

Amendment No.

CHAMBER ACTION

Senate

House

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1 Representative Kreegel offered the following:

2
3 **Amendment (with title amendment)**

4 Remove lines 979-2030 and insert:

5 (m) Entities that do not seek reimbursement from insurance
6 companies for medical services paid pursuant to personal injury
7 protection coverage required by s. 627.736, bodily injury
8 liability coverage, personal liability umbrella coverage, or
9 uninsured motorist coverage.

10 Section 14. Paragraph (a) of subsection (7) of section
11 400.9935, Florida Statutes, is amended to read:

12 400.9935 Clinic responsibilities.--

13 (7) (a) Each clinic engaged in magnetic resonance imaging
14 services must be accredited by the Joint Commission on
15 Accreditation of Healthcare Organizations, the American College
16 of Radiology, or the Accreditation Association for Ambulatory
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17 Health Care, within 1 year after licensure. A clinic that is
18 accredited by the American College of Radiology or is within the
19 original 1-year period after licensure and replaces its core
20 magnetic resonance imaging equipment shall be given 1 year after
21 the date upon which the equipment is replaced to attain
22 accreditation. However, a clinic may request a single, 6-month
23 extension if it provides evidence to the agency establishing
24 that, for good cause shown, such clinic cannot ~~can not~~ be
25 accredited within 1 year after licensure, and that such
26 accreditation will be completed within the 6-month extension.
27 After obtaining accreditation as required by this subsection,
28 each such clinic must maintain accreditation as a condition of
29 renewal of its license. A clinic that files a change of
30 ownership application must comply with the original
31 accreditation timeframe requirements of the transferor. The
32 agency shall deny a change of ownership application if the
33 clinic is not in compliance with the accreditation requirements.
34 When a clinic adds, replaces, or modifies magnetic resonance
35 imaging equipment and the accrediting organization requires new
36 accreditation, the clinic must be accredited within 1 year after
37 the date of the addition, replacement, or modification but may
38 request a single, 6-month extension if the clinic provides
39 evidence of good cause to the agency.

40 Section 15. Subsection (6) of section 400.995, Florida
41 Statutes, is amended to read:

42 400.995 Agency administrative penalties.--

43 (6) During an inspection, the agency, ~~as an alternative to~~
44 ~~or in conjunction with an administrative action against a clinic~~
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45 ~~for violations of this part and adopted rules,~~ shall make a
46 reasonable attempt to discuss each violation ~~and recommended~~
47 ~~corrective action~~ with the owner, medical director, or clinic
48 director of the clinic, prior to written notification. ~~The~~
49 ~~agency, instead of fixing a period within which the clinic shall~~
50 ~~enter into compliance with standards,~~ may request a plan of
51 ~~corrective action from the clinic which demonstrates a good~~
52 ~~faith effort to remedy each violation by a specific date,~~
53 ~~subject to the approval of the agency.~~

54 Section 16. Subsections (5), (9), and (13) of section
55 408.803, Florida Statutes, are amended to read:

56 408.803 Definitions.--As used in this part, the term:

57 (5) "Change of ownership" means:

58 (a) An event in which the licensee sells or otherwise
59 transfers its ownership changes to a different individual or
60 legal entity, as evidenced by a change in federal employer
61 identification number or taxpayer identification number; or

62 (b) An event in which 51 45 percent or more of the
63 ownership, voting shares, membership, or controlling interest of
64 a licensee is in any manner transferred or otherwise assigned.

65 This paragraph does not apply to a licensee that is publicly
66 traded on a recognized stock exchange. In a corporation whose
67 shares are not publicly traded on a recognized stock exchange is
68 transferred or assigned, including the final transfer or
69 assignment of multiple transfers or assignments over a 2-year
70 period that cumulatively total 45 percent or greater.

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72 A change solely in the management company or board of directors
73 is not a change of ownership.

74 (9) "Licensee" means an individual, corporation,
75 partnership, firm, association, ~~or~~ governmental entity, or other
76 entity that is issued a permit, registration, certificate, or
77 license by the agency. The licensee is legally responsible for
78 all aspects of the provider operation.

79 (13) "Voluntary board member" means a board member of a
80 not-for-profit corporation or organization who serves solely in
81 a voluntary capacity, does not receive any remuneration for his
82 or her services on the board of directors, and has no financial
83 interest in the corporation or organization. ~~The agency shall~~
84 ~~recognize a person as a voluntary board member following~~
85 ~~submission of a statement to the agency by the board member and~~
86 ~~the not-for-profit corporation or organization that affirms that~~
87 ~~the board member conforms to this definition. The statement~~
88 ~~affirming the status of the board member must be submitted to~~
89 ~~the agency on a form provided by the agency.~~

90 Section 17. Paragraph (a) of subsection (1), subsection
91 (2), paragraph (c) of subsection (7), and subsection (8) of
92 section 408.806, Florida Statutes, are amended to read:

93 408.806 License application process.--

94 (1) An application for licensure must be made to the
95 agency on forms furnished by the agency, submitted under oath,
96 and accompanied by the appropriate fee in order to be accepted
97 and considered timely. The application must contain information
98 required by authorizing statutes and applicable rules and must
99 include:

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100 (a) The name, address, and social security number of:

101 1. The applicant;

102 2. The administrator or a similarly titled person who is
103 responsible for the day-to-day operation of the provider;

104 3. The financial officer or similarly titled person who is
105 responsible for the financial operation of the licensee or
106 provider; and

107 4. Each controlling interest if the applicant or
108 controlling interest is an individual.

109 (2) (a) The applicant for a renewal license must submit an
110 application that must be received by the agency at least 60 days
111 but no more than 120 days prior to the expiration of the current
112 license. An application received more than 120 days prior to the
113 expiration of the current license shall be returned to the
114 applicant. If the renewal application and fee are received prior
115 to the license expiration date, the license shall not be deemed
116 to have expired if the license expiration date occurs during the
117 agency's review of the renewal application.

118 (b) The applicant for initial licensure due to a change of
119 ownership must submit an application that must be received by
120 the agency at least 60 days prior to the date of change of
121 ownership.

122 (c) For any other application or request, the applicant
123 must submit an application or request that must be received by
124 the agency at least 60 days but no more than 120 days prior to
125 the requested effective date, unless otherwise specified in
126 authorizing statutes or applicable rules. An application

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127 received more than 120 days prior to the requested effective
128 date shall be returned to the applicant.

129 (d) The agency shall notify the licensee by mail or
130 electronically at least 90 days prior to the expiration of a
131 license that a renewal license is necessary to continue
132 operation. The failure to timely submit a renewal application
133 and license fee shall result in a \$50 per day late fee charged
134 to the licensee by the agency; however, the aggregate amount of
135 the late fee may not exceed 50 percent of the licensure fee or
136 \$500, whichever is less. If an application is received after the
137 required filing date and exhibits a hand-canceled postmark
138 obtained from a United States post office dated on or before the
139 required filing date, no fine will be levied.

140 (7)

141 (c) If an inspection is required by the authorizing
142 statute for a license application other than an initial
143 application, the inspection must be unannounced. This paragraph
144 does not apply to inspections required pursuant to ss. 383.324,
145 395.0161(4), 429.67(6), and 483.061(2).

146 (8) The agency may establish procedures for the electronic
147 notification and submission of required information, including,
148 but not limited to:

149 (a) Licensure applications.

150 (b) Required signatures.

151 (c) Payment of fees.

152 (d) Notarization of applications.

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154 Requirements for electronic submission of any documents required
155 by this part or authorizing statutes may be established by rule.
156 As an alternative to sending documents as required by
157 authorizing statutes, the agency may provide electronic access
158 to information or documents.

159 Section 18. Subsection (2) of section 408.808, Florida
160 Statutes, is amended to read:

161 408.808 License categories.--

162 (2) PROVISIONAL LICENSE.--A provisional license may be
163 issued to an applicant pursuant to s. 408.809(3). An applicant
164 against whom a proceeding denying or revoking a license is
165 pending at the time of license renewal may be issued a
166 provisional license effective until final action not subject to
167 further appeal. A provisional license may also be issued to an
168 applicant applying for a change of ownership. A provisional
169 license shall be limited in duration to a specific period of
170 time, not to exceed 12 months, as determined by the agency.

171 Section 19. Subsection (5) of section 408.809, Florida
172 Statutes, is amended, and new subsections (5) and (6) are added
173 to that section, to read:

174 408.809 Background screening; prohibited offenses.--

175 (5) Effective October 1, 2009, in addition to the offenses
176 listed in ss. 435.03 and 435.04, all persons required to undergo
177 background screening pursuant to this part or authorizing
178 statutes must not have been found guilty of, regardless of
179 adjudication, or entered a plea of nolo contendere or guilty to,
180 any of the following offenses or any similar offense of another
181 jurisdiction:

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- 182 (a) A violation of any authorizing statutes, if the
183 offense was a felony.
- 184 (b) A violation of this chapter, if the offense was a
185 felony.
- 186 (c) A violation of s. 409.920, relating to Medicaid
187 provider fraud, if the offense was a felony.
- 188 (d) A violation of s. 409.9201, relating to Medicaid
189 fraud, if the offense was a felony.
- 190 (e) A violation of s. 741.28, relating to domestic
191 violence.
- 192 (f) A violation of chapter 784, relating to assault,
193 battery, and culpable negligence, if the offense was a felony.
- 194 (g) A violation of s. 810.02, relating to burglary.
- 195 (h) A violation of s. 817.034, relating to fraudulent acts
196 through mail, wire, radio, electromagnetic, photoelectronic, or
197 photooptical systems.
- 198 (i) A violation of s. 817.234, relating to false and
199 fraudulent insurance claims.
- 200 (j) A violation of s. 817.505, relating to patient
201 brokering.
- 202 (k) A violation of s. 817.568, relating to criminal use of
203 personal identification information.
- 204 (l) A violation of s. 817.60, relating to obtaining a
205 credit card through fraudulent means.
- 206 (m) A violation of s. 817.61, relating to fraudulent use
207 of credit cards, if the offense was a felony.
- 208 (n) A violation of s. 831.01, relating to forgery.

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209 (o) A violation of s. 831.02, relating to uttering forged
210 instruments.

211 (p) A violation of s. 831.07, relating to forging bank
212 bills, checks, drafts, or promissory notes.

213 (q) A violation of s. 831.09, relating to uttering forged
214 bank bills, checks, drafts, or promissory notes.

215 (r) A violation of s. 831.30, relating to fraud in
216 obtaining medicinal drugs.

217 (s) A violation of s. 831.31, relating to the sale,
218 manufacture, delivery, or possession with the intent to sell,
219 manufacture, or deliver any counterfeit controlled substance, if
220 the offense was a felony.

221

222 A person who serves as a controlling interest of or is employed
223 by a licensee on September 30, 2009, shall not be required by
224 law to submit to rescreening if that licensee has in its
225 possession written evidence that the person has been screened
226 and qualified according to the standards specified in s. 435.03
227 or s. 435.04. However, if such person has been convicted of a
228 disqualifying offense listed in this subsection, he or she may
229 apply for an exemption from the appropriate licensing agency
230 before September 30, 2009, and if agreed to by the employer, may
231 continue to perform his or her duties until the licensing agency
232 renders a decision on the application for exemption for an
233 offense listed in this subsection. Exemptions from
234 disqualification may be granted pursuant to s. 435.07.

235 (6) The attestations required under ss. 435.04(5) and
236 435.05(3) must be submitted at the time of license renewal,
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237 notwithstanding the provisions of ss. 435.04(5) and 435.05(3)
238 which require annual submission of an affidavit of compliance
239 with background screening requirements.

240 ~~(5) Background screening is not required to obtain a~~
241 ~~certificate of exemption issued under s. 483.106.~~

242 Section 20. Subsection (3) of section 408.810, Florida
243 Statutes, is amended to read:

244 408.810 Minimum licensure requirements.--In addition to
245 the licensure requirements specified in this part, authorizing
246 statutes, and applicable rules, each applicant and licensee must
247 comply with the requirements of this section in order to obtain
248 and maintain a license.

249 (3) Unless otherwise specified in this part, authorizing
250 statutes, or applicable rules, any information required to be
251 reported to the agency must be submitted within 21 calendar days
252 after the report period or effective date of the information,
253 whichever is earlier, including, but not limited to, any change
254 of:

255 (a) Information contained in the most recent application
256 for licensure.

257 (b) Required insurance or bonds.

258 Section 21. Present subsection (4) of section 408.811,
259 Florida Statutes, is renumbered as subsection (6), subsections
260 (2) and (3) are amended, and new subsections (4) and (5) are
261 added to that section, to read:

262 408.811 Right of inspection; copies; inspection reports;
263 plan for correction of deficiencies.--

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264 (2) Inspections conducted in conjunction with
265 certification, comparable licensure requirements, or a
266 recognized or approved accreditation organization may be
267 accepted in lieu of a complete licensure inspection. However, a
268 licensure inspection may also be conducted to review any
269 licensure requirements that are not also requirements for
270 certification.

271 (3) The agency shall have access to and the licensee shall
272 provide, or if requested send, copies of all provider records
273 required during an inspection or other review at no cost to the
274 agency, including records requested during an offsite review.

