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CHAMBER ACTION

The Committee on Future of Florida's Families recommends the following:

## Committee Substitute

Remove the entire bill and insert:

A bill to be entitled

7 An act relating to health care facilities; creating s. 8 400.0712, F.S.; authorizing the Agency for Health Care 9 Administration to issue inactive licenses to nursing homes 10 for all or a portion of their beds under certain 11 circumstances; providing requirements for application for 12 and issuance of such licenses; providing rulemaking authority; amending s. 400.071, F.S.; deleting a provision 13 14 relating to issuance of inactive licenses, to conform; amending s. 400.021, F.S.; redefining the term "resident 15 care plan," as used in part II of ch. 400, F.S.; amending 16 17 s. 400.23, F.S.; providing that certain information from the agency must be promptly updated to reflect the most 18 19 current agency actions; amending s. 400.211, F.S.; 20 revising inservice training requirements for persons 21 employed as nursing assistants in a nursing home facility; 22 amending s. 408.034, F.S.; requiring the nursing-home-bed-23 need methodology established by the agency by rule to

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24 include a goal of maintaining a specified subdistrict average occupancy rate; amending s. 408.036, F.S., 25 26 relating to health-care-related projects subject to review 27 for a certificate of need; subjecting certain projects relating to replacement of a nursing home and relocation 28 29 of nursing home beds to expedited review; revising 30 requirements for certain projects relating to the addition 31 of nursing home beds which are exempt from review; 32 exempting from review certain projects relating to 33 replacement of a licensed nursing home bed on the same site or nearby and consolidation or combination of 34 35 licensed nursing homes or transfer of beds between licensed nursing homes within the same planning 36 37 subdistrict; providing rulemaking authority; providing for 38 assessment of exemption-request fees; amending s. 52, ch. 2001-45, Laws of Florida; specifying nonapplication of a 39 40 moratorium on certificates of need and authorizing approval of certain certificates of need for certain 41 42 counties under certain circumstances; providing review requirements and bed limitations; amending s. 651.118, 43 44 F.S.; revising provisions relating to use of sheltered 45 nursing home beds at a continuing care facility by persons 46 who are not residents of the continuing care facility; 47 providing an effective date. 48 49 Be It Enacted by the Legislature of the State of Florida:

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CS 51 Section 1. Section 400.0712, Florida Statutes, is created 52 to read: 400.0712 Application for inactive license.--53 54 (1) As specified in this section, the agency may issue an 55 inactive license to a nursing home facility for all or a portion 56 of its beds. Any request by a licensee that a nursing home or 57 portion of a nursing home become inactive must be submitted to 58 the agency in the approved format. The facility may not initiate any suspension of services, notify residents, or initiate 59 60 facility closure before receiving approval from the agency; and 61 a facility that violates this provision shall not be issued an inactive license. Upon agency approval of an inactive license, 62 the nursing home shall notify residents of any necessary 63 64 discharge or transfer as provided in s. 400.0255. 65 (2) The agency may issue an inactive license to a nursing 66 home that chooses to use an unoccupied contiguous portion of the facility for an alternative use to meet the needs of elderly 67 68 persons through the use of less restrictive, less institutional 69 services. 70 (a) An inactive license issued under this subsection may 71 be granted for a period not to exceed 12 months but may be 72 renewed annually by the agency for 12 months. 73 (b) A request to extend the inactive license must be 74 submitted to the agency in the approved format and approved by 75 the agency in writing. 76 (c) Nursing homes that receive an inactive license to 77 provide alternative services shall not receive preference for

