

CHAMBER ACTION

1 The Health & Families Council recommends the following:

2
3 **Council/Committee Substitute**

4 Remove the entire bill and insert:

5
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 special needs for purposes of inclusion
11 within the registry of persons with special needs
12 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; providing
19 that a person with special needs shall be allowed to bring
20 his or her service animal into a special needs shelter;
21 revising provisions with respect to the required
22 notification of residential utility customers of the
23 availability of the special needs registration program;

HB 7139 CS

2006
CS

24 providing that special needs shelter roster information
25 shall be provided to local law enforcement agencies upon
26 request; creating s. 252.3568, F.S.; requiring the
27 Division of Emergency Management to address strategies for
28 the evacuation of persons with pets in the shelter
29 component of the state comprehensive emergency management
30 plan; providing for the inclusion of the requirement for
31 similar strategies within local comprehensive emergency
32 management plans; requiring the Department of Agriculture
33 and Consumer Services to provide specified assistance to
34 the division; creating s. 252.357, F.S., requiring the
35 Florida Comprehensive Emergency Management Plan to permit
36 the Agency for Health Care Administration to make initial
37 contact with each nursing home and assisted living
38 facility in a disaster area; requiring the agency to
39 annually publish an emergency telephone number that may be
40 used by nursing homes and assisted living facilities to
41 contact the agency; amending s. 252.385, F.S., relating to
42 public shelter space; requiring the Division of Emergency
43 Management of the Department of Community Affairs to
44 biennially prepare and submit a statewide emergency
45 shelter plan to the Governor and the Cabinet for approval;
46 providing plan requirements; requiring the Department of
47 Health to provide specified assistance to the division;
48 revising those facilities which are excluded as being
49 suitable for use as public hurricane evacuation shelters;
50 requiring local emergency management agencies to
51 coordinate with public facilities to determine readiness

Page 2 of 39

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hb7139-02-c2

HB 7139 CS

2006
CS

52 | prior to activation; amending s. 381.0303, F.S.; providing
53 | for the operation and closure of special needs shelters;
54 | providing that local Children's Medical Services offices
55 | shall assume lead responsibility for specified
56 | coordination with respect to the development of a plan for
57 | the staffing and medical management of pediatric special
58 | needs shelters; requiring such plans to conform to the
59 | local comprehensive emergency management plan; requiring
60 | county governments to assist the Department of Health with
61 | nonmedical staffing and operation of special needs
62 | shelters; requiring county health departments and
63 | emergency management agencies to coordinate such efforts
64 | to ensure appropriate staffing; providing that the
65 | appropriate county health department, Children's Medical
66 | Services office, and local emergency management agency
67 | shall jointly determine the responsibility for medical
68 | supervision in a special needs shelter; requiring the
69 | local health department and emergency management agency to
70 | coordinate efforts to ensure appropriate designation,
71 | operation, and closure of special needs shelters;
72 | requiring the Secretary of Elderly Affairs to convene
73 | multiagency special needs shelter discharge planning teams
74 | to assist local areas that are severely impacted by a
75 | natural or manmade disaster that requires the use of
76 | special needs shelters; providing duties and
77 | responsibilities of such discharge planning teams;
78 | providing for the inclusion of specified state agency
79 | representatives on each discharge planning team; revising

Page 3 of 39

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hb7139-02-c2

HB 7139 CS

2006
CS

80 provisions relating to reimbursement of health care
81 practitioners; providing for eligibility of specified
82 health care facilities for reimbursement when a
83 multiagency special needs shelter discharge planning team
84 discharges persons with special needs to such receiving
85 facilities; providing procedures and requirements with
86 respect to such reimbursement; requiring the department to
87 specify by rule expenses that are reimbursable and the
88 rate of reimbursement for services; revising provisions
89 which prescribe means of and procedures for reimbursement;
90 disallowing specified reimbursements; revising provisions
91 with respect to the organization, role, duties, and
92 composition of the special needs shelter interagency
93 committee; requiring the department to adopt specified
94 rules with respect to special needs shelters; amending ss.
95 400.492, 400.497, 400.506, 400.610, and 400.934, F.S.;
96 revising requirements with respect to the comprehensive
97 emergency management plans of home health agencies, nurse
98 registries, and hospices, and providing such requirements
99 with respect to home medical equipment providers, to
100 include the means by which continuing services will be
101 provided to patients who evacuate to special needs
102 shelters; authorizing the establishment of links to local
103 emergency operations centers for specified purposes;
104 revising requirements of a county health department with
105 respect to review of a comprehensive emergency management
106 plan submitted by a home health agency, nurse registry, or
107 hospice; providing requirements upon failure to submit a

Page 4 of 39

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hb7139-02-c2

108 | plan or requested information to the department; providing
109 | for imposition of a fine; revising requirements of the
110 | Department of Health with respect to review of the plan of
111 | a home health agency or hospice that operates in more than
112 | one county; providing that the preparation and maintenance
113 | of a comprehensive emergency management plan by a home
114 | medical equipment provider is a requirement for licensure
115 | and must meet minimum criteria established by the Agency
116 | for Health Care Administration; providing plan
117 | requirements; providing that the plan is subject to review
118 | and approval by the county health department; requiring
119 | each home medical equipment provider to maintain a current
120 | prioritized list of patients who need continued services
121 | during an emergency; amending s. 400.925, F.S.; defining
122 | "life-supporting or life-sustaining equipment" for
123 | purposes of pt. X of ch. 400, F.S., relating to home
124 | medical equipment providers; amending s. 400.935, F.S.;
125 | requiring the Agency for Health Care Administration to
126 | adopt rules with respect to the comprehensive emergency
127 | management plan prepared by a home medical equipment
128 | services provider; amending s. 408.831, F.S.; providing
129 | that entities regulated or licensed by the Agency for
130 | Health Care Administration may exceed their licensed
131 | capacity to act as a receiving facility under specified
132 | circumstances; providing requirements while such entities
133 | are in an overcapacity status; providing for issuance of
134 | an inactive license to such licensees under specified
135 | conditions; providing requirements and procedures with

HB 7139 CS

2006
CS

136 | respect to the issuance and reactivation of an inactive
137 | license; providing fees; requiring certain health
138 | insurance entities to waive time restrictions on refilling
139 | prescriptions for medication during specified emergency
140 | conditions; providing legislative findings with respect to
141 | the equipping of all designated public special needs
142 | hurricane evacuation shelters with permanent emergency
143 | power generating capacity by a specified date; requiring
144 | the Department of Community Affairs to work with local
145 | communities to ensure a sufficient number of public
146 | special needs shelters designated to meet anticipated
147 | demand; specifying the percentage of local match for such
148 | projects; providing an appropriation to the Department of
149 | Community Affairs to establish a competitive award
150 | process; specifying a limit with respect to administration
151 | of the funding; providing legislative findings with
152 | respect to retrofitting public hurricane evacuation
153 | shelters; providing criteria for the retrofitting of a
154 | public hurricane evacuation shelter; providing an
155 | appropriation to the Department of Community Affairs to
156 | establish a competitive award process; specifying a limit
157 | with respect to administration of the funding; providing
158 | an appropriation to implement the provisions of emergency
159 | management plan reviews for home health agencies and nurse
160 | registry, hospice, and home medical equipment providers;
161 | providing an effective date.