275 (4) Deficiencies must be corrected within 30 calendar days
276 after the provider is notified of inspection results unless an
277 alternative timeframe is required or approved by the agency.

278 (5) The agency may require an applicant or licensee to
279 submit a plan of correction for deficiencies. If required, the
280 plan of correction must be filed with the agency within 10
281 calendar days after notification unless an alternative timeframe
282 is required.

283 Section 22. Section 408.813, Florida Statutes, is amended
284 to read:

285 408.813 Administrative fines; violations.--As a penalty
286 for any violation of this part, authorizing statutes, or
287 applicable rules, the agency may impose an administrative fine.

288 (1) Unless the amount or aggregate limitation of the fine
289 is prescribed by authorizing statutes or applicable rules, the
290 agency may establish criteria by rule for the amount or
291 aggregate limitation of administrative fines applicable to this
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292 part, authorizing statutes, and applicable rules. Each day of
293 violation constitutes a separate violation and is subject to a
294 separate fine, unless a per-violation fine is prescribed by law.
295 For fines imposed by final order of the agency and not subject
296 to further appeal, the violator shall pay the fine plus interest
297 at the rate specified in s. 55.03 for each day beyond the date
298 set by the agency for payment of the fine.

299 (2) Violations of this part, authorizing statutes, or
300 applicable rules shall be classified according to the nature of
301 the violation and the gravity of its probable effect on clients.
302 The scope of a violation may be cited as an isolated, patterned,
303 or widespread deficiency. An isolated deficiency is a deficiency
304 affecting one or a very limited number of clients, or involving
305 one or a very limited number of staff, or a situation that
306 occurred only occasionally or in a very limited number of
307 locations. A patterned deficiency is a deficiency in which more
308 than a very limited number of clients are affected, or more than
309 a very limited number of staff are involved, or the situation
310 has occurred in several locations, or the same client or clients
311 have been affected by repeated occurrences of the same deficient
312 practice but the effect of the deficient practice is not found
313 to be pervasive throughout the provider. A widespread deficiency
314 is a deficiency in which the problems causing the deficiency are
315 pervasive in the provider or represent systemic failure that has
316 affected or has the potential to affect a large portion of the
317 provider's clients. This subsection does not affect the
318 legislative determination of the amount of a fine imposed under

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319 authorizing statutes. Violations shall be classified on the
320 written notice as follows:

321 (a) Class "I" violations are those conditions or
322 occurrences related to the operation and maintenance of a
323 provider or to the care of clients which the agency determines
324 present an imminent danger to the clients of the provider or a
325 substantial probability that death or serious physical or
326 emotional harm would result therefrom. The condition or practice
327 constituting a class I violation shall be abated or eliminated
328 within 24 hours, unless a fixed period, as determined by the
329 agency, is required for correction. The agency shall impose an
330 administrative fine as provided by law for a cited class I
331 violation. A fine shall be levied notwithstanding the correction
332 of the violation.

333 (b) Class "II" violations are those conditions or
334 occurrences related to the operation and maintenance of a
335 provider or to the care of clients which the agency determines
336 directly threaten the physical or emotional health, safety, or
337 security of the clients, other than class I violations. The
338 agency shall impose an administrative fine as provided by law
339 for a cited class II violation. A fine shall be levied
340 notwithstanding the correction of the violation.

341 (c) Class "III" violations are those conditions or
342 occurrences related to the operation and maintenance of a
343 provider or to the care of clients which the agency determines
344 indirectly or potentially threaten the physical or emotional
345 health, safety, or security of clients, other than class I or
346 class II violations. The agency shall impose an administrative

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347 fine as provided by law for a cited class III violation. A
348 citation for a class III violation must specify the time within
349 which the violation is required to be corrected. If a class III
350 violation is corrected within the time specified, a fine may not
351 be imposed.

352 (d) Class "IV" violations are those conditions or
353 occurrences related to the operation and maintenance of a
354 provider or to required reports, forms, or documents that do not
355 have the potential of negatively affecting clients. These
356 violations are of a type that the agency determines do not
357 threaten the health, safety, or security of clients. The agency
358 shall impose an administrative fine as provided by law for a
359 cited class IV violation. A citation for a class IV violation
360 must specify the time within which the violation is required to
361 be corrected. If a class IV violation is corrected within the
362 time specified, a fine may not be imposed.

363 Section 23. Subsections (12) through (29) of section
364 408.820, Florida Statutes, are renumbered as subsections (11)
365 through (28), respectively, and present subsections (11), (12),
366 (13), (21), and (26) of that section are amended to read:

367 408.820 Exemptions.--Except as prescribed in authorizing
368 statutes, the following exemptions shall apply to specified
369 requirements of this part:

370 ~~(11) Private review agents, as provided under part I of~~
371 ~~chapter 395, are exempt from ss. 408.806(7), 408.810, and~~
372 ~~408.811.~~

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373 (11)~~(12)~~ Health care risk managers, as provided under part
374 I of chapter 395, are exempt from ss. 408.806(7), 408.810(4)-
375 (10), and 408.811.

376 (12)~~(13)~~ Nursing homes, as provided under part II of
377 chapter 400, are exempt from ss. 408.810(7) and 408.813(2).

378 (20)~~(21)~~ Transitional living facilities, as provided under
379 part V of chapter 400, are exempt from s. 408.810~~(7)~~(10).

380 (25)~~(26)~~ Health care clinics, as provided under part X of
381 chapter 400, are exempt from s. ss. 408.809 and 408.810(1), (6),
382 (7), and (10).

383 Section 24. Section 408.821, Florida Statutes, is created
384 to read:

385 408.821 Emergency management planning; emergency
386 operations; inactive license.--

387 (1) Licensees required by authorizing statutes to have an
388 emergency operations plan must designate a safety liaison to
389 serve as the primary contact for emergency operations.

390 (2) An entity subject to this part may temporarily exceed
391 its licensed capacity to act as a receiving provider in
392 accordance with an approved emergency operations plan for up to
393 15 days. While in an overcapacity status, each provider must
394 furnish or arrange for appropriate care and services to all
395 clients. In addition, the agency may approve requests for
396 overcapacity in excess of 15 days, which approvals may be based
397 upon satisfactory justification and need as provided by the
398 receiving and sending providers.

399 (3) (a) An inactive license may be issued to a licensee
400 subject to this section when the provider is located in a
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401 geographic area in which a state of emergency was declared by
402 the Governor if the provider:

403 1. Suffered damage to its operation during the state of
404 emergency.

405 2. Is currently licensed.

406 3. Does not have a provisional license.

407 4. Will be temporarily unable to provide services but is
408 reasonably expected to resume services within 12 months.

