

HB 7139

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CHAMBER ACTION

1 The Health Care Appropriations Committee recommends the
2 following:

3
4 **Council/Committee Substitute**

5 Remove the entire bill and insert:

6 A bill to be entitled

7 An act relating to emergency management; amending s.
8 252.355, F.S.; specifying additional entities and agencies
9 that are required to provide registration information to
10 persons with disabilities or special needs for purposes of
11 inclusion within the registry of persons with special
12 needs maintained by local emergency management agencies;
13 providing that the Department of Community Affairs shall
14 be the designated lead agency responsible for community
15 education and outreach to the general public, including
16 persons with special needs, regarding registration as a
17 person with special needs, special needs shelters, and
18 general information regarding shelter stays; requiring the
19 department to disseminate educational and outreach
20 information through local emergency management offices;
21 requiring the department to coordinate community education
22 and outreach related to special needs shelters with
23 specified agencies and entities; providing that special

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24 | needs shelters must allow persons with special needs to
25 | bring service animals into special needs shelters;
26 | revising provisions with respect to the required
27 | notification of residential utility customers of the
28 | availability of the special needs registration program;
29 | providing that specified confidential and exempt
30 | information relating to registration of persons with
31 | special needs be provided to the Department of Health and
32 | local law enforcement agencies; creating s. 252.3568,
33 | F.S.; requiring the Division of Emergency Management to
34 | address evacuation of persons with pets in the shelter
35 | component of the state comprehensive emergency management
36 | plan; creating s. 252.357, F.S., requiring the Florida
37 | Comprehensive Emergency Management Plan to permit the
38 | Agency for Health Care Administration to make initial
39 | contact with each nursing home in a disaster area;
40 | requiring the agency to annually publish an emergency
41 | telephone number that may be used by nursing homes to
42 | contact the agency; amending s. 252.385, F.S., relating to
43 | public shelter space; requiring the Division of Emergency
44 | Management of the Department of Community Affairs to
45 | biennially prepare and submit a statewide emergency
46 | shelter plan to the Governor and the Cabinet for approval;
47 | providing plan requirements; requiring the Department of
48 | Health to provide specified assistance to the division;
49 | revising those facilities which are excluded as being
50 | suitable for use as public hurricane evacuation shelters;
51 | requiring local emergency management agencies to inspect a

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52 | designated facility prior to activation to determine its
53 | readiness; amending s. 381.0303, F.S.; providing for the
54 | operation, maintenance, and closure of special needs
55 | shelters; providing that local Children's Medical Services
56 | offices shall assume lead responsibility for specified
57 | coordination with respect to the development of a plan for
58 | the staffing and medical management of pediatric special
59 | needs shelters; requiring such plans to conform to the
60 | local comprehensive emergency management plan; requiring
61 | county governments to assist the Department of Health with
62 | nonmedical staffing and operation of special needs
63 | shelters; requiring local health departments and emergency
64 | management agencies to coordinate such efforts to ensure
65 | appropriate staffing; providing that the appropriate
66 | county health department, Children's Medical Services
67 | office, and local emergency management agency shall
68 | jointly determine the responsibility for medical
69 | supervision in a special needs shelter; providing
70 | notification requirements; requiring local emergency
71 | management agencies to be responsible for the
72 | infrastructure and closure of special needs shelters;
73 | requiring the emergency management agency and the local
74 | health department to coordinate efforts to ensure
75 | appropriate designation, operation, and infrastructure in
76 | special needs shelters; providing that a county health
77 | department is not prohibited from entering into an
78 | alternative agreement with a local emergency management
79 | agency to assume the lead responsibility for special needs

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80 shelter supplies and equipment; providing that state
81 employees with a preestablished role in disaster response
82 are subject to serve in times of disaster in specified
83 capacities; requiring the Secretary of Elderly Affairs to
84 convene multiagency special needs shelter discharge
85 planning teams to assist local areas that are severely
86 impacted by a natural or manmade disaster that requires
87 the use of special needs shelters; providing duties and
88 responsibilities of such discharge planning teams;
89 providing for the inclusion of specified state agency
90 representatives on each discharge planning team; revising
91 provisions relating to reimbursement of health care
92 practitioners; providing for eligibility of specified
93 health care facilities for reimbursement when a
94 multiagency special needs shelter discharge planning team
95 discharges persons with special needs to such receiving
96 facilities; providing procedures and requirements with
97 respect to such reimbursement; requiring the department to
98 specify by rule expenses that are reimbursable and the
99 rate of reimbursement for services; revising provisions
100 which prescribe means of and procedures for reimbursement;
101 disallowing specified reimbursements; revising provisions
102 with respect to the organization, role, duties, and
103 composition of the special needs shelter interagency
104 committee; requiring the department to adopt specified
105 rules with respect to special needs shelters; providing
106 requirements with respect to emergency management plans
107 submitted to a county health department by a home health

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108 | agency, nurse registry, hospice, or home medical equipment
109 | provider; amending ss. 400.492, 400.497, 400.506, 400.610,
110 | and 400.934, F.S.; revising requirements with respect to
111 | the comprehensive emergency management plans of home
112 | health agencies, nurse registries, and hospices, and
113 | providing such requirements with respect to home medical
114 | equipment providers, to include the means by which
115 | continuing services will be provided to patients who
116 | evacuate to special needs shelters; authorizing the
117 | establishment of links to local emergency operations
118 | centers for specified purposes; providing actions that
119 | constitute abandonment of a patient; providing sanctions
120 | for abandonment; revising requirements of a county health
121 | department with respect to review of a comprehensive
122 | emergency management plan submitted by a home health
123 | agency, nurse registry, or hospice, and providing such
124 | requirements with respect to a home medical equipment
125 | provider; providing requirements upon failure to submit a
126 | plan or requested information to the department; providing
127 | for imposition of a fine; revising requirements of the
128 | Department of Health with respect to review of the plan of
129 | a home health agency, nurse registry, or hospice that
130 | operates in more than one county, and providing such
131 | requirements with respect to a home medical equipment
132 | provider that operates in more than one county; providing
133 | that the preparation and maintenance of a comprehensive
134 | emergency management plan by a home medical equipment
135 | provider is a requirement for licensure and must meet

