

1 the Department of Health and local law
2 enforcement agencies; creating s. 252.3568,
3 F.S.; requiring the Division of Emergency
4 Management to address evacuation of persons
5 with pets in the shelter component of the state
6 comprehensive emergency management plan;
7 creating s. 252.357, F.S., requiring the
8 Florida Comprehensive Emergency Management Plan
9 to permit the Agency for Health Care
10 Administration to make initial contact with
11 each nursing home in a disaster area; requiring
12 the agency to annually publish an emergency
13 telephone number that may be used by nursing
14 homes to contact the agency; amending s.
15 252.385, F.S., relating to public shelter
16 space; requiring the Division of Emergency
17 Management of the Department of Community
18 Affairs to biennially prepare and submit a
19 statewide emergency shelter plan to the
20 Governor and the Cabinet for approval;
21 providing plan requirements; requiring the
22 Department of Health to provide specified
23 assistance to the division; revising those
24 facilities which are excluded as being suitable
25 for use as public hurricane evacuation
26 shelters; requiring local emergency management
27 agencies to inspect a designated facility prior
28 to activation to determine its readiness;
29 amending s. 381.0303, F.S.; providing for the
30 operation, maintenance, and closure of special
31 needs shelters; providing that local Children's

1 Medical Services offices shall assume lead
2 responsibility for specified coordination with
3 respect to the development of a plan for the
4 staffing and medical management of pediatric
5 special needs shelters; requiring such plans to
6 conform to the local comprehensive emergency
7 management plan; requiring county governments
8 to assist the Department of Health with
9 nonmedical staffing and operation of special
10 needs shelters; requiring local health
11 departments and emergency management agencies
12 to coordinate such efforts to ensure
13 appropriate staffing; providing that the
14 appropriate county health department,
15 Children's Medical Services office, and local
16 emergency management agency shall jointly
17 determine the responsibility for medical
18 supervision in a special needs shelter;
19 providing notification requirements; requiring
20 local emergency management agencies to be
21 responsible for the infrastructure and closure
22 of special needs shelters; requiring the
23 emergency management agency and the local
24 health department to coordinate efforts to
25 ensure appropriate designation, operation, and
26 infrastructure in special needs shelters;
27 providing that a county health department is
28 not prohibited from entering into an
29 alternative agreement with a local emergency
30 management agency to assume the lead
31 responsibility for special needs shelter

1 supplies and equipment; providing that state
2 employees with a preestablished role in
3 disaster response are subject to serve in times
4 of disaster in specified capacities; requiring
5 the Secretary of Elderly Affairs to convene
6 multiagency special needs shelter discharge
7 planning teams to assist local areas that are
8 severely impacted by a natural or manmade
9 disaster that requires the use of special needs
10 shelters; providing duties and responsibilities
11 of such discharge planning teams; providing for
12 the inclusion of specified state agency
13 representatives on each discharge planning
14 team; revising provisions relating to
15 reimbursement of health care practitioners;
16 providing for eligibility of specified health
17 care facilities for reimbursement when a
18 multiagency special needs shelter discharge
19 planning team discharges persons with special
20 needs to such receiving facilities; providing
21 procedures and requirements with respect to
22 such reimbursement; requiring the department to
23 specify by rule expenses that are reimbursable
24 and the rate of reimbursement for services;
25 revising provisions which prescribe means of
26 and procedures for reimbursement; disallowing
27 specified reimbursements; revising provisions
28 with respect to the organization, role, duties,
29 and composition of the special needs shelter
30 interagency committee; requiring the department
31 to adopt specified rules with respect to

1 special needs shelters; providing requirements
2 with respect to emergency management plans
3 submitted to a county health department by a
4 home health agency, nurse registry, hospice, or
5 home medical equipment provider; amending ss.
6 400.492, 400.497, 400.506, 400.610, and
7 400.934, F.S.; revising requirements with
8 respect to the comprehensive emergency
9 management plans of home health agencies, nurse
10 registries, and hospices, and providing such
11 requirements with respect to home medical
12 equipment providers, to include the means by
13 which continuing services will be provided to
14 patients who evacuate to special needs
15 shelters; authorizing the establishment of
16 links to local emergency operations centers for
17 specified purposes; providing actions that
18 constitute abandonment of a patient; providing
19 sanctions for abandonment; revising
20 requirements of a county health department with
21 respect to review of a comprehensive emergency
22 management plan submitted by a home health
23 agency, nurse registry, or hospice, and
24 providing such requirements with respect to a
25 home medical equipment provider; providing
26 requirements upon failure to submit a plan or
27 requested information to the department;
28 providing for imposition of a fine; revising
29 requirements of the Department of Health with
30 respect to review of the plan of a home health
31 agency, nurse registry, or hospice that

1 operates in more than one county, and providing
2 such requirements with respect to a home
3 medical equipment provider that operates in
4 more than one county; providing that the
5 preparation and maintenance of a comprehensive
6 emergency management plan by a home medical
7 equipment provider is a requirement for
8 licensure and must meet minimum criteria
9 established by the Agency for Health Care
10 Administration; providing plan requirements;
11 providing that the plan is subject to review
12 and approval by the county health department;
13 requiring each home medical equipment provider
14 to maintain a current prioritized list of
15 patients who need continued services during an
16 emergency; amending s. 400.925, F.S.; defining
17 "life-supporting or life-sustaining equipment"
18 for purposes of pt. X of ch. 400, F.S.,
19 relating to home medical equipment providers;
20 amending s. 400.935, F.S.; requiring the Agency
21 for Health Care Administration to adopt rules
22 with respect to the comprehensive emergency
23 management plan prepared by a home medical
24 equipment services provider; amending s.
25 408.831, F.S.; providing that entities
26 regulated or licensed by the Agency for Health
27 Care Administration may exceed their licensed
28 capacity to act as a receiving facility under
29 specified circumstances; providing requirements
30 while such entities are in an overcapacity
31 status; providing for issuance of an inactive

1 license to such licensees under specified
2 conditions; providing requirements and
3 procedures with respect to the issuance and
4 reactivation of an inactive license; providing
5 fees; providing an effective date.
6

