Florida Senate - 2006

By Senator Saunders

37-1242A-06

1	A bill to be entitled
2	An act relating to the licensure of health care
3	providers; creating parts I, II, III, and IV of
4	ch. 408, F.S.; creating s. 408.801, F.S.;
5	designating part II of ch. 408, F.S.,
6	consisting of ss. 408.801-408.820, F.S., as the
7	"Health Care Licensing Procedures Act";
8	providing legislative findings and purpose;
9	creating s. 408.802, F.S.; providing
10	applicability; creating s. 408.803, F.S.;
11	providing definitions; creating s. 408.804,
12	F.S.; requiring providers to have and display a
13	license from the Agency for Health Care
14	Administration; providing limitations; creating
15	s. 408.805, F.S.; establishing license fees;
16	providing a method for calculating annual
17	adjustment of fees; creating s. 408.806, F.S.;
18	providing a license application process;
19	requiring specified information to be included
20	on the application; requiring payment of late
21	fees under certain circumstances; requiring
22	inspections; providing an exception;
23	authorizing the Agency for Health Care
24	Administration to establish procedures and
25	rules for the electronic transmission of
26	required information; creating s. 408.807,
27	F.S.; providing procedures for a change of
28	ownership by a licensee; requiring the
29	transferor to notify the agency in writing
30	within a specified period; providing for duties
31	and liability of the transferor; providing for

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1	maintenance of records; creating s. 408.808,
2	F.S.; providing license categories and
3	requirements therefor; creating s. 408.809,
4	F.S.; requiring background screening of
5	specified employees; providing for submission
6	of proof of compliance, under certain
7	circumstances; providing conditions for
8	granting provisional and standard licenses;
9	providing an exception to screening
10	requirements; creating s. 408.810, F.S.;
11	providing minimum licensure requirements;
12	providing procedures for discontinuance of
13	operation and surrender of a license; requiring
14	forwarding of client records; requiring
15	publication of a notice of discontinuance of
16	operation by a provider; providing penalties;
17	providing for statewide toll-free telephone
18	numbers for reporting complaints and abusive,
19	neglectful, or exploitative practices;
20	requiring that a provider provide proof of a
21	legal right to occupy property, proof of
22	insurance, and proof of financial viability,
23	under certain circumstances; requiring
24	disclosure of information relating to financial
25	instability; providing a penalty; prohibiting
26	the agency from licensing a health care
27	provider that does not have a certificate of
28	need or an exemption; creating s. 408.811,
29	F.S.; providing for inspections and
30	investigations by the agency to determine
31	compliance; providing that inspection reports

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1	are public records; requiring retention of
2	records for a specified period; creating s.
3	408.812, F.S.; prohibiting certain unlicensed
4	activity by a provider; requiring unlicensed
5	providers to cease activity; providing
6	penalties; requiring the reporting of
7	unlicensed providers; creating s. 408.813,
8	F.S.; authorizing the agency to impose
9	administrative fines; creating s. 408.814,
10	F.S.; providing conditions for the agency to
11	impose a moratorium or emergency suspension
12	against a provider; requiring notice; creating
13	s. 408.815, F.S.; providing grounds for denial
14	or revocation of a license or
15	change-of-ownership application; providing
16	conditions for continuing operation; exempting
17	renewal applications from provisions requiring
18	the agency to approve or deny an application
19	within a specified period, under certain
20	circumstances; creating s. 408.816, F.S.;
21	authorizing the agency to institute injunction
22	proceedings, under certain circumstances;
23	creating s. 408.817, F.S.; providing a basis
24	for review of administrative proceedings
25	challenging licensure enforcement action by the
26	agency; creating s. 408.818, F.S.; requiring
27	fees and fines related to health care licensing
28	to be deposited into the Health Care Trust
29	Fund; creating s. 408.819, F.S.; authorizing
30	the agency to adopt rules; providing a
31	timeframe for compliance; creating s. 408.820,

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1	F.S.; providing exemptions from specified
2	requirements of part II of ch. 408, F.S.;
3	amending s. 400.801, F.S.; providing that the
4	definition of the term "homes for special
5	services" applies to sites licensed by the
б	agency after a certain date; amending s.
7	400.9905, F.S.; revising the types of entities
8	providing oncology or radiation therapy
9	services which are included within the
10	definition of the word "entities" for purposes
11	of the Health Care Clinic Act; amending s.
12	408.831, F.S.; revising provisions relating to
13	agency action to deny, suspend, or revoke a
14	license, registration, certificate, or
15	application; conforming cross-references;
16	providing for priority of application in case
17	of conflict; authorizing the agency to adjust
18	annual licensure fees to provide biennial
19	licensure fees; requiring the Division of
20	Statutory Revision to assist in preparing
21	conforming legislation; authorizing the agency
22	to issue licenses for less than a specified
23	time period and providing conditions therefor;
24	providing an effective date.
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26	Be It Enacted by the Legislature of the State of Florida:
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28	Section 1. <u>Part I of chapter 408, Florida Statutes,</u>
29	consisting of sections 408.031, 408.032, 408.033, 408.034,
30	<u>408.035, 408.036, 408.0361, 408.037, 408.038, 408.039,</u>
31	<u>408.040, 408.041, 408.042, 408.043, 408.044, 408.045,</u>

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1 408.0455, 408.05, 408.061, 408.062, 408.063, 408.07, 408.08, 2 408.09, 408.10, 408.15, 408.16, 408.18, 408.185, 408.20, 408.301, 408.302, 408.40, 408.50, 408.70, 408.7056, 408.7057, 3 4 and 408.7071, Florida Statutes, is created and entitled "Health Facility and Services Planning." 5 б Section 2. Part II of chapter 408, Florida Statutes, 7 consisting of sections 408.801, 408.802, 408.803, 408.804, 8 408.805, 408.806, 408.807, 408.808, 408.809, 408.810, 408.811, 408.812, 408.813, 408.814, 408.815, 408.816, 408.817, 408.818, 9 10 408.819, 408.820, and 408.831, Florida Statutes, is created and entitled "Health Care Licensing: General Provisions." 11 12 Section 3. Part III of chapter 408, Florida Statutes, 13 consisting of sections 408.90, 408.901, 408.902, 408.903, 408.904, 408.905, 408.906, 408.907, 408.908, and 408.909, 14 Florida Statutes, is created and entitled "Health Insurance 15 16 Access." 17 Section 4. Part IV of chapter 408, Florida Statutes, 18 consisting of sections 408.911, 408.913, 408.914, 408.915, 408.916, 408.917, and 408.918, Florida Statutes, is created 19 and entitled "Health and Human Services Eligibility Access 2.0 21 System." 22 Section 5. Sections 408.801, 408.802, 408.803, 23 408.804, 408.805, 408.806, 408.807, 408.808, 408.809, 408.810, 408.811, 408.812, 408.813, 408.814, 408.815, 408.816, 408.817, 2.4 408.818, 408.819, and 408.820, Florida Statutes, are created 25 to read: 26 27 408.801 Short title; purpose.--2.8 (1) This part may be cited as the "Health Care 29 Licensing Procedures Act." (2) The Legislature finds that there is unnecessary 30 duplication and variation in the requirements for licensure by 31

