



## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. HOUSE PRINCIPLES ANALYSIS:

This bill does not appear to implicate any of the House Principles.

#### B. EFFECT OF PROPOSED CHANGES:

The bill requires a nurse registry at the time of contracting for services performed by a certified nursing assistant or home health aide to advise patients or their families that a registered nurse is available to visit the patient's home to assess the patient's condition for an additional cost.

Nurse registries provide skilled and personal care. Nurse registries are set up differently than home health agencies in that they hire independent contractors that are registered nurses, certified nurse assistants (CNA), home health aides, licensed practical nurses, homemakers, or companions to provide services to patients in their homes. These individuals are not direct employees of the nurse registry, but are independent contractors. A patient contracts with a nurse registry and the independent contractors for services. The patient makes a direct contract with the individual contractor sent from the nurse registry.

A nurse registry is required to obtain the following information from the independent contractors they refer: name, address, date of birth, and social security number, educational background, employment history, and number and date of the applicable license or certification and renewal information.

As of December 18, 2004, there were 2,218 licensed nurse registries in Florida. Nurse registries are licensed annually and licensure costs \$1,000. Currently, nurse registries are required to send a registered nurse to perform a supervisory visit to the home of a patient receiving services from a certified nursing assistant or home health aide to assess the quality of care provided.<sup>1</sup>

#### C. SECTION DIRECTORY:

**Section 1.** Amends s. 400.506, F.S., requiring a nurse registry to provide information regarding additional visits by registered nurses and associated costs.

**Section 2.** Provides that the bill will take effect on July 1, 2005.

### II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

#### A. FISCAL IMPACT ON STATE GOVERNMENT:

##### 1. Revenues:

None.

##### 2. Expenditures:

None.

#### B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

##### 1. Revenues:

None.

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<sup>1</sup> See s. 400.506 (10), F.S.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

Currently, some nurse registries are absorbing the cost of the supervisory registered nurses' home visit and others are billing the patient for this service.

D. FISCAL COMMENTS:

None.

### III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not require counties or municipalities to spend funds or take an action requiring the expenditure of funds. This bill does not reduce the percentage of a state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenue.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

None.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

### IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On April 5, 2005, the Health Care Regulation Committee adopted an amendment sponsored by Representative Cannon. The committee substitute differs from the original bill as filed in that the committee substitute adds language to specify that the registered nurse will be sent to visit a patient's home "to assess the patient's condition," which mirrors the language in the Senate companion.