

1 A bill to be entitled
2 An act relating to health care; amending s. 112.0455,
3 F.S., and repealing paragraph (10)(e), relating to a
4 prohibition against applying the Drug-Free Workplace Act
5 retroactively; conforming a cross-reference; repealing s.
6 383.325, F.S., relating to the requirement of a licensed
7 facility under s. 383.305, F.S., to maintain inspection
8 reports; repealing s. 395.1046, F.S., relating to the
9 investigation of complaints regarding hospitals; repealing
10 s. 395.3037, F.S.; deleting definitions relating to
11 obsolete provisions governing primary and comprehensive
12 stroke centers; amending s. 400.0239, F.S.; deleting an
13 obsolete provision; repealing s. 400.147(10), F.S.,
14 relating to a requirement that a nursing home facility
15 report any notice of a filing of a claim for a violation
16 of a resident's rights or a claim of negligence; repealing
17 s. 400.148, F.S., relating to the Medicaid "Up-or-Out"
18 Quality of Care Contract Management Program; repealing s.
19 400.195, F.S., relating to reporting requirements for the
20 Agency for Health Care Administration; amending s.
21 400.476, F.S.; providing requirements for an alternate
22 administrator of a home health agency; revising the duties
23 of the administrator; revising the requirements for a
24 director of nursing for a specified number of home health
25 agencies; prohibiting a home health agency from using an
26 individual as a home health aide unless the person has
27 completed training and an evaluation program; requiring a
28 home health aide to meet certain standards in order to be

29 | competent in performing certain tasks; requiring a home
30 | health agency and staff to comply with accepted
31 | professional standards; providing certain requirements for
32 | a written contract between certain personnel and the
33 | agency; requiring a home health agency to provide certain
34 | services through its employees; authorizing a home health
35 | agency to provide additional services with another
36 | organization; providing responsibilities of a home health
37 | agency when it provides home health aide services through
38 | another organization; requiring the home health agency to
39 | coordinate personnel who provide home health services;
40 | requiring personnel to communicate with the home health
41 | agency; amending s. 400.487, F.S.; requiring a home health
42 | agency to provide a patient or the patient's legal
43 | representative a copy of the agreement between the agency
44 | and the patient which specifies the home health services
45 | to be provided; providing the rights that are protected by
46 | the home health agency; requiring the home health agency
47 | to furnish nursing services by or under the supervision of
48 | a registered nurse; requiring the home health agency to
49 | provide therapy services through a qualified therapist or
50 | therapy assistant; providing the duties and qualifications
51 | of a therapist and therapy assistant; requiring
52 | supervision by a physical therapist or occupational
53 | therapist of a physical therapist assistant or
54 | occupational therapy assistant; providing duties of a
55 | physical therapist assistant or occupational therapy
56 | assistant; providing for speech therapy services to be

57 provided by a qualified speech-language pathologist or
58 audiologist; providing for a plan of care; providing that
59 only the staff of a home health agency may administer
60 drugs and treatments as ordered by certain health
61 professionals; providing requirements for verbal orders;
62 providing duties of a registered nurse, licensed practical
63 nurse, home health aide, and certified nursing assistant
64 who work for a home health agency; providing for
65 supervisory visits of services provided by a home health
66 agency; repealing s. 408.802(11), F.S., relating to the
67 applicability of the Health Care Licensing Procedures Act
68 to private review agents; repealing s. 409.912(15)(e),
69 (f), and (g), F.S., relating to a requirement for the
70 Agency for Health Care Administration to submit a report
71 to the Legislature regarding the operations of the CARE
72 program; repealing s. 429.12(2), F.S., relating to the
73 sale or transfer of ownership of an assisted living
74 facility; repealing s. 429.23(5), F.S., relating to each
75 assisted living facility's requirement to submit a report
76 to the agency regarding liability claims filed against it;
77 repealing s. 429.911(2)(a), F.S., relating to an
78 intentional or negligent act materially affecting the
79 health or safety of center participants as grounds for
80 which the agency may take action against the owner of an
81 adult day care center or its operator or employee;
82 requiring persons who apply for licensure renewal as a
83 dentist or dental hygienist to furnish certain information
84 to the Department of Health in a dental workforce survey;