162 |
163 | Be It Enacted by the Legislature of the State of Florida:

Page 6 of 39

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hb7139-02-c2

HB 7139 CS

2006
CS

164

165 Section 1. Section 252.355, Florida Statutes, is amended
166 to read:

167 252.355 Registry of persons with special needs; notice.--

168 (1) In order to meet the special needs of persons who
169 would need assistance during evacuations and sheltering because
170 of physical, mental, cognitive impairment, or sensory
171 disabilities, each local emergency management agency in the
172 state shall maintain a registry of persons with special needs
173 located within the jurisdiction of the local agency. The
174 registration shall identify those persons in need of assistance
175 and plan for resource allocation to meet those identified needs.
176 To assist the local emergency management agency in identifying
177 such persons, home health agencies, hospices, nurse registries,
178 home medical equipment providers, the Department of Children and
179 Family Services, the Department of Health, the Agency for Health
180 Care Administration, the Department of Education, the Agency for
181 Persons with Disabilities, ~~Department of Labor and Employment~~
182 ~~Security~~, and the Department of Elderly Affairs shall provide
183 registration information to all of their special needs clients
184 and to all people with special needs who receive services
185 ~~incoming clients as a part of the intake process~~. The registry
186 shall be updated annually. The registration program shall give
187 persons with special needs the option of preauthorizing
188 emergency response personnel to enter their homes during search
189 and rescue operations if necessary to assure their safety and
190 welfare following disasters.

HB 7139 CS

2006
CS

191 (2) The Department of Community Affairs shall be the
192 designated lead agency responsible for community education and
193 outreach to the general public, including special needs clients,
194 regarding registration and special needs shelters and general
195 information regarding shelter stays.

196 (3) A person with special needs shall be allowed to bring
197 his or her service animal into a special needs shelter in
198 accordance with s. 413.08.

199 (4)~~(2)~~ On or before May 1 of each year each electric
200 utility in the state shall annually notify residential customers
201 in its service area of the availability of the registration
202 program available through their local emergency management
203 agency with either:

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

207 (b) Two separate annual notifications between January 1
208 and May 31.

209
210 The notification required under this subsection may be made by
211 any available means, including, but not limited to, written,
212 electronic, or verbal notification, and may be made concurrently
213 with any other notification to residential customers required by
214 law or rule.

215 (5)~~(3)~~ All records, data, information, correspondence, and
216 communications relating to the registration of persons with
217 special needs as provided in subsection (1) are confidential and
218 exempt from the provisions of s. 119.07(1), except that such

HB 7139 CS

2006
CS

219 information shall be available to other emergency response
220 agencies, as determined by the local emergency management
221 director. Local law enforcement agencies shall be provided
222 complete shelter roster information upon request.

223 (6)(4) All appropriate agencies and community-based
224 service providers, including home health care providers,
225 hospices, nurse registries, and home medical equipment
226 providers, shall assist emergency management agencies by
227 collecting registration information for persons with special
228 needs as part of program intake processes, establishing programs
229 to increase the awareness of the registration process, and
230 educating clients about the procedures that may be necessary for
231 their safety during disasters. Clients of state or federally
232 funded service programs with physical, mental, cognitive
233 impairment, or sensory disabilities who need assistance in
234 evacuating, or when in shelters, must register as persons with
235 special needs.

236 Section 2. Section 252.3568, Florida Statutes, is created
237 to read:

238 252.3568 Emergency sheltering of persons with pets.--In
239 accordance with the provisions of s. 252.35, the division shall
240 address strategies for the evacuation of persons with pets in
241 the shelter component of the state comprehensive emergency
242 management plan and shall include the requirement for similar
243 strategies in its standards and requirements for local
244 comprehensive emergency management plans. The Department of
245 Agriculture and Consumer Services shall assist the division in
246 determining strategies regarding this activity.

Page 9 of 39

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hb7139-02-c2

HB 7139 CS

2006
CS

247 Section 3. Section 252.357, Florida Statutes, is created
248 to read:

249 252.357 Monitoring of nursing homes and assisted living
250 facilities during disaster.--The Florida Comprehensive Emergency
251 Management Plan shall permit the Agency for Health Care
252 Administration, working from the agency's offices or in the
253 Emergency Operations Center, ESF-8, to make initial contact with
254 each nursing home and assisted living facility in the disaster
255 area. The agency, by July 15, 2006, and annually thereafter,
256 shall publish on the Internet an emergency telephone number that
257 may be used by nursing homes and assisted living facilities to
258 contact the agency on a schedule established by the agency to
259 report requests for assistance. The agency may also provide the
260 telephone number to each facility when it makes the initial
261 facility call.

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

265 252.385 Public shelter space.--

266 (2) (a) The division shall administer a program to survey
267 existing schools, universities, community colleges, and other
268 state-owned, municipally owned, and county-owned public
269 buildings and any private facility that the owner, in writing,
270 agrees to provide for use as a public hurricane evacuation
271 shelter to identify those that are appropriately designed and
272 located to serve as such shelters. The owners of the facilities
273 must be given the opportunity to participate in the surveys. The
274 state university boards of trustees ~~Board of Regents~~, district

HB 7139 CS

2006
CS

275 school boards, community college boards of trustees, and the
276 Department of Education are responsible for coordinating and
277 implementing the survey of public schools, universities, and
278 community colleges with the division or the local emergency
279 management agency.