7 Be It Enacted by the Legislature of the State of Florida:
8

9 Section 1. Section 252.355, Florida Statutes, is
10 amended to read:

11 252.355 Registry of persons with special needs;
12 notice.--

13 (1) In order to meet the special needs of persons who
14 would need assistance during evacuations and sheltering
15 because of physical, mental, cognitive impairment, or sensory
16 disabilities, each local emergency management agency in the
17 state shall maintain a registry of persons with special needs
18 located within the jurisdiction of the local agency. The
19 registration shall identify those persons in need of
20 assistance and plan for resource allocation to meet those
21 identified needs. To assist the local emergency management
22 agency in identifying such persons, home health agencies,
23 hospices, nurse registries, home medical equipment providers,
24 the Department of Children and Family Services, the Department
25 of Health, the Agency for Health Care Administration, the
26 Department of Education, the Agency for Persons with
27 Disabilities, Department of Labor and Employment Security, and
28 the Department of Elderly Affairs shall provide registration
29 information to all of their special needs clients and to all
30 people with disabilities or special needs who receive services
31 ~~incoming clients as a part of the intake process~~. The registry

1 shall be continuously maintained ~~updated annually~~. The
2 registration program shall give persons with special needs the
3 option of preauthorizing emergency response personnel to enter
4 their homes during search and rescue operations if necessary
5 to assure their safety and welfare following disasters.

6 (2) The Department of Community Affairs shall be the
7 designated lead agency responsible for community education and
8 outreach to the general public, including special needs
9 clients, regarding registration and special needs shelters and
10 general information regarding shelter stays. The Department of
11 Community Affairs shall disseminate such educational and
12 outreach information through the local emergency management
13 offices. The department shall coordinate the development of
14 curriculum and dissemination of all community education and
15 outreach related to special needs shelters with the
16 Clearinghouse on Disability Information of the Governor's
17 Working Group on the Americans with Disabilities Act, the
18 Department of Children and Family Services, the Department of
19 Health, the Agency for Health Care Administration, the
20 Department of Education, the Agency for Persons with
21 Disabilities, and the Department of Elderly Affairs.

22 (3) A person with special needs shall be allowed to
23 bring his or her service animal into a special needs shelter
24 in compliance with the Americans with Disabilities Act of
25 1990, Pub. L. No. 101-336. Because a special needs shelter is
26 considered a public facility when it is activated for a
27 disaster, persons with disabilities must be allowed access to
28 special needs shelters when accompanied by a service animal in
29 compliance with the Americans with Disabilities Act, which
30 provides that businesses and organizations that serve the
31 public must allow people with disabilities to bring their

1 service animals into all areas of a facility where customers
2 are normally allowed to go.

3 ~~(4)(2)~~ ~~On or before May 1 of each year~~ Each electric
4 utility in the state shall ~~annually~~ notify residential
5 customers in its service area of the availability of the
6 registration program available through their local emergency
7 management agency with either:-

8 (a) An initial notification upon the activation of new
9 residential service with the electric utility followed by one
10 annual notification between January 1 and May 31; or

11 (b) Two separate annual notifications between January
12 1 and May 31.

13
14 The notification required under this subsection may be made by
15 any available means, including, but not limited to, written,
16 electronic, or verbal notification, and may be made
17 concurrently with any other notification to residential
18 customers required by law or rule.

19 ~~(5)(3)~~ All records, data, information, correspondence,
20 and communications relating to the registration of persons
21 with special needs as provided in subsection (1) are
22 confidential and exempt from the provisions of s. 119.07(1),
23 except that such information shall be available to other
24 emergency response agencies, as determined by the local
25 emergency management director, and to the Department of Health
26 in the furtherance of its duties and responsibilities. Local
27 law enforcement agencies shall be provided complete shelter
28 registration information upon request.

29 ~~(6)(4)~~ All appropriate agencies and community-based
30 service providers, including home health care providers,
31 hospices, nurse registries, and home medical equipment

1 providers, shall assist emergency management agencies by
2 collecting registration information for persons with special
3 needs as part of program intake processes, establishing
4 programs to increase the awareness of the registration
5 process, and educating clients about the procedures that may
6 be necessary for their safety during disasters. Clients of
7 state or federally funded service programs with physical,
8 mental, cognitive impairment, or sensory disabilities who need
9 assistance in evacuating, or when in shelters, must register
10 as persons with special needs.

11 Section 2. Section 252.3568, Florida Statutes, is
12 created to read:

13 252.3568 Emergency sheltering of persons with
14 pets.--In accordance with the provisions of s. 252.35, the
15 division shall address the evacuation of persons with pets in
16 the shelter component of the state comprehensive emergency
17 management plan. The Department of Agriculture and Consumer
18 Services shall assist the division in determining strategies
19 regarding this activity.

20 Section 3. Section 252.357, Florida Statutes, is
21 created to read:

22 252.357 Monitoring of nursing homes during
23 disaster.--The Florida Comprehensive Emergency Management Plan
24 shall permit the Agency for Health Care Administration,
25 working from the agency's offices or in the Emergency
26 Operations Center, ESF-8, to make initial contact with each
27 nursing home in the disaster area. The agency, by July 15,
28 2006, and annually thereafter, shall publish on the Internet
29 an emergency telephone number that may be used by nursing
30 homes to contact the agency on a schedule established by the
31 agency to report requests for assistance. The agency may also

1 provide the telephone number to each facility when it makes
2 the initial facility call.

3 Section 4. Subsection (2) and paragraphs (a) and (b)
4 of subsection (4) of section 252.385, Florida Statutes, are
5 amended to read:

6 252.385 Public shelter space.--

7 (2)(a) The division shall administer a program to
8 survey existing schools, universities, community colleges, and
9 other state-owned, municipally owned, and county-owned public
10 buildings and any private facility that the owner, in writing,
11 agrees to provide for use as a public hurricane evacuation
12 shelter to identify those that are appropriately designed and
13 located to serve as such shelters. The owners of the
14 facilities must be given the opportunity to participate in the
15 surveys. The Board of ~~Governors Regents~~, district school
16 boards, community college boards of trustees, and the
17 Department of Education are responsible for coordinating and
18 implementing the survey of public schools, universities, and
19 community colleges with the division or the local emergency
20 management agency.