85 requiring the Board of Dentistry to issue a
86 nondisciplinary citation and a notice for failure to
87 complete the survey within a specified time; providing
88 notification requirements for the citation; requiring the
89 department to serve as the coordinating body for the
90 purpose of collecting, disseminating, and updating dental
91 workforce data; requiring the department to maintain a
92 database regarding the state's dental workforce; requiring
93 the department to develop strategies to maximize federal
94 and state programs and to work with an advisory body to
95 address matters relating to the state's dental workforce;
96 providing membership of the advisory body; providing for
97 members of the advisory body to serve without
98 compensation; requiring the department to act as a
99 clearinghouse for collecting and disseminating information
100 regarding the dental workforce; requiring the department
101 and the board to adopt rules; providing legislative intent
102 regarding implementation of the act within existing
103 resources; amending s. 499.01, F.S.; authorizing certain
104 business entities to pay for prescription drugs obtained
105 by practitioners licensed under ch. 466, F.S.; amending s.
106 624.91, F.S.; revising the membership of the board of
107 directors of the Florida Healthy Kids Corporation to
108 include a member nominated by the Florida Dental
109 Association and appointed by the Governor; providing an
110 effective date.

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

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Section 1. Paragraph (e) of subsection (10) of section 112.0455, Florida Statutes, is repealed, and paragraph (e) of subsection (14) of that section is amended to read:

112.0455 Drug-Free Workplace Act.—

(14) DISCIPLINE REMEDIES.—

(e) Upon resolving an appeal filed pursuant to paragraph (c), and finding a violation of this section, the commission may order the following relief:

1. Rescind the disciplinary action, expunge related records from the personnel file of the employee or job applicant and reinstate the employee.
2. Order compliance with paragraph (10) (f) ~~(g)~~.
3. Award back pay and benefits.
4. Award the prevailing employee or job applicant the necessary costs of the appeal, reasonable attorney's fees, and expert witness fees.

Section 2. Section 383.325, Florida Statutes, is repealed.

Section 3. Section 395.1046, Florida Statutes, is repealed.

Section 4. Section 395.3037, Florida Statutes, is repealed.

Section 5. Paragraph (g) of subsection (2) of section 400.0239, Florida Statutes, is amended to read:

400.0239 Quality of Long-Term Care Facility Improvement Trust Fund.—

(2) Expenditures from the trust fund shall be allowable for direct support of the following:

141 (g) Other initiatives authorized by the Centers for
 142 Medicare and Medicaid Services for the use of federal civil
 143 monetary penalties, ~~including projects recommended through the~~
 144 ~~Medicaid "Up or Out" Quality of Care Contract Management Program~~
 145 ~~pursuant to s. 400.148.~~

146 Section 6. Subsection (10) of section 400.147, Florida
 147 Statutes, is repealed.

148 Section 7. Section 400.148, Florida Statutes, is repealed.

149 Section 8. Section 400.195, Florida Statutes, is repealed.

150 Section 9. Section 400.476, Florida Statutes, is amended
 151 to read:

152 400.476 Staffing requirements; notifications; limitations
 153 on staffing services.—

154 (1) ADMINISTRATOR.—

155 (a) An administrator may manage only one home health
 156 agency, except that an administrator may manage up to five home
 157 health agencies if all five home health agencies have identical
 158 controlling interests as defined in s. 408.803 and are located
 159 within one agency geographic service area or within an
 160 immediately contiguous county. If the home health agency is
 161 licensed under this chapter and is part of a retirement
 162 community that provides multiple levels of care, an employee of
 163 the retirement community may administer the home health agency
 164 and up to a maximum of four entities licensed under this chapter
 165 or chapter 429 which all have identical controlling interests as
 166 defined in s. 408.803. An administrator shall designate, in
 167 writing, for each licensed entity, a qualified alternate
 168 administrator to serve during the administrator's absence. An

169 alternate administrator must meet the requirements in this
 170 paragraph and s. 400.462(1).

171 (b) An administrator of a home health agency who is a
 172 licensed physician, physician assistant, or registered nurse
 173 licensed to practice in this state may also be the director of
 174 nursing for a home health agency. An administrator may serve as
 175 a director of nursing for up to the number of entities
 176 authorized in subsection (2) only if there are 10 or fewer full-
 177 time equivalent employees and contracted personnel in each home
 178 health agency.

179 (c) The administrator shall organize and direct the
 180 agency's ongoing functions, maintain an ongoing liaison with the
 181 board members and the staff, employ qualified personnel and
 182 ensure adequate staff education and evaluations, ensure the
 183 accuracy of public informational materials and activities,
 184 implement an effective budgeting and accounting system, and
 185 ensure that the home health agency operates in compliance with
 186 this part and part II of chapter 408 and rules adopted for these
 187 laws.

188 (d) The administrator shall clearly set forth in writing
 189 the organizational chart, services furnished, administrative
 190 control authority, and lines of authority for the delegation of
 191 responsibilities for patient care. These responsibilities must
 192 be readily identifiable. Administrative and supervisory
 193 functions may not be delegated to another agency or
 194 organization, and the primary home health agency shall monitor
 195 and control all services that are not furnished directly,
 196 including services provided through contracts.