280 (b) By January 31 of each even-numbered year, the division
281 shall prepare and submit a statewide emergency shelter plan to
282 the Governor and the Cabinet for approval, subject to the
283 requirements for approval provided in s. 1013.37(2). The plan
284 shall identify the general location and square footage of
285 special needs shelters, by regional planning council region,
286 during the next 5 years. The plan shall also include information
287 on the availability of shelters that accept pets. The Department
288 of Health shall assist the division in determining the estimated
289 need for special needs shelter space and the adequacy of
290 facilities to meet the needs of persons with special needs based
291 on information from the registries of persons with special needs
292 and other information.

293 (4) (a) Public facilities, including schools, postsecondary
294 education facilities, and other facilities owned or leased by
295 the state or local governments, but excluding hospitals, hospice
296 care facilities, assisted living facilities, or nursing homes,
297 which are suitable for use as public hurricane evacuation
298 shelters shall be made available at the request of the local
299 emergency management agencies. The local emergency management
300 agency shall coordinate with these entities to ensure that
301 designated facilities are ready to activate prior to a specific
302 hurricane or disaster. Such agencies shall coordinate with the

HB 7139 CS

2006
CS

303 appropriate school board, university, community college, or
 304 local governing board when requesting the use of such facilities
 305 as public hurricane evacuation shelters.

306 (b) The Department of Management Services shall
 307 incorporate provisions for the use of suitable leased public
 308 facilities as public hurricane evacuation shelters into lease
 309 agreements for state agencies. Suitable leased public facilities
 310 include leased public facilities that are solely occupied by
 311 state agencies and have at least 2,000 square feet of net floor
 312 area in a single room or in a combination of rooms having a
 313 minimum of 400 square feet in each room. The net square footage
 314 of floor area shall ~~must~~ be determined by subtracting from the
 315 gross square footage the square footage of spaces such as
 316 mechanical and electrical rooms, storage rooms, open corridors,
 317 restrooms, kitchens, science or computer laboratories, shop or
 318 mechanical areas, administrative offices, records vaults, and
 319 crawl spaces.

320 Section 5. Section 381.0303, Florida Statutes, is amended
 321 to read:

322 381.0303 ~~Health practitioner recruitment for~~ Special needs
 323 shelters.--

324 (1) PURPOSE.--The purpose of this section is to provide
 325 for the operation and closure of special needs shelters and to
 326 designate the Department of Health, through its county health
 327 departments, as the lead agency for coordination of the
 328 recruitment of health care practitioners, as defined in s.
 329 456.001(4), to staff special needs shelters in times of
 330 emergency or disaster and to provide resources to the department

HB 7139 CS

2006
CS

331 to carry out this responsibility. However, nothing in this
332 section prohibits a county health department from entering into
333 an agreement with a local emergency management agency to assume
334 the lead responsibility for recruiting health care
335 practitioners.

336 (2) SPECIAL NEEDS SHELTER PLAN; STAFFING; STATE AGENCY
337 ASSISTANCE ~~AND STAFFING~~.--Provided funds have been appropriated
338 to support ~~medical services~~ disaster coordinator positions in
339 county health departments:7

340 (a) The department shall assume lead responsibility for
341 the ~~local~~ coordination of local medical and health care
342 providers, the American Red Cross, and other interested parties
343 in developing a plan for the staffing and medical management of
344 special needs shelters. The local Children's Medical Services
345 offices shall assume lead responsibility for the coordination of
346 local medical and health care providers, the American Red Cross,
347 and other interested parties in developing a plan for the
348 staffing and medical management of pediatric special needs
349 shelters. Plans shall conform to ~~The plan shall be in~~
350 ~~conformance with~~ the local comprehensive emergency management
351 plan.

352 (b) ~~(a)~~ County health departments shall, in conjunction
353 with the local emergency management agencies, have the lead
354 responsibility for coordination of the recruitment of health
355 care practitioners to staff local special needs shelters. County
356 health departments shall assign their employees to work in
357 special needs shelters when those employees are needed to
358 protect the health and safety of persons with special needs of

HB 7139 CS

2006
CS

359 ~~patients.~~ County governments shall assist the department with
 360 nonmedical staffing and the operation of special needs shelters.
 361 The local health department and emergency management agency
 362 shall coordinate these efforts to ensure appropriate staffing in
 363 special needs shelters.

364 ~~(c)(b)~~ The appropriate county health department,
 365 Children's Medical Services office, and local emergency
 366 management agency shall jointly decide ~~determine~~ who has
 367 responsibility for medical supervision in each a special needs
 368 shelter.

369 ~~(d)(e)~~ Local emergency management agencies shall be
 370 responsible for the designation and operation of special needs
 371 shelters during times of emergency or disaster and the closure
 372 of the facilities following an emergency or disaster. The local
 373 health department and emergency management agency shall
 374 coordinate these efforts to ensure the appropriate designation,
 375 operation, and closure of special needs shelters. County health
 376 departments shall assist the local emergency management agency
 377 with regard to the management of medical services in special
 378 needs shelters.

379 (e) The Secretary of Elderly Affairs, or his or her
 380 designee, shall convene, at any time that he or she deems
 381 appropriate and necessary, a multiagency special needs shelter
 382 discharge planning team or teams to assist local areas that are
 383 severely impacted by a natural or manmade disaster that requires
 384 the use of special needs shelters. Multiagency special needs
 385 shelter discharge planning teams shall provide assistance to
 386 local emergency management agencies with the continued operation

HB 7139 CS

2006
CS

387 or closure of the shelters, as well as with the discharge of
388 special needs clients to alternate facilities if necessary.
389 Local emergency management agencies may request the assistance
390 of a multiagency special needs shelter discharge planning team
391 by alerting statewide emergency management officials of the
392 necessity for additional assistance in their area. The Secretary
393 of Elderly Affairs is encouraged to proactively work with other
394 state agencies prior to any natural disasters for which warnings
395 are provided to ensure that multiagency special needs shelter
396 discharge planning teams are ready to assemble and deploy
397 rapidly upon a determination by state emergency management
398 officials that a disaster area requires additional assistance.
399 The Secretary of Elderly Affairs may call upon any state agency
400 or office to provide staff to assist a multiagency special needs
401 shelter discharge planning team or teams. Unless the secretary
402 determines that the nature or circumstances surrounding the
403 disaster do not warrant participation from a particular agency's
404 staff, each multiagency special needs shelter discharge planning
405 team shall include at least one representative from each of the
406 following state agencies:

- 407 1. Department of Elderly Affairs.
- 408 2. Department of Health.
- 409 3. Department of Children and Family Services.
- 410 4. Department of Veterans' Affairs.
- 411 5. Department of Community Affairs.
- 412 6. Agency for Health Care Administration.
- 413 7. Agency for Persons with Disabilities.