21 (b) By January 31 of each even-numbered year, the
22 division shall prepare and submit a statewide emergency
23 shelter plan to the Governor and the Cabinet for approval,
24 subject to the requirements for approval provided in s.
25 1013.37(2). The plan shall identify the general location and
26 square footage of special needs shelters, by regional planning
27 council region, during the next 5 years. The plan shall also
28 include information on the availability of shelters that
29 accept pets. The Department of Health shall assist the
30 division in determining the estimated need for special needs
31 shelter space and the adequacy of facilities to meet the needs

1 of persons with special needs based on information from the
2 registries of persons with special needs and other
3 information.

4 (4)(a) Public facilities, including schools,
5 postsecondary education facilities, and other facilities owned
6 or leased by the state or local governments, but excluding
7 hospitals, hospice care facilities, assisted living
8 facilities, or nursing homes, which are suitable for use as
9 public hurricane evacuation shelters shall be made available
10 at the request of the local emergency management agencies. The
11 local emergency management agency shall inspect a designated
12 facility to determine its readiness prior to activating the
13 facility for a specific hurricane or disaster. Such agencies
14 shall coordinate with the appropriate school board,
15 university, community college, or local governing board when
16 requesting the use of such facilities as public hurricane
17 evacuation shelters.

18 (b) The Department of Management Services shall
19 incorporate provisions for the use of suitable leased public
20 facilities as public hurricane evacuation shelters into lease
21 agreements for state agencies. Suitable leased public
22 facilities include leased public facilities that are solely
23 occupied by state agencies and have at least 2,000 square feet
24 of net floor area in a single room or in a combination of
25 rooms having a minimum of 400 square feet in each room. The
26 net square footage of floor area shall ~~must~~ be determined by
27 subtracting from the gross square footage the square footage
28 of spaces such as mechanical and electrical rooms, storage
29 rooms, open corridors, restrooms, kitchens, science or
30 computer laboratories, shop or mechanical areas,
31 administrative offices, records vaults, and crawl spaces.

1 Section 5. Section 381.0303, Florida Statutes, is
2 amended to read:

3 381.0303 ~~Health practitioner recruitment for~~ Special
4 needs shelters.--

5 (1) PURPOSE.--The purpose of this section is to
6 provide for the operation, maintenance, and closure of special
7 needs shelters and to designate the Department of Health,
8 through its county health departments, as the lead agency for
9 coordination of the recruitment of health care practitioners,
10 as defined in s. 456.001(4), to staff special needs shelters
11 in times of emergency or disaster and to provide resources to
12 the department to carry out this responsibility. However,
13 nothing in this section prohibits a county health department
14 from entering into an agreement with a local emergency
15 management agency to assume the lead responsibility for
16 recruiting health care practitioners.

17 (2) SPECIAL NEEDS SHELTER PLAN; STAFFING; CLOSURE;
18 STATE AGENCY ASSISTANCE AND STAFFING.--Provided funds have
19 been appropriated to support ~~medical services~~ disaster
20 coordinator positions in county health departments:--

21 (a) The department shall assume lead responsibility
22 for the ~~local~~ coordination of local medical and health care
23 providers, the American Red Cross, and other interested
24 parties in developing a plan for the staffing and medical
25 management of special needs shelters. The local Children's
26 Medical Services offices shall assume lead responsibility for
27 the coordination of local medical and health care providers,
28 the American Red Cross, and other interested parties in
29 developing a plan for the staffing and medical management of
30 pediatric special needs shelters. Plans shall conform to The
31

1 ~~plan shall be in conformance with~~ the local comprehensive
2 emergency management plan.

3 ~~(b)(a)~~ County health departments shall, in conjunction
4 with the local emergency management agencies, have the lead
5 responsibility for coordination of the recruitment of health
6 care practitioners to staff local special needs shelters.

7 County health departments shall assign their employees to work
8 in special needs shelters when those employees are needed to
9 protect the health and safety of persons with special needs ~~of~~
10 ~~patients~~. County governments shall assist the Department of
11 Health with nonmedical staffing and the operation of special
12 needs shelters. The local health department and emergency
13 management agency shall coordinate these efforts to ensure
14 appropriate staffing in special needs shelters.

15 ~~(c)(b)~~ The appropriate county health department,
16 Children's Medical Services office, and local emergency
17 management agency shall jointly decide ~~determine~~ who has
18 responsibility for medical supervision in each ~~a~~ special needs
19 shelter and shall notify the Division of Emergency Management
20 and the Department of Health of their decision.

21 ~~(d)(e)~~ Local emergency management agencies shall be
22 responsible for the designation, ~~and~~ operation, and
23 infrastructure of special needs shelters during times of
24 emergency or disaster and the closure of the facilities
25 following an emergency or disaster. The emergency management
26 agency and the local health department shall coordinate these
27 efforts to ensure appropriate designation, operation, and
28 infrastructure in special needs shelters. County health
29 departments shall assist the local emergency management agency
30 with regard to the management of medical services in special
31 needs shelters. However, nothing in this section prohibits a

1 county health department from entering into an alternative
2 agreement with a local emergency management agency to assume
3 the lead responsibility for special needs shelter supplies and
4 equipment.

5 (e) Any state employee with a preestablished role in
6 disaster response that has been designated by the employing
7 agency is subject to serve in times of disaster in a capacity
8 that is commensurate with the employee's knowledge, skills,
9 and abilities and to participate in any needed activities
10 related to the disaster unless the employee has other mandated
11 response activities that preclude participation.

12 (f) The Secretary of Elderly Affairs, or his or her
13 designee, shall convene, at any time that he or she deems
14 appropriate and necessary, a multiagency special needs shelter
15 discharge planning team or teams to assist local areas that
16 are severely impacted by a natural or manmade disaster that
17 requires the use of special needs shelters. Multiagency
18 special needs shelter discharge planning teams shall provide
19 assistance to local emergency management agencies with the
20 continued operation or closure of the shelters, as well as
21 with the discharge of special needs clients to alternate
22 facilities if necessary. Local emergency management agencies
23 may request the assistance of a multiagency special needs
24 shelter discharge planning team by alerting statewide
25 emergency management officials of the necessity for additional
26 assistance in their area. The Secretary of Elderly Affairs is
27 encouraged to proactively work with other state agencies prior
28 to any natural disasters for which warnings are provided to
29 ensure that multiagency special needs shelter discharge
30 planning teams are ready to assemble and deploy rapidly upon a
31 determination by state emergency management officials that a

1 disaster area requires additional assistance. The Secretary of
2 Elderly Affairs may call upon any state agency or office to
3 provide staff to assist a multiagency special needs shelter
4 discharge planning team or teams. Unless the secretary
5 determines that the nature or circumstances surrounding the
6 disaster do not warrant participation from a particular
7 agency's staff, each multiagency special needs shelter
8 discharge planning team shall include at least one
9 representative from each of the following state agencies:

- 10 1. Department of Elderly Affairs.
- 11 2. Department of Health.
- 12 3. Department of Children and Family Services.
- 13 4. Department of Veterans' Affairs.
- 14 5. Department of Community Affairs.
- 15 6. Agency for Health Care Administration.
- 16 7. Agency for Persons with Disabilities.