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197 (2) DIRECTOR OF NURSING.—
 198 (a) A director of nursing may be the director of nursing
 199 for:
 200 1. Up to two licensed home health agencies if the agencies
 201 have identical controlling interests as defined in s. 408.803
 202 and are located within one agency geographic service area or
 203 within an immediately contiguous county; or
 204 2. Up to five licensed home health agencies if:
 205 a. All of the home health agencies have identical
 206 controlling interests as defined in s. 408.803;
 207 b. All of the home health agencies are located within one
 208 agency geographic service area or within an immediately
 209 contiguous county; ~~and~~
 210 c. Each home health agency has a registered nurse who
 211 meets the qualifications of a director of nursing and who has a
 212 written delegation from the director of nursing to serve as the
 213 director of nursing for that home health agency when the
 214 director of nursing is not present; and—
 215 d. This person, or a similarly qualified alternate, is
 216 available at all times during operating hours and participates
 217 in all activities relevant to the professional services
 218 furnished, including, but not limited to, the oversight of
 219 nursing services, home health aides, and certified nursing
 220 assistants and the assignment of personnel.
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 222 If a home health agency licensed under this chapter is part of a
 223 retirement community that provides multiple levels of care, an
 224 employee of the retirement community may serve as the director

225 of nursing of the home health agency and up to a maximum of four
226 entities, other than home health agencies, licensed under this
227 chapter or chapter 429 which all have identical controlling
228 interests as defined in s. 408.803.

229 (b) A home health agency that provides skilled nursing
230 care may not operate for more than 30 calendar days without a
231 director of nursing. A home health agency that provides skilled
232 nursing care and the director of nursing of a home health agency
233 must notify the agency within 10 business days after termination
234 of the services of the director of nursing for the home health
235 agency. A home health agency that provides skilled nursing care
236 must notify the agency of the identity and qualifications of the
237 new director of nursing within 10 days after the new director is
238 hired. If a home health agency that provides skilled nursing
239 care operates for more than 30 calendar days without a director
240 of nursing, the home health agency commits a class II
241 deficiency. In addition to the fine for a class II deficiency,
242 the agency may issue a moratorium in accordance with s. 408.814
243 or revoke the license. The agency shall fine a home health
244 agency that fails to notify the agency as required in this
245 paragraph \$1,000 for the first violation and \$2,000 for a repeat
246 violation. The agency may not take administrative action against
247 a home health agency if the director of nursing fails to notify
248 the department upon termination of services as the director of
249 nursing for the home health agency.

250 (c) A home health agency that is not Medicare or Medicaid
251 certified and does not provide skilled care or provides only
252 physical, occupational, or speech therapy is not required to

253 have a director of nursing and is exempt from paragraph (b).

254 (3) TRAINING.—A home health agency shall ensure that each
 255 certified nursing assistant employed by or under contract with
 256 the home health agency and each home health aide employed by or
 257 under contract with the home health agency is adequately trained
 258 to perform the tasks of a home health aide in the home setting.

259 (a) The home health agency may not use as a home health
 260 aide on a full-time, temporary, per diem, or other basis any
 261 individual to provide services unless the individual has
 262 completed a training and competency evaluation program, or a
 263 competency evaluation program, as permitted in s. 400.497, which
 264 meets the minimum standards established by the agency in state
 265 rules.

266 (b) A home health aide is not competent in any task for
 267 which he or she is evaluated as "unsatisfactory." The aide must
 268 perform any such task only under direct supervision by a
 269 licensed nurse until he or she receives training in the task and
 270 satisfactorily passes a subsequent evaluation in performing the
 271 task. A home health aide has not successfully passed a
 272 competency evaluation if the aide does not have a passing score
 273 on the test as specified by agency rule.

274 (4) STAFFING.—Staffing services may be provided anywhere
 275 within the state.

276 (5) PERSONNEL.—

277 (a) The home health agency and its staff must comply with
 278 accepted professional standards and principles that apply to
 279 professionals, including, but not limited to, the state practice
 280 acts and the home health agency's policies and procedures.

281 (b) If personnel under hourly or per-visit contracts are
282 used by the home health agency, there must be a written contract
283 between those personnel and the agency which specifies the
284 following requirements:

285 1. Acceptance for care only of patients by the primary
286 home health agency.

287 2. The services to be furnished.

288 3. The necessity to conform to all applicable agency
289 policies, including personnel qualifications.

290 4. The responsibility for participating in developing
291 plans of care.

292 5. The manner in which services are controlled,
293 coordinated, and evaluated by the primary home health agency.