409 (b) An inactive license may be issued for a period not to
410 exceed 12 months but may be renewed by the agency for up to 12
411 additional months upon demonstration to the agency of progress
412 toward reopening. A request by a licensee for an inactive
413 license or to extend the previously approved inactive period
414 must be submitted in writing to the agency, accompanied by
415 written justification for the inactive license, which states the
416 beginning and ending dates of inactivity and includes a plan for
417 the transfer of any clients to other providers and appropriate
418 licensure fees. Upon agency approval, the licensee shall notify
419 clients of any necessary discharge or transfer as required by
420 authorizing statutes or applicable rules. The beginning of the
421 inactive licensure period shall be the date the provider ceases
422 operations. The end of the inactive period shall become the
423 license expiration date, and all licensure fees must be current,
424 must be paid in full, and may be prorated. Reactivation of an
425 inactive license requires the prior approval by the agency of a
426 renewal application, including payment of licensure fees and
427 agency inspections indicating compliance with all requirements
428 of this part and applicable rules and statutes.

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429 (4) The agency may adopt rules relating to emergency
430 management planning, communications, and operations. Licensees
431 providing residential or inpatient services must utilize an
432 online database approved by the agency to report information to
433 the agency regarding the provider's emergency status, planning,
434 or operations.

435 Section 25. Subsections (3), (4), and (5) of section
436 408.831, Florida Statutes, are amended to read:

437 408.831 Denial, suspension, or revocation of a license,
438 registration, certificate, or application.--

439 ~~(3) An entity subject to this section may exceed its~~
440 ~~licensed capacity to act as a receiving facility in accordance~~
441 ~~with an emergency operations plan for clients of evacuating~~
442 ~~providers from a geographic area where an evacuation order has~~
443 ~~been issued by a local authority having jurisdiction. While in~~
444 ~~an overcapacity status, each provider must furnish or arrange~~
445 ~~for appropriate care and services to all clients. In addition,~~
446 ~~the agency may approve requests for overcapacity beyond 15 days,~~
447 ~~which approvals may be based upon satisfactory justification and~~
448 ~~need as provided by the receiving and sending facilities.~~

449 ~~(4) (a) An inactive license may be issued to a licensee~~
450 ~~subject to this section when the provider is located in a~~
451 ~~geographic area where a state of emergency was declared by the~~
452 ~~Governor if the provider:~~

453 ~~1. Suffered damage to its operation during that state of~~
454 ~~emergency.~~

455 ~~2. Is currently licensed.~~

456 ~~3. Does not have a provisional license.~~

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457 ~~4. Will be temporarily unable to provide services but is~~
458 ~~reasonably expected to resume services within 12 months.~~

459 ~~(b) An inactive license may be issued for a period not to~~
460 ~~exceed 12 months but may be renewed by the agency for up to 12~~
461 ~~additional months upon demonstration to the agency of progress~~
462 ~~toward reopening. A request by a licensee for an inactive~~
463 ~~license or to extend the previously approved inactive period~~
464 ~~must be submitted in writing to the agency, accompanied by~~
465 ~~written justification for the inactive license, which states the~~
466 ~~beginning and ending dates of inactivity and includes a plan for~~
467 ~~the transfer of any clients to other providers and appropriate~~
468 ~~licensure fees. Upon agency approval, the licensee shall notify~~
469 ~~clients of any necessary discharge or transfer as required by~~
470 ~~authorizing statutes or applicable rules. The beginning of the~~
471 ~~inactive licensure period shall be the date the provider ceases~~
472 ~~operations. The end of the inactive period shall become the~~
473 ~~licensee expiration date, and all licensure fees must be~~
474 ~~current, paid in full, and may be prorated. Reactivation of an~~
475 ~~inactive license requires the prior approval by the agency of a~~
476 ~~renewal application, including payment of licensure fees and~~
477 ~~agency inspections indicating compliance with all requirements~~
478 ~~of this part and applicable rules and statutes.~~

479 ~~(3)-(5)~~ This section provides standards of enforcement
480 applicable to all entities licensed or regulated by the Agency
481 for Health Care Administration. This section controls over any
482 conflicting provisions of chapters 39, 383, 390, 391, 394, 395,
483 400, 408, 429, 468, 483, and 765 or rules adopted pursuant to
484 those chapters.

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485 Section 26. Subsection (2) of section 408.918, Florida
486 Statutes, is amended, and subsection (3) is added to that
487 section, to read:

488 408.918 Florida 211 Network; uniform certification
489 requirements.--

490 (2) In order to participate in the Florida 211 Network, a
491 211 provider must be fully accredited by the National ~~certified~~
492 ~~by the Agency for Health Care Administration. The agency shall~~
493 ~~develop criteria for certification, as recommended by the~~
494 ~~Florida Alliance of Information and Referral Services~~ or have
495 received approval to operate, pending accreditation, from its
496 affiliate, the Florida Alliance of Information and Referral
497 Services, and shall adopt the criteria as administrative rules.

498 (a) If any provider of information and referral services
499 or other entity leases a 211 number from a local exchange
500 company and is not authorized as described in this section,
501 ~~certified by the agency, the agency shall, after consultation~~
502 ~~with the local exchange company and the Public Service~~
503 ~~Commission shall,~~ request that the Federal Communications
504 Commission direct the local exchange company to revoke the use
505 of the 211 number.

506 (b) ~~The agency shall seek the assistance and guidance of~~
507 ~~the Public Service Commission and the Federal Communications~~
508 ~~Commission in resolving any disputes arising over jurisdiction~~
509 ~~related to 211 numbers.~~

510 (3) The Florida Alliance of Information and Referral
511 Services is the 211 collaborative organization for the state
512 that is responsible for studying, designing, implementing,

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513 supporting, and coordinating the Florida 211 Network and
514 receiving federal grants.

515 Section 27. Paragraph (e) of subsection (4) of section
516 409.221, Florida Statutes, is amended to read:

517 409.221 Consumer-directed care program.--

518 (4) CONSUMER-DIRECTED CARE.--

519 (e) Services.--Consumers shall use the budget allowance
520 only to pay for home and community-based services that meet the
521 consumer's long-term care needs and are a cost-efficient use of
522 funds. Such services may include, but are not limited to, the
523 following:

524 1. Personal care.

525 2. Homemaking and chores, including housework, meals,
526 shopping, and transportation.

527 3. Home modifications and assistive devices which may
528 increase the consumer's independence or make it possible to
529 avoid institutional placement.

530 4. Assistance in taking self-administered medication.

531 5. Day care and respite care services, including those
532 provided by nursing home facilities pursuant to s.

533 400.141(1)(f) ~~(6)~~ or by adult day care facilities licensed
534 pursuant to s. 429.907.

535 6. Personal care and support services provided in an
536 assisted living facility.