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136 minimum criteria established by the Agency for Health Care
137 Administration; providing plan requirements; providing
138 that the plan is subject to review and approval by the
139 county health department; requiring each home medical
140 equipment provider to maintain a current prioritized list
141 of patients who need continued services during an
142 emergency; amending s. 400.925, F.S.; defining "life-
143 supporting or life-sustaining equipment" for purposes of
144 pt. X of ch. 400, F.S., relating to home medical equipment
145 providers; amending s. 400.935, F.S.; requiring the Agency
146 for Health Care Administration to adopt rules with respect
147 to the comprehensive emergency management plan prepared by
148 a home medical equipment services provider; amending s.
149 408.831, F.S.; providing that entities regulated or
150 licensed by the Agency for Health Care Administration may
151 exceed their licensed capacity to act as a receiving
152 facility under specified circumstances; providing
153 requirements while such entities are in an overcapacity
154 status; providing for issuance of an inactive license to
155 such licensees under specified conditions; providing
156 requirements and procedures with respect to the issuance
157 and reactivation of an inactive license; providing fees;
158 providing legislative findings with respect to the
159 equipping of all designated public special needs hurricane
160 evacuation shelters with permanent emergency power
161 generating capacity by a specified date; requiring the
162 Department of Community Affairs to work with local
163 communities to ensure a sufficient number of public

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164 special needs shelters designated to meet anticipated
165 demand; specifying the percentage of local match for such
166 projects; providing an appropriation to the Department of
167 Community Affairs to establish a competitive award
168 process; specifying a limit with respect to administration
169 of the funding; providing legislative findings with
170 respect to retrofitting public hurricane evacuation
171 shelters; providing criteria for the retrofitting of a
172 public hurricane evacuation shelter; providing an
173 appropriation to the Department of Community Affairs to
174 establish a competitive award process; specifying a limit
175 with respect to administration of the funding; providing
176 an appropriation to implement the provisions of emergency
177 management plan reviews for home health agencies and nurse
178 registry, hospice, and home medical equipment providers;
179 providing an effective date.

180

181 Be It Enacted by the Legislature of the State of Florida:

182

183 Section 1. Section 252.355, Florida Statutes, is amended
184 to read:

185 252.355 Registry of persons with special needs; notice.--

186 (1) In order to meet the special needs of persons who
187 would need assistance during evacuations and sheltering because
188 of physical, mental, cognitive impairment, or sensory
189 disabilities, each local emergency management agency in the
190 state shall maintain a registry of persons with special needs
191 located within the jurisdiction of the local agency. The

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192 registration shall identify those persons in need of assistance
 193 and plan for resource allocation to meet those identified needs.
 194 To assist the local emergency management agency in identifying
 195 such persons, home health agencies, hospices, nurse registries,
 196 home medical equipment providers, the Department of Children and
 197 Family Services, the Department of Health, the Agency for Health
 198 Care Administration, the Department of Education, Agency for
 199 Persons with Disabilities, ~~Department of Labor and Employment~~
 200 ~~Security,~~ and the Department of Elderly Affairs shall provide
 201 registration information to all of their special needs clients
 202 and to all people with disabilities or special needs who receive
 203 services incoming clients as a part of the intake process. The
 204 registry shall be continuously maintained ~~updated annually.~~ The
 205 registration program shall give persons with special needs the
 206 option of preauthorizing emergency response personnel to enter
 207 their homes during search and rescue operations if necessary to
 208 assure their safety and welfare following disasters.

209 (2) The Department of Community Affairs shall be the
 210 designated lead agency responsible for community education and
 211 outreach to the general public, including special needs clients,
 212 regarding registration and special needs shelters and general
 213 information regarding shelter stays. The Department of Community
 214 Affairs shall disseminate such educational and outreach
 215 information through the local emergency management offices. The
 216 department shall coordinate the development of curriculum and
 217 dissemination of all community education and outreach related to
 218 special needs shelters with the Clearinghouse on Disability
 219 Information of the Governor's Working Group on the Americans

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220 with Disabilities Act, the Department of Children and Family
221 Services, the Department of Health, the Agency for Health Care
222 Administration, the Department of Education, the Agency for
223 Persons with Disabilities, and the Department of Elderly
224 Affairs.

225 (3) A person with special needs shall be allowed to bring
226 his or her service animal into a special needs shelter in
227 compliance with the Americans with Disabilities Act of 1990,
228 Pub. L. No. 101-336. Because a special needs shelter is
229 considered a public facility when it is activated for a
230 disaster, persons with disabilities must be allowed access to
231 special needs shelters when accompanied by a service animal in
232 compliance with the Americans with Disabilities Act, which
233 provides that businesses and organizations that serve the public
234 must allow people with disabilities to bring their service
235 animals into all areas of a facility where customers are
236 normally allowed to go.

237 (4)(2) ~~On or before May 1 of each year~~ Each electric
238 utility in the state shall ~~annually~~ notify residential customers
239 in its service area of the availability of the registration
240 program available through their local emergency management
241 agency ~~with either:-~~

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

245 (b) Two separate annual notifications between January 1
246 and May 31.

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248 | The notification required under this subsection may be made by
249 | any available means, including, but not limited to, written,
250 | electronic, or verbal notification, and may be made concurrently
251 | with any other notification to residential customers required by
252 | law or rule.

253 | (5)~~(3)~~ All records, data, information, correspondence, and
254 | communications relating to the registration of persons with
255 | special needs as provided in subsection (1) are confidential and
256 | exempt from the provisions of s. 119.07(1), except that such
257 | information shall be available to other emergency response
258 | agencies, as determined by the local emergency management
259 | director, and to the Department of Health in the furtherance of
260 | its duties and responsibilities. Local law enforcement agencies
261 | shall be provided complete shelter registration information upon
262 | request.

263 | (6)~~(4)~~ All appropriate agencies and community-based
264 | service providers, including home health care providers,
265 | hospices, nurse registries, and home medical equipment
266 | providers, shall assist emergency management agencies by
267 | collecting registration information for persons with special
268 | needs as part of program intake processes, establishing programs
269 | to increase the awareness of the registration process, and
270 | educating clients about the procedures that may be necessary for
271 | their safety during disasters. Clients of state or federally
272 | funded service programs with physical, mental, cognitive
273 | impairment, or sensory disabilities who need assistance in
274 | evacuating, or when in shelters, must register as persons with
275 | special needs.

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276 Section 2. Section 252.3568, Florida Statutes, is created
277 to read:

278 252.3568 Emergency sheltering of persons with pets.--In
279 accordance with the provisions of s. 252.35, the division shall
280 address the evacuation of persons with pets in the shelter
281 component of the state comprehensive emergency management plan.
282 The Department of Agriculture and Consumer Services shall assist
283 the division in determining strategies regarding this activity.

284 Section 3. Section 252.357, Florida Statutes, is created
285 to read:

286 252.357 Monitoring of nursing homes during disaster.--The
287 Florida Comprehensive Emergency Management Plan shall permit the
288 Agency for Health Care Administration, working from the agency's
289 offices or in the Emergency Operations Center, ESF-8, to make
290 initial contact with each nursing home in the disaster area. The
291 agency, by July 15, 2006, and annually thereafter, shall publish
292 on the Internet an emergency telephone number that may be used
293 by nursing homes to contact the agency on a schedule established
294 by the agency to report requests for assistance. The agency may
295 also provide the telephone number to each facility when it makes
296 the initial facility call.

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

300 252.385 Public shelter space.--

301 (2)(a) The division shall administer a program to survey
302 existing schools, universities, community colleges, and other
303 state-owned, municipally owned, and county-owned public

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304 buildings and any private facility that the owner, in writing,
 305 agrees to provide for use as a public hurricane evacuation
 306 shelter to identify those that are appropriately designed and
 307 located to serve as such shelters. The owners of the facilities
 308 must be given the opportunity to participate in the surveys. The
 309 Board of Regents, district school boards, community college
 310 boards of trustees, and the Department of Education are
 311 responsible for coordinating and implementing the survey of
 312 public schools, universities, and community colleges with the
 313 division or the local emergency management agency.

314 (b) By January 31 of each even-numbered year, the division
 315 shall prepare and submit a statewide emergency shelter plan to
 316 the Governor and the Cabinet for approval, subject to the
 317 requirements for approval provided in s. 1013.37(2). The plan
 318 shall identify the general location and square footage of
 319 special needs shelters, by regional planning council region,
 320 during the next 5 years. The plan shall also include information
 321 on the availability of shelters that accept pets. The Department
 322 of Health shall assist the division in determining the estimated
 323 need for special needs shelter space and the adequacy of
 324 facilities to meet the needs of persons with special needs based
 325 on information from the registries of persons with special needs
 326 and other information.

327 (4) (a) Public facilities, including schools, postsecondary
 328 education facilities, and other facilities owned or leased by
 329 the state or local governments, but excluding hospitals, hospice
 330 care facilities, assisted living facilities, or nursing homes,
 331 which are suitable for use as public hurricane evacuation

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332 shelters shall be made available at the request of the local
333 emergency management agencies. The local emergency management
334 agency shall inspect a designated facility to determine its
335 readiness prior to activating the facility for a specific
336 hurricane or disaster. Such agencies shall coordinate with the
337 appropriate school board, university, community college, or
338 local governing board when requesting the use of such facilities
339 as public hurricane evacuation shelters.

340 (b) The Department of Management Services shall
341 incorporate provisions for the use of suitable leased public
342 facilities as public hurricane evacuation shelters into lease
343 agreements for state agencies. Suitable leased public facilities
344 include leased public facilities that are solely occupied by
345 state agencies and have at least 2,000 square feet of net floor
346 area in a single room or in a combination of rooms having a
347 minimum of 400 square feet in each room. The net square footage
348 of floor area shall ~~must~~ be determined by subtracting from the
349 gross square footage the square footage of spaces such as
350 mechanical and electrical rooms, storage rooms, open corridors,
351 restrooms, kitchens, science or computer laboratories, shop or
352 mechanical areas, administrative offices, records vaults, and
353 crawl spaces.

354 Section 5. Section 381.0303, Florida Statutes, is amended
355 to read:

356 381.0303 ~~Health practitioner recruitment for~~ Special needs
357 shelters.--

358 (1) PURPOSE.--The purpose of this section is to provide
359 for the operation, maintenance, and closure of special needs

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360 shelters and to designate the Department of Health, through its
361 county health departments, as the lead agency for coordination
362 of the recruitment of health care practitioners, as defined in
363 s. 456.001(4), to staff special needs shelters in times of
364 emergency or disaster and to provide resources to the department
365 to carry out this responsibility. However, nothing in this
366 section prohibits a county health department from entering into
367 an agreement with a local emergency management agency to assume
368 the lead responsibility for recruiting health care
369 practitioners.

370 (2) SPECIAL NEEDS SHELTER PLAN; STAFFING; CLOSURE; STATE
371 AGENCY ASSISTANCE AND STAFFING.--Provided funds have been
372 appropriated to support ~~medical services~~ disaster coordinator
373 positions in county health departments:7

374 (a) The department shall assume lead responsibility for
375 the ~~local~~ coordination of local medical and health care
376 providers, the American Red Cross, and other interested parties
377 in developing a plan for the staffing and medical management of
378 special needs shelters. The local Children's Medical Services
379 offices shall assume lead responsibility for the coordination of
380 local medical and health care providers, the American Red Cross,
381 and other interested parties in developing a plan for the
382 staffing and medical management of pediatric special needs
383 shelters. Plans shall conform to ~~The plan shall be in~~
384 ~~conformance with~~ the local comprehensive emergency management
385 plan.

386 (b) ~~(a)~~ County health departments shall, in conjunction
387 with the local emergency management agencies, have the lead

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388 responsibility for coordination of the recruitment of health
389 care practitioners to staff local special needs shelters. County
390 health departments shall assign their employees to work in
391 special needs shelters when those employees are needed to
392 protect the health and safety of persons with special needs of
393 patients. County governments shall assist the Department of
394 Health with nonmedical staffing and the operation of special
395 needs shelters. The local health department and emergency
396 management agency shall coordinate these efforts to ensure
397 appropriate staffing in special needs shelters.

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

404 (d) ~~(e)~~ Local emergency management agencies shall be
405 responsible for the designation, and operation, and
406 infrastructure of special needs shelters during times of
407 emergency or disaster and the closure of the facilities
408 following an emergency or disaster. The emergency management
409 agency and the local health department shall coordinate these
410 efforts to ensure appropriate designation, operation, and
411 infrastructure in special needs shelters. County health
412 departments shall assist the local emergency management agency
413 with regard to the management of medical services in special
414 needs shelters. However, nothing in this section prohibits a
415 county health department from entering into an alternative

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416 agreement with a local emergency management agency to assume the
417 lead responsibility for special needs shelter supplies and
418 equipment.

419 (e) Any state employee with a preestablished role in
420 disaster response that has been designated by the employing
421 agency is subject to serve in times of disaster in a capacity
422 that is commensurate with the employee's knowledge, skills, and
423 abilities and to participate in any needed activities related to
424 the disaster unless the employee has other mandated response
425 activities that preclude participation.

