

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. DOES THE BILL:

- | | | | |
|--------------------------------------|---|-----------------------------|---|
| 1. Reduce government? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 2. Lower taxes? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| 3. Expand individual freedom? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| 4. Increase personal responsibility? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| 5. Empower families? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |

For any principle that received a "no" above, please explain:

B. EFFECT OF PROPOSED CHANGES:

The bill deletes a licensure requirement for nurse registries that a registered nurse must make monthly visits to the patient's home to assess the patient's condition and quality of care being provided by a certified nursing assistant or home health aide.

The bill makes the pilot program that provides personal care attendants for individuals who have spinal cord injuries a permanent program.

Nurse Registries

The Agency for Health Care Administration licenses home health agencies and nurse registries under part IV of chapter 400, F.S. Section 400.506(10), F.S., requires a registered nurse from a nurse registry to make monthly visits to a patient's home to assess the patient's condition and quality of care provided by the certified nursing assistant or home health aide referred by the registry to the patient. The registered nurse must report to the attending physician and the nurse registry any condition that requires further medical attention. The assessment becomes a part of the patient's file with the nurse registry and may be reviewed by AHCA as part of the agency's survey of the nurse registry.

Brain and Spinal Cord Injury Program

The Brain and Spinal Cord Injury (BSCI) Program within DOH provides a statewide coordinated infrastructure to provide access to medical care and rehabilitation for individuals with moderate to severe traumatic brain and spinal cord injuries which enables individuals to return to community settings. The BSCI program refers individuals who have the potential to obtain gainful employment directly to the Division of Vocational Rehabilitation of DOE.

Florida's Personal Care Attendant Program

House Bill 1481 requires the Florida Association of Centers for Independent Living (FACIL) and DOH in cooperation with the Able Trust to develop a program to recruit, screen, and select candidates to be trained as personal care attendants. The bill requires FACIL and DOH in cooperation with the Able Trust to seek federal waivers to implement the personal care attendant program, to develop training program for personal care attendants, and to establish procedures for selecting persons eligible to participate in the personal care attendant program. FACIL and DOH, in cooperation with the Division of Vocational Rehabilitation must assess the selected participants and make recommendations for their placement into work-related training programs.

The criteria for participation are revised :

- Be at least 18 years old and significantly disabled due to a traumatic spinal cord injury;
- Require a personal care attendant for bathing, dressing, bowel and bladder management, and transportation;
- Require a personal care attendant to obtain or maintain substantial gainful employment;
- Be able to hire and supervise a personal care attendant; and
- Be living in a nursing home, have moved out of a nursing home within the preceding 180 days due to participation in a Medicaid home and community-based waiver program targeted to persons with brain or spinal cord injuries, or presently be employed but due to loss of a caregiver will lose employment and potentially return to a nursing home.

The requirement that individuals be eligible for training services from the Division of Vocational Rehabilitation is removed.

The bill increases the personal care attendant program's share of revenue collected from the tax collection enforcement diversion program from 25 to 50 percent. The Able Trust must select the entity to administer the personal care attendant program. Participating governmental units will be judicial circuits instead of counties to reflect the participation of the state attorney's office in each judicial circuit currently implementing the pilot program and in the Fourth Judicial Circuit (Duval County).

The bill requires DOH to establish a personal care attendant program oversight workgroup to oversee the implementation and administration of the program. The workgroup is composed of one representative from the following groups: the BSCI program, DOR, and the Florida Medicaid Program, the Able Trust, FACIL, and the Division of Vocational Rehabilitation. Two members of the workgroup must be persons who have traumatic spinal cord injuries or are family members of persons with traumatic spinal cord injuries.

The bill removes obsolete language that refers to a report due to Legislature by March 1, 2003, regarding an implementation plan for the pilot program, and requirements for the pilot program to be implemented by July 1, 2003.

C. SECTION DIRECTORY:

Section 1. Amends section 400.506, F.S., related to nurse registries. It deletes the requirement that a Registered Nurse make a monthly supervisory visit to patients receiving care from certified nursing assistant or home health aide.

Section 2. Amends section 413.402, F.S., related to the Personal Care Program for persons with Brain and Spinal Cord Injuries. It removes the designation "pilot" and makes the program permanent. The duties of the collaborating agencies are revised to require FACIL, in conjunction with DOH's BSCI program to develop the personal care attendant program in AHCA, the Able Trust, and the Division of Vocational Rehabilitation. Eligibility requirements are revised.

Section 3. Amends section 413.4021, F.S., to revise the provisions related to participant selection in the Personal Care Attendant Program.

Section 4. Amends section 3 of chapter 2002-286, L.O.F., related to the appropriation to the Florida Endowment Foundation for Vocational Rehabilitation to make conforming changes: referencing judicial circuits instead of counties and deleting the word "pilot".

Section 5. This act takes effect July 1, 2004.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

The bill would expand the current pilot program that involves more aggressive efforts to collect unremitted sales taxes. Fifty percent of the collected sales tax would be deposited in the General Revenue fund; the remaining fifty percent would be used to fund this program.

2. Expenditures:

The bill will decrease the amount of sales tax collections available to the General Revenue Fund by continuing the diversion of the proceeds from the diversion programs in each judicial circuit currently implementing the pilot program and in the Fourth Judicial Circuit (Duval County). The state-wide fiscal impact would be indeterminate.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

Individuals with disabilities will have the opportunity to hire a personal care attendant to assist them in obtaining or maintaining gainful employment.

D. FISCAL COMMENTS:

The bill does not propose any additional taxes or fees; rather, the bill would redirect 50 percent of the sales tax collections obtained through the tax collection enforcement diversion program to the personal care attendant program.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable.

2. Other:

B. RULE-MAKING AUTHORITY:

None is granted.

C. DRAFTING ISSUES OR OTHER COMMENTS:

The Sponsor has prepared a strike-all amendment to conform the House bill to the amended Senate bill. Section 1 of the bill related to nurse registries is also addressed in another house bill and it was amended so that the two provisions are not longer identical.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES