

Section 14. Subsection (2) of section 1009.66, Florida Statutes, is amended to read:

1009.66 Nursing Student Loan Forgiveness Program. --

(2) To be eligible, a candidate must have graduated from an accredited or approved nursing program and have

received a Florida license as a licensed practical nurse, a certified geriatric specialist certified under part I of chapter 464, or a registered nurse or a Florida certificate as an advanced registered nurse practitioner.

Section 15. The sum of \$157,017 is appropriated from the General Revenue Fund to the Agency for Workforce

Innovation to support the work of the Certified Geriatric

Specialty Nursing Initiative Steering Committee, to administer the pilot sites, contract for an evaluation, and to provide, if necessary, nursing faculty, substitute certified nursing assistants for those who are in clinical education, and technical support to the pilot sites during the 2003-2004 fiscal year.

Section 16. Subsection (6) is added to section 464.201, Florida Statutes, to read:

464.201 Definitions.--As used in this part, the term:

(6) "Practice of a certified nursing assistant" means providing care and assisting persons with tasks relating to the activities of daily living. Such tasks are those associated with personal care, maintaining mobility, nutrition and hydration, toileting and elimination, assistive devices, safety and cleanliness, data gathering, reporting abnormal signs and symptoms, post mortem care, patient socialization and reality orientation, end-of-life care, CPR and emergency care, residents' or patients' rights, documentation of nursing assistant services, and other tasks that a certified nurse assistant may perform after training beyond that required for initial certification and upon validation of competence in that skill by a registered nurse. This section does not restrict the ability of any person who is otherwise trained and educated from performing such tasks.

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Section 17. Section 464.202, Florida Statutes, is amended to read:

464.202 Duties and powers of the board. -- The board shall maintain, or contract with or approve another entity to maintain, a state registry of certified nursing assistants. The registry must consist of the name of each certified nursing assistant in this state; other identifying information defined by board rule; certification status; the effective date of certification; other information required by state or federal law; information regarding any crime or any abuse, neglect, or exploitation as provided under chapter 435; and any disciplinary action taken against the certified nursing assistant. The registry shall be accessible to the public, the certificateholder, employers, and other state agencies. The board shall adopt by rule testing procedures for use in certifying nursing assistants and shall adopt rules regulating the practice of certified nursing assistants which specify the scope of practice authorized and level of supervision required for the practice of certified nursing assistants to enforce this part. The board may contract with or approve another entity or organization to provide the examination services, including the development and administration of examinations. The board shall require that the contract provider offer certified nursing assistant applications via the Internet, and may require the contract provider to accept certified nursing assistant applications for processing via the Internet. board shall require the contract provider to provide the preliminary results of the certified nursing examination on the date the test is administered. The provider shall pay all reasonable costs and expenses incurred by the board in evaluating the provider's application and performance during

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the delivery of services, including examination services and
   procedures for maintaining the certified nursing assistant
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    registry.
           Section 18. This act shall take effect upon becoming a
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CODING: Words stricken are deletions; words underlined are additions.