426 (f) The Secretary of Elderly Affairs, or his or her
427 designee, shall convene, at any time that he or she deems
428 appropriate and necessary, a multiagency special needs shelter
429 discharge planning team or teams to assist local areas that are
430 severely impacted by a natural or manmade disaster that requires
431 the use of special needs shelters. Multiagency special needs
432 shelter discharge planning teams shall provide assistance to
433 local emergency management agencies with the continued operation
434 or closure of the shelters, as well as with the discharge of
435 special needs clients to alternate facilities if necessary.
436 Local emergency management agencies may request the assistance
437 of a multiagency special needs shelter discharge planning team
438 by alerting statewide emergency management officials of the
439 necessity for additional assistance in their area. The Secretary
440 of Elderly Affairs is encouraged to proactively work with other
441 state agencies prior to any natural disasters for which warnings
442 are provided to ensure that multiagency special needs shelter
443 discharge planning teams are ready to assemble and deploy

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444 rapidly upon a determination by state emergency management
445 officials that a disaster area requires additional assistance.
446 The Secretary of Elderly Affairs may call upon any state agency
447 or office to provide staff to assist a multiagency special needs
448 shelter discharge planning team or teams. Unless the secretary
449 determines that the nature or circumstances surrounding the
450 disaster do not warrant participation from a particular agency's
451 staff, each multiagency special needs shelter discharge planning
452 team shall include at least one representative from each of the
453 following state agencies:

- 454 1. Department of Elderly Affairs.
- 455 2. Department of Health.
- 456 3. Department of Children and Family Services.
- 457 4. Department of Veterans' Affairs.
- 458 5. Department of Community Affairs.
- 459 6. Agency for Health Care Administration.
- 460 7. Agency for Persons with Disabilities.

461 (3) REIMBURSEMENT TO HEALTH CARE PRACTITIONERS AND
462 FACILITIES.--

463 (a) The Department of Health shall upon request reimburse,
464 subject to the availability of funds for this purpose, health
465 care practitioners, as defined in s. 456.001, provided the
466 practitioner is not providing care to a patient under an
467 existing contract, and emergency medical technicians and
468 paramedics licensed under ~~pursuant to~~ chapter 401 for medical
469 care provided at the request of the department in special needs
470 shelters or at other locations during times of emergency or a
471 declared major disaster. Reimbursement for health care

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472 practitioners, except for physicians licensed under ~~pursuant to~~
473 chapter 458 or chapter 459, shall be based on the average hourly
474 rate that such practitioners were paid according to the most
475 recent survey of Florida hospitals conducted by the Florida
476 Hospital Association or other nationally or state recognized
477 data source. Reimbursement shall be requested on forms prepared
478 by the Department of Health and shall be paid as specified in
479 paragraph (c).

480 (b) If, upon closure of a special needs shelter, a
481 multiagency special needs shelter discharge planning team
482 determines that it is necessary to discharge persons with
483 special needs to other health care facilities, such as
484 hospitals, nursing homes, assisted living facilities, and
485 community residential homes, the receiving facilities shall be
486 eligible for reimbursement for services provided to the
487 individuals for up to 90 days. Any facility eligible for
488 reimbursement under this paragraph shall submit invoices for
489 reimbursement on forms developed by the department. A facility
490 must show proof of a written request from a representative of an
491 agency serving on the multiagency special needs shelter
492 discharge planning team that the individual for whom the
493 facility is seeking reimbursement for services rendered was
494 referred to that facility from a special needs shelter. The
495 department shall specify by rule which expenses are reimbursable
496 and the rate of reimbursement for each service. Reimbursement
497 for the services described in this paragraph shall be paid as
498 specified in paragraph (c).

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499 (c) If a Presidential Disaster Declaration has been issued
500 ~~made~~, and the Federal Government makes funds available, the
501 department shall request federal ~~use such funds for~~
502 reimbursement of eligible expenditures. In other situations, or
503 if federal funds do not fully compensate the department for
504 reimbursements permissible under ~~reimbursement made pursuant to~~
505 this section, the department shall process a budget amendment to
506 obtain reimbursement from unobligated, unappropriated moneys in
507 the General Revenue Fund. The department shall not provide
508 reimbursement to facilities under this subsection for services
509 provided to a person with special needs if, during the period of
510 time in which the services were provided, the individual was
511 enrolled in another state-funded program, such as Medicaid or
512 another similar program, was covered under a policy of health
513 insurance as defined in s. 624.603, or was a member of a health
514 maintenance organization or prepaid health clinic as defined in
515 chapter 641, which would otherwise pay for the same services.
516 Travel expense and per diem costs shall be reimbursed pursuant
517 to s. 112.061.

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

523 (5) SPECIAL NEEDS SHELTER INTERAGENCY COMMITTEE.--The
524 Secretary Department of Health may establish a special needs
525 shelter interagency committee and serve as or appoint a designee
526 to serve as the committee's chair. The department shall provide

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527 | any necessary staff and resources to support the committee in
528 | the performance of its duties, ~~to be chaired and staffed by the~~
529 | ~~department.~~ The committee shall address and resolve problems
530 | related to special needs shelters not addressed in the state
531 | comprehensive emergency medical plan and shall consult on ~~serve~~
532 | ~~as an oversight committee to monitor~~ the planning and operation
533 | of special needs shelters.

534 | (a) The committee shall ~~may~~:

535 | 1. Develop, ~~and~~ negotiate, and regularly review any
536 | necessary interagency agreements.

537 | 2. Undertake other such activities as the department deems
538 | necessary to facilitate the implementation of this section.

539 | 3. Submit recommendations to the Legislature as necessary.

540 | (b) The special needs shelter interagency committee shall
541 | be composed of representatives of emergency management, health,
542 | medical, and social services organizations. Membership shall
543 | include, but shall not be limited to, representatives of the
544 | Departments of Health, Community Affairs, Children and Family
545 | Services, Elderly Affairs, ~~Labor and Employment Security,~~ and
546 | Education; the Agency for Health Care Administration; the
547 | Florida Medical Association; the Florida Osteopathic Medical
548 | Association; Associated Home Health Industries of Florida, Inc.;
549 | the Florida Nurses Association; the Florida Health Care
550 | Association; the Florida Assisted Living Affiliation
551 | ~~Association;~~ the Florida Hospital Association; the Florida
552 | Statutory Teaching Hospital Council; the Florida Association of
553 | Homes for the Aging; the Florida Emergency Preparedness
554 | Association; the American Red Cross; Florida Hospices and

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555 Palliative Care, Inc.; the Association of Community Hospitals
556 and Health Systems; the Florida Association of Health
557 Maintenance Organizations; the Florida League of Health Systems;
558 Private Care Association; and the Salvation Army; the Florida
559 Association of Aging Services Providers; AARP; and the Florida
560 Renal Coalition.