HB 7139 CS

2006
CS

414 (3) REIMBURSEMENT TO HEALTH CARE PRACTITIONERS AND
415 FACILITIES.--

416 (a) The department ~~of Health~~ shall upon request reimburse,
417 in accordance with paragraph (b): subject to the availability of
418 funds for this purpose,

419 1. Health care practitioners, as defined in s. 456.001,
420 provided the practitioner is not providing care to a patient
421 under an existing contract, and emergency medical technicians
422 and paramedics licensed under ~~pursuant to~~ chapter 401 for
423 medical care provided at the request of the department in
424 special needs shelters or at other locations during times of
425 emergency or a declared ~~major~~ disaster. Reimbursement for health
426 care practitioners, except for physicians licensed under
427 ~~pursuant to~~ chapter 458 or chapter 459, shall be based on the
428 average hourly rate that such practitioners were paid according
429 to the most recent survey of Florida hospitals conducted by the
430 Florida Hospital Association or other nationally or state
431 recognized data source. ~~Reimbursement shall be requested on~~
432 ~~forms prepared by the Department of Health.~~

433 2. Health care facilities, such as hospitals, nursing
434 homes, assisted living facilities, and community residential
435 homes, if, upon closure of a special needs shelter, a
436 multiagency special needs shelter discharge planning team
437 determines that it is necessary to discharge persons with
438 special needs to other health care facilities. The receiving
439 facilities shall be eligible for reimbursement for services
440 provided to the individuals for up to 90 days. A facility must
441 show proof of a written request from a representative of an

HB 7139 CS

2006
CS

442 agency serving on the multiagency special needs shelter
443 discharge planning team that the individual for whom the
444 facility is seeking reimbursement for services rendered was
445 referred to that facility from a special needs shelter. The
446 department shall specify by rule which expenses are reimbursable
447 and the rate of reimbursement for each service.

448 (b) Reimbursement is subject to the availability of
449 federal funds and shall be requested on forms prepared by the
450 department. If a Presidential Disaster Declaration has been
451 issued ~~made, and the Federal Government makes funds available,~~
452 the department shall request federal use such funds for
453 reimbursement of eligible expenditures. ~~In other situations, or~~
454 ~~if federal funds do not fully compensate the department for~~
455 ~~reimbursement made pursuant to this section, the department~~
456 ~~shall process a budget amendment to obtain reimbursement from~~
457 ~~unobligated, unappropriated moneys in the General Revenue Fund.~~
458 The department shall not provide reimbursement to facilities
459 under this subsection for services provided to a person with
460 special needs if, during the period of time in which the
461 services were provided, the individual was enrolled in another
462 state-funded program, such as Medicaid or another similar
463 program, was covered under a policy of health insurance as
464 defined in s. 624.603, or was a member of a health maintenance
465 organization or prepaid health clinic as defined in chapter 641,
466 which would otherwise pay for the same services. Travel expense
467 and per diem costs shall be reimbursed pursuant to s. 112.061.

468 (4) HEALTH CARE PRACTITIONER REGISTRY.--The department may
469 use the registries established in ss. 401.273 and 456.38 when

HB 7139 CS

2006
CS

470 health care practitioners are needed to staff special needs
471 shelters or to assist with other disaster-related activities
472 ~~staff disaster medical assistance teams.~~

473 (5) SPECIAL NEEDS SHELTER INTERAGENCY COMMITTEE.--The
474 Secretary ~~Department~~ of Health may establish a special needs
475 shelter interagency committee and serve as or appoint a designee
476 to serve as the committee's chair. The department shall provide
477 any necessary staff and resources to support the committee in
478 the performance of its duties, ~~to be chaired and staffed by the~~
479 ~~department.~~ The committee shall address and resolve problems
480 related to special needs shelters not addressed in the state
481 comprehensive emergency medical plan and shall consult on ~~serve~~
482 ~~as an oversight committee to monitor~~ the planning and operation
483 of special needs shelters.

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

485 1. Develop, and negotiate, and regularly review any
486 necessary interagency agreements.

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

489 3. Submit recommendations to the Legislature as necessary.

490 (b) The special needs shelter interagency committee shall
491 be composed of representatives of emergency management, health,
492 medical, and social services organizations. Membership shall
493 include, but shall not be limited to, representatives of the
494 Departments of Health, Community Affairs, Children and Family
495 Services, Elderly Affairs, Labor and Employment Security, and
496 Education; the Agency for Health Care Administration; the
497 Florida Medical Association; the Florida Osteopathic Medical

HB 7139 CS

2006
CS

498 Association; Associated Home Health Industries of Florida, Inc.;
 499 the Florida Nurses Association; the Florida Health Care
 500 Association; the Florida Assisted Living Affiliation
 501 ~~Association~~; the Florida Hospital Association; the Florida
 502 Statutory Teaching Hospital Council; the Florida Association of
 503 Homes for the Aging; the Florida Emergency Preparedness
 504 Association; the American Red Cross; Florida Hospices and
 505 Palliative Care, Inc.; the Association of Community Hospitals
 506 and Health Systems; the Florida Association of Health
 507 Maintenance Organizations; the Florida League of Health Systems;
 508 Private Care Association; ~~and~~ the Salvation Army; the Florida
 509 Association of Aging Services Providers; AARP; and the Florida
 510 Renal Coalition.

511 (c) Meetings of the committee shall be held in
 512 Tallahassee, and members of the committee shall serve at the
 513 expense of the agencies or organizations they represent. The
 514 committee shall make every effort to use teleconference or video
 515 conference capabilities in order to ensure statewide input and
 516 participation.

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

520 (a) The a definition of a "person with special needs",
 521 including eligibility criteria for individuals with physical,
 522 mental, cognitive impairment, or sensory disabilities and the
 523 services a person with special needs can expect to receive in a
 524 special needs shelter patient, specify physician reimbursement,

525 ~~and designate which county health departments will have~~
 526 ~~responsibility for implementation of subsections (2) and (3).~~

527 (b) The process for special needs shelter health care
 528 practitioners and facility reimbursement for services provided
 529 in a disaster.

530 (c) Guidelines for special needs shelter staffing levels
 531 to provide services.

532 (d) The definition of and standards for special needs
 533 shelter supplies and equipment, including durable medical
 534 equipment.