294 6. The procedures for submitting clinical and progress
295 notes, scheduling visits, and providing periodic patient
296 evaluations.

297 7. The procedures for payment for services furnished under
298 the contract.

299 (c) A home health agency shall directly provide at least
300 one of the types of authorized services through home health
301 agency employees, but may provide additional services under
302 arrangements with another agency or organization. Services
303 furnished under such arrangements must have a written contract
304 conforming to the requirements specified in paragraph (b).

305 (d) If home health aide services are provided by an
306 individual who is not employed directly by the home health
307 agency, the services of the home health aide must be provided
308 under arrangements as stated in paragraphs (b) and (c). If the

309 home health agency chooses to provide home health aide services
 310 under arrangements with another organization, the
 311 responsibilities of the home health agency include, but are not
 312 limited to:

313 1. Ensuring the overall quality of the care provided by
 314 the aide.

315 2. Supervising the aide's services as described in s.
 316 400.487.

317 3. Ensuring that each home health aide providing services
 318 under arrangements with another organization has met the
 319 training requirements or competency evaluation requirements of
 320 s. 400.497.

321 (e) The home health agency shall coordinate the efforts of
 322 all personnel furnishing services, and the personnel shall
 323 maintain communication with the home health agency to ensure
 324 that personnel efforts support the objectives outlined in the
 325 plan of care. The clinical record or minutes of case conferences
 326 shall ensure that effective interchange, reporting, and
 327 coordination of patient care occurs.

328 Section 10. Section 400.487, Florida Statutes, is amended
 329 to read:

330 400.487 Home health service agreements; physician's,
 331 physician assistant's, and advanced registered nurse
 332 practitioner's treatment orders; patient assessment;
 333 establishment and review of plan of care; provision of services;
 334 orders not to resuscitate.-

335 (1) Services provided by a home health agency must be
 336 covered by an agreement between the home health agency and the

337 patient or the patient's legal representative specifying the
338 home health services to be provided, the rates or charges for
339 services paid with private funds, and the sources of payment,
340 which may include Medicare, Medicaid, private insurance,
341 personal funds, or a combination thereof. The home health agency
342 shall provide a copy of the agreement to the patient or the
343 patient's legal representative. A home health agency providing
344 skilled care must make an assessment of the patient's needs
345 within 48 hours after the start of services.

346 (2) When required by the provisions of chapter 464; part
347 I, part III, or part V of chapter 468; or chapter 486, the
348 attending physician, physician assistant, or advanced registered
349 nurse practitioner, acting within his or her respective scope of
350 practice, shall establish treatment orders for a patient who is
351 to receive skilled care. The treatment orders must be signed by
352 the physician, physician assistant, or advanced registered nurse
353 practitioner before a claim for payment for the skilled services
354 is submitted by the home health agency. If the claim is
355 submitted to a managed care organization, the treatment orders
356 must be signed within the time allowed under the provider
357 agreement. The treatment orders shall be reviewed, as frequently
358 as the patient's illness requires, by the physician, physician
359 assistant, or advanced registered nurse practitioner in
360 consultation with the home health agency.

361 (3) A home health agency shall arrange for supervisory
362 visits by a registered nurse to the home of a patient receiving
363 home health aide services as specified in subsection (9) ~~in~~
364 ~~accordance with the patient's direction, approval, and agreement~~

365 ~~to pay the charge for the visits.~~

366 (4) The home health agency shall protect and promote the
 367 rights of each individual under its care, including each of the
 368 following rights:

369 (a) Notice of rights.—The home health agency shall provide
 370 the patient with a written notice of the patient's rights in
 371 advance of furnishing care to the patient or during the initial
 372 evaluation visit before the initiation of treatment. The home
 373 health agency must maintain documentation showing that it has
 374 complied with the requirements of this section.

375 (b) Exercise of rights and respect for property and
 376 person.—

377 1. The patient has the right to exercise his or her rights
 378 as a patient of the home health agency.

379 2. The patient has the right to have his or her property
 380 treated with respect.

381 3. The patient has the right to voice grievances regarding
 382 treatment or care that is or fails to be furnished, or regarding
 383 the lack of respect for property by anyone who is furnishing
 384 services on behalf of the home health agency, and not be
 385 subjected to discrimination or reprisal for doing so.

386 4. The home health agency must investigate complaints made
 387 by a patient or the patient's family or guardian regarding
 388 treatment or care that is or fails to be furnished or regarding
 389 the lack of respect for the patient's property by anyone
 390 furnishing services on behalf of the home health agency. The
 391 home health agency shall document the existence of the complaint
 392 and its resolution.

393 5. The patient and his or her immediate family or
 394 representative must be informed of the right to report
 395 complaints via the statewide toll-free telephone number to the
 396 agency as required in s. 408.810.

397 (c) Right to be informed and to participate in planning
 398 care and treatment.-

399 1. The patient has the right to be informed, in advance,
 400 about the care to be furnished and of any changes in the care to
 401 be furnished. The home health agency shall advise the patient in
 402 advance of which disciplines will furnish care and the frequency
 403 of visits proposed to be furnished. The home health agency must
 404 advise the patient in advance of any change in the plan of care
 405 before the change is made.

406 2. The patient has the right to participate in the
 407 planning of the care. The home health agency must advise the
 408 patient in advance of the right to participate in planning the
 409 care or treatment and in planning changes in the care or
 410 treatment. ~~Each patient has the right to be informed of and to~~
 411 ~~participate in the planning of his or her care.~~ Each patient
 412 must be provided, upon request, a copy of the plan of care
 413 established and maintained for that patient by the home health
 414 agency.

415 (5) When nursing services are ordered, the home health
 416 agency to which a patient has been admitted for care must
 417 provide the initial admission visit, all service evaluation
 418 visits, and the discharge visit by a direct employee. Services
 419 provided by others under contractual arrangements to a home
 420 health agency must be monitored and managed by the admitting

421 home health agency. The admitting home health agency is fully
422 responsible for ensuring that all care provided through its
423 employees or contract staff is delivered in accordance with this
424 part and applicable rules.

425 (6) The skilled care services provided by a home health
426 agency, directly or under contract, must be supervised and
427 coordinated in accordance with the plan of care. The home health
428 agency shall furnish skilled nursing services by or under the
429 supervision of a registered nurse and in accordance with the
430 plan of care. Any therapy services offered directly or under
431 arrangement by the home health agency must be provided by a
432 qualified therapist or by a qualified therapy assistant under
433 the supervision of a qualified therapist and in accordance with
434 the plan of care.

435 (a) Duties and qualifications.—A qualified therapist shall
436 assist the physician in evaluating the level of function, help
437 develop or revise the plan of care, prepare clinical and
438 progress notes, advise and consult with the family and other
439 agency personnel, and participate in in-service programs. The
440 therapist or therapy assistant must meet the qualifications in
441 the state practice acts and applicable rules.

442 (b) Physical therapist assistants and occupational therapy
443 assistants.—Services provided by a physical therapist assistant
444 or occupational therapy assistant must be under the supervision
445 of a qualified physical therapist or occupational therapist as
446 required in chapter 486 and part III of chapter 468,
447 respectively, and applicable rules. A physical therapist
448 assistant or occupational therapy assistant shall perform

449 services planned, delegated, and supervised by the therapist,
450 assist in preparing clinical notes and progress reports,
451 participate in educating the patient and his or her family, and
452 participate in in-service programs.

453 (c) Speech therapy services.—Speech therapy services shall
454 be furnished only by or under supervision of a qualified speech-
455 language pathologist or audiologist as required in part I of
456 chapter 468 and applicable rules.

457 (d) Care follows a written plan of care.—The plan of care
458 shall be reviewed by the physician or health professional who
459 provided the treatment orders pursuant to subsection (2) and
460 home health agency personnel as often as the severity of the
461 patient's condition requires, but at least once every 60 days or
462 more when there is a patient-elected transfer, a significant
463 change in condition, or a discharge and return to the same home
464 health agency during the 60-day episode. Professional staff of a
465 home health agency shall promptly alert the physician or other
466 health professional who provided the treatment orders of any
467 change that suggests a need to alter the plan of care.

468 (e) Administration of drugs and treatment.—Only
469 professional staff of a home health agency may administer drugs
470 and treatments as ordered by the physician or health
471 professional pursuant to subsection (2), with the exception of
472 influenza and pneumococcal polysaccharide vaccines, which may be
473 administered according to the policy of the home health agency
474 developed in consultation with a physician and after an
475 assessment for contraindications. Verbal orders shall be in
476 writing and signed and dated with the date of receipt by the

477 registered nurse or qualified therapist who is responsible for
 478 furnishing or supervising the ordered service. A verbal order
 479 may be accepted only by personnel who are authorized to do so by
 480 applicable state laws, rules, and internal policies of the home
 481 health agency.

482 (7) A registered nurse shall conduct the initial
 483 evaluation visit, regularly reevaluate the patient's nursing
 484 needs, initiate the plan of care and necessary revisions,
 485 furnish those services requiring substantial and specialized
 486 nursing skill, initiate appropriate preventive and
 487 rehabilitative nursing procedures, prepare clinical and progress
 488 notes, coordinate services, inform the physician and other
 489 personnel of changes in the patient's condition and needs,
 490 counsel the patient and his or her family in meeting nursing and
 491 related needs, participate in in-service programs, and supervise
 492 and teach other nursing personnel, unless the home health agency
 493 providing the home health aide services is not Medicare-
 494 certified or Medicaid-certified and does not provide skilled
 495 care.

496 (8) A licensed practical nurse shall furnish services in
 497 accordance with agency policies, prepare clinical and progress
 498 notes, assist the physician and registered nurse in performing
 499 specialized procedures, prepare equipment and materials for
 500 treatments observing aseptic technique as required, and assist
 501 the patient in learning appropriate self-care techniques.

502 (9) A home health aide and certified nursing assistant
 503 shall provide services that are in the service provision plan
 504 provided in s. 400.491 and other services that the home health

505 aide or certified nursing assistant is permitted to perform
506 under state law. The duties of a home health aide or certified
507 nursing assistant include the provision of hands-on personal
508 care, performance of simple procedures as an extension of
509 therapy or nursing services, assistance in ambulation or
510 exercises, and assistance in administering medications that are
511 ordinarily self-administered and are specified in agency rules.
512 Any services by a home health aide which are offered by a home
513 health agency must be provided by a qualified home health aide
514 or certified nursing assistant.

515 (a) Assignment and duties.—A home health aide or certified
516 nursing assistant shall be assigned to a specific patient by a
517 registered nurse, unless the home health agency providing the
518 home health aide services is not Medicare-certified or Medicaid-
519 certified and does not provide skilled care. Written patient
520 care instructions for the home health aide and certified nursing
521 assistant must be prepared by the registered nurse or other
522 appropriate professional who is responsible for the supervision
523 of the home health aide and certified nursing assistant as
524 stated in this section.

525 (b) Supervision.—If a patient receives skilled nursing
526 care, the registered nurse shall perform the supervisory visit.
527 If the patient is not receiving skilled nursing care but is
528 receiving physical therapy, occupational therapy, or speech-
529 language pathology services, the appropriate therapist may
530 provide the supervision. A registered nurse or other
531 professional must make an onsite visit to the patient's home at
532 least once every 2 weeks. The visit is not required while the

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533 aide is providing care.

534 (c) Supervisory visits.—If home health aide services are
535 provided to a patient who is not receiving skilled nursing care,
536 physical or occupational therapy, or speech-language pathology
537 services, a registered nurse must make a supervisory visit to
538 the patient's home at least once every 60 days, unless the home
539 health agency providing the home health aide services is not
540 Medicare-certified or Medicaid-certified and does not provide
541 skilled care, either directly or through contracts. The
542 registered nurse shall ensure that the aide is properly caring
543 for the patient and each supervisory visit must occur while the
544 home health aide is providing patient care. In addition to the
545 requirements in this subsection, a home health agency shall
546 arrange for additional supervisory visits by a registered nurse
547 to the home of a patient receiving home health aide services in
548 accordance with the patient's direction, approval, and agreement
549 to pay the charge for the visits.

550 (10) ~~(7)~~ Home health agency personnel may withhold or
551 withdraw cardiopulmonary resuscitation if presented with an
552 order not to resuscitate executed pursuant to s. 401.45. The
553 agency shall adopt rules providing for the implementation of
554 such orders. Home health personnel and agencies shall not be
555 subject to criminal prosecution or civil liability, nor be
556 considered to have engaged in negligent or unprofessional
557 conduct, for withholding or withdrawing cardiopulmonary
558 resuscitation pursuant to such an order and rules adopted by the
559 agency.

560 Section 11. Subsection (11) of section 408.802, Florida

561 Statutes, is repealed.

562 Section 12. Paragraphs (e), (f), and (g) of subsection
 563 (15) of section 409.912, Florida Statutes, are repealed.

564 Section 13. Subsection (2) of section 429.12, Florida
 565 Statutes, is repealed.

566 Section 14. Subsection (5) of section 429.23, Florida
 567 Statutes, is repealed.

568 Section 15. Paragraph (a) of subsection (2) of section
 569 429.911, Florida Statutes, is repealed.

570 Section 16. Dental workforce survey.-

571 (1) Beginning in 2012, each person who applies for
 572 licensure renewal as a dentist or dental hygienist under chapter
 573 466, Florida Statutes, must, in conjunction with the renewal of
 574 such license under procedures and forms adopted by the Board of
 575 Dentistry and in addition to any other information that may be
 576 required from the applicant, furnish the following information
 577 to the Department of Health, working in conjunction with the
 578 board, in a dental workforce survey:

579 (a) Licensee information, including, but not limited to:

580 1. The name of the dental school or dental hygiene program
 581 that the dentist or dental hygienist graduated from and the year
 582 of graduation.

583 2. The year that the dentist or dental hygienist began
 584 practicing or working in this state.

585 3. The geographic location of the dentist's or dental
 586 hygienist's practice or address within the state.

587 4. For a dentist in private practice:

588 a. The number of full-time dental hygienists employed by

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589 the dentist during the reporting period.

590 b. The number of full-time dental assistants employed by
591 the dentist during the reporting period.

592 c. The average number of patients treated per week by the
593 dentist during the reporting period.

594 d. The settings where the dental care was delivered.

595 5. Anticipated plans of the dentist to change the status
596 of his or her license or practice.

597 6. The dentist's areas of specialty or certification.

598 7. The year that the dentist completed a specialty program
599 recognized by the American Dental Association.

600 8. For a hygienist:

601 a. The average number of patients treated per week by the
602 hygienist during the reporting period.

603 b. The settings where the dental care was delivered.

604 9. The dentist's memberships in professional
605 organizations.

606 10. The number of pro bono hours provided by the dentist
607 or dental hygienist during the last biennium.

608 (b) Information concerning the availability and trends
609 relating to critically needed services, including, but not
610 limited to, the following types of care provided by the dentist
611 or dental hygienist:

612 1. Dental care to children having special needs.

613 2. Geriatric dental care.

614 3. Dental services in emergency departments.

615 4. Medicaid services.

616 5. Other critically needed specialty areas, as determined

617 by the advisory body.

618 (2) In addition to the completed survey, the dentist or
 619 dental hygienist must submit a statement that the information
 620 provided is true and accurate to the best of his or her
 621 knowledge and belief.

622 (3) Beginning in 2012, renewal of a license by a dentist
 623 or dental hygienist licensed under chapter 466, Florida
 624 Statutes, is not contingent upon the completion and submission
 625 of the dental workforce survey; however, for any subsequent
 626 license renewal, the board may not renew the license of any
 627 dentist or dental hygienist until the survey required under this
 628 section is completed and submitted by the licensee.

629 (4) (a) Beginning in 2012, the Board of Dentistry shall
 630 issue a nondisciplinary citation to any dentist or dental
 631 hygienist licensed under chapter 466, Florida Statutes, who
 632 fails to complete the survey within 90 days after the renewal of
 633 his or her license to practice as a dentist or dental hygienist.

634 (b) The citation must notify a dentist or dental hygienist
 635 who fails to complete the survey required by this section that
 636 his or her license will not be renewed for any subsequent
 637 license renewal unless the dentist or dental hygienist completes
 638 the survey.

639 (c) In conjunction with issuing the license renewal notice
 640 required by s. 456.038, Florida Statutes, the board shall notify
 641 each dentist or dental hygienist licensed under chapter 466,
 642 Florida Statutes, who fails to complete the survey that the
 643 survey must be completed before the subsequent license renewal.

644 Section 17. (1) The Department of Health shall serve as

645 the coordinating body for the purpose of collecting and
646 regularly updating and disseminating dental workforce data. The
647 department shall work with multiple stakeholders, including the
648 Florida Dental Association and the Florida Dental Hygiene
649 Association, to assess and share with all communities of
650 interest all data collected in a timely fashion.

651 (2) The Department of Health shall maintain a current
652 database to serve as a statewide source of data concerning the
653 dental workforce. The department, in conjunction with the Board
654 of Dentistry, shall also:

655 (a) Develop strategies to maximize federal and state
656 programs that provide incentives for dentists to practice in
657 shortage areas that are federally designated. Strategies shall
658 include programs such as the Florida Health Services Corps
659 established under s. 381.0302, Florida Statutes.

660 (b) Work in conjunction with an advisory body to address
661 matters relating to the state's dental workforce. The advisory
662 body shall provide input on developing questions for the dentist
663 workforce survey. The advisory body shall include, but need not
664 be limited to, the State Surgeon General or his or her designee,
665 the dean of each dental school accredited in the United States
666 and based in this state or his or her designee, a representative
667 from the Florida Dental Association, a representative from the
668 Florida Dental Hygiene Association, a representative from the
669 Board of Dentistry, and a dentist from each of the dental
670 specialties recognized by the American Dental Association's
671 Commission on Dental Accreditation. Members of the advisory body
672 shall serve without compensation.

673 (c) Act as a clearinghouse for collecting and
 674 disseminating information concerning the dental workforce.

675 (3) The Department of Health and the Board of Dentistry
 676 shall adopt rules necessary to administer this section.