561 (c) Meetings of the committee shall be held in
562 Tallahassee, and members of the committee shall serve at the
563 expense of the agencies or organizations they represent. The
564 committee shall make every effort to use teleconference or video
565 conference capabilities in order to ensure statewide input and
566 participation.

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

570 (a) The a definition of a "person with special needs",
571 including eligibility criteria for individuals with physical,
572 mental, cognitive impairment, or sensory disabilities and the
573 services a person with special needs can expect to receive in a
574 special needs shelter patient, specify physician reimbursement,
575 ~~and designate which county health departments will have~~
576 ~~responsibility for implementation of subsections (2) and (3).~~

577 (b) The process for special needs shelter health care
578 practitioners and facility reimbursement for services provided
579 in a disaster.

580 (c) Guidelines for special needs shelter staffing levels
581 to provide services.

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582 (d) The definition of and standards for special needs
583 shelter supplies and equipment, including durable medical
584 equipment.

585 (e) Compliance with applicable laws relating to service
586 animals.

587 (f) Standards for the special needs shelter registration
588 process, including guidelines for addressing the needs of
589 unregistered persons in need of a special needs shelter.

590 (g) Standards for addressing the needs of families where
591 only one dependent is eligible for admission to a special needs
592 shelter and the needs of adults with special needs who are
593 caregivers for individuals without special needs.

594 (h) The requirement of the county health departments to
595 seek the participation of hospitals, nursing homes, assisted
596 living facilities, home health agencies, hospice providers,
597 nurse registries, home medical equipment providers, dialysis
598 centers, and other health and medical emergency preparedness
599 stakeholders in preevent planning activities.

600 (7) ~~REVIEW OF EMERGENCY MANAGEMENT PLANS; CONTINUITY OF~~
601 CARE.--Each emergency management plan submitted to a county
602 health department by a home health agency under s. 400.492, by a
603 nurse registry pursuant to s. 400.506(16)(e), by a hospice
604 pursuant to s. 400.610(1)(b), or by a home medical equipment
605 provider pursuant to s. 400.934(20)(a) shall specify the means
606 by which the home health agency, nurse registry, hospice, or
607 home medical equipment provider will continue to provide staff
608 and equipment to perform the same type and quantity of services
609 for their patients who evacuate to special needs shelters that

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610 were being provided to those patients prior to evacuation. The
611 submission of emergency management plans to county health
612 departments by home health agencies, ~~pursuant to s.~~
613 ~~400.497(8)(c) and (d) and by nurse registries, pursuant to s.~~
614 ~~400.506(16)(e) and by hospice programs, pursuant to s.~~
615 ~~400.610(1)(b)~~ and home medical equipment providers is
616 conditional upon the receipt of an appropriation by the
617 department to establish ~~medical services~~ disaster coordinator
618 positions in county health departments unless the secretary of
619 the department and a local county commission jointly determine
620 to require such plans to be submitted based on a determination
621 that there is a special need to protect public health in the
622 local area during an emergency.

623 Section 6. Section 400.492, Florida Statutes, is amended
624 to read:

625 400.492 Provision of services during an emergency.--Each
626 home health agency shall prepare and maintain a comprehensive
627 emergency management plan that is consistent with the standards
628 adopted by national or state accreditation organizations and
629 consistent with the local special needs plan. The plan shall be
630 updated annually and shall provide for continuing home health
631 services during an emergency that interrupts patient care or
632 services in the patient's home. The plan shall include the means
633 by which the home health agency will continue to provide staff
634 to perform the same type and quantity of services to their
635 patients who evacuate to special needs shelters that were being
636 provided to those patients prior to evacuation. The plan shall
637 describe how the home health agency establishes and maintains an

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638 effective response to emergencies and disasters, including:
639 notifying staff when emergency response measures are initiated;
640 providing for communication between staff members, county health
641 departments, and local emergency management agencies, including
642 a backup system; identifying resources necessary to continue
643 essential care or services or referrals to other organizations
644 subject to written agreement; and prioritizing and contacting
645 patients who need continued care or services.

646 (1) Each patient record for patients who are listed in the
647 registry established pursuant to s. 252.355 shall include a
648 description of how care or services will be continued in the
649 event of an emergency or disaster. The home health agency shall
650 discuss the emergency provisions with the patient and the
651 patient's caregivers, including where and how the patient is to
652 evacuate, procedures for notifying the home health agency in the
653 event that the patient evacuates to a location other than the
654 shelter identified in the patient record, and a list of
655 medications and equipment which must either accompany the
656 patient or will be needed by the patient in the event of an
657 evacuation.

658 (2) Each home health agency shall maintain a current
659 prioritized list of patients who need continued services during
660 an emergency. The list shall indicate how services shall be
661 continued in the event of an emergency or disaster for each
662 patient and if the patient is to be transported to a special
663 needs shelter, and shall indicate if the patient is receiving
664 skilled nursing services and the patient's medication and
665 equipment needs. The list shall be furnished to county health

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666 departments and to local emergency management agencies, upon
667 request.

668 (3) Home health agencies shall not be required to continue
669 to provide care to patients in emergency situations that are
670 beyond their control and that make it impossible to provide
671 services, such as when roads are impassable or when patients do
672 not go to the location specified in their patient records. Home
673 health agencies may establish links to local emergency
674 operations centers to determine a mechanism to approach specific
675 areas within a disaster area in order for the agency to reach
676 its clients. The presentation of a home health agency client to
677 a special needs shelter without the home health agency making a
678 good faith effort to provide services in the shelter setting
679 shall be considered abandonment of the client and constitutes a
680 class II deficiency, subject to sanctions provided in s.
681 400.484(2)(b). For purposes of this section, "good faith effort"
682 may be demonstrated by documented attempts of staff to follow
683 procedures as outlined in the home health agency's comprehensive
684 emergency management plan, and by the patient's record, which
685 support a finding that continuing care has been provided for
686 those patients who have been identified as needing care by the
687 home health agency in the event of an emergency or disaster
688 under subsection (1).

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

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

695 400.497 Rules establishing minimum standards.--The agency
696 shall adopt, publish, and enforce rules to implement this part,
697 including, as applicable, ss. 400.506 and 400.509, which must
698 provide reasonable and fair minimum standards relating to:

699 (8) Preparation of a comprehensive emergency management
700 plan pursuant to s. 400.492.

701 (c) The plan is subject to review and approval by the
702 county health department. During its review, the county health
703 department shall contact state and local health and medical
704 stakeholders during its review when necessary. ~~ensure that the~~
705 ~~following agencies, at a minimum, are given the opportunity to~~
706 ~~review the plan:~~

- 707 1. ~~The local emergency management agency.~~
- 708 2. ~~The Agency for Health Care Administration.~~
- 709 3. ~~The local chapter of the American Red Cross or other~~
710 ~~lead sheltering agency.~~
- 711 4. ~~The district office of the Department of Children and~~
712 ~~Family Services.~~

713

714 The county health department shall complete its review to ensure
715 that the plan is in accordance with the criteria set forth in
716 the rules of the Agency for Health Care Administration within 90
717 ~~60~~ days after receipt of the plan and shall either approve the
718 plan or advise the home health agency of necessary revisions. If
719 the home health agency fails to submit a plan or fails to submit
720 the requested information or revisions to the county health

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721 department within 30 days after written notification from the
 722 county health department, the county health department shall
 723 notify the Agency for Health Care Administration. The agency
 724 shall notify the home health agency that such failure
 725 constitutes a deficiency, subject to a fine of \$5,000 per
 726 occurrence. If the plan is not submitted, information is not
 727 provided, or revisions are not made as requested, the agency may
 728 impose the fine.

729 (d) For any home health agency that operates in more than
 730 one county, the Department of Health shall review the plan,
 731 after consulting with state and local health and medical
 732 stakeholders, when necessary ~~all of the county health~~
 733 ~~departments, the agency, and all the local chapters of the~~
 734 ~~American Red Cross or other lead sheltering agencies in the~~
 735 ~~areas of operation for that particular home health agency.~~ The
 736 department of Health shall complete its review within 90 days
 737 after receipt of the plan and shall either approve the plan or
 738 advise the home health agency of necessary revisions. The
 739 department of Health shall make every effort to avoid imposing
 740 differing requirements on a home health agency that operates in
 741 more than one county as a result of differing or conflicting
 742 comprehensive plan requirements of the ~~based on differences~~
 743 ~~between counties~~ in which ~~on~~ the home health agency operates.

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

746 400.506 Licensure of nurse registries; requirements;
 747 penalties.--

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748 (16) Each nurse registry shall prepare and maintain a
749 comprehensive emergency management plan that is consistent with
750 the criteria in this subsection and with the local special needs
751 plan. The plan shall be updated annually. The plan shall include
752 the means by which the nurse registry will continue to provide
753 staff to perform the same type and quantity of services to their
754 patients who evacuate to special needs shelters that were being
755 provided to those patients prior to evacuation. The plan shall
756 specify how the nurse registry shall facilitate the provision of
757 continuous care by persons referred for contract to persons who
758 are registered pursuant to s. 252.355 during an emergency that
759 interrupts the provision of care or services in private
760 residencies. Nurse registries may establish links to local
761 emergency operations centers to determine a mechanism to
762 approach specific areas within a disaster area in order for a
763 provider to reach its clients. The presentation of nurse
764 registry clients to a special needs shelter without the nurse
765 registry provider making a good faith effort to provide services
766 in the shelter setting shall be considered abandonment of the
767 patient and constitutes a class II deficiency, subject to
768 sanctions provided in s. 400.484(2)(b). For purposes of this
769 section, "good faith effort" may be demonstrated by documented
770 attempts of staff to follow procedures as outlined in the nurse
771 registry's comprehensive emergency management plan which support
772 a finding that continuing care has been provided for those
773 patients who have been identified as needing care by the nurse
774 registry in the event of an emergency under s. 400.506(1).

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775 (a) All persons referred for contract who care for persons
776 registered pursuant to s. 252.355 must include in the patient
777 record a description of how care will be continued during a
778 disaster or emergency that interrupts the provision of care in
779 the patient's home. It shall be the responsibility of the person
780 referred for contract to ensure that continuous care is
781 provided.

782 (b) Each nurse registry shall maintain a current
783 prioritized list of patients in private residences who are
784 registered pursuant to s. 252.355 and are under the care of
785 persons referred for contract and who need continued services
786 during an emergency. This list shall indicate, for each patient,
787 if the client is to be transported to a special needs shelter
788 and if the patient is receiving skilled nursing services. Nurse
789 registries shall make this list available to county health
790 departments and to local emergency management agencies upon
791 request.

792 (c) Each person referred for contract who is caring for a
793 patient who is registered pursuant to s. 252.355 shall provide a
794 list of the patient's medication and equipment needs to the
795 nurse registry. Each person referred for contract shall make
796 this information available to county health departments and to
797 local emergency management agencies upon request.

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

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

804 (e) The comprehensive emergency management plan required
805 by this subsection is subject to review and approval by the
806 county health department. During its review, the county health
807 department shall contact state and local health and medical
808 stakeholders, when necessary ~~ensure that, at a minimum, the~~
809 ~~local emergency management agency, the Agency for Health Care~~
810 ~~Administration, and the local chapter of the American Red Cross~~
811 ~~or other lead sheltering agency are given the opportunity to~~
812 ~~review the plan.~~ The county health department shall complete its
813 review to ensure that the plan is in accordance with the
814 criteria set forth in the rules of the Agency for Health Care
815 Administration within 90 ~~60~~ days after receipt of the plan and
816 shall either approve the plan or advise the nurse registry of
817 necessary revisions. If a nurse registry fails to submit a plan
818 or fails to submit requested information or revisions to the
819 county health department within 30 days after written
820 notification from the county health department, the county
821 health department shall notify the Agency for Health Care
822 Administration. The agency shall notify the nurse registry that
823 such failure constitutes a deficiency, subject to a fine of
824 \$5,000 per occurrence. If the plan is not submitted, information
825 is not provided, or revisions are not made as requested, the
826 agency may impose the fine.

827 (f) The Department of Health shall review the
828 comprehensive emergency management plan of any nurse registry
829 that operates in more than one county. The department shall

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830 complete its review within 90 days after receipt of the plan and
831 shall either approve the plan or advise the nurse registry of
832 necessary revisions. The department shall make every effort to
833 avoid imposing differing requirements on nurse registries that
834 operate in more than one county as a result of differing or
835 conflicting comprehensive plan requirements of the counties in
836 which the nurse registry operates.

837 (g)~~(f)~~ The Agency for Health Care Administration shall
838 adopt rules establishing minimum criteria for the comprehensive
839 emergency management plan and plan updates required by this
840 subsection, with the concurrence of the Department of Health and
841 in consultation with the Department of Community Affairs.

842 Section 9. Paragraph (b) of subsection (1) of section
843 400.610, Florida Statutes, is amended to read:

844 400.610 Administration and management of a hospice.--

845 (1) A hospice shall have a clearly defined organized
846 governing body, consisting of a minimum of seven persons who are
847 representative of the general population of the community
848 served. The governing body shall have autonomous authority and
849 responsibility for the operation of the hospice and shall meet
850 at least quarterly. The governing body shall:

851 (b)1. Prepare and maintain a comprehensive emergency
852 management plan that provides for continuing hospice services in
853 the event of an emergency that is consistent with local special
854 needs plans. The plan shall include provisions for ensuring
855 continuing care to hospice patients who go to special needs
856 shelters. The plan shall include the means by which the hospice
857 provider will continue to provide staff to perform the same type

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858 and quantity of services to their patients who evacuate to
859 special needs shelters that were being provided to those
860 patients prior to evacuation. The plan is subject to review and
861 approval by the county health department, except as provided in
862 subparagraph 2. During its review, the county health department
863 shall contact state and local health and medical stakeholders,
864 ~~when necessary ensure that the department, the agency, and the~~
865 ~~local chapter of the American Red Cross or other lead sheltering~~
866 ~~agency have an opportunity to review and comment on the plan.~~
867 The county health department shall complete its review to ensure
868 that the plan is in accordance with the criteria set forth in
869 the rules of the Department of Elderly Affairs within 90 ~~60~~ days
870 after receipt of the plan and shall either approve the plan or
871 advise the hospice of necessary revisions. Hospice providers may
872 establish links to local emergency operations centers to
873 determine a mechanism to approach specific areas within a
874 disaster area in order for the provider to reach its clients.
875 The presentation of hospice clients to a special needs shelter
876 without the hospice provider making a good faith effort to
877 provide services in the shelter setting shall be considered
878 abandonment of the client subject to sanction as provided by law
879 or rule. For the purposes of this section, "good faith effort"
880 may be demonstrated by documented attempts of staff to follow
881 procedures as outlined in the hospice's comprehensive emergency
882 management plan and to provide continuing care for those hospice
883 clients who have been identified as needing alternative
884 caregiver services in the event of an emergency.

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885 2. For any hospice that operates in more than one county,
886 the Department of Health during its review shall contact state
887 and local health and medical stakeholders, when necessary ~~review~~
888 ~~the plan, after consulting with all of the county health~~
889 ~~departments, the agency, and all the local chapters of the~~
890 ~~American Red Cross or other lead sheltering agency in the areas~~
891 ~~of operation for that particular hospice.~~ The Department of
892 Health shall complete its review to ensure that the plan is in
893 accordance with the criteria set forth in the rules of the
894 Department of Elderly Affairs within 90 days after receipt of
895 the plan and shall either approve the plan or advise the hospice
896 of necessary revisions. The Department of Health shall make
897 every effort to avoid imposing ~~on the hospice~~ differing
898 requirements on a hospice that operates in more than one county
899 as a result of differing or conflicting comprehensive plan
900 requirements of the ~~based on differences between counties in~~
901 which the hospice operates.

902 Section 10. Subsections (13) through (16) of section
903 400.925, Florida Statutes, are renumbered as subsections (14)
904 through (17), respectively, and a new subsection (13) is added
905 to that section to read:

906 400.925 Definitions.--As used in this part, the term:

907 (13) "Life-supporting or life-sustaining equipment" means
908 a device that is essential to, or that yields information that
909 is essential to, the restoration or continuation of a bodily
910 function important to the continuation of human life. Life-
911 supporting or life-sustaining equipment includes apnea monitors,
912 enteral feeding pumps, infusion pumps, portable home dialysis

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913 equipment, and ventilator equipment and supplies for all related
914 equipment, including oxygen equipment and related respiratory
915 equipment.

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

918 400.934 Minimum standards.--As a requirement of licensure,
919 home medical equipment providers shall:

920 (20)(a) Prepare and maintain a comprehensive emergency
921 management plan that meets minimum criteria established by the
922 agency in rule under s. 400.935. The plan shall be updated
923 annually and shall provide for continuing home medical equipment
924 services for life-supporting or life-sustaining equipment, as
925 defined in 400.925, during an emergency that interrupts home
926 medical equipment services in a patient's home. The plan shall
927 include:

928 1. The means by which the home medical equipment provider
929 will continue to provide equipment to perform the same type and
930 quantity of services to its patients who evacuate to special
931 needs shelters that were being provided to those patients prior
932 to evacuation.

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

936 a. Notification of staff when emergency response measures
937 are initiated.

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

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941 c. Identification of resources necessary to continue
942 essential care or services or referrals to other organizations
943 subject to written agreement.

944 d. Contacting and prioritizing patients in need of
945 continued medical equipment services and supplies.

946 (b) The plan is subject to review and approval by the
947 county health department. During its review, the county health
948 department shall contact state and local health and medical
949 stakeholders, when necessary. The county health department shall
950 complete its review to ensure that the plan is in accordance
951 with the criteria set forth in the rules of the Agency for
952 Health Care Administration within 90 days after receipt of the
953 plan. If a home medical equipment provider fails to submit a
954 plan or fails to submit requested information or revisions to
955 the county health department within 30 days after written
956 notification from the county health department, the county
957 health department shall notify the Agency for Health Care
958 Administration. The agency shall notify the home medical
959 equipment provider that such failure constitutes a deficiency,
960 subject to a fine of \$5,000 per occurrence. If the plan is not
961 submitted, information is not provided, or revisions are not
962 made as requested, the agency may impose the fine.

963 (c) The Department of Health shall review the
964 comprehensive emergency management plan of any home medical
965 equipment provider that operates in more than one county. The
966 department shall complete its review within 90 days after
967 receipt of the plan and shall either approve the plan or advise
968 the home medical equipment provider of necessary revisions. The

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969 department shall make every effort to avoid imposing differing
970 requirements on home medical equipment providers that operate in
971 more than one county as a result of differing or conflicting
972 comprehensive plan requirements of the counties in which the
973 home medical equipment provider operates.

974 (21) Each home medical equipment provider shall maintain a
975 current prioritized list of patients who need continued services
976 during an emergency. The list shall indicate the means by which
977 services shall be continued for each patient in the event of an
978 emergency or disaster, whether the patient is to be transported
979 to a special needs shelter, and whether the patient has life-
980 supporting or life-sustaining equipment, including the specific
981 type of equipment and related supplies. The list shall be
982 furnished to county health departments and local emergency
983 management agencies, upon request.

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

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

990 400.935 Rules establishing minimum standards.--The agency
991 shall adopt, publish, and enforce rules to implement this part,
992 which must provide reasonable and fair minimum standards
993 relating to:

994 (11) Preparation of the comprehensive emergency management
995 plan under s. 400.934 and the establishment of minimum criteria
996 for the plan, including the maintenance of patient equipment and

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997 | supply lists that can accompany patients who are transported
998 | from their homes. Such rules shall be formulated in consultation
999 | with the Department of Health and the Department of Community
1000 | Affairs.