535 (e) Standards for the special needs shelter registration
 536 process, including guidelines for addressing the needs of
 537 unregistered persons in need of a special needs shelter.

538 (f) Standards for addressing the needs of families where
 539 only one dependent is eligible for admission to a special needs
 540 shelter and the needs of adults with special needs who are
 541 caregivers for individuals without special needs.

542 (g) The requirement of the county health departments to
 543 seek the participation of hospitals, nursing homes, assisted
 544 living facilities, home health agencies, hospice providers,
 545 nurse registries, home medical equipment providers, dialysis
 546 centers, and other health and medical emergency preparedness
 547 stakeholders in pre-event planning activities.

548 (7) ~~REVIEW OF EMERGENCY MANAGEMENT PLANS.--~~The submission
 549 of emergency management plans to county health departments by
 550 home health agencies, ~~pursuant to s. 400.497(8)(c) and (d) and~~
 551 ~~by nurse registries, pursuant to s. 400.506(16)(c) and by~~
 552 ~~hospice programs, pursuant to s. 400.610(1)(b) and home medical~~

HB 7139 CS

2006
CS

553 equipment providers is conditional upon the receipt of an
554 appropriation by the department to establish ~~medical services~~
555 disaster coordinator positions in county health departments
556 unless the secretary of the department and a local county
557 commission jointly determine to require such plans to be
558 submitted based on a determination that there is a special need
559 to protect public health in the local area during an emergency.

560 Section 6. Section 400.492, Florida Statutes, is amended
561 to read:

562 400.492 Provision of services during an emergency.--Each
563 home health agency shall prepare and maintain a comprehensive
564 emergency management plan that is consistent with the standards
565 adopted by national or state accreditation organizations and
566 consistent with the local special needs plan. The plan shall be
567 updated annually and shall provide for continuing home health
568 services during an emergency that interrupts patient care or
569 services in the patient's home. The plan shall include the means
570 by which the home health agency will continue to provide staff
571 to perform the same type and quantity of services to their
572 patients who evacuate to special needs shelters that were being
573 provided to those patients prior to evacuation. The plan shall
574 describe how the home health agency establishes and maintains an
575 effective response to emergencies and disasters, including:
576 notifying staff when emergency response measures are initiated;
577 providing for communication between staff members, county health
578 departments, and local emergency management agencies, including
579 a backup system; identifying resources necessary to continue
580 essential care or services or referrals to other organizations

HB 7139 CS

2006
CS

581 subject to written agreement; and prioritizing and contacting
582 patients who need continued care or services.

583 (1) Each patient record for patients who are listed in the
584 registry established pursuant to s. 252.355 shall include a
585 description of how care or services will be continued in the
586 event of an emergency or disaster. The home health agency shall
587 discuss the emergency provisions with the patient and the
588 patient's caregivers, including where and how the patient is to
589 evacuate, procedures for notifying the home health agency in the
590 event that the patient evacuates to a location other than the
591 shelter identified in the patient record, and a list of
592 medications and equipment which must either accompany the
593 patient or will be needed by the patient in the event of an
594 evacuation.

595 (2) Each home health agency shall maintain a current
596 prioritized list of patients who need continued services during
597 an emergency. The list shall indicate how services shall be
598 continued in the event of an emergency or disaster for each
599 patient and if the patient is to be transported to a special
600 needs shelter, and shall indicate if the patient is receiving
601 skilled nursing services and the patient's medication and
602 equipment needs. The list shall be furnished to county health
603 departments and to local emergency management agencies, upon
604 request.

605 (3) Home health agencies shall not be required to continue
606 to provide care to patients in emergency situations that are
607 beyond their control and that make it impossible to provide
608 services, such as when roads are impassable or when patients do

HB 7139 CS

2006
CS

609 | not go to the location specified in their patient records. Home
610 | health agencies may establish links to local emergency
611 | operations centers to determine a mechanism to approach specific
612 | areas within a disaster area in order for the agency to reach
613 | its clients. Home health agencies shall demonstrate a good faith
614 | effort to comply with the requirements of this subsection by
615 | documenting attempts of staff to follow procedures as outlined
616 | in the home health agency's comprehensive emergency management
617 | plan, and by the patient's record, which support a finding that
618 | attempts were made to provide continuing care for those patients
619 | who have been identified as needing care by the home health
620 | agency and who are registered under s. 252.355 in the event of
621 | an emergency or disaster under subsection (1).

622 | (4) Notwithstanding the provisions of s. 400.464(2) or any
623 | other provision of law to the contrary, a home health agency may
624 | provide services in a special needs shelter located in any
625 | county.

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

628 | 400.497 Rules establishing minimum standards.--The agency
629 | shall adopt, publish, and enforce rules to implement this part,
630 | including, as applicable, ss. 400.506 and 400.509, which must
631 | provide reasonable and fair minimum standards relating to:

632 | (8) Preparation of a comprehensive emergency management
633 | plan pursuant to s. 400.492.

634 | (c) The plan is subject to review and approval by the
635 | county health department. During its review, the county health
636 | department shall contact state and local health and medical

HB 7139 CS

2006
CS

637 stakeholders during its review when necessary. ~~ensure that the~~
638 ~~following agencies, at a minimum, are given the opportunity to~~
639 ~~review the plan:~~

- 640 1. ~~The local emergency management agency.~~
- 641 2. ~~The Agency for Health Care Administration.~~
- 642 3. ~~The local chapter of the American Red Cross or other~~
643 ~~lead sheltering agency.~~
- 644 4. ~~The district office of the Department of Children and~~
645 ~~Family Services.~~

646
647 The county health department shall complete its review to ensure
648 that the plan is in accordance with the criteria set forth in
649 the rules of the Agency for Health Care Administration within 90
650 60 days after receipt of the plan and shall either approve the
651 plan or advise the home health agency of necessary revisions. If
652 the home health agency fails to submit a plan or fails to submit
653 the requested information or revisions to the county health
654 department within 30 days after written notification from the
655 county health department, the county health department shall
656 notify the Agency for Health Care Administration. The agency
657 shall notify the home health agency that such failure
658 constitutes a deficiency, subject to a fine of \$5,000 per
659 occurrence. If the plan is not submitted, information is not
660 provided, or revisions are not made as requested, the agency may
661 impose the fine.