1	the Agency for Health Care Administration. It is the intent of
2	the Legislature to provide a streamlined and consistent set of
3	basic licensing requirements for all such providers in order
4	to minimize confusion, standardize terminology, and include
5	issues that are not otherwise adequately addressed in the
6	Florida Statutes pertaining to specific providers.
7	408.802 ApplicabilityThe provisions of this part
8	apply to the provision of services that require licensure as
9	defined in this part and to the following entities licensed,
10	registered, or certified by the Agency for Health Care
11	Administration, as described in chapters 112, 383, 390, 394,
12	<u>395, 400, 440, 483, and 765:</u>
13	(1) Laboratories authorized to perform testing under
14	the Drug-Free Workplace Act, as provided under ss. 112.0455
15	and 440.102.
16	(2) Birth centers, as provided under chapter 383.
17	(3) Abortion clinics, as provided under chapter 390.
18	(4) Crisis-stabilization units, as provided under
19	parts I and IV of chapter 394.
20	(5) Short-term residential treatment facilities, as
21	provided under parts I and IV of chapter 394.
22	(6) Residential treatment facilities, as provided
23	under part IV of chapter 394.
24	(7) Residential treatment centers for children and
25	adolescents, as provided under part IV of chapter 394.
26	(8) Hospitals, as provided under part I of chapter
27	<u>395.</u>
28	(9) Ambulatory surgical centers, as provided under
29	part I of chapter 395.
30	(10) Mobile surgical facilities, as provided under
31	part I of chapter 395.

1	(11) Private review agents, as provided under part I
2	<u>of chapter 395.</u>
3	(12) Health care risk managers, as provided under part
4	<u>I of chapter 395.</u>
5	(13) Nursing homes, as provided under part II of
6	chapter 400.
7	(14) Assisted living facilities, as provided under
8	part III of chapter 400.
9	(15) Home health agencies, as provided under part IV
10	<u>of chapter 400.</u>
11	(16) Nurse registries, as provided under part IV of
12	chapter 400.
13	(17) Companion services or homemaker services
14	providers, as provided under part IV of chapter 400.
15	(18) Adult day care centers, as provided under part V
16	<u>of chapter 400.</u>
17	(19) Hospices, as provided under part VI of chapter
18	400.
19	(20) Adult family-care homes, as provided under part
20	VII of chapter 400.
21	(21) Homes for special services, as provided under
22	part VIII of chapter 400.
23	(22) Transitional living facilities, as provided under
24	part VIII of chapter 400.
25	(23) Prescribed pediatric extended care centers, as
26	provided under part IX of chapter 400.
27	(24) Home medical equipment providers, as provided
28	under part X of chapter 400.
29	(25) Intermediate care facilities for persons with
30	<u>developmental disabilities, as provided under part XI of</u>
31	chapter 400.
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(26) Health care services pools, as provided under	
part XII of chapter 400.	
(27) Health care clinics, as provided under part XIII	
of chapter 400.	
(28) Clinical laboratories, as provided under part I	
of chapter 483.	
(29) Multiphasic health testing centers, as provided	
under part II of chapter 483.	
(30) Organ and tissue procurement agencies, as	
provided under chapter 765.	

7 (29) Multiphasic 8 under part II of chapter (30) Organ and ti 9 10 provided under chapter 7 408.803 Definitions.--As used in this part, the term: 11 12 (1) "Agency" means the Agency for Health Care 13 Administration, which is the licensing agency under this part. (2) "Applicant" means an individual, corporation, 14 partnership, firm, association, or governmental entity that 15 submits an application to the agency for a license. 16 17 (3) "Authorizing statute" means the statute 18 authorizing the licensed operation of a provider listed in s. 408.802, including chapters 112, 383, 390, 394, 395, 400, 440, 19 20 483, and 765. 21 (4) "Certification" means certification as a Medicare or Medicaid provider of the services that require licensure or 2.2 23 certification pursuant to the federal Clinical Laboratory Improvement Amendment (CLIA). 2.4 25 (5) "Change of ownership" means an event in which the licensee changes to a different legal entity or in which 45 26 27 percent or more of the ownership, voting shares, or 28 controlling interest in a corporation whose shares are not publicly traded on a recognized stock exchange is transferred 29 or assigned, including the final transfer or assignment of 30

multiple transfers or assignments over a 2-year period which 31

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1 cumulatively total 45 percent or greater. A change solely in 2 the management company or the board of directors is not a 3 change of ownership. 4 (6) "Client" means any person receiving services from 5 a provider listed in s. 408.802. б (7) "Controlling interest" means: 7 (a) The applicant or licensee; 8 (b) A person or entity that serves as an officer of, is on the board of directors of, or has a 5 percent or greater 9 10 ownership interest in the applicant or licensee; or (c) A person or entity that serves as an officer of, 11 12 is on the board of directors of, or has a 5 percent or greater 13 ownership interest in the management company or other entity, related or unrelated, with which the applicant or licensee 14 15 contracts to manage the provider. 16 17 The term does not include a voluntary board member. 18 (8) "License" means any permit, registration, certificate, or license issued by the agency. 19 20 (9) "Licensee" means an individual, corporation, 21 partnership, firm, association, or governmental entity that is issued a permit, registration, certificate, or license by the 2.2 23 agency. The licensee is legally responsible for all aspects of the operations of the provider. 2.4 (10) "Moratorium" means a prohibition on the 25 acceptance of new clients. 26 27 (11) "Provider" means any activity, service, agency, 2.8 or facility regulated by the agency and listed in s. 408.802. (12) "Services that require licensure" means those 29 30 services, including residential services, that require a valid 31