1001 | Section 13. Section 408.831, Florida Statutes, is amended
1002 | to read:

1003 | 408.831 Denial, suspension, or revocation of a license,
1004 | registration, certificate, or application.--

1005 | (1) In addition to any other remedies provided by law, the
1006 | agency may deny each application or suspend or revoke each
1007 | license, registration, or certificate of entities regulated or
1008 | licensed by it:

1009 | (a) If the applicant, licensee, registrant, or
1010 | certificateholder, or, in the case of a corporation,
1011 | partnership, or other business entity, if any officer, director,
1012 | agent, or managing employee of that business entity or any
1013 | affiliated person, partner, or shareholder having an ownership
1014 | interest equal to 5 percent or greater in that business entity,
1015 | has failed to pay all outstanding fines, liens, or overpayments
1016 | assessed by final order of the agency or final order of the
1017 | Centers for Medicare and Medicaid Services, not subject to
1018 | further appeal, unless a repayment plan is approved by the
1019 | agency; or

1020 | (b) For failure to comply with any repayment plan.

1021 | (2) In reviewing any application requesting a change of
1022 | ownership or change of the licensee, registrant, or
1023 | certificateholder, the transferor shall, prior to agency
1024 | approval of the change, repay or make arrangements to repay any

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1025 amounts owed to the agency. Should the transferor fail to repay
1026 or make arrangements to repay the amounts owed to the agency,
1027 the issuance of a license, registration, or certificate to the
1028 transferee shall be delayed until repayment or until
1029 arrangements for repayment are made.

1030 (3) Entities subject to this section may exceed their
1031 licensed capacity to act as a receiving facility in accordance
1032 with an emergency operations plan for clients of evacuating
1033 providers from a geographic area where an evacuation order has
1034 been issued by a local authority having jurisdiction. While in
1035 an overcapacity status, each provider must furnish or arrange
1036 for appropriate care and services to all clients. In addition,
1037 the agency may approve requests for overcapacity beyond 15 days,
1038 which approvals may be based upon satisfactory justification and
1039 need as provided by the receiving and sending facility.

1040 (4) An inactive license may be issued to a licensee
1041 subject to this section when the provider is located in a
1042 geographic area where a state of emergency was declared by the
1043 Governor if the provider:

1044 (a) Suffered damage to the provider's operation during
1045 that state of emergency.

1046 (b) Is currently licensed.

1047 (c) Does not have a provisional license.

1048 (d) Will be temporarily unable to provide services but is
1049 reasonably expected to resume services within 12 months.

1050
1051 An inactive license may be issued for a period not to exceed 12
1052 months but may be renewed by the agency for up to 6 additional

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1053 months upon demonstration to the agency of progress toward
1054 reopening. A request by a licensee for an inactive license or to
1055 extend the previously approved inactive period must be submitted
1056 in writing to the agency, accompanied by written justification
1057 for the inactive license which states the beginning and ending
1058 dates of inactivity and includes a plan for the transfer of any
1059 clients to other providers and appropriate licensure fees. Upon
1060 agency approval, the licensee shall notify clients of any
1061 necessary discharge or transfer as required by authorizing
1062 statutes or applicable rules. The beginning of the inactive
1063 licensure period shall be the date the provider ceases
1064 operations. The end of the inactive period shall become the
1065 licensee expiration date, and all licensure fees must be
1066 current, paid in full, and may be prorated. Reactivation of an
1067 inactive license requires the prior approval by the agency of a
1068 renewal application, including payment of licensure fees and
1069 agency inspections indicating compliance with all requirements
1070 of this part and applicable rules and statutes.

1071 (5)-(3) This section provides standards of enforcement
1072 applicable to all entities licensed or regulated by the Agency
1073 for Health Care Administration. This section controls over any
1074 conflicting provisions of chapters 39, 381, 383, 390, 391, 393,
1075 394, 395, 400, 408, 468, 483, and 641 or rules adopted pursuant
1076 to those chapters.

1077 Section 14. The Legislature finds that all designated
1078 public special needs hurricane evacuation shelters should be
1079 equipped with permanent emergency power generating capacity to
1080 provide the necessary equipment, heating, ventilation, and air-

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1081 conditioning to meet the medical needs of patients by June 1,
1082 2007. The Department of Community Affairs shall work with local
1083 communities to ensure that there is a sufficient number of
1084 public special needs shelters designated to meet the anticipated
1085 demand based on best available data as determined by the
1086 department and the Department of Health. Local match for these
1087 projects shall be no less than 25 percent of project cost. There
1088 is hereby appropriated \$21.5 million from the U.S. Contributions
1089 Trust Fund in fixed capital outlay to the Department of
1090 Community Affairs to establish a competitive award process to
1091 implement this section. No more than 5 percent of the funds
1092 provided under this section may be used by the department for
1093 administration of the funding.

1094 Section 15. The Legislature finds that retrofitting public
1095 hurricane evacuation shelters is an efficient and economical
1096 method of accelerating the state and local efforts to reduce the
1097 shelter deficit. Criteria for the retrofitting of a public
1098 hurricane evacuation shelter shall include, but not be limited
1099 to, the project's ability to meet the structural and siting
1100 requirements of American Red Cross Standard ARC 4496,
1101 "Guidelines for Hurricane Evacuation Shelter Selection," once
1102 completed; the shelter needs for the local government, as well
1103 as the overall needs of the hurricane evacuation planning
1104 region; the cost-effectiveness of the project in terms of the
1105 number of public hurricane evacuation spaces; and the priority
1106 ranking of the proposed project in the applicable local
1107 mitigation strategy. There is hereby appropriated \$9 million
1108 from the U.S. Contributions Trust Fund in fixed capital outlay

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1109 | to the Department of Community Affairs to establish a
1110 | competitive award process to implement this section. No more
1111 | than 5 percent of the funds provided under this section may be
1112 | used by the department for administration of this funding.

1113 | Section 16. For the 2006-2007 fiscal year, the sums of
1114 | \$896,799 from recurring general revenue funds and \$104,156 from
1115 | nonrecurring general revenue funds are appropriated, and 20
1116 | full-time equivalent positions are authorized at 872,644 salary
1117 | rate, to implement the provisions of emergency management plan
1118 | reviews for home health agencies and nurse registry, hospice,
1119 | and home medical equipment providers.

1120 | Section 17. This act shall take effect July 1, 2006.