662 (d) For any home health agency that operates in more than
663 one county, the Department of Health shall review the plan,
664 after consulting with state and local health and medical

665 | stakeholders, when necessary all of the county health
 666 | departments, the agency, and all the local chapters of the
 667 | American Red Cross or other lead sheltering agencies in the
 668 | areas of operation for that particular home health agency. The
 669 | department of Health shall complete its review within 90 days
 670 | after receipt of the plan and shall either approve the plan or
 671 | advise the home health agency of necessary revisions. The
 672 | department of Health shall make every effort to avoid imposing
 673 | differing requirements on a home health agency that operates in
 674 | more than one county as a result of differing or conflicting
 675 | comprehensive plan requirements of the based on differences
 676 | between counties in which on the home health agency operates.

677 | Section 8. Subsection (16) of section 400.506, Florida
 678 | Statutes, is amended to read:

679 | 400.506 Licensure of nurse registries; requirements;
 680 | penalties.--

681 | (16) Each nurse registry shall prepare and maintain a
 682 | comprehensive emergency management plan that is consistent with
 683 | the criteria in this subsection and with the local special needs
 684 | plan. The plan shall be updated annually. The plan shall include
 685 | the means by which the nurse registry will continue to perform
 686 | the same type and quantity of services to their patients who
 687 | evacuate to special needs shelters that were being provided to
 688 | those patients prior to evacuation. The plan shall specify how
 689 | the nurse registry shall facilitate the provision of continuous
 690 | care by persons referred for contract to persons who are
 691 | registered pursuant to s. 252.355 during an emergency that
 692 | interrupts the provision of care or services in private

HB 7139 CS

2006
CS

693 | residencies. Nurse registries may establish links to local
694 | emergency operations centers to determine a mechanism to
695 | approach specific areas within a disaster area in order for a
696 | provider to reach its clients. Nurse registries shall
697 | demonstrate a good faith effort to comply with the requirements
698 | of this subsection by documenting attempts of staff to follow
699 | procedures as outlined in the nurse registry's comprehensive
700 | emergency management plan which support a finding that attempts
701 | were made to provide continuing care for those patients who have
702 | been identified as needing care by the nurse registry and who
703 | are registered under s. 252.355 in the event of an emergency.

704 | (a) All persons referred for contract who care for persons
705 | registered pursuant to s. 252.355 must include in the patient
706 | record a description of how care will be continued during a
707 | disaster or emergency that interrupts the provision of care in
708 | the patient's home. It shall be the responsibility of the person
709 | referred for contract to ensure that continuous care is
710 | provided.

711 | (b) Each nurse registry shall maintain a current
712 | prioritized list of patients in private residences who are
713 | registered pursuant to s. 252.355 and are under the care of
714 | persons referred for contract and who need continued services
715 | during an emergency. This list shall indicate, for each patient,
716 | if the client is to be transported to a special needs shelter
717 | and if the patient is receiving skilled nursing services. Nurse
718 | registries shall make this list available to county health
719 | departments and to local emergency management agencies upon
720 | request.

HB 7139 CS

2006
CS

721 (c) Each person referred for contract who is caring for a
722 patient who is registered pursuant to s. 252.355 shall provide a
723 list of the patient's medication and equipment needs to the
724 nurse registry. Each person referred for contract shall make
725 this information available to county health departments and to
726 local emergency management agencies upon request.

727 (d) Each person referred for contract shall not be
728 required to continue to provide care to patients in emergency
729 situations that are beyond the person's control and that make it
730 impossible to provide services, such as when roads are
731 impassable or when patients do not go to the location specified
732 in their patient records.

733 (e) The comprehensive emergency management plan required
734 by this subsection is subject to review and approval by the
735 county health department. During its review, the county health
736 department shall contact state and local health and medical
737 stakeholders, when necessary ~~ensure that, at a minimum, the~~
738 ~~local emergency management agency, the Agency for Health Care~~
739 ~~Administration, and the local chapter of the American Red Cross~~
740 ~~or other lead sheltering agency are given the opportunity to~~
741 ~~review the plan.~~ The county health department shall complete its
742 review to ensure that the plan is in accordance with the
743 criteria set forth in the rules of the Agency for Health Care
744 Administration within 90 ~~60~~ days after receipt of the plan and
745 shall either approve the plan or advise the nurse registry of
746 necessary revisions. If a nurse registry fails to submit a plan
747 or fails to submit requested information or revisions to the
748 county health department within 30 days after written

HB 7139 CS

2006
CS

749 notification from the county health department, the county
750 health department shall notify the Agency for Health Care
751 Administration. The agency shall notify the nurse registry that
752 such failure constitutes a deficiency, subject to a fine of
753 \$5,000 per occurrence. If the plan is not submitted, information
754 is not provided, or revisions are not made as requested, the
755 agency may impose the fine.

756 (f) The Agency for Health Care Administration shall adopt
757 rules establishing minimum criteria for the comprehensive
758 emergency management plan and plan updates required by this
759 subsection, with the concurrence of the Department of Health and
760 in consultation with the Department of Community Affairs.

761 Section 9. Paragraph (b) of subsection (1) of section
762 400.610, Florida Statutes, is amended to read:

763 400.610 Administration and management of a hospice.--

764 (1) A hospice shall have a clearly defined organized
765 governing body, consisting of a minimum of seven persons who are
766 representative of the general population of the community
767 served. The governing body shall have autonomous authority and
768 responsibility for the operation of the hospice and shall meet
769 at least quarterly. The governing body shall:

770 (b)1. Prepare and maintain a comprehensive emergency
771 management plan that provides for continuing hospice services in
772 the event of an emergency that is consistent with local special
773 needs plans. The plan shall include provisions for ensuring
774 continuing care to hospice patients who go to special needs
775 shelters. The plan shall include the means by which the hospice
776 provider will continue to provide staff to perform the same type

HB 7139 CS

2006
CS

777 and quantity of services to their patients who evacuate to
778 special needs shelters that were being provided to those
779 patients prior to evacuation. The plan is subject to review and
780 approval by the county health department, except as provided in
781 subparagraph 2. During its review, the county health department
782 shall contact state and local health and medical stakeholders,
783 when necessary ~~ensure that the department, the agency, and the~~
784 ~~local chapter of the American Red Cross or other lead sheltering~~
785 ~~agency have an opportunity to review and comment on the plan.~~
786 The county health department shall complete its review to ensure
787 that the plan is in accordance with the criteria set forth in
788 the rules of the Department of Elderly Affairs within 90 ~~60~~ days
789 after receipt of the plan and shall either approve the plan or
790 advise the hospice of necessary revisions. Hospice providers may
791 establish links to local emergency operations centers to
792 determine a mechanism to approach specific areas within a
793 disaster area in order for the provider to reach its clients. A
794 hospice shall demonstrate a good faith effort to comply with the
795 requirements of this paragraph by documenting attempts of staff
796 to follow procedures as outlined in the hospice's comprehensive
797 emergency management plan and to provide continuing care for
798 those hospice clients who have been identified as needing
799 alternative caregiver services in the event of an emergency.