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1	license before those services may be provided in accordance
2	with authorizing statutes and agency rules.
3	(13) "Voluntary board member" means a board member of
4	a not-for-profit corporation or organization who serves solely
5	in a voluntary capacity, does not receive any remuneration for
6	his or her services on the board of directors, and has no
7	financial interest in the corporation or organization. The
8	agency shall recognize a person as a voluntary board member
9	following submission of a statement to the agency by the board
10	member and the not-for-profit corporation or organization that
11	affirms that the board member conforms to this definition. The
12	statement affirming the status of the board member must be
13	submitted to the agency on a form provided by the agency.
14	408.804 License required; display
15	(1) It is unlawful to provide services that require
16	licensure, or operate or maintain a provider that offers or
17	provides services that require licensure, without first
18	obtaining from the agency a license authorizing the provision
19	of such services or the operation or maintenance of such
20	provider.
21	(2) A license must be displayed in a conspicuous place
22	readily visible to clients who enter at the address that
23	appears on the license and is valid only in the hands of the
24	licensee to whom it is issued and may not be sold, assigned,
25	or otherwise transferred, voluntarily or involuntarily. The
26	license is valid only for the licensee, provider, and location
27	for which the license is issued.
28	408.805 Fees required; adjustmentsUnless otherwise
29	limited by authorizing statutes, license fees must be
30	reasonably calculated by the agency to cover its costs in
31	carrying out its responsibilities under this part, authorizing

statutes, and applicable rules, including the cost of 1 2 licensure, inspection, and the regulation of providers. (1) Licensure fees shall be adjusted to provide for 3 4 biennial licensure under agency rules. 5 (2) The agency shall annually adjust licensure fees, 6 including fees paid per bed, by not more than the change in 7 the Consumer Price Index based on the 12 months immediately 8 preceding the increase. 9 (3) The agency may, by rule, adjust licensure fees to 10 cover the cost of administering this part, authorizing statutes, and applicable rules. 11 12 (4) An inspection fee must be paid as required in 13 authorizing statutes. (5) Fees are nonrefundable. 14 (6) When a change is reported that requires issuance 15 of a license, a fee may be assessed. The fee must be based on 16 17 the actual cost of processing and issuing the license. 18 (7) A fee may be charged to a licensee requesting a duplicate license. The fee may not exceed the actual cost of 19 20 duplication and postage. 21 (8) Total fees collected may not exceed the cost of administering this part, authorizing statutes, and applicable 2.2 23 rules. 408.806 License application process.--2.4 (1) An application for licensure must be made to the 25 agency on forms furnished by the agency, submitted under oath, 26 27 and accompanied by the appropriate fee in order to be accepted 2.8 and considered timely. The application must contain information required by authorizing statutes and applicable 29 30 rules and must include: 31

1	(a) The name, address, and social security number of
2	the applicant and each controlling interest if the applicant
3	<u>or controlling interest is an individual.</u>
4	(b) The name, address, and federal employer
5	identification number or taxpayer identification number of the
б	applicant and each controlling interest if the applicant or
7	<u>controlling interest is not an individual.</u>
8	(c) The name by which the provider is to be known.
9	(d) The total number of beds or capacity requested, as
10	applicable.
11	(e) The name of the person or persons under whose
12	management or supervision the provider will be operated and
13	the name of the administrator, if required.
14	(f) If the applicant offers continuing care agreements
15	as defined in chapter 651, proof that the applicant has
16	obtained a certificate of authority as required for operation
17	under chapter 651.
18	(q) Other information, including satisfactory
19	inspection results, which the agency finds necessary to
20	determine the ability of the applicant to carry out its
21	responsibilities under this part, authorizing statutes, and
22	applicable rules.
23	(2)(a) The applicant for a renewal license must submit
24	an application that must be received by the agency at least 60
25	days before the expiration of the current license.
26	(b) The applicant for initial licensure due to a
27	change of ownership must submit an application that must be
28	received by the agency at least 60 days before the date of
29	change of ownership.
30	(c) For any other application or request, the
31	applicant must submit an application or request that must be
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1 received by the agency at least 60 days before the requested 2 effective date, unless otherwise specified in authorizing statutes or rules. 3 4 (d) The agency shall notify the licensee by mail or electronically at least 90 days before the expiration of a 5 6 license that a renewal license is necessary to continue 7 operation. The failure to timely submit an application and 8 license fee shall result in a late fee charged to the licensee by the agency in an amount equal to 50 percent of the 9 10 licensure fee; however, the aggregate amount of the fine may not exceed \$5,000. If an application is received after the 11 12 required filing date and exhibits a hand-canceled postmark 13 obtained from a United States Post Office dated on or before the required filing date, a fine may not be levied. 14 (3)(a) Upon receipt of an application for a license, 15 the agency shall examine the application and, within 30 days 16 17 after receipt, notify the applicant in writing of any apparent 18 errors or omissions and request any additional information required. 19 (b) Requested information omitted from an application 20 21 for licensure, license renewal, or change of ownership, other than an inspection, must be filed with the agency within 21 2.2 23 days after the agency's request for omitted information or the application shall be deemed incomplete and shall be withdrawn 2.4 from further consideration and the fees shall be forfeited. 25 (c) Within 60 days after the receipt of a complete 26 27 application, the agency shall approve or deny the application. 2.8 (4)(a) Licensees subject to the provisions of this part shall be issued biennial licenses unless conditions of 29 30 the license category specify a shorter license period. 31

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1	(b) Each license issued must indicate the name of the
2	licensee, the type of provider or service that the licensee is
3	required or authorized to operate or offer, the date the
4	license is effective, the expiration date of the license, the
5	maximum capacity of the licensed premises, if applicable, and
б	any other information required or deemed necessary by the
7	agency.
8	(5) In accordance with authorizing statutes and
9	applicable rules, proof of compliance with s. 408.810 must be
10	submitted with an application for licensure.
11	(6) The agency may not issue an initial license to a
12	health care provider subject to the certificate-of-need
13	provisions in part I of this chapter if the licensee has not
14	been issued a certificate of need or certificate-of-need
15	exemption, when applicable. Failure to apply for the renewal
16	of a license before the expiration date renders the license
17	void.
18	(7)(a) An applicant must demonstrate compliance with
19	the requirements in this part, authorizing statutes, and
20	applicable rules during an inspection pursuant to s. 408.811,
21	as required by authorizing statutes.
22	(b) An initial inspection is not required for
23	companion services or homemaker services providers, as
24	provided under part IV of chapter 400, or for health care
25	services pools, as provided under part XII of chapter 400.
26	(c) If an inspection is required by the authorizing
27	statute for a license application other than an initial
28	application, the inspection must be unannounced. This
29	paragraph does not apply to inspections required pursuant to
30	<u>ss. 383.324, 395.0161(4), and 483.061(2).</u>
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1 (d) If a provider is not available when an inspection 2 is attempted, the application shall be denied. 3 (8) The agency may establish procedures for the 4 electronic notification and submission of required information, including, but not limited to: 5 б (a) Licensure applications. 7 (b) Required signatures. 8 (c) Payment of fees. 9 (d) Notarization of applications. 10 Requirements for electronic submission of any documents 11 12 required by this part or authorizing statutes may be 13 established by rule. 408.807 Change of ownership. --Whenever a change of 14 ownership occurs: 15 (1) The transferor shall notify the agency in writing 16 17 at least 60 days before the anticipated date of the change of 18 ownership. (2) The transferee shall make application to the 19 agency for a license within the timeframes required in s. 20 21 408.806. 22 (3) The transferor shall be responsible and liable 23 for: (a) The lawful operation of the provider and the 2.4 welfare of the clients served until the date the transferee is 25 26 licensed by the agency. 27 (b) Any and all penalties imposed against the 2.8 transferor for violations occurring before the date of change 29 of ownership. 30 31

1	(4) Any restriction on licensure, including a
2	conditional license existing at the time of a change of
3	ownership, shall remain in effect until removed by the agency.
4	(5) The transferee shall maintain records of the
5	transferor as required in this part, authorizing statutes, and
б	applicable rules, including:
7	(a) All client records.
8	(b) Inspection reports.
9	(c) All records required to be maintained pursuant to
10	<u>s. 409.913, if applicable.</u>
11	408.808 License categories
12	(1) STANDARD LICENSE A standard license may be
13	issued to an applicant at the time of initial licensure,
14	license renewal, or change of ownership. A standard license
15	shall be issued when the applicant is in compliance with all
16	statutory requirements and agency rules. Unless sooner
17	revoked, a standard license expires 2 years after the date of
18	issue.
19	(2) PROVISIONAL LICENSE A provisional license may be
20	issued to an applicant pursuant to s. 408.809(3). An applicant
21	<u>against whom a proceeding denying or revoking a license is</u>
22	pending at the time of license renewal may be issued a
23	provisional license that is effective until final action but
24	is not subject to further appeal.
25	(3) INACTIVE LICENSE An inactive license may be
26	issued to a health care provider subject to the
27	certificate-of-need provisions in part I of this chapter when
28	the provider is currently licensed, does not have a
29	provisional license, and will be temporarily unable to provide
30	services but is reasonably expected to resume services within
31	12 months. Such designation may be made for a period not to

1	exceed 12 months, but may be renewed by the agency for up to
2	12 additional months upon demonstration by the licensee of the
3	provider's progress toward reopening. A request by a licensee
4	for an inactive license or to extend the previously approved
5	inactive period must be submitted to the agency and must
6	include a written justification for the inactive license with
7	the beginning and ending dates of inactivity specified, a plan
8	for the transfer of any clients to other providers, and the
9	appropriate licensure fees. The agency may not accept a
10	request that is submitted after initiating closure, after any
11	suspension of service, or after notifying clients of closure
12	or suspension of service unless the action is the result of a
13	natural disaster. Upon agency approval, the provider shall
14	notify clients of any necessary discharge or transfer as
15	required by authorizing statutes or applicable rules. The
16	beginning of the inactive license period is the date the
17	provider ceases operations. The end of the inactive license
18	period shall become the license-expiration date. All licensure
19	fees must be current, must be paid in full, and may be
20	prorated. Reactivation of an inactive license requires the
21	approval of a renewal application, including payment of
22	licensure fees and agency inspections indicating compliance
23	with all requirements of this part, authorizing statutes, and
24	applicable rules.
25	(4) OTHER LICENSES Other types of license categories
26	may be issued pursuant to authorizing statutes or applicable
27	<u>rules.</u>
28	408.809 Background screening; prohibited offenses
29	(1) Level 2 background screening pursuant to chapter
30	435 must be conducted through the agency for each of the
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1 following persons, who shall be considered an employee for the 2 purposes of conducting screening under chapter 435: (a) The licensee, if an individual. 3 4 (b) The administrator or a similarly titled person who is responsible for the day-to-day operation of the provider. 5 б (c) The financial officer or similarly titled 7 individual who is responsible for the financial operation of 8 the licensee or provider. 9 (d) Any person who is a controlling interest if the 10 agency has reason to believe that such person has been convicted of any offense prohibited by s. 435.04. For each 11 12 controlling interest who has been convicted of any such 13 offense, the licensee shall submit to the agency a description and explanation of the conviction at the time of license 14 15 application. (2) Proof of compliance with level 2 screening 16 17 standards submitted within the previous 5 years to meet any 18 provider or professional licensure requirements of the agency, the Department of Health, the Agency for Persons with 19 Disabilities, or the Department of Children and Family 20 21 Services satisfies the requirements of this section, if such proof is accompanied, under penalty of perjury, by an 2.2 23 affidavit of compliance with the provisions of chapter 435 using forms provided by the agency. Proof of compliance with 2.4 the background screening requirements of the Department of 25 Financial Services submitted within the previous 5 years for 26 27 an applicant for a certificate of authority to operate a 2.8 continuing care retirement community under chapter 651 satisfies the Department of Law Enforcement and Federal Bureau 29 30 of Investigation portions of a level 2 background check. 31

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1	(3) A provisional license may be granted to an
2	applicant when each individual required by this section to
3	undergo background screening has met the standards for the
4	Department of Law Enforcement background check but the agency
5	has not yet received background screening results from the
6	Federal Bureau of Investigation. A standard license may be
7	granted to the licensee upon the agency's receipt of a report
8	of the results of the Federal Bureau of Investigation
9	background screening for each individual required by this
10	section to undergo background screening which confirms that
11	all standards have been met or upon the granting of an
12	exemption from disqualification by the agency as set forth in
13	chapter 435.
14	(4) When a person is newly employed in a capacity that
15	requires screening under this section, the licensee must
16	notify the agency of the change within the time period
17	specified in the authorizing statute or rules and must submit
18	to the agency information necessary to conduct level 2
19	screening or provide evidence of compliance with background
20	screening requirements of this section. The person may serve
21	in his or her capacity pending the agency's receipt of the
22	report from the Federal Bureau of Investigation if he or she
23	has met the standards for the Department of Law Enforcement
24	background check. However, the person may not continue to
25	serve in his or her capacity if the report indicates any
26	violation of background screening standards unless an
27	exemption from disqualification has been granted by the agency
28	<u>as set forth in chapter 435.</u>
29	(5) Background screening is not required in order to
30	obtain a certificate of exemption issued under s. 483.106.
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1	408.810 Minimum licensure requirementsIn addition
2	to the licensure requirements specified in this part,
3	authorizing statutes, and applicable rules, each applicant and
4	licensee must comply with the requirements of this section in
5	order to obtain and maintain a license.
6	(1) An applicant for licensure must comply with the
7	background screening requirements of s. 408.809.
8	(2) An applicant for licensure must provide a
9	description and explanation of any exclusions, suspensions, or
10	terminations of the applicant from the Medicare, Medicaid, or
11	federal Clinical Laboratory Improvement Amendment (CLIA)
12	programs.
13	(3) Unless otherwise specified in this part,
14	authorizing statutes, or applicable rules, any information
15	required to be reported to the agency must be submitted within
16	21 calendar days after the report period or effective date of
17	the information.
18	(4) Whenever a licensee discontinues operation of a
19	provider:
20	(a) The licensee must inform the agency not less than
21	30 days before discontinuance of operation and inform clients
22	as required by authorizing statutes. Immediately upon
23	discontinuance of operation of a provider, the licensee shall
24	surrender the license to the agency and the license shall be
25	canceled.
26	(b) The licensee shall remain responsible for
27	retaining and appropriately distributing all records within
28	the timeframes prescribed in authorizing statutes and
29	applicable rules. In addition, the licensee or, in the event
30	of death or dissolution of a licensee, the estate or agent of
31	the licensee shall:

1	1. Make arrangements to forward records for each
2	client to one of the following, based upon the client's
3	choice: the client or the client's legal representative, the
4	client's attending physician, or the health care provider
5	where the client currently receives services; or
6	2. Cause a notice to be published in the newspaper of
7	greatest general circulation in the county in which the
8	provider was located which advises clients of the
9	discontinuance of the provider operation. The notice must
10	inform clients that they may obtain copies of their records
11	and specify the name, address, and telephone number of the
12	person from whom the copies of records may be obtained. The
13	notice must appear at least once a week for 4 consecutive
14	weeks.
15	(5)(a) On or before the first day services are
16	provided to a client, a licensee must inform the client and
17	his or her immediate family or representative, if appropriate,
18	of the right to report:
19	1. Complaints. The statewide toll-free telephone
20	number for reporting complaints to the agency must be provided
21	to clients in a manner that is clearly legible and must
22	include the words: "To report a complaint regarding the
23	<u>services you receive, please call toll-free (phone number)."</u>
24	2. Abusive, neglectful, or exploitative practices. The
25	statewide toll-free telephone number for the central abuse
26	hotline must be provided to clients in a manner that is
27	clearly legible and must include the words: "To report abuse,
28	neglect, or exploitation, please call toll-free (phone
29	number)." The agency shall publish a minimum of a 90-day
30	advance notice of a change in the toll-free telephone numbers.
31	

1	(b) Each licensee shall establish appropriate policies
2	and procedures for providing such notice to clients.
3	(6) An applicant must provide the agency with proof of
4	the applicant's legal right to occupy the property before a
5	license may be issued. Proof may include, but need not be
6	limited to, copies of warranty deeds, lease or rental
7	agreements, contracts for deeds, guitclaim deeds, or other
8	such documentation.
9	(7) If proof of insurance is required by the
10	authorizing statute, that insurance must be in compliance with
11	chapter 624, chapter 626, chapter 627, or chapter 628 and with
12	agency rules.
13	(8) Upon application for initial licensure or
14	change-of-ownership licensure, the applicant shall furnish
15	satisfactory proof of the applicant's financial ability to
16	operate in accordance with the requirements of this part,
17	authorizing statutes, and applicable rules. The agency shall
18	establish standards for this purpose, including information
19	concerning the applicant's controlling interests. The agency
20	shall also establish documentation requirements, to be
21	completed by each applicant, which show anticipated provider
22	revenues and expenditures, the basis for financing, the
23	anticipated cash-flow requirements of the provider, and the
24	applicant's access to contingency financing. A current
25	certificate of authority, pursuant to chapter 651, may be
26	provided as proof of financial ability to operate. The agency
27	may require a licensee to provide proof of financial ability
28	to operate at any time if there is evidence of financial
29	instability, including, but not limited to, unpaid expenses
30	necessary for the basic operations of the provider.
31	

1	(9) A controlling interest may not withhold from the
2	agency any evidence of financial instability, including, but
3	not limited to, checks returned due to insufficient funds,
4	delinguent accounts, nonpayment of withholding taxes, unpaid
5	utility expenses, nonpayment for essential services, or
6	adverse court action concerning the financial viability of the
7	provider or any other provider licensed under this part which
8	is under the control of the controlling interest. Any person
9	who violates this subsection commits a misdemeanor of the
10	second degree, punishable as provided in s. 775.082 or s.
11	775.083. Each day of continuing violation is a separate
12	offense.
13	(10) The agency may not issue a license to a health
14	care provider subject to the certificate-of-need provisions in
15	part I of this chapter if the health care provider has not
16	been issued a certificate of need or an exemption. Upon
17	initial licensure of any such provider, the authorization
18	contained in the certificate of need shall be considered fully
19	implemented and merged into the license and shall have no
20	force and effect upon termination of the license for any
21	reason.
22	408.811 Right of inspection; copies; inspection
23	reports
24	(1) An authorized officer or employee of the agency
25	may make or cause to be made any inspection or investigation
26	deemed necessary by the agency to determine the state of
27	compliance with this part, authorizing statutes, and
28	applicable rules. The right of inspection extends to any
29	business that the agency has reason to believe is being
30	operated as a provider without a license, but inspection of
31	any business suspected of being operated without the

2the owner or person in charge unless a warrant is first3obtained from a circuit court. Any application for a license4issued under this part, authorizing statutes, or applicable5rules constitutes permission for an appropriate inspection to6verify the information submitted on or in connection with the7application.8(a) All inspections shall be unannounced, except as9specified in s. 408.806.10(b) Inspections for relicensure shall be conducted11biennially unless otherwise specified by authorizing statutes12or applicable rules.13(2) Inspections conducted in conjunction with14certification may be accepted in lieu of a complete licensure15inspection. However, a licensure inspection may also be16conducted to review any licensure requirements that are not18(3) The agency shall have access to and the licensee19shall provide copies of all provider records required during20an inspection at no cost to the agency.11(4)(a) Each licensee shall maintain as public12information, available upon request, records of all inspection13reports pertaining to that provider which have been filed by14the agency unless those reports are exempt from or contain15information that is exempt from s. 119.07(1) and s. 24(a).14the agency unless those reports of the provider for15at least 3 vears following the date the reports are filed and16issued, regardless of	1	appropriate license may not be made without the permission of
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30 issued, regardless of a change of ownership.	28	reports shall be retained in the records of the provider for
	29	at least 3 years following the date the reports are filed and
31	30	issued, regardless of a change of ownership.
	31	

1	(b) A licensee shall, upon the request of any person
2	who has completed a written application with intent to be
3	admitted by such provider, any person who is a client of such
4	provider, or any relative, spouse, or quardian of any such
5	person, furnish to the requester a copy of the last inspection
б	report pertaining to the licensed provider which was issued by
7	the agency or by an accrediting organization if such report is
8	used in lieu of a licensure inspection.
9	408.812 Unlicensed activity
10	(1) A person or entity may not offer or advertise
11	services that require licensure as defined by this part,
12	authorizing statutes, or applicable rules to the public
13	without obtaining a valid license from the agency. A
14	licenseholder may not advertise or hold out to the public that
15	he or she holds a license for other than that for which he or
16	she actually holds the license.
17	(2) The operation or maintenance of an unlicensed
18	provider or the performance of any services that require
19	licensure without proper licensure is a violation of this part
20	and authorizing statutes. Unlicensed activity constitutes harm
21	that materially affects the health, safety, and welfare of
22	<u>clients. The agency or any state attorney may, in addition to</u>
23	other remedies provided in this part, bring an action for an
24	injunction to restrain such violation or to enjoin the future
25	operation or maintenance of the unlicensed provider or the
26	performance of any services in violation of this part and
27	authorizing statutes, until compliance with this part,
28	authorizing statutes, and agency rules has been demonstrated
29	to the satisfaction of the agency.
30	(3) It is unlawful for any person or entity to own,
31	<u>operate, or maintain an unlicensed provider. If, after</u>

2fails to cease operation and apply for a license under this3part and authorizing statutes, that person or entity is4subject to penalties as prescribed by authorizing statutes and5applicable rules, Each day of continued operation is a5separate offense.7(4) Any person or entity that fails to cease operation8after agency notification may be fined \$1,000 for each day of9noncompliance.10(5) When a controlling interest or licensee has an11interest in more than one provider and fails to license a12provider rendering services that require licensure, the agency13may revoke all licenses, impose actions under s. 408,814 and a14fine of \$1,000 per day, unless otherwise specified by15authorizing statutes, against each licensee until such time as16the appropriate license is obtained for the unlicensed17operation.18(6) In addition to granting injunctive relief pursuant19to subsection (2), if the agency determines that a person or20entity is operating or maintaining a provider without21obtaining a license and determines that a condition exists22that poses a threat to the health, safety, or welfare of a23client of the provider, the person or entity is subject to the24same actions and fines imposed against a licensee as specified25in this part, authorizing statutes, and agency rules.26(7) Any person who is aware of the operation of an27unlice	1	receiving notification from the agency, such person or entity
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5applicable rules. Each day of continued operation is a separate offense.7(4) Any person or entity that fails to cease operation after agency notification may be fined \$1,000 for each day of noncompliance.10(5) When a controlling interest or licensee has an interest in more than one provider and fails to license a provider rendering services that require licensure, the agency may revoke all licenses, impose actions under s. 408.814 and a fine of \$1,000 per day, unless otherwise specified by authorizing statutes, against each licensee until such time as the appropriate license is obtained for the unlicensed operation.18(6) In addition to granting injunctive relief pursuant to subsection (2), if the agency determines that a person or entity is operating or maintaining a provider without20obtaining a license and determines that a condition exists that poses a threat to the health, safety, or welfare of a client of the provider, the person or entity is subject to the same actions and fines imposed against a licensee as specified in this part, authorizing statutes, and agency rules.26(7) Any person who is aware of the operation of an unlicensed provider must report that provider to the agency. 408.813 Administrative finesAs a penalty for any violation of this part, authorizing statutes, or applicable rules, the agency may impose an administrative fine. Unless	3	part and authorizing statutes, that person or entity is
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	29	violation of this part, authorizing statutes, or applicable
31 the amount or aggregate limitation of the fine is prescribed	30	rules, the agency may impose an administrative fine. Unless
	31	the amount or aggregate limitation of the fine is prescribed

1	by authorizing statutes or applicable rules, the agency may
2	establish criteria by rule for the amount or aggregate
3	limitation of administrative fines applicable to this part,
4	authorizing statutes, and applicable rules. Each day of
5	violation constitutes a separate violation and is subject to a
6	separate fine. For fines that are imposed by final order of
7	the agency and that are not subject to further appeal, the
8	violator shall pay the fine plus interest at the rate
9	specified in s. 55.03 for each day beyond the date set by the
10	agency for payment of the fine.
11	408.814 Moratoriums; emergency suspensions
12	(1) The agency may impose an immediate moratorium or
13	emergency suspension as defined in s. 120.60 on any provider
14	if the agency determines that any condition related to the
15	provider or licensee presents a threat to the health, safety,
16	or welfare of a client.
17	(2) A provider or licensee, the license of which is
18	denied or revoked, may be subject to immediate imposition of a
19	moratorium or emergency suspension to run concurrently with
20	licensure denial, revocation, or injunction.
21	(3) A moratorium or emergency suspension remains in
22	effect after a change of ownership, unless the agency has
23	determined that the conditions that created the moratorium,
24	emergency suspension, or denial of licensure have been
25	corrected.
26	(4) When a moratorium or emergency suspension is
27	placed on a provider or licensee, notice of the action shall
28	be posted and visible to the public at the location of the
29	provider until the action is lifted.
30	408.815 License or application denial; revocation
31	

1	(1) In addition to the grounds provided in authorizing
2	statutes, grounds that may be used by the agency for denying
3	and revoking a license or change-of-ownership application
4	include any of the following actions by a controlling
5	interest:
б	(a) False representation of a material fact in the
7	license application or omission of any material fact from the
8	application.
9	(b) An intentional or negligent act materially
10	affecting the health or safety of a client of the provider.
11	(c) A violation of this part, authorizing statutes, or
12	applicable rules.
13	(d) A demonstrated pattern of deficient performance.
14	(e) The applicant, licensee, or controlling interest
15	has been or is currently excluded, suspended, terminated from
16	participation in the state Medicaid program, the Medicaid
17	program of any other state, or the Medicare program.
18	(2) If a licensee lawfully continues to operate while
19	a denial or revocation is pending in litigation, the licensee
20	must continue to meet all other requirements of this part,
21	authorizing statutes, and applicable rules and must file
22	subsequent renewal applications for licensure and pay all
23	licensure fees. The provisions of ss. 120.60(1) and
24	408.806(3)(c) do not apply to renewal applications filed
25	during the time period in which the litigation of the denial
26	or revocation is pending until that litigation is final.
27	(3) An action under s. 408.814 or denial of the
28	license of the transferor may be grounds for denial of a
29	change-of-ownership application of the transferee.
30	408.816 Injunctions
31	

1	(1) In addition to the other powers provided by this
2	part, authorizing statutes, and applicable rules, the agency
3	may institute injunction proceedings in a court of competent
4	jurisdiction to:
5	(a) Restrain or prevent the establishment or operation
б	of a provider that does not have a license or is in violation
7	of any provision of this part, authorizing statutes, or
8	applicable rules. The agency may also institute injunction
9	proceedings in a court of competent jurisdiction when a
10	violation of this part, authorizing statutes, or applicable
11	rules constitutes an emergency affecting the immediate health
12	and safety of a client.
13	(b) Enforce the provisions of this part, authorizing
14	statutes, or any minimum standard, rule, or order issued or
15	entered into pursuant thereto when the attempt by the agency
16	to correct a violation through administrative sanctions has
17	failed or when the violation materially affects the health,
18	safety, or welfare of clients or involves any operation of an
19	unlicensed provider.
20	(c) Terminate the operation of a provider when a
21	violation of any provision of this part, authorizing statutes,
22	or any rule adopted pursuant thereto exists which materially
23	affects the health, safety, or welfare of a client.
24	
25	Such injunctive relief may be temporary or permanent.
26	(2) If action is necessary to protect clients of
27	providers from immediate, life-threatening situations, the
28	court may allow a temporary injunction without bond upon
29	proper proof being made. If it appears by competent evidence
30	or a sworn, substantiated affidavit that a temporary
31	injunction should be issued, the court, pending the

1 determination on final hearing, shall enjoin the operation of 2 the provider. 408.817 Administrative proceedings.--Administrative 3 4 proceedings challenging licensure-enforcement action by the 5 agency shall be reviewed on the basis of the facts and 6 conditions that resulted in the agency action. 7 408.818 Health Care Trust Fund. -- Unless otherwise 8 prescribed by authorizing statutes, all fees and fines 9 collected under this part, authorizing statutes, and 10 applicable rules shall be deposited into the Health Care Trust Fund, created in s. 408.16, and used to pay the costs of the 11 12 agency in administering the provider program paying the fees 13 or fines. 408.819 Rules. -- The agency may adopt rules as 14 necessary to administer this part. Any licensed provider that 15 is in operation at the time of adoption of any applicable rule 16 17 under this part or authorizing statutes shall be given a 18 reasonable time under the particular circumstances, not to 19 exceed 6 months after the date of such adoption, within which to comply with such rule, unless otherwise specified by rule. 2.0 21 408.820 Exemptions.--Except as prescribed in authorizing statutes, the following exemptions shall apply to 2.2 23 specified requirements of this part: (1) Laboratories authorized to perform testing under 2.4 the Drug-Free Workplace Act, as provided under ss. 112.0455 25 and 440.102, are exempt from s. 408.810(5)-(10). 26 27 (2) Birth centers, as provided under chapter 383, are 2.8 exempt from s. 408.810(7)-(10). (3) Abortion clinics, as provided under chapter 390, 29 30 are exempt from s. 408.810(7)-(10). 31

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1 (4) Crisis-stabilization units, as provided under 2 parts I and IV of chapter 394, are exempt from s. 408.810(8) - (10). 3 4 (5) Short-term residential treatment facilities, as provided under parts I and IV of chapter 394, are exempt from 5 6 s. 408.810(8)-(10). 7 (6) Residential treatment facilities, as provided 8 under part IV of chapter 394, are exempt from s. 9 408.810(8) - (10). 10 (7) Residential treatment centers for children and adolescents, as provided under part IV of chapter 394, are 11 12 exempt from s. 408.810(8)-(10). (8) Hospitals, as provided under part I of chapter 13 <u>395, are exempt from s. 408.810(7)-(9).</u> 14 (9) Ambulatory surgical centers, as provided under 15 part I of chapter 395, are exempt from s. 408.810(7)-(10). 16 17 (10) Mobile surgical facilities, as provided under part I of chapter 395, are exempt from s. 408.810(7)-(10). 18 19 (11) Private review agents, as provided under part I of chapter 395, are exempt from ss. 408.806(7), 408.810, and 20 21 408.811. 22 (12) Health care risk managers, as provided under part 23 I of chapter 395, are exempt from ss. 408.806(7), 408.810, 2.4 408.811. (13) Nursing homes, as provided under part II of 25 chapter 400, are exempt from s. 408.810(7). 26 27 (14) Assisted living facilities, as provided under 2.8 part III of chapter 400, are exempt from s. 408.810(10). (15) Home health agencies, as provided under part IV 29 30 of chapter 400, are exempt from s. 408.810(10). 31

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1	(16) Nurse registries, as provided under part IV of
2	<u>chapter 400, are exempt from s. 408.810(6)-(10).</u>
3	(17) Companion services or homemaker services
4	providers, as provided under part IV of chapter 400, are
5	<u>exempt from s. 408.810(6)-(10).</u>
6	(18) Adult day care centers, as provided under part V
7	of chapter 400, are exempt from s. 408.810(10).
8	(19) Adult family-care homes, as provided under part
9	VII of chapter 400, are exempt from s. 408.810(7)-(10).
10	(20) Homes for special services, as provided under
11	part VIII of chapter 400, are exempt from s. 408.810(7)-(10).
12	(21) Transitional living facilities, as provided under
13	part VIII of chapter 400, are exempt from s. 408.810(7)-(10).
14	(22) Prescribed pediatric extended care centers, as
15	provided under part IX of chapter 400, are exempt from s.
16	<u>408.810(10).</u>
17	(23) Home medical equipment providers, as provided
18	under part X of chapter 400, are exempt from s. 408.810(10).
19	(24) Intermediate care facilities for persons with
20	developmental disabilities, as provided under part XI of
21	chapter 400, are exempt from s. 408.810(7).
22	(25) Health care services pools, as provided under
23	part XII of chapter 400, are exempt from s. 408.810(6)-(10).
24	(26) Health care clinics, as provided under part XIII
25	of chapter 400, are exempt from ss. 408.809 and 408.810(1),
26	(6), (7) and (10) .
27	(27) Clinical laboratories, as provided under part I
28	of chapter 483, are exempt from s. 408.810(5)-(10).
29	(28) Multiphasic health testing centers, as provided
30	under part II of chapter 483, are exempt from s.
31	408.810(5) - (10).

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1 (29) Organ and tissue procurement agencies, as 2 provided under chapter 765, are exempt from s. 408.810(5) - (10). 3 4 Section 6. Paragraph (b) of subsection (1) of section 400.801, Florida Statutes, is amended to read: 5 б 400.801 Homes for special services.--7 (1) As used in this section, the term: 8 (b) "Home for special services" means a site <u>licensed</u> by the agency before January 1, 2006, where specialized health 9 10 care services are provided, including personal and custodial care, but not continuous nursing services. 11 12 Section 7. Paragraph (i) of subsection (4) of section 13 400.9905, Florida Statutes, is amended to read: 400.9905 Definitions.--14 (4) "Clinic" means an entity at which health care 15 services are provided to individuals and which tenders charges 16 17 for reimbursement for such services, including a mobile clinic 18 and a portable equipment provider. For purposes of this part, the term does not include and the licensure requirements of 19 this part do not apply to: 20 21 (i) Entities that provide only oncology or radiation 22 therapy services by physicians licensed under chapter 458 or 23 chapter 459 which are owned by a corporation whose shares are publicly traded on a registered stock exchange. 2.4 Section 8. Subsections (1) and (3) of section 408.831, 25 Florida Statutes, are amended to read: 26 27 408.831 Denial, suspension, or revocation of a 2.8 license, registration, certificate, or application .--29 (1) In addition to any other remedies provided by law, 30 the agency may deny each application or suspend or revoke each 31

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1 license, registration, or certificate of entities regulated or 2 licensed by it: 3 (a) If the applicant, licensee, or a licensee subject 4 to this part which shares a common controlling interest with 5 the applicant registrant, or certificateholder, or, in the 6 case of a corporation, partnership, or other business entity, 7 if any officer, director, agent, or managing employee of that 8 business entity or any affiliated person, partner, or 9 shareholder having an ownership interest equal to 5 percent or 10 greater in that business entity, has failed to pay all outstanding fines, liens, or overpayments assessed by final 11 12 order of the agency or final order of the Centers for Medicare 13 and Medicaid Services, not subject to further appeal, unless a repayment plan is approved by the agency; or 14 (b) For failure to comply with any repayment plan. 15 (3) This section provides standards of enforcement 16 17 applicable to all entities licensed or regulated by the Agency 18 for Health Care Administration. This section controls over any conflicting provisions of chapters 39, 381, 383, 390, 391, 19 393, 394, 395, 400, 408, 468, 483, and <u>765</u> 641 or rules 20 21 adopted pursuant to those chapters. 22 Section 9. In case of conflict between the provisions 23 of part II of chapter 408, Florida Statutes, and the authorizing statutes governing the licensure of health care 2.4 providers by the Agency for Health Care Administration found 25 in s. 112.0455, chapter 383, chapter 390, chapter 394, chapter 26 27 395, chapter 400, chapter 440, chapter 483, and chapter 765, 2.8 Florida Statutes, the provisions of part II of chapter 408, Florida Statutes, shall prevail. 29 30 Section 10. All provisions that apply to the entities specified in s. 408.802, Florida Statutes, as created by this 31

1	act, in effect on October 1, 2006, which provides for annual
2	licensure fees are adjusted to provide for biennial licensure
3	fees with a corresponding doubling of the amount.
4	Section 11. The Legislature recognizes that there is a
5	need to conform the Florida Statutes to the policy decisions
б	reflected in this act and that there may be a need to resolve
7	apparent conflicts between authorizing statutes or any other
8	legislation that has been or may be enacted during 2006 and
9	the creation by this act of parts I, II, III, and IV of
10	chapter 408, Florida Statutes. Therefore, in the interim
11	between this act becoming a law and the 2007 Regular Session
12	of the Legislature or an earlier special session addressing
13	this issue, the Division of Statutory Revision shall provide
14	the relevant substantive committees of the Senate and the
15	House of Representatives with assistance, upon request, to
16	enable such committees to prepare draft legislation to conform
17	the Florida Statutes and any legislation enacted during 2006
18	to the provisions of this act.
19	Section 12. For the purpose of staggering license
20	expiration dates, the Agency for Health Care Administration
21	may issue a license for less than a 2-year period to those
22	providers making the transition from annual to biennial
23	licensure as authorized in this act. The agency shall charge a
24	prorated licensure fee for this shortened period. This
25	authority shall expire September 30, 2008.
26	Section 13. This act shall take effect October 1,
27	2006.
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2	SENATE SUMMARY
3	Creates part II of ch. 408, F.S., the "Health Care
4	Licensing Procedures Act." Provides uniform licensing requirements and procedures for various health care
5	professionals and entities regulated by the Agency for Health Care Administration. Provides for establishing
6	license fees. Provides requirements for inspections by the agency. Provides requirements for background
7	screening. Provides procedures for discontinuing operation of a facility and for transferring a license.
8	Specifies conditions under which the agency may impose a moratorium or suspend the operations of a provider.
9	Authorizes the agency to institute injunction proceedings. Requires that licensing fees be deposited
10	into the Health Care Trust Fund. Provides for part II of ch. 408, F.S., to prevail in case of a conflict with
11	other licensing provisions. (See bill for details.)
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CODING: Words stricken are deletions; words <u>underlined</u> are additions.