17 (3) REIMBURSEMENT TO HEALTH CARE PRACTITIONERS AND
18 FACILITIES.--

19 (a) The Department of Health shall upon request
20 ~~reimburse, subject to the availability of funds for this~~
21 ~~purpose,~~ health care practitioners, as defined in s. 456.001,
22 provided the practitioner is not providing care to a patient
23 under an existing contract, and emergency medical technicians
24 and paramedics licensed under ~~pursuant to~~ chapter 401 for
25 medical care provided at the request of the department in
26 special needs shelters or at other locations during times of
27 emergency or a declared major ~~major~~ disaster. Reimbursement for
28 health care practitioners, except for physicians licensed
29 under ~~pursuant to~~ chapter 458 or chapter 459, shall be based
30 on the average hourly rate that such practitioners were paid
31 according to the most recent survey of Florida hospitals

1 | conducted by the Florida Hospital Association or other
2 | nationally or state recognized data source. Reimbursement
3 | shall be requested on forms prepared by the Department of
4 | Health and shall be paid as specified in paragraph (c).

5 | (b) If, upon closure of a special needs shelter, a
6 | multiagency special needs shelter discharge planning team
7 | determines that it is necessary to discharge persons with
8 | special needs to other facilities, such as hospitals, nursing
9 | homes, assisted living facilities, and community residential
10 | homes, the receiving facilities shall be eligible for
11 | reimbursement for services provided to the individuals for up
12 | to 90 days. Any facility eligible for reimbursement under this
13 | paragraph shall submit invoices for reimbursement on forms
14 | developed by the department. A facility must show proof of a
15 | written request from a representative of an agency serving on
16 | the multiagency special needs shelter discharge planning team
17 | that the individual for whom the facility is seeking
18 | reimbursement for services rendered was referred to that
19 | facility from a special needs shelter. The department shall
20 | specify by rule which expenses are reimbursable and the rate
21 | of reimbursement for each service. Reimbursement for the
22 | services described in this paragraph shall be paid as
23 | specified in paragraph (c).

24 | (c) If a Presidential Disaster Declaration has been
25 | issued made, and the Federal Government makes funds available,
26 | the department shall request federal use such funds for
27 | reimbursement of eligible expenditures. In other situations,
28 | or if federal funds do not fully compensate the department for
29 | reimbursements permissible under reimbursement made pursuant
30 | to this section, the department shall process a budget
31 | amendment to obtain reimbursement from unobligated,

1 unappropriated moneys in the General Revenue Fund. The
2 department shall not provide reimbursement to facilities under
3 this subsection for services provided to a person with special
4 needs if, during the period of time in which the services were
5 provided, the individual was enrolled in another state-funded
6 program, such as Medicaid or another similar program, was
7 covered under a policy of health insurance as defined in s.
8 624.603, or was a member of a health maintenance organization
9 or prepaid health clinic as defined in chapter 641, which
10 would otherwise pay for the same services. Travel expense and
11 per diem costs shall be reimbursed pursuant to s. 112.061.

12 (4) HEALTH CARE PRACTITIONER REGISTRY.--The department
13 may use the registries established in ss. 401.273 and 456.38
14 when health care practitioners are needed to staff special
15 needs shelters or to assist with other disaster-related
16 activities ~~staff disaster medical assistance teams.~~

17 (5) SPECIAL NEEDS SHELTER INTERAGENCY COMMITTEE.--The
18 ~~Secretary~~ Department of Health may establish a special needs
19 shelter interagency committee and serve as or appoint a
20 designee to serve as the committee's chair. The department
21 shall provide any necessary staff and resources to support the
22 committee in the performance of its duties, ~~to be chaired and~~
23 ~~staffed by the department.~~ The committee shall address and
24 resolve problems related to special needs shelters not
25 addressed in the state comprehensive emergency medical plan
26 and shall consult on ~~serve as an oversight committee to~~
27 ~~monitor~~ the planning and operation of special needs shelters.

28 (a) The committee shall ~~may~~:

29 1. Develop, ~~and~~ negotiate, and regularly review any
30 necessary interagency agreements.
31

1 2. Undertake other such activities as the department
2 deems necessary to facilitate the implementation of this
3 section.

4 3. Submit recommendations to the Legislature as
5 necessary.

6 (b) The special needs shelter interagency committee
7 shall be composed of representatives of emergency management,
8 health, medical, and social services organizations. Membership
9 shall include, but shall not be limited to, representatives of
10 the Departments of Health, Community Affairs, Children and
11 Family Services, Elderly Affairs, ~~Labor and Employment~~
12 ~~Security~~, and Education; the Agency for Health Care
13 Administration; the Florida Medical Association; the Florida
14 Osteopathic Medical Association; Associated Home Health
15 Industries of Florida, Inc.; the Florida Nurses Association;
16 the Florida Health Care Association; the Florida Assisted
17 Living Affiliation Association; the Florida Hospital
18 Association; the Florida Statutory Teaching Hospital Council;
19 the Florida Association of Homes for the Aging; the Florida
20 Emergency Preparedness Association; the American Red Cross;
21 Florida Hospices and Palliative Care, Inc.; the Association of
22 Community Hospitals and Health Systems; the Florida
23 Association of Health Maintenance Organizations; the Florida
24 League of Health Systems; Private Care Association; ~~and~~ the
25 Salvation Army; the Florida Association of Aging Services
26 Providers; AARP; the Florida Area Health Education Center
27 Network; and the Florida Renal Coalition.

28 (c) Meetings of the committee shall be held in
29 Tallahassee, and members of the committee shall serve at the
30 expense of the agencies or organizations they represent. The
31 committee shall make every effort to use teleconference or

1 video conference capabilities in order to ensure statewide
2 input and participation.

3 (6) RULES.--The department has the authority to adopt
4 rules necessary to implement this section. Rules shall ~~may~~
5 include:

6 (a) The a definition of a "person with special needs,"
7 including eligibility criteria for individuals with physical,
8 mental, cognitive impairment, or sensory disabilities and the
9 services a person with special needs can expect to receive in
10 a special needs shelter patient, specify physician
11 reimbursement, and designate which county health departments
12 will have responsibility for implementation of subsections (2)
13 and (3).

14 (b) The process for special needs shelter health care
15 practitioners and facility reimbursement for services provided
16 in a disaster.

17 (c) Guidelines for special needs shelter staffing
18 levels to provide services.

19 (d) The definition of and standards for special needs
20 shelter supplies and equipment, including durable medical
21 equipment.

22 (e) Compliance with applicable laws relating to
23 service animals.

24 (f) Standards for the special needs shelter
25 registration process, including guidelines for addressing the
26 needs of unregistered persons in need of a special needs
27 shelter.

28 (g) Standards for addressing the needs of families
29 where only one dependent is eligible for admission to a
30 special needs shelter and the needs of adults with special
31

1 needs who are caregivers for individuals without special
2 needs.

3 (h) The requirement of the county health departments
4 to seek the participation of hospitals, nursing homes,
5 assisted living facilities, home health agencies, hospice
6 providers, nurse registries, home medical equipment providers,
7 dialysis centers, and other health and medical emergency
8 preparedness stakeholders in preevent planning activities.

9 (7) REVIEW OF EMERGENCY MANAGEMENT PLANS; CONTINUITY
10 OF CARE.--Each emergency management plan submitted to a county
11 health department by a home health agency under s. 400.492, by
12 a nurse registry pursuant to s. 400.506(16)(e), by a hospice
13 pursuant to s. 400.610(1)(b), or by a home medical equipment
14 provider pursuant to s. 400.934(20)(a) shall specify the means
15 by which the home health agency, nurse registry, hospice, or
16 home medical equipment provider will continue to provide staff
17 and equipment to perform the same type and quantity of
18 services for their patients who evacuate to special needs
19 shelters that were being provided to those patients prior to
20 evacuation. The submission of emergency management plans to
21 county health departments by home health agencies, ~~pursuant to~~
22 ~~s. 400.497(8)(c) and (d) and by nurse registries, pursuant to~~
23 ~~s. 400.506(16)(e) and by hospice programs, pursuant to s.~~
24 400.610(1)(b) and home medical equipment providers is
25 conditional upon the receipt of an appropriation by the
26 department to establish ~~medical services~~ disaster coordinator
27 positions in county health departments unless the secretary of
28 the department and a local county commission jointly determine
29 to require such plans to be submitted based on a determination
30 that there is a special need to protect public health in the
31 local area during an emergency.

1 Section 6. Section 400.492, Florida Statutes, is
2 amended to read:

3 400.492 Provision of services during an
4 emergency.--Each home health agency shall prepare and maintain
5 a comprehensive emergency management plan that is consistent
6 with the standards adopted by national or state accreditation
7 organizations and consistent with the local special needs
8 plan. The plan shall be updated annually and shall provide for
9 continuing home health services during an emergency that
10 interrupts patient care or services in the patient's home. The
11 plan shall include the means by which the home health agency
12 will continue to provide staff to perform the same type and
13 quantity of services to their patients who evacuate to special
14 needs shelters that were being provided to those patients
15 prior to evacuation. The plan shall describe how the home
16 health agency establishes and maintains an effective response
17 to emergencies and disasters, including: notifying staff when
18 emergency response measures are initiated; providing for
19 communication between staff members, county health
20 departments, and local emergency management agencies,
21 including a backup system; identifying resources necessary to
22 continue essential care or services or referrals to other
23 organizations subject to written agreement; and prioritizing
24 and contacting patients who need continued care or services.

25 (1) Each patient record for patients who are listed in
26 the registry established pursuant to s. 252.355 shall include
27 a description of how care or services will be continued in the
28 event of an emergency or disaster. The home health agency
29 shall discuss the emergency provisions with the patient and
30 the patient's caregivers, including where and how the patient
31 is to evacuate, procedures for notifying the home health

1 agency in the event that the patient evacuates to a location
2 other than the shelter identified in the patient record, and a
3 list of medications and equipment which must either accompany
4 the patient or will be needed by the patient in the event of
5 an evacuation.

6 (2) Each home health agency shall maintain a current
7 prioritized list of patients who need continued services
8 during an emergency. The list shall indicate how services
9 shall be continued in the event of an emergency or disaster
10 for each patient and if the patient is to be transported to a
11 special needs shelter, and shall indicate if the patient is
12 receiving skilled nursing services and the patient's
13 medication and equipment needs. The list shall be furnished to
14 county health departments and to local emergency management
15 agencies, upon request.

16 (3) Home health agencies shall not be required to
17 continue to provide care to patients in emergency situations
18 that are beyond their control and that make it impossible to
19 provide services, such as when roads are impassable or when
20 patients do not go to the location specified in their patient
21 records. Home health agencies may establish links to local
22 emergency operations centers to determine a mechanism to
23 approach specific areas within a disaster area in order for
24 the agency to reach its clients. The presentation of a home
25 health agency client to a special needs shelter without the
26 home health agency making a good faith effort to provide
27 services in the shelter setting shall be considered
28 abandonment of the client and constitutes a class II
29 deficiency, subject to sanctions provided in s. 400.484(2)(b).
30 For purposes of this section, "good faith effort" may be
31 demonstrated by documented attempts of staff to follow

1 procedures as outlined in the home health agency's
2 comprehensive emergency management plan, and by the patient's
3 record, which support a finding that continuing care has been
4 provided for those patients who have been identified as
5 needing care by the home health agency in the event of an
6 emergency or disaster under subsection (1).

7 (4) Notwithstanding the provisions of s. 400.464(2) or
8 any other provision of law to the contrary, a home health
9 agency may provide services in a special needs shelter located
10 in any county.

11 Section 7. Paragraphs (c) and (d) of subsection (8) of
12 section 400.497, Florida Statutes, are amended to read:

13 400.497 Rules establishing minimum standards.--The
14 agency shall adopt, publish, and enforce rules to implement
15 this part, including, as applicable, ss. 400.506 and 400.509,
16 which must provide reasonable and fair minimum standards
17 relating to:

18 (8) Preparation of a comprehensive emergency
19 management plan pursuant to s. 400.492.

20 (c) The plan is subject to review and approval by the
21 county health department. During its review, the county health
22 department shall contact state and local health and medical
23 stakeholders during its review when necessary. ~~ensure that the~~
24 ~~following agencies, at a minimum, are given the opportunity to~~
25 ~~review the plan:~~

- 26 1. ~~The local emergency management agency.~~
- 27 2. ~~The Agency for Health Care Administration.~~
- 28 3. ~~The local chapter of the American Red Cross or~~
29 ~~other lead sheltering agency.~~
- 30 4. ~~The district office of the Department of Children~~
31 ~~and Family Services.~~

1
2 The county health department shall complete its review to
3 ensure that the plan is in accordance with the criteria set
4 forth in the rules of the Agency for Health Care
5 Administration within 90 ~~60~~ days after receipt of the plan and
6 shall either approve the plan or advise the home health agency
7 of necessary revisions. If the home health agency fails to
8 submit a plan or fails to submit the requested information or
9 revisions to the county health department within 30 days after
10 written notification from the county health department, the
11 county health department shall notify the Agency for Health
12 Care Administration. The agency shall notify the home health
13 agency that such failure constitutes a deficiency, subject to
14 a fine of \$5,000 per occurrence. If the plan is not submitted,
15 information is not provided, or revisions are not made as
16 requested, the agency may impose the fine.

17 (d) For any home health agency that operates in more
18 than one county, the Department of Health shall review the
19 plan, after consulting with state and local health and medical
20 stakeholders, when necessary ~~all of the county health~~
21 ~~departments, the agency, and all the local chapters of the~~
22 ~~American Red Cross or other lead sheltering agencies in the~~
23 ~~areas of operation for that particular home health agency.~~ The
24 department ~~of Health~~ shall complete its review within 90 days
25 after receipt of the plan and shall either approve the plan or
26 advise the home health agency of necessary revisions. The
27 department ~~of Health~~ shall make every effort to avoid imposing
28 differing requirements on a home health agency that operates
29 in more than one county as a result of differing or
30 conflicting comprehensive plan requirements of the ~~based on~~
31

1 ~~differences between counties in which~~ ~~on~~ the home health
2 agency operates.

3 Section 8. Subsection (16) of section 400.506, Florida
4 Statutes, is amended to read:

5 400.506 Licensure of nurse registries; requirements;
6 penalties.--

7 (16) Each nurse registry shall prepare and maintain a
8 comprehensive emergency management plan that is consistent
9 with the criteria in this subsection and with the local
10 special needs plan. The plan shall be updated annually. The
11 plan shall include the means by which the nurse registry will
12 continue to provide staff to perform the same type and
13 quantity of services to their patients who evacuate to special
14 needs shelters that were being provided to those patients
15 prior to evacuation. The plan shall specify how the nurse
16 registry shall facilitate the provision of continuous care by
17 persons referred for contract to persons who are registered
18 pursuant to s. 252.355 during an emergency that interrupts the
19 provision of care or services in private residencies. Nurse
20 registries may establish links to local emergency operations
21 centers to determine a mechanism to approach specific areas
22 within a disaster area in order for a provider to reach its
23 clients. The presentation of nurse registry clients to a
24 special needs shelter without the nurse registry provider
25 making a good faith effort to provide services in the shelter
26 setting shall be considered abandonment of the patient and
27 constitutes a class II deficiency, subject to sanctions
28 provided in s. 400.484(2)(b). For purposes of this section,
29 "good faith effort" may be demonstrated by documented attempts
30 of staff to follow procedures as outlined in the nurse
31 registry's comprehensive emergency management plan which

1 support a finding that continuing care has been provided for
2 those patients who have been identified as needing care by the
3 nurse registry in the event of an emergency under s.
4 400.506(1).

5 (a) All persons referred for contract who care for
6 persons registered pursuant to s. 252.355 must include in the
7 patient record a description of how care will be continued
8 during a disaster or emergency that interrupts the provision
9 of care in the patient's home. It shall be the responsibility
10 of the person referred for contract to ensure that continuous
11 care is provided.

12 (b) Each nurse registry shall maintain a current
13 prioritized list of patients in private residences who are
14 registered pursuant to s. 252.355 and are under the care of
15 persons referred for contract and who need continued services
16 during an emergency. This list shall indicate, for each
17 patient, if the client is to be transported to a special needs
18 shelter and if the patient is receiving skilled nursing
19 services. Nurse registries shall make this list available to
20 county health departments and to local emergency management
21 agencies upon request.

22 (c) Each person referred for contract who is caring
23 for a patient who is registered pursuant to s. 252.355 shall
24 provide a list of the patient's medication and equipment needs
25 to the nurse registry. Each person referred for contract shall
26 make this information available to county health departments
27 and to local emergency management agencies upon request.

28 (d) Each person referred for contract shall not be
29 required to continue to provide care to patients in emergency
30 situations that are beyond the person's control and that make
31 it impossible to provide services, such as when roads are

1 impassable or when patients do not go to the location
2 specified in their patient records.

3 (e) The comprehensive emergency management plan
4 required by this subsection is subject to review and approval
5 by the county health department. During its review, the county
6 health department shall contact state and local health and
7 medical stakeholders, when necessary ~~ensure that, at a~~
8 ~~minimum, the local emergency management agency, the Agency for~~
9 ~~Health Care Administration, and the local chapter of the~~
10 ~~American Red Cross or other lead sheltering agency are given~~
11 ~~the opportunity to review the plan.~~ The county health
12 department shall complete its review to ensure that the plan
13 is in accordance with the criteria set forth in the rules of
14 the Agency for Health Care Administration within 90 ~~60~~ days
15 after receipt of the plan and shall either approve the plan or
16 advise the nurse registry of necessary revisions. If a nurse
17 registry fails to submit a plan or fails to submit requested
18 information or revisions to the county health department
19 within 30 days after written notification from the county
20 health department, the county health department shall notify
21 the Agency for Health Care Administration. The agency shall
22 notify the nurse registry that such failure constitutes a
23 deficiency, subject to a fine of \$5,000 per occurrence. If the
24 plan is not submitted, information is not provided, or
25 revisions are not made as requested, the agency may impose the
26 fine.