800 2. For any hospice that operates in more than one county,
801 the Department of Health during its review shall contact state
802 and local health and medical stakeholders, when necessary ~~review~~
803 ~~the plan, after consulting with all of the county health~~
804 ~~departments, the agency, and all the local chapters of the~~

HB 7139 CS

2006
CS

805 ~~American Red Cross or other lead sheltering agency in the areas~~
806 ~~of operation for that particular hospice.~~ The Department of
807 Health shall complete its review to ensure that the plan is in
808 accordance with the criteria set forth in the rules of the
809 Department of Elderly Affairs within 90 days after receipt of
810 the plan and shall either approve the plan or advise the hospice
811 of necessary revisions. The Department of Health shall make
812 every effort to avoid imposing ~~on the hospice~~ differing
813 requirements on a hospice that operates in more than one county
814 as a result of differing or conflicting comprehensive plan
815 requirements of the based on differences between counties in
816 which the hospice operates.

817 Section 10. Subsections (13) through (16) of section
818 400.925, Florida Statutes, are renumbered as subsections (14)
819 through (17), respectively, and a new subsection (13) is added
820 to that section to read:

821 400.925 Definitions.--As used in this part, the term:

822 (13) "Life-supporting or life-sustaining equipment" means
823 a device that is essential to, or that yields information that
824 is essential to, the restoration or continuation of a bodily
825 function important to the continuation of human life. Life-
826 supporting or life-sustaining equipment includes apnea monitors,
827 enteral feeding pumps, infusion pumps, portable home dialysis
828 equipment, and ventilator equipment and supplies for all related
829 equipment, including oxygen equipment and related respiratory
830 equipment.

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

HB 7139 CS

2006
CS

833 400.934 Minimum standards.--As a requirement of licensure,
834 home medical equipment providers shall:

835 (20) (a) Prepare and maintain a comprehensive emergency
836 management plan that meets minimum criteria established by the
837 agency in rule under s. 400.935. The plan shall be updated
838 annually and shall provide for continuing home medical equipment
839 services for life-supporting or life-sustaining equipment, as
840 defined in 400.925, during an emergency that interrupts home
841 medical equipment services in a patient's home. The plan shall
842 include:

843 1. The means by which the home medical equipment provider
844 will continue to provide equipment to perform the same type and
845 quantity of services to its patients who evacuate to special
846 needs shelters that were being provided to those patients prior
847 to evacuation.

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

851 a. Notification of staff when emergency response measures
852 are initiated.

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

856 c. Identification of resources necessary to continue
857 essential care or services or referrals to other organizations
858 subject to written agreement.

859 d. Contacting and prioritizing patients in need of
860 continued medical equipment services and supplies.

HB 7139 CS

2006
CS

861 (b) The plan is subject to review and approval by the
862 county health department. During its review, the county health
863 department shall contact state and local health and medical
864 stakeholders, when necessary. The county health department shall
865 complete its review to ensure that the plan is in accordance
866 with the criteria set forth in the rules of the Agency for
867 Health Care Administration within 90 days after receipt of the
868 plan. If a home medical equipment provider fails to submit a
869 plan or fails to submit requested information or revisions to
870 the county health department within 30 days after written
871 notification from the county health department, the county
872 health department shall notify the Agency for Health Care
873 Administration. The agency shall notify the home medical
874 equipment provider that such failure constitutes a deficiency,
875 subject to a fine of \$5,000 per occurrence. If the plan is not
876 submitted, information is not provided, or revisions are not
877 made as requested, the agency may impose the fine.

878 (21) Each home medical equipment provider shall maintain a
879 current prioritized list of patients who need continued services
880 during an emergency. The list shall indicate the means by which
881 services shall be continued for each patient in the event of an
882 emergency or disaster, whether the patient is to be transported
883 to a special needs shelter, and whether the patient has life-
884 supporting or life-sustaining equipment, including the specific
885 type of equipment and related supplies. The list shall be
886 furnished to county health departments and local emergency
887 management agencies, upon request.

HB 7139 CS

2006
CS

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

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

894 400.935 Rules establishing minimum standards.--The agency
 895 shall adopt, publish, and enforce rules to implement this part,
 896 which must provide reasonable and fair minimum standards
 897 relating to:

898 (11) Preparation of the comprehensive emergency management
 899 plan under s. 400.934 and the establishment of minimum criteria
 900 for the plan, including the maintenance of patient equipment and
 901 supply lists that can accompany patients who are transported
 902 from their homes. Such rules shall be formulated in consultation
 903 with the Department of Health and the Department of Community
 904 Affairs.

905 Section 13. Section 408.831, Florida Statutes, is amended
 906 to read:

907 408.831 Denial, suspension, or revocation of a license,
 908 registration, certificate, or application.--

909 (1) In addition to any other remedies provided by law, the
 910 agency may deny each application or suspend or revoke each
 911 license, registration, or certificate of entities regulated or
 912 licensed by it:

913 (a) If the applicant, licensee, registrant, or
 914 certificateholder, or, in the case of a corporation,
 915 partnership, or other business entity, if any officer, director,

HB 7139 CS

2006
CS

916 agent, or managing employee of that business entity or any
 917 affiliated person, partner, or shareholder having an ownership
 918 interest equal to 5 percent or greater in that business entity,
 919 has failed to pay all outstanding fines, liens, or overpayments
 920 assessed by final order of the agency or final order of the
 921 Centers for Medicare and Medicaid Services, not subject to
 922 further appeal, unless a repayment plan is approved by the
 923 agency; or

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

925 (2) In reviewing any application requesting a change of
 926 ownership or change of the licensee, registrant, or
 927 certificateholder, the transferor shall, prior to agency
 928 approval of the change, repay or make arrangements to repay any
 929 amounts owed to the agency. Should the transferor fail to repay
 930 or make arrangements to repay the amounts owed to the agency,
 931 the issuance of a license, registration, or certificate to the
 932 transferee shall be delayed until repayment or until
 933 arrangements for repayment are made.