537 Section 28. Subsection (5) of section 409.901, Florida
538 Statutes, is amended to read:

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539 409.901 Definitions; ss. 409.901-409.920.--As used in ss.
540 409.901-409.920, except as otherwise specifically provided, the
541 term:

542 (5) "Change of ownership" means:

543 (a) An event in which the provider ownership changes to a
544 different individual legal entity, as evidenced by a change in
545 federal employer identification number or taxpayer
546 identification number; or

547 (b) An event in which 51 45 percent or more of the
548 ownership, voting shares, membership, or controlling interest of
549 a provider is in any manner transferred or otherwise assigned.
550 This paragraph does not apply to a licensee that is publicly
551 traded on a recognized stock exchange; or

552 (c) When the provider is licensed or registered by the
553 agency, an event considered a change of ownership for licensure
554 as defined in s. 408.803 in a corporation whose shares are not
555 publicly traded on a recognized stock exchange is transferred or
556 assigned, including the final transfer or assignment of multiple
557 transfers or assignments over a 2-year period that cumulatively
558 total 45 percent or more.

559
560 A change solely in the management company or board of directors
561 is not a change of ownership.

562 Section 29. Section 429.071, Florida Statutes, is
563 repealed.

564 Section 30. Paragraph (e) of subsection (1) and
565 subsections (2) and (3) of section 429.08, Florida Statutes, are
566 amended to read:

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567 429.08 Unlicensed facilities; referral of person for
568 residency to unlicensed facility; penalties; verification of
569 licensure status.--

570 (1)

571 (e) The agency shall publish ~~provide to the department's~~
572 ~~elder information and referral providers~~ a list, by county, of
573 licensed assisted living facilities, ~~to assist persons who are~~
574 ~~considering an assisted living facility placement in locating a~~
575 ~~licensed facility.~~ This information may be provided
576 electronically or on the agency's Internet website.

577 ~~(2) Each field office of the Agency for Health Care~~
578 ~~Administration shall establish a local coordinating workgroup~~
579 ~~which includes representatives of local law enforcement~~
580 ~~agencies, state attorneys, the Medicaid Fraud Control Unit of~~
581 ~~the Department of Legal Affairs, local fire authorities, the~~
582 ~~Department of Children and Family Services, the district long-~~
583 ~~term care ombudsman council, and the district human rights~~
584 ~~advocacy committee to assist in identifying the operation of~~
585 ~~unlicensed facilities and to develop and implement a plan to~~
586 ~~ensure effective enforcement of state laws relating to such~~
587 ~~facilities. The workgroup shall report its findings, actions,~~
588 ~~and recommendations semiannually to the Director of Health~~
589 ~~Quality Assurance of the agency.~~

590 (2)~~(3)~~ It is unlawful to knowingly refer a person for
591 residency to an unlicensed assisted living facility; to an
592 assisted living facility the license of which is under denial or
593 has been suspended or revoked; or to an assisted living facility
594 that has a moratorium pursuant to part II of chapter 408. ~~Any~~

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595 ~~person who violates this subsection commits a noncriminal~~
596 ~~violation, punishable by a fine not exceeding \$500 as provided~~
597 ~~in s. 775.083.~~

598 (a) Any health care practitioner, as defined in s.
599 456.001, who is aware of the operation of an unlicensed facility
600 shall report that facility to the agency. Failure to report a
601 facility that the practitioner knows or has reasonable cause to
602 suspect is unlicensed shall be reported to the practitioner's
603 licensing board.

604 (b) Any provider as defined in s. 408.803 that ~~hospital or~~
605 ~~community mental health center licensed under chapter 395 or~~
606 ~~chapter 394 which~~ knowingly discharges a patient or client to an
607 unlicensed facility is subject to sanction by the agency.

608 (c) Any employee of the agency or department, or the
609 Department of Children and Family Services, who knowingly refers
610 a person for residency to an unlicensed facility; to a facility
611 the license of which is under denial or has been suspended or
612 revoked; or to a facility that has a moratorium pursuant to part
613 II of chapter 408 is subject to disciplinary action by the
614 agency or department, or the Department of Children and Family
615 Services.

616 (d) The employer of any person who is under contract with
617 the agency or department, or the Department of Children and
618 Family Services, and who knowingly refers a person for residency
619 to an unlicensed facility; to a facility the license of which is
620 under denial or has been suspended or revoked; or to a facility
621 that has a moratorium pursuant to part II of chapter 408 shall

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622 be fined and required to prepare a corrective action plan
623 designed to prevent such referrals.

624 ~~(e) The agency shall provide the department and the~~
625 ~~Department of Children and Family Services with a list of~~
626 ~~licensed facilities within each county and shall update the list~~
627 ~~at least quarterly.~~

628 ~~(f) At least annually, the agency shall notify, in~~
629 ~~appropriate trade publications, physicians licensed under~~
630 ~~chapter 458 or chapter 459, hospitals licensed under chapter~~
631 ~~395, nursing home facilities licensed under part II of chapter~~
632 ~~400, and employees of the agency or the department, or the~~
633 ~~Department of Children and Family Services, who are responsible~~
634 ~~for referring persons for residency, that it is unlawful to~~
635 ~~knowingly refer a person for residency to an unlicensed assisted~~
636 ~~living facility and shall notify them of the penalty for~~
637 ~~violating such prohibition. The department and the Department of~~
638 ~~Children and Family Services shall, in turn, notify service~~
639 ~~providers under contract to the respective departments who have~~
640 ~~responsibility for resident referrals to facilities. Further,~~
641 ~~the notice must direct each noticed facility and individual to~~
642 ~~contact the appropriate agency office in order to verify the~~
643 ~~licensure status of any facility prior to referring any person~~
644 ~~for residency. Each notice must include the name, telephone~~
645 ~~number, and mailing address of the appropriate office to~~
646 ~~contact.~~

647 Section 31. Paragraph (e) of subsection (1) of section
648 429.14, Florida Statutes, is amended to read:

649 429.14 Administrative penalties.--

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650 (1) In addition to the requirements of part II of chapter
651 408, the agency may deny, revoke, and suspend any license issued
652 under this part and impose an administrative fine in the manner
653 provided in chapter 120 against a licensee of an assisted living
654 facility for a violation of any provision of this part, part II
655 of chapter 408, or applicable rules, or for any of the following
656 actions by a licensee of an assisted living facility, for the
657 actions of any person subject to level 2 background screening
658 under s. 408.809, or for the actions of any facility employee:

659 (e) A citation of any of the following deficiencies as
660 specified ~~defined~~ in s. 429.19:

- 661 1. One or more cited class I deficiencies.
- 662 2. Three or more cited class II deficiencies.
- 663 3. Five or more cited class III deficiencies that have
664 been cited on a single survey and have not been corrected within
665 the times specified.

666 Section 32. Subsections (2), (8), and (9) of section
667 429.19, Florida Statutes, are amended to read:

668 429.19 Violations; imposition of administrative fines;
669 grounds.--

670 (2) Each violation of this part and adopted rules shall be
671 classified according to the nature of the violation and the
672 gravity of its probable effect on facility residents. The agency
673 shall indicate the classification on the written notice of the
674 violation as follows:

675 (a) Class "I" violations are defined in s. 408.813 ~~these~~
676 ~~conditions or occurrences related to the operation and~~
677 ~~maintenance of a facility or to the personal care of residents~~
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678 ~~which the agency determines present an imminent danger to the~~
679 ~~residents or guests of the facility or a substantial probability~~
680 ~~that death or serious physical or emotional harm would result~~
681 ~~therefrom. The condition or practice constituting a class I~~
682 ~~violation shall be abated or eliminated within 24 hours, unless~~
683 ~~a fixed period, as determined by the agency, is required for~~
684 ~~correction. The agency shall impose an administrative fine for a~~
685 ~~cited class I violation in an amount not less than \$5,000 and~~
686 ~~not exceeding \$10,000 for each violation. A fine may be levied~~
687 ~~notwithstanding the correction of the violation.~~

688 (b) Class "II" violations are defined in s. 408.813 ~~those~~
689 ~~conditions or occurrences related to the operation and~~
690 ~~maintenance of a facility or to the personal care of residents~~
691 ~~which the agency determines directly threaten the physical or~~
692 ~~emotional health, safety, or security of the facility residents,~~
693 ~~other than class I violations. The agency shall impose an~~
694 ~~administrative fine for a cited class II violation in an amount~~
695 ~~not less than \$1,000 and not exceeding \$5,000 for each~~
696 ~~violation. A fine shall be levied notwithstanding the correction~~
697 ~~of the violation.~~

698 (c) Class "III" violations are defined in s. 408.813 ~~those~~
699 ~~conditions or occurrences related to the operation and~~
700 ~~maintenance of a facility or to the personal care of residents~~
701 ~~which the agency determines indirectly or potentially threaten~~
702 ~~the physical or emotional health, safety, or security of~~
703 ~~facility residents, other than class I or class II violations.~~
704 The agency shall impose an administrative fine for a cited class
705 III violation in an amount not less than \$500 and not exceeding
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706 \$1,000 for each violation. ~~A citation for a class III violation~~
707 ~~must specify the time within which the violation is required to~~
708 ~~be corrected. If a class III violation is corrected within the~~
709 ~~time specified, no fine may be imposed, unless it is a repeated~~
710 ~~offense.~~

711 (d) Class "IV" violations are defined in s. 408.813 ~~those~~
712 ~~conditions or occurrences related to the operation and~~
713 ~~maintenance of a building or to required reports, forms, or~~
714 ~~documents that do not have the potential of negatively affecting~~
715 ~~residents. These violations are of a type that the agency~~
716 ~~determines do not threaten the health, safety, or security of~~
717 ~~residents of the facility.~~ The agency shall impose an
718 administrative fine for a cited class IV violation in an amount
719 not less than \$100 and not exceeding \$200 for each violation. ~~A~~
720 ~~citation for a class IV violation must specify the time within~~
721 ~~which the violation is required to be corrected. If a class IV~~
722 ~~violation is corrected within the time specified, no fine shall~~
723 ~~be imposed. Any class IV violation that is corrected during the~~
724 ~~time an agency survey is being conducted will be identified as~~
725 ~~an agency finding and not as a violation.~~

726 (8) During an inspection, ~~the agency, as an alternative to~~
727 ~~or in conjunction with an administrative action against a~~
728 ~~facility for violations of this part and adopted rules, shall~~
729 make a reasonable attempt to discuss each violation ~~and~~
730 ~~recommended corrective action~~ with the owner or administrator of
731 the facility, prior to written notification. ~~The agency, instead~~
732 ~~of fixing a period within which the facility shall enter into~~
733 ~~compliance with standards, may request a plan of corrective~~

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734 ~~action from the facility which demonstrates a good faith effort~~
735 ~~to remedy each violation by a specific date, subject to the~~
736 ~~approval of the agency.~~

737 (9) The agency shall develop and disseminate an annual
738 list of all facilities sanctioned or fined ~~\$5,000 or more~~ for
739 violations of state standards, the number and class of
740 violations involved, the penalties imposed, and the current
741 status of cases. The list shall be disseminated, at no charge,
742 to the Department of Elderly Affairs, the Department of Health,
743 the Department of Children and Family Services, the Agency for
744 Persons with Disabilities, the area agencies on aging, the
745 Florida Statewide Advocacy Council, and the state and local
746 ombudsman councils. The Department of Children and Family
747 Services shall disseminate the list to service providers under
748 contract to the department who are responsible for referring
749 persons to a facility for residency. The agency may charge a fee
750 commensurate with the cost of printing and postage to other
751 interested parties requesting a copy of this list. This
752 information may be provided electronically or on the agency's
753 Internet website.

754 Section 33. Subsections (2) and (6) of section 429.23,
755 Florida Statutes, are amended to read:

756 429.23 Internal risk management and quality assurance
757 program; adverse incidents and reporting requirements.--

758 (2) Every facility licensed under this part is required to
759 maintain adverse incident reports. For purposes of this section,
760 the term, "adverse incident" means:

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761 (a) An event over which facility personnel could exercise
762 control rather than as a result of the resident's condition and
763 results in:

764 1. Death;

765 2. Brain or spinal damage;

766 3. Permanent disfigurement;

767 4. Fracture or dislocation of bones or joints;

768 5. Any condition that required medical attention to which
769 the resident has not given his or her consent, including failure
770 to honor advanced directives;

771 6. Any condition that requires the transfer of the
772 resident from the facility to a unit providing more acute care
773 due to the incident rather than the resident's condition before
774 the incident; or-

775 7. An event that is reported to law enforcement or its
776 personnel for investigation; or

777 ~~(b) Abuse, neglect, or exploitation as defined in s.~~
778 ~~415.102;~~

779 ~~(c) Events reported to law enforcement; or~~

780 ~~(b)(d) Resident elopement, if the elopement places the~~
781 ~~resident at risk of harm or injury.~~

782 (6) Abuse, neglect, or exploitation must be reported to
783 the Department of Children and Family Services as required under
784 chapter 415. The agency shall annually submit to the Legislature
785 a report on assisted living facility adverse incident reports.
786 The report must include the following information arranged by
787 county:

788 ~~(a) A total number of adverse incidents;~~

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789 ~~(b) A listing, by category, of the type of adverse~~
790 ~~incidents occurring within each category and the type of staff~~
791 ~~involved;~~