HB 267 2004 CS 78 participation in the Assisted Living for the Elderly Medicaid 79 waiver. (3) The agency may issue an inactive license to a nursing 80 81 home that will be temporarily unable to provide services but is 82 reasonably expected to resume services. (a) An inactive license issued under this subsection may 83 be issued for a period not to exceed 12 months and may be 84 renewed by the agency for an additional 6 months upon 85 86 demonstration of progress toward reopening. 87 (b) All licensure fees must be current and paid in full, 88 and may be prorated as provided by agency rule, before the inactive license is issued. 89 90 (c) Reactivation of an inactive license requires that the applicant pay all licensure fees and be inspected by the agency 91 92 to confirm that all of the requirements of this part and 93 applicable rules are met. (4) The agency shall adopt rules pursuant to ss. 94 95 120.536(1) and 120.54 necessary to implement this section. Section 2. Subsections (10), (11), and (12) of section 96 97 400.071, Florida Statutes, are amended to read: 400.071 Application for license.--98 99 (10) The agency may issue an inactive license to a nursing 100 home that will be temporarily unable to provide services but 101 that is reasonably expected to resume services. Such designation 102 may be made for a period not to exceed 12 months but may be 103 renewed by the agency for up to 6 additional months. Any request 104 by a licensee that a nursing home become inactive must be 105 submitted to the agency and approved by the agency prior to Page 4 of 13

106 initiating any suspension of service or notifying residents. 107 Upon agency approval, the nursing home shall notify residents of 108 any necessary discharge or transfer as provided in s. 400.0255.

109 <u>(10)</u>(11) As a condition of licensure, each facility must 110 establish and submit with its application a plan for quality 111 assurance and for conducting risk management.

112 (11)(12) The applicant must provide the agency with proof 113 of a legal right to occupy the property before a license may be 114 issued. Proof may include, but is not limited to, copies of 115 warranty deeds, lease or rental agreements, contracts for deeds, 116 or quitclaim deeds.

Section 3. Subsection (17) of section 400.021, Florida Statutes, is amended to read:

119 400.021 Definitions.--When used in this part, unless the 120 context otherwise requires, the term:

"Resident care plan" means a written plan developed, 121 (17)122 maintained, and reviewed not less than quarterly by a registered nurse, with participation from other facility staff and the 123 124 resident or his or her designee or legal representative, which includes a comprehensive assessment of the needs of an 125 126 individual resident; the type and frequency of services required 127 to provide the necessary care for the resident to attain or maintain the highest practicable physical, mental, and 128 129 psychosocial well-being; a listing of services provided within or outside the facility to meet those needs; and an explanation 130 of service goals. The resident care plan must be signed by the 131 director of nursing or another registered nurse employed by the 132 facility to whom institutional responsibilities have been 133

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CS 134 delegated and by the resident, the resident's designee, or the 135 resident's legal representative. The facility may not use an 136 agency or temporary registered nurse to satisfy the foregoing 137 requirement and must document the institutional responsibilities 138 that have been delegated to the registered nurse. 139 Section 4. Subsection (10) is added to section 400.23, 140 Florida Statutes, to read: 400.23 Rules; evaluation and deficiencies; licensure 141 142 status.--143 (10) Agency records, reports, ranking systems, Internet 144 information, and publications must be promptly updated to 145 reflect the most current agency actions. 146 Section 5. Subsection (4) of section 400.211, Florida 147 Statutes, is amended to read: 148 400.211 Persons employed as nursing assistants; 149 certification requirement.--150 When employed by a nursing home facility for a 12-(4) 151 month period or longer, a nursing assistant, to maintain 152 certification, shall submit to a performance review every 12 153 months and must receive regular inservice education based on the 154 outcome of such reviews. The inservice training must: 155 (a) Be sufficient to ensure the continuing competence of 156 nursing assistants and must meet the standard specified in s. 157 464.203(7), must be at least 18 hours per year, and may include 158 hours accrued under s. 464.203(8); Include, at a minimum: 159 (b) 160 Techniques for assisting with eating and proper 1. 161 feeding;

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Principles of adequate nutrition and hydration;
 Techniques for assisting and responding to the

164 cognitively impaired resident or the resident with difficult 165 behaviors;

166 4. Techniques for caring for the resident at the end-of-167 life; and

168 5. Recognizing changes that place a resident at risk for 169 pressure ulcers and falls; and

170 (c) Address areas of weakness as determined in nursing
171 assistant performance reviews and may address the special needs
172 of residents as determined by the nursing home facility staff.

174 Costs associated with this training may not be reimbursed from 175 additional Medicaid funding through interim rate adjustments.