934 (3) Entities subject to this section may exceed their
 935 licensed capacity to act as a receiving facility in accordance
 936 with an emergency operations plan for clients of evacuating
 937 providers from a geographic area where an evacuation order has
 938 been issued by a local authority having jurisdiction. While in
 939 an overcapacity status, each provider must furnish or arrange
 940 for appropriate care and services to all clients. In addition,
 941 the agency may approve requests for overcapacity beyond 15 days,
 942 which approvals may be based upon satisfactory justification and
 943 need as provided by the receiving and sending facility.

HB 7139 CS

2006
CS

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

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

950 (b) Is currently licensed.

951 (c) Does not have a provisional license.

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

954

955 An inactive license may be issued for a period not to exceed 12
956 months but may be renewed by the agency for up to 12 additional
957 months upon demonstration to the agency of progress toward
958 reopening. A request by a licensee for an inactive license or to
959 extend the previously approved inactive period must be submitted
960 in writing to the agency, accompanied by written justification
961 for the inactive license which states the beginning and ending
962 dates of inactivity and includes a plan for the transfer of any
963 clients to other providers and appropriate licensure fees. Upon
964 agency approval, the licensee shall notify clients of any
965 necessary discharge or transfer as required by authorizing
966 statutes or applicable rules. The beginning of the inactive
967 licensure period shall be the date the provider ceases
968 operations. The end of the inactive period shall become the
969 licensee expiration date, and all licensure fees must be
970 current, paid in full, and may be prorated. Reactivation of an
971 inactive license requires the prior approval by the agency of a

HB 7139 CS

2006
CS

972 renewal application, including payment of licensure fees and
973 agency inspections indicating compliance with all requirements
974 of this part and applicable rules and statutes.

975 ~~(5)(3)~~ This section provides standards of enforcement
976 applicable to all entities licensed or regulated by the Agency
977 for Health Care Administration. This section controls over any
978 conflicting provisions of chapters 39, 381, 383, 390, 391, 393,
979 394, 395, 400, 408, 468, 483, and 641 or rules adopted pursuant
980 to those chapters.

981 Section 14. Emergency preparedness prescription medication
982 refills.--

983 (1) All health insurers, managed care organizations, and
984 other entities licensed by the Office of Insurance Regulation
985 that provide prescription medication coverage as part of a
986 policy or contract shall waive time restrictions on prescription
987 medication refills, which includes suspension of electronic
988 "refill too soon" edits to pharmacies, to enable insureds or
989 subscribers to refill prescriptions in advance, as long as there
990 are authorized refills remaining, and shall authorize payment to
991 pharmacies for at least a 30-day supply of any prescription
992 medication, regardless of the date upon which the prescription
993 had most recently been filled by a pharmacist, when the
994 following conditions occur:

995 (a) The person seeking the prescription medication refill
996 resides in a county that:

997 1. Is under a hurricane warning issued by the National
998 Weather Service;

HB 7139 CS

2006
CS

999 | 2. Is declared to be under a state of emergency in an
1000 | executive order issued by the Governor; or

1001 | 3. Has activated its emergency operations center and its
1002 | emergency management plan.

1003 | (b) The prescription medication refill is requested:

1004 | 1. Within 30 days of the date upon which the conditions
1005 | set forth in paragraph (a) originated; or

1006 | 2. Prior to the date upon which the conditions set forth
1007 | in paragraph (a) are terminated by the issuing authority or no
1008 | longer exist.

1009 |
1010 | The time period for the waiver of prescription medication
1011 | refills may be extended in 15-day or 30-day increments by
1012 | emergency orders issued by the Office of Insurance Regulation.

1013 | (2) Nothing in this section excuses or exempts an insured
1014 | or subscriber from compliance with all the other terms of the
1015 | policy or contract providing prescription medication coverage.

1016 | Section 15. The Legislature finds that all designated
1017 | public special needs hurricane evacuation shelters should be
1018 | equipped with permanent emergency power generating capacity to
1019 | provide the necessary equipment, heating, ventilation, and air-
1020 | conditioning to meet the medical needs of patients by June 1,
1021 | 2007. The Department of Community Affairs shall work with local
1022 | communities to ensure that there is a sufficient number of
1023 | public special needs shelters designated to meet the anticipated
1024 | demand based on best available data as determined by the
1025 | department and the Department of Health. Local match for these
1026 | projects shall be no less than 25 percent of project cost. There

HB 7139 CS

2006
CS

1027 is hereby appropriated \$21.5 million from the U.S. Contributions
1028 Trust Fund in fixed capital outlay to the Department of
1029 Community Affairs to establish a competitive award process to
1030 implement this section. No more than 5 percent of the funds
1031 provided under this section may be used by the department for
1032 administration of the funding.

1033 Section 16. The Legislature finds that retrofitting public
1034 hurricane evacuation shelters is an efficient and economical
1035 method of accelerating the state and local efforts to reduce the
1036 shelter deficit. Criteria for the retrofitting of a public
1037 hurricane evacuation shelter shall include, but not be limited
1038 to, the project's ability to meet the structural and siting
1039 requirements of American Red Cross Standard ARC 4496,
1040 "Guidelines for Hurricane Evacuation Shelter Selection," once
1041 completed; the shelter needs for the local government, as well
1042 as the overall needs of the hurricane evacuation planning
1043 region; the cost-effectiveness of the project in terms of the
1044 number of public hurricane evacuation spaces; and the priority
1045 ranking of the proposed project in the applicable local
1046 mitigation strategy. There is hereby appropriated \$9 million
1047 from the U.S. Contributions Trust Fund in fixed capital outlay
1048 to the Department of Community Affairs to establish a
1049 competitive award process to implement this section. No more
1050 than 5 percent of the funds provided under this section may be
1051 used by the department for administration of this funding.

1052 Section 17. For the 2006-2007 fiscal year, the sums of
1053 \$896,799 from recurring general revenue funds and \$104,156 from
1054 nonrecurring general revenue funds are appropriated, and 20

HB 7139 CS

2006
CS

1055 | full-time equivalent positions are authorized at 872,644 salary
1056 | rate, to implement the provisions of emergency management plan
1057 | reviews for home health agencies and nurse registry, hospice,
1058 | and home medical equipment providers.

1059 | Section 18. This act shall take effect July 1, 2006.