792 ~~(c) A listing, by category, of the types of injuries, if~~
793 ~~any, and the number of injuries occurring within each category;~~

794 ~~(d) Types of liability claims filed based on an adverse~~
795 ~~incident report or reportable injury; and~~

796 ~~(e) Disciplinary action taken against staff, categorized~~
797 ~~by the type of staff involved.~~

798 Section 34. Subsections (10) through (12) of section
799 429.26, Florida Statutes, are renumbered as subsections (9)
800 through (11), respectively, and present subsection (9) of that
801 section is amended to read:

802 429.26 Appropriateness of placements; examinations of
803 residents.--

804 ~~(9) If, at any time after admission to a facility, a~~
805 ~~resident appears to need care beyond that which the facility is~~
806 ~~licensed to provide, the agency shall require the resident to be~~
807 ~~physically examined by a licensed physician, physician~~
808 ~~assistant, or licensed nurse practitioner. This examination~~
809 ~~shall, to the extent possible, be performed by the resident's~~
810 ~~preferred physician or nurse practitioner and shall be paid for~~
811 ~~by the resident with personal funds, except as provided in s.~~
812 ~~429.18(2). Following this examination, the examining physician,~~
813 ~~physician assistant, or licensed nurse practitioner shall~~
814 ~~complete and sign a medical form provided by the agency. The~~
815 ~~completed medical form shall be submitted to the agency within~~
816 ~~30 days after the date the facility owner or administrator is~~

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817 ~~notified by the agency that the physical examination is~~
818 ~~required. After consultation with the physician, physician~~
819 ~~assistant, or licensed nurse practitioner who performed the~~
820 ~~examination, a medical review team designated by the agency~~
821 ~~shall then determine whether the resident is appropriately~~
822 ~~residing in the facility. The medical review team shall base its~~
823 ~~decision on a comprehensive review of the resident's physical~~
824 ~~and functional status, including the resident's preferences, and~~
825 ~~not on an isolated health-related problem. In the case of a~~
826 ~~mental health resident, if the resident appears to have needs in~~
827 ~~addition to those identified in the community living support~~
828 ~~plan, the agency may require an evaluation by a mental health~~
829 ~~professional, as determined by the Department of Children and~~
830 ~~Family Services. A facility may not be required to retain a~~
831 ~~resident who requires more services or care than the facility is~~
832 ~~able to provide in accordance with its policies and criteria for~~
833 ~~admission and continued residency. Members of the medical review~~
834 ~~team making the final determination may not include the agency~~
835 ~~personnel who initially questioned the appropriateness of a~~
836 ~~resident's placement. Such determination is final and binding~~
837 ~~upon the facility and the resident. Any resident who is~~
838 ~~determined by the medical review team to be inappropriately~~
839 ~~residing in a facility shall be given 30 days' written notice to~~
840 ~~relocate by the owner or administrator, unless the resident's~~
841 ~~continued residence in the facility presents an imminent danger~~
842 ~~to the health, safety, or welfare of the resident or a~~
843 ~~substantial probability exists that death or serious physical~~

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844 ~~harm would result to the resident if allowed to remain in the~~
845 ~~facility.~~

846 Section 35. Paragraph (h) of subsection (3) of section
847 430.80, Florida Statutes, is amended to read:

848 430.80 Implementation of a teaching nursing home pilot
849 project.--

850 (3) To be designated as a teaching nursing home, a nursing
851 home licensee must, at a minimum:

852 (h) Maintain insurance coverage pursuant to s.
853 400.141(1)(s) ~~(20)~~ or proof of financial responsibility in a
854 minimum amount of \$750,000. Such proof of financial
855 responsibility may include:

856 1. Maintaining an escrow account consisting of cash or
857 assets eligible for deposit in accordance with s. 625.52; or

858 2. Obtaining and maintaining pursuant to chapter 675 an
859 unexpired, irrevocable, nontransferable and nonassignable letter
860 of credit issued by any bank or savings association organized
861 and existing under the laws of this state or any bank or savings
862 association organized under the laws of the United States that
863 has its principal place of business in this state or has a
864 branch office which is authorized to receive deposits in this
865 state. The letter of credit shall be used to satisfy the
866 obligation of the facility to the claimant upon presentment of a
867 final judgment indicating liability and awarding damages to be
868 paid by the facility or upon presentment of a settlement
869 agreement signed by all parties to the agreement when such final
870 judgment or settlement is a result of a liability claim against
871 the facility.

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872 Section 36. Subsection (5) of section 435.04, Florida
873 Statutes, is amended to read:

874 435.04 Level 2 screening standards.--

875 (5) Under penalty of perjury, all employees in such
876 positions of trust or responsibility shall attest to meeting the
877 requirements for qualifying for employment and agreeing to
878 inform the employer immediately if convicted of any of the
879 disqualifying offenses while employed by the employer. Each
880 employer of employees in such positions of trust or
881 responsibilities which is licensed or registered by a state
882 agency shall submit to the licensing agency annually or at the
883 time of license renewal, under penalty of perjury, an affidavit
884 of compliance with the provisions of this section.

885 Section 37. Subsection (3) of section 435.05, Florida
886 Statutes, is amended to read:

887 435.05 Requirements for covered employees.--Except as
888 otherwise provided by law, the following requirements shall
889 apply to covered employees:

890 (3) Each employer required to conduct level 2 background
891 screening must sign an affidavit annually or at the time of
892 license renewal, under penalty of perjury, stating that all
893 covered employees have been screened or are newly hired and are
894 awaiting the results of the required screening checks.

895 Section 38. Subsection (2) of section 483.031, Florida
896 Statutes, is amended to read:

897 483.031 Application of part; exemptions.--This part
898 applies to all clinical laboratories within this state, except:

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899 (2) A clinical laboratory that performs only waived tests
900 ~~and has received a certificate of exemption from the agency~~
901 ~~under s. 483.106.~~

902 Section 39. Subsection (10) of section 483.041, Florida
903 Statutes, is amended to read:

904 483.041 Definitions.--As used in this part, the term:

905 (10) "Waived test" means a test that the federal Centers
906 for Medicare and Medicaid Services ~~Health Care Financing~~
907 ~~Administration~~ has determined qualifies for a certificate of
908 waiver under the federal Clinical Laboratory Improvement
909 Amendments of 1988, and the federal rules adopted thereunder.

910 Section 40. Section 483.106, Florida Statutes, is
911 repealed.

912 Section 41. Subsection (3) of section 483.172, Florida
913 Statutes, is amended to read:

914 483.172 License fees.--

915 (3) The agency shall assess ~~a biennial fee of \$100 for a~~
916 ~~certificate of exemption and~~ a \$100 biennial license fee under
917 this section for facilities surveyed by an approved accrediting
918 organization.