677 Section 18. It is the intent of the Legislature that the
 678 Department of Health and the Board of Dentistry implement the
 679 provisions of sections 16 through 20 of this act within existing
 680 resources.

681 Section 19. Paragraph (t) of subsection (2) of section
 682 499.01, Florida Statutes, is amended to read:

683 499.01 Permits.—

684 (2) The following permits are established:

685 (t) Health care clinic establishment permit.—Effective
 686 January 1, 2009, a health care clinic establishment permit is
 687 required for the purchase of a prescription drug by a place of
 688 business at one general physical location that provides health
 689 care or veterinary services, which is owned and operated by a
 690 business entity that has been issued a federal employer tax
 691 identification number. For the purpose of this paragraph, the
 692 term "qualifying practitioner" means a licensed health care
 693 practitioner defined in s. 456.001, or a veterinarian licensed
 694 under chapter 474, who is authorized under the appropriate
 695 practice act to prescribe and administer a prescription drug.

696 1. An establishment must provide, as part of the
 697 application required under s. 499.012, designation of a
 698 qualifying practitioner who will be responsible for complying
 699 with all legal and regulatory requirements related to the
 700 purchase, recordkeeping, storage, and handling of the

701 prescription drugs. In addition, the designated qualifying
702 practitioner shall be the practitioner whose name, establishment
703 address, and license number is used on all distribution
704 documents for prescription drugs purchased or returned by the
705 health care clinic establishment. Upon initial appointment of a
706 qualifying practitioner, the qualifying practitioner and the
707 health care clinic establishment shall notify the department on
708 a form furnished by the department within 10 days after such
709 employment. In addition, the qualifying practitioner and health
710 care clinic establishment shall notify the department within 10
711 days after any subsequent change.

712 2. The health care clinic establishment must employ a
713 qualifying practitioner at each establishment.

714 3. In addition to the remedies and penalties provided in
715 this part, a violation of this chapter by the health care clinic
716 establishment or qualifying practitioner constitutes grounds for
717 discipline of the qualifying practitioner by the appropriate
718 regulatory board.

719 4. The purchase of prescription drugs by the health care
720 clinic establishment is prohibited during any period of time
721 when the establishment does not comply with this paragraph.

722 5. A health care clinic establishment permit is not a
723 pharmacy permit or otherwise subject to chapter 465. A health
724 care clinic establishment that meets the criteria of a modified
725 Class II institutional pharmacy under s. 465.019 is not eligible
726 to be permitted under this paragraph.

727 6. This paragraph does not apply to the purchase of a
728 prescription drug by a licensed practitioner under his or her

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729 license. A professional corporation or limited liability company
730 composed of dentists and operating as authorized in s. 466.0285
731 may pay for prescription drugs obtained by a practitioner
732 licensed under chapter 466, and the licensed practitioner is
733 deemed the purchaser and owner of the prescription drugs.

734 Section 20. Paragraph (a) of subsection (6) of section
735 624.91, Florida Statutes, is amended to read:

736 624.91 The Florida Healthy Kids Corporation Act.—

737 (6) BOARD OF DIRECTORS.—

738 (a) The Florida Healthy Kids Corporation shall operate
739 subject to the supervision and approval of a board of directors
740 chaired by the Chief Financial Officer or her or his designee,
741 and composed of 12 ~~11~~ other members selected for 3-year terms of
742 office as follows:

743 1. The Secretary of Health Care Administration, or his or
744 her designee.

745 2. One member appointed by the Commissioner of Education
746 from the Office of School Health Programs of the Florida
747 Department of Education.

748 3. One member appointed by the Chief Financial Officer
749 from among three members nominated by the Florida Pediatric
750 Society.

751 4. One member, appointed by the Governor, who represents
752 the Children's Medical Services Program.

753 5. One member appointed by the Chief Financial Officer
754 from among three members nominated by the Florida Hospital
755 Association.

756 6. One member, appointed by the Governor, who is an expert

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757 | on child health policy.

758 | 7. One member, appointed by the Chief Financial Officer,
759 | from among three members nominated by the Florida Academy of
760 | Family Physicians.

761 | 8. One member, appointed by the Governor, who represents
762 | the state Medicaid program.

763 | 9. One member, appointed by the Chief Financial Officer,
764 | from among three members nominated by the Florida Association of
765 | Counties.

766 | 10. The State Health Officer or her or his designee.

767 | 11. The Secretary of Children and Family Services, or his
768 | or her designee.

769 | 12. One member, appointed by the Governor, from among
770 | three members nominated by the Florida Dental Association.

771 | Section 21. This act shall take effect July 1, 2010.