Section 6. Subsection (5) of section 408.034, FloridaStatutes, is amended to read:

408.034 Duties and responsibilities of agency; rules.--

(5) The agency shall establish by rule a nursing-home-bedneed methodology that <u>has a goal of maintaining a subdistrict</u>
<u>average occupancy rate of 94 percent and that</u> reduces the
community nursing home bed need for the areas of the state where
the agency establishes pilot community diversion programs
through the Title XIX aging waiver program.

Section 7. Paragraphs (g) and (h) are added to subsection (2) of section 408.036, Florida Statutes, paragraph (p) of subsection (3) is amended, paragraphs (u) and (v) are added to subsection (3) of said section, and subsection (4) is reenacted to read:

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408.036 Projects subject to review; exemptions.--

191 (2) PROJECTS SUBJECT TO EXPEDITED REVIEW.--Unless exempt
192 pursuant to subsection (3), projects subject to an expedited
193 review shall include, but not be limited to:

194 (g) Replacement of a nursing home within the same 195 district, provided the proposed project site is located within a 196 geographic area that contains at least 65 percent of the 197 facility's current residents and is within a 30-mile radius of 198 the replaced nursing home.

(h) Relocation of a portion of a nursing home's licensed beds to a facility within the same district, provided the relocation is within a 30-mile radius of the existing facility and the total number of nursing home beds in the district does not increase.

The agency shall develop rules to implement the provisions for expedited review, including time schedule, application content which may be reduced from the full requirements of s. 408.037(1), and application processing.

209 (3) EXEMPTIONS.--Upon request, the following projects are 210 subject to exemption from the provisions of subsection (1):

(p) For the addition of nursing home beds licensed under chapter 400 in a number not exceeding 10 total beds or 10 percent of the number of beds licensed in the facility being expanded, whichever is greater, or for the addition of nursing home beds licensed under chapter 400 at a facility that has been designated as a Gold Seal nursing home under s. 400.235 in a number not exceeding 20 total beds or 10 percent of the number

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#### 218 of beds licensed in the facility being expanded, whichever is 219 greater. 220 In addition to any other documentation required by the 1. 221 agency, a request for exemption submitted under this paragraph 222 must: 223 Effective until June 30, 2001, Certify that the a. 224 facility has not had any class I or class II deficiencies within 225 the 30 months preceding the request for addition. 226 b. Effective on July 1, 2001, certify that the facility 227 has been designated as a Gold Seal nursing home under s. 228 400.235. 229 b.c. Certify that the prior 12-month average occupancy 230 rate for the nursing home beds at the facility meets or exceeds 231 96 percent. 232 c.<del>d.</del> Certify that any beds authorized for the facility 233 under this paragraph before the date of the current request for an exemption have been licensed and operational for at least 12 234 235 months. The timeframes and monitoring process specified in s. 236 2. 237 408.040(2)(a)-(c) apply to any exemption issued under this 238 paragraph. 239 3. The agency shall count beds authorized under this paragraph as approved beds in the published inventory of nursing 240 home beds until the beds are licensed. 241 242 (u) For replacement of a licensed nursing home on the same 243 site, or within 3 miles of the same site, provided the number of 244 licensed beds does not increase. Page 9 of 13 CODING: Words stricken are deletions; words underlined are additions.

(v) For consolidation or combination of licensed nursing
homes or transfer of beds between licensed nursing homes within
the same planning subdistrict, by providers that operate
multiple nursing homes within that planning subdistrict,
provided there is no increase in the planning subdistrict total
of nursing home beds and the relocation does not exceed 30 miles
from the original location.

(4) A request for exemption under subsection (3) may be
made at any time and is not subject to the batching requirements
of this section. The request shall be supported by such
documentation as the agency requires by rule. The agency shall
assess a fee of \$250 for each request for exemption submitted
under subsection (3).