919 Section 42. Paragraph (b) of subsection (1) of section
920 627.4239, Florida Statutes, is amended to read:

921 627.4239 Coverage for use of drugs in treatment of
922 cancer.--

923 (1) DEFINITIONS.--As used in this section, the term:

924 (b) "Standard reference compendium" means authoritative
925 compendia identified by the Secretary of the United States

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926 Department of Health and Human Services and recognized by the
927 federal Centers for Medicare and Medicaid Services:

- 928 ~~1. The United States Pharmacopeia Drug Information;~~
- 929 ~~2. The American Medical Association Drug Evaluations; or~~
- 930 ~~3. The American Hospital Formulary Service Drug~~
931 ~~Information.~~

932
933

934 -----

T I T L E A M E N D M E N T

936 Remove lines 46-163 and insert:
 937 coverage, bodily injury liability coverage, personal
 938 liability umbrella coverage, or uninsured motorist
 939 coverage; amending s. 400.9935, F.S.; revising
 940 accreditation requirements for clinics providing magnetic
 941 resonance imaging services; amending s. 400.995, F.S.;
 942 revising agency responsibilities with respect to personnel
 943 and operations in certain injunctive proceedings; amending
 944 s. 408.803, F.S.; revising definitions applicable to pt.
 945 II of ch. 408, F.S., the "Health Care Licensing Procedures
 946 Act"; amending s. 408.806, F.S.; revising contents of and
 947 procedures relating to health care provider applications
 948 for licensure; providing an exception from certain
 949 licensure inspections for adult family-care homes;
 950 authorizing the agency to provide electronic access to
 951 certain information and documents; amending s. 408.808,
 952 F.S.; providing for a provisional license to be issued to
 953 applicants applying for a change of ownership; providing a

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HOUSE AMENDMENT

Bill No. CS/CS/CS/HB 651

Amendment No.

954 time limit on provisional licenses; amending s. 408.809,
955 F.S.; revising provisions relating to background screening
956 of specified employees; exempting certain persons from
957 rescreening; permitting certain persons to apply for an
958 exemption from disqualification under certain
959 circumstances; requiring health care providers to submit
960 to the agency an affidavit of compliance with background
961 screening requirements at the time of license renewal;
962 deleting a provision to conform to changes made by the
963 act; amending s. 408.810, F.S.; revising provisions
964 relating to information required for licensure; amending
965 s. 408.811, F.S.; providing for certain inspections to be
966 accepted in lieu of complete licensure inspections;
967 granting agency access to records requested during an
968 offsite review; providing timeframes for correction of
969 certain deficiencies and submission of plans to correct
970 such deficiencies; amending s. 408.813, F.S.; providing
971 classifications of violations of pt. II of ch. 408, F.S.;
972 providing for fines; amending s. 408.820, F.S.; revising
973 applicability of exemptions from specified requirements of
974 pt. II of ch. 408, F.S.; conforming references; creating
975 s. 408.821, F.S.; requiring entities regulated or licensed
976 by the agency to designate a safety liaison for emergency
977 operations; providing that entities regulated or licensed
978 by the agency may temporarily exceed their licensed
979 capacity to act as receiving providers under specified
980 circumstances; providing requirements while such entities
981 are in an overcapacity status; providing for issuance of

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982 an inactive license to such licensees under specified
983 conditions; providing requirements and procedures with
984 respect to the issuance and reactivation of an inactive
985 license; authorizing the agency to adopt rules; amending
986 s. 408.831, F.S.; deleting provisions relating to
987 authorization for entities regulated or licensed by the
988 agency to exceed their licensed capacity to act as
989 receiving facilities and issuance and reactivation of
990 inactive licenses; amending s. 408.918, F.S.; requiring
991 accreditation by the National Alliance of Information and
992 Referral Services for participation in the Florida 211
993 Network; eliminating the requirement that the agency seek
994 certain assistance and guidance in resolving certain
995 disputes; removing certain agency obligations relating to
996 the Florida 211 Network; requiring the Florida Alliance of
997 Information and Referral Services to perform certain
998 functions related to the Florida 211 Network; amending s.
999 409.221, F.S.; conforming a cross-reference; amending s.
1000 409.901, F.S.; revising a definition applicable to
1001 Medicaid providers; repealing s. 429.071, F.S., relating
1002 to the intergenerational respite care assisted living
1003 facility pilot program; amending s. 429.08, F.S.;
1004 authorizing the agency to provide information regarding
1005 licensed assisted living facilities electronically or on
1006 its Internet website; abolishing local coordinating
1007 workgroups established by agency field offices; deleting a
1008 fine; deleting provisions requiring the agency to provide
1009 certain information and notice to service providers;

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HOUSE AMENDMENT

Bill No. CS/CS/CS/HB 651

Amendment No.

1010 amending s. 429.14, F.S.; conforming a reference; amending
1011 s. 429.19, F.S.; revising agency procedures for imposition
1012 of fines for violations of pt. I of ch. 429, F.S., the
1013 "Assisted Living Facilities Act"; providing for the
1014 posting of certain information electronically or on the
1015 agency's Internet website; amending s. 429.23, F.S.;
1016 revising the definition of the term "adverse incident" for
1017 reporting purposes; requiring abuse, neglect, and
1018 exploitation to be reported to the agency and the
1019 Department of Children and Family Services; deleting a
1020 requirement that the agency submit an annual report on
1021 assisted living facility adverse incidents to the
1022 Legislature; amending s. 429.26, F.S.; removing
1023 requirement for a resident of an assisted living facility
1024 to undergo examinations and evaluations under certain
1025 circumstances; amending s. 430.80, F.S.; conforming a
1026 cross-reference; amending ss. 435.04 and 435.05, F.S.;
1027 requiring employers of certain employees to submit an
1028 affidavit of compliance with level 2 screening
1029 requirements at the time of license renewal; amending s.
1030 483.031, F.S.; conforming a reference; amending s.
1031 483.041, F.S.; revising a definition applicable to pt. I
1032 of ch. 483, F.S., the "Florida Clinical Laboratory Law";
1033 repealing s. 483.106, F.S., relating to applications for
1034 certificates of exemption by clinical laboratories that
1035 perform certain tests; amending s. 483.172, F.S.;
1036 conforming a reference; amending s. 627.4239, F.S.;
1037 revising the definition of the term "standard reference

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HOUSE AMENDMENT

Bill No. CS/CS/CS/HB 651

Amendment No.

1038 compendium" for purposes of regulating the insurance
1039 coverage of drugs used in the treatment of cancer;
1040 amending s. 651.118, F.S.; conforming a cross-reference;
1041 providing an effective date.

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