27 (f) The Department of Health shall review the
28 comprehensive emergency management plan of any nurse registry
29 that operates in more than one county. The department shall
30 complete its review within 90 days after receipt of the plan
31 and shall either approve the plan or advise the nurse registry

1 of necessary revisions. The department shall make every effort
2 to avoid imposing differing requirements on nurse registries
3 that operate in more than one county as a result of differing
4 or conflicting comprehensive plan requirements of the counties
5 in which the nurse registry operates.

6 ~~(g)(f)~~ The Agency for Health Care Administration shall
7 adopt rules establishing minimum criteria for the
8 comprehensive emergency management plan and plan updates
9 required by this subsection, with the concurrence of the
10 Department of Health and in consultation with the Department
11 of Community Affairs.

12 Section 9. Paragraph (b) of subsection (1) of section
13 400.610, Florida Statutes, is amended to read:

14 400.610 Administration and management of a hospice.--

15 (1) A hospice shall have a clearly defined organized
16 governing body, consisting of a minimum of seven persons who
17 are representative of the general population of the community
18 served. The governing body shall have autonomous authority and
19 responsibility for the operation of the hospice and shall meet
20 at least quarterly. The governing body shall:

21 (b)1. Prepare and maintain a comprehensive emergency
22 management plan that provides for continuing hospice services
23 in the event of an emergency that is consistent with local
24 special needs plans. The plan shall include provisions for
25 ensuring continuing care to hospice patients who go to special
26 needs shelters. The plan shall include the means by which the
27 hospice provider will continue to provide staff to perform the
28 same type and quantity of services to their patients who
29 evacuate to special needs shelters that were being provided to
30 those patients prior to evacuation. The plan is subject to
31 review and approval by the county health department, except as

1 provided in subparagraph 2. During its review, the county
2 health department shall contact state and local health and
3 medical stakeholders, when necessary ~~ensure that the~~
4 ~~department, the agency, and the local chapter of the American~~
5 ~~Red Cross or other lead sheltering agency have an opportunity~~
6 ~~to review and comment on the plan.~~ The county health
7 department shall complete its review to ensure that the plan
8 is in accordance with the criteria set forth in the rules of
9 the Department of Elderly Affairs within 90 60 days after
10 receipt of the plan and shall either approve the plan or
11 advise the hospice of necessary revisions. Hospice providers
12 may establish links to local emergency operations centers to
13 determine a mechanism to approach specific areas within a
14 disaster area in order for the provider to reach its clients.
15 The presentation of hospice clients to a special needs shelter
16 without the hospice provider making a good faith effort to
17 provide services in the shelter setting shall be considered
18 abandonment of the client subject to sanction as provided by
19 law or rule. For the purposes of this section, "good faith
20 effort" may be demonstrated by documented attempts of staff to
21 follow procedures as outlined in the hospice's comprehensive
22 emergency management plan and to provide continuing care for
23 those hospice clients who have been identified as needing
24 alternative caregiver services in the event of an emergency.

25 2. For any hospice that operates in more than one
26 county, the Department of Health during its review shall
27 contact state and local health and medical stakeholders, when
28 necessary ~~review the plan, after consulting with all of the~~
29 ~~county health departments, the agency, and all the local~~
30 ~~chapters of the American Red Cross or other lead sheltering~~
31 ~~agency in the areas of operation for that particular hospice.~~

1 The Department of Health shall complete its review to ensure
2 that the plan is in accordance with the criteria set forth in
3 the rules of the Department of Elderly Affairs within 90 days
4 after receipt of the plan and shall either approve the plan or
5 advise the hospice of necessary revisions. The Department of
6 Health shall make every effort to avoid imposing ~~on the~~
7 ~~hospice~~ differing requirements on a hospice that operates in
8 more than one county as a result of differing or conflicting
9 comprehensive plan requirements of the ~~based on differences~~
10 ~~between~~ counties in which the hospice operates.

11 Section 10. Subsections (13) through (16) of section
12 400.925, Florida Statutes, are renumbered as subsections (14)
13 through (17), respectively, and a new subsection (13) is added
14 to that section to read:

15 400.925 Definitions.--As used in this part, the term:
16 (13) "Life-supporting or life-sustaining equipment"
17 means a device that is essential to, or that yields
18 information that is essential to, the restoration or
19 continuation of a bodily function important to the
20 continuation of human life. Life-supporting or life-sustaining
21 equipment includes apnea monitors, enteral feeding pumps,
22 infusion pumps, portable home dialysis equipment, and
23 ventilator equipment and supplies for all related equipment,
24 including oxygen equipment and related respiratory equipment.

25 Section 11. Subsections (20), (21), and (22) are added
26 to section 400.934, Florida Statutes, to read:

27 400.934 Minimum standards.--As a requirement of
28 licensure, home medical equipment providers shall:
29 (20)(a) Prepare and maintain a comprehensive emergency
30 management plan that meets minimum criteria established by the
31 agency in rule under s. 400.935. The plan shall be updated

1 annually and shall provide for continuing home medical
2 equipment services for life-supporting or life-sustaining
3 equipment, as defined in 400.925, during an emergency that
4 interrupts home medical equipment services in a patient's
5 home. The plan shall include:

6 1. The means by which the home medical equipment
7 provider will continue to provide equipment to perform the
8 same type and quantity of services to its patients who
9 evacuate to special needs shelters that were being provided to
10 those patients prior to evacuation.

11 2. The means by which the home medical equipment
12 provider establishes and maintains an effective response to
13 emergencies and disasters, including plans for:

14 a. Notification of staff when emergency response
15 measures are initiated.

16 b. Communication between staff members, county health
17 departments, and local emergency management agencies, which
18 shall include provisions for a backup communications system.

19 c. Identification of resources necessary to continue
20 essential care or services or referrals to other organizations
21 subject to written agreement.

22 d. Contacting and prioritizing patients in need of
23 continued medical equipment services and supplies.