Section 8. Section 52 of chapter 2001-45, Laws of Florida, as amended by section 1693 of chapter 2003-261, Laws of Florida, is amended to read:

261 Section 52. <u>(1)</u> Notwithstanding the establishment of need 262 as provided for in chapter 408, Florida Statutes, no certificate 263 of need for additional community nursing home beds shall be 264 approved by the agency until July 1, 2006.

265 (2) The Legislature finds that the continued growth in the 266 Medicaid budget for nursing home care has constrained the 267 ability of the state to meet the needs of its elderly residents 268 through the use of less restrictive and less institutional 269 methods of long-term care. It is therefore the intent of the 270 Legislature to limit the increase in Medicaid nursing home expenditures in order to provide funds to invest in long-term 271 care that is community-based and provides supportive services in 272

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HB 267 2004 CS 273 a manner that is both more cost-effective and more in keeping 274 with the wishes of the elderly residents of this state. 275 This moratorium on certificates of need shall not (3) 276 apply to sheltered nursing home beds in a continuing care 277 retirement community certified by the former Department of 278 Insurance or by the Office of Insurance Regulation pursuant to 279 chapter 651, Florida Statutes. (4)(a) This moratorium on certificates of need shall not 280 281 apply, and a certificate of need for additional community 282 nursing home beds may be approved, for a county that meets the 283 following circumstances: 284 1. The county has no community nursing home beds. 285 The lack of community nursing home beds occurs because 2. all nursing home beds in the county that were licensed on July 286 287 1, 2001, have subsequently closed. 288 (b) The certificate-of-need review for such circumstances 289 shall be subject to the comparative review process consistent 290 with the provisions of s. 408.039, Florida Statutes, and the 291 number of beds may not exceed the number of beds lost by the 292 county after July 1, 2001. 293 Section 9. Subsection (7) of section 651.118, Florida 294 Statutes, is amended to read: 295 651.118 Agency for Health Care Administration; 296 certificates of need; sheltered beds; community beds.--297 (7) Notwithstanding the provisions of subsection (2), at 298 the discretion of the continuing care provider, sheltered 299 nursing home beds may be used for persons who are not residents 300 of the continuing care facility and who are not parties to a

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301 continuing care contract for a period of up to 5 years after the 302 date of issuance of the initial nursing home license. A provider 303 whose 5-year period has expired or is expiring may request the 304 Agency for Health Care Administration for an extension, not to 305 exceed 30 percent of the total sheltered nursing home beds, if 306 the utilization by residents of the nursing home facility in the 307 sheltered beds will not generate sufficient income to cover 308 nursing home facility expenses, as evidenced by one of the 309 following:

(a) The <u>nursing home</u> facility has a net loss for the most recent fiscal year as determined under generally accepted accounting principles, excluding the effects of extraordinary or unusual items, as demonstrated in the most recently audited financial statement; or

(b) The <u>nursing home</u> facility would have had a pro forma loss for the most recent fiscal year, excluding the effects of extraordinary or unusual items, if revenues were reduced by the amount of revenues from persons in sheltered beds who were not residents, as reported on by a certified public accountant.

321 The agency shall be authorized to grant an extension to the 322 provider based on the evidence required in this subsection. The agency may request a continuing care facility to use up to 25 323 324 percent of the patient days generated by new admissions of 325 nonresidents during the extension period to serve Medicaid recipients for those beds authorized for extended use if there 326 is a demonstrated need in the respective service area and if 327 328 funds are available. A provider who obtains an extension is

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329 prohibited from applying for additional sheltered beds under the 330 provision of subsection (2), unless additional residential units are built or the provider can demonstrate need by continuing 331 332 care facility residents to the Agency for Health Care 333 Administration. The 5-year limit does not apply to up to five 334 sheltered beds designated for inpatient hospice care as part of a contractual arrangement with a hospice licensed under part VI 335 of chapter 400. A continuing care facility that uses such beds 336 337 after the 5-year period shall report such use to the Agency for 338 Health Care Administration. For purposes of this subsection, 339 "resident" means a person who, upon admission to the continuing 340 care facility, initially resides in a part of the continuing 341 care facility not licensed under part II of chapter 400. 342 Section 10. This act shall take effect upon becoming a 343 law.