24 (b) The plan is subject to review and approval by the
25 county health department. During its review, the county health
26 department shall contact state and local health and medical
27 stakeholders, when necessary. The county health department
28 shall complete its review to ensure that the plan is in
29 accordance with the criteria set forth in the rules of the
30 Agency for Health Care Administration within 90 days after
31 receipt of the plan. If a home medical equipment provider

1 fails to submit a plan or fails to submit requested
2 information or revisions to the county health department
3 within 30 days after written notification from the county
4 health department, the county health department shall notify
5 the Agency for Health Care Administration. The agency shall
6 notify the home medical equipment provider that such failure
7 constitutes a deficiency, subject to a fine of \$5,000 per
8 occurrence. If the plan is not submitted, information is not
9 provided, or revisions are not made as requested, the agency
10 may impose the fine.

11 (c) The Department of Health shall review the
12 comprehensive emergency management plan of any home medical
13 equipment provider that operates in more than one county. The
14 department shall complete its review within 90 days after
15 receipt of the plan and shall either approve the plan or
16 advise the home medical equipment provider of necessary
17 revisions. The department shall make every effort to avoid
18 imposing differing requirements on home medical equipment
19 providers that operate in more than one county as a result of
20 differing or conflicting comprehensive plan requirements of
21 the counties in which the home medical equipment provider
22 operates.

23 (21) Each home medical equipment provider shall
24 maintain a current prioritized list of patients who need
25 continued services during an emergency. The list shall
26 indicate the means by which services shall be continued for
27 each patient in the event of an emergency or disaster, whether
28 the patient is to be transported to a special needs shelter,
29 and whether the patient has life-supporting or life-sustaining
30 equipment, including the specific type of equipment and
31 related supplies. The list shall be furnished to county health

1 departments and local emergency management agencies, upon
2 request.

3 (22) Home medical equipment providers may establish
4 links to local emergency operations centers to determine a
5 mechanism to approach specific areas within a disaster area in
6 order for the provider to reach its patients.

7 Section 12. Subsection (11) is added to section
8 400.935, Florida Statutes, to read:

9 400.935 Rules establishing minimum standards.--The
10 agency shall adopt, publish, and enforce rules to implement
11 this part, which must provide reasonable and fair minimum
12 standards relating to:

13 (11) Preparation of the comprehensive emergency
14 management plan under s. 400.934 and the establishment of
15 minimum criteria for the plan, including the maintenance of
16 patient equipment and supply lists that can accompany patients
17 who are transported from their homes. Such rules shall be
18 formulated in consultation with the Department of Health and
19 the Department of Community Affairs.

20 Section 13. Section 408.831, Florida Statutes, is
21 amended to read:

22 408.831 Denial, suspension, or revocation of a
23 license, registration, certificate, or application.--

24 (1) In addition to any other remedies provided by law,
25 the agency may deny each application or suspend or revoke each
26 license, registration, or certificate of entities regulated or
27 licensed by it:

28 (a) If the applicant, licensee, registrant, or
29 certificateholder, or, in the case of a corporation,
30 partnership, or other business entity, if any officer,
31 director, agent, or managing employee of that business entity

1 or any affiliated person, partner, or shareholder having an
2 ownership interest equal to 5 percent or greater in that
3 business entity, has failed to pay all outstanding fines,
4 liens, or overpayments assessed by final order of the agency
5 or final order of the Centers for Medicare and Medicaid
6 Services, not subject to further appeal, unless a repayment
7 plan is approved by the agency; or

8 (b) For failure to comply with any repayment plan.

9 (2) In reviewing any application requesting a change
10 of ownership or change of the licensee, registrant, or
11 certificateholder, the transferor shall, prior to agency
12 approval of the change, repay or make arrangements to repay
13 any amounts owed to the agency. Should the transferor fail to
14 repay or make arrangements to repay the amounts owed to the
15 agency, the issuance of a license, registration, or
16 certificate to the transferee shall be delayed until repayment
17 or until arrangements for repayment are made.

18 (3) Entities subject to this section may exceed their
19 licensed capacity to act as a receiving facility in accordance
20 with an emergency operations plan for clients of evacuating
21 providers from a geographic area where an evacuation order has
22 been issued by a local authority having jurisdiction. While in
23 an overcapacity status, each provider must furnish or arrange
24 for appropriate care and services to all clients. In addition,
25 the agency may approve requests for overcapacity beyond 15
26 days, which approvals may be based upon satisfactory
27 justification and need as provided by the receiving and
28 sending facility.

29 (4) An inactive license may be issued to a licensee
30 subject to this section when the provider is located in a
31

1 geographic area where a state of emergency was declared by the
2 Governor if the provider:

3 (a) Suffered damage to the provider's operation during
4 that state of emergency.

5 (b) Is currently licensed.

6 (c) Does not have a provisional license.

7 (d) Will be temporarily unable to provide services but
8 is reasonably expected to resume services within 12 months.

9
10 An inactive license may be issued for a period not to exceed
11 12 months but may be renewed by the agency for up to 12
12 additional months upon demonstration to the agency of progress
13 toward reopening. A request by a licensee for an inactive
14 license or to extend the previously approved inactive period
15 must be submitted in writing to the agency, accompanied by
16 written justification for the inactive license which states
17 the beginning and ending dates of inactivity and includes a
18 plan for the transfer of any clients to other providers and
19 appropriate licensure fees. Upon agency approval, the licensee
20 shall notify clients of any necessary discharge or transfer as
21 required by authorizing statutes or applicable rules. The
22 beginning of the inactive licensure period shall be the date
23 the provider ceases operations. The end of the inactive period
24 shall become the license expiration date, and all licensure
25 fees must be current, paid in full, and may be prorated.
26 Reactivation of an inactive license requires the prior
27 approval by the agency of a renewal application, including
28 payment of licensure fees and agency inspections indicating
29 compliance with all requirements of this part and applicable
30 rules and statutes.

31

1 ~~(5)(3)~~ This section provides standards of enforcement
2 applicable to all entities licensed or regulated by the Agency
3 for Health Care Administration. This section controls over any
4 conflicting provisions of chapters 39, 381, 383, 390, 391,
5 393, 394, 395, 400, 408, 468, 483, and 641 or rules adopted
6 pursuant to those chapters.

7 Section 14. This act shall take effect July 1, 2006.

8
9 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
10 COMMITTEE SUBSTITUTE FOR
11 CS for CS for Senate Bill 1058

12 The committee substitute adds the Florida Area Health
13 Education Center Network to the list of representatives for
14 the special needs shelter interagency committee. An inactive
15 license may now be renewed by the agency for up to 12
16 additional months instead of 6. The committee substitute also
17 makes several other technical changes.
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