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LEGISLATIVE ACTION

Senate

House

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Floor: WD

03/09/2012 05:46 PM

Senator Bogdanoff moved the following:

Senate Amendment (with title amendment)

Between lines 407 and 408

insert:

Section 10. Subsection (2) of section 400.1183, Florida Statutes, is amended to read:

400.1183 Resident grievance procedures.—

(2) Each nursing home facility shall maintain records of all grievances and a shall report, subject to agency inspection, ~~of to the agency at the time of relicensure~~ the total number of grievances handled ~~during the prior licensure period,~~ a categorization of the cases underlying the grievances, and the final disposition of the grievances.



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14 Section 11. Subsection (3) of section 400.142, Florida
15 Statutes, is amended to read:

16 400.142 Emergency medication kits; orders not to
17 resuscitate.—

18 (3) Facility staff may withhold or withdraw cardiopulmonary
19 resuscitation if presented with an order not to resuscitate
20 executed pursuant to s. 401.45. ~~The agency shall adopt rules~~
21 ~~providing for the implementation of such orders.~~ Facility staff
22 and facilities are ~~shall~~ not be subject to criminal prosecution
23 or civil liability, or ~~nor~~ be considered to have engaged in
24 negligent or unprofessional conduct, for withholding or
25 withdrawing cardiopulmonary resuscitation pursuant to such ~~an~~
26 ~~order and rules adopted by the agency.~~ The absence of an order
27 not to resuscitate executed pursuant to s. 401.45 does not
28 preclude a physician from withholding or withdrawing
29 cardiopulmonary resuscitation as otherwise permitted by law.

30 Section 12. Subsections (9) through (15) of section
31 400.147, Florida Statutes, are renumbered as subsections (8)
32 through (13), respectively, and present subsections (7), (8),
33 and (10) of that section are amended to read:

34 400.147 Internal risk management and quality assurance
35 program.—

36 (7) The nursing home facility shall initiate an
37 investigation ~~and shall notify the agency~~ within 1 business day
38 after the risk manager or his or her designee has received a
39 report pursuant to paragraph (1)(d). The facility must complete
40 the investigation and submit a report to the agency within 15
41 calendar days after the adverse incident occurred. ~~The~~
42 ~~notification must be made in writing and be provided~~



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43 ~~electronically, by facsimile device or overnight mail delivery.~~
44 The agency shall develop a form for the report which
45 ~~notification~~ must include the name of the risk manager,
46 information regarding the identity of the affected resident, the
47 type of adverse incident, the initiation of an investigation by
48 the facility, and whether the events causing or resulting in the
49 adverse incident represent a potential risk to any other
50 resident. The report ~~notification~~ is confidential as provided by
51 law and is not discoverable or admissible in any civil or
52 administrative action, except in disciplinary proceedings by the
53 agency or the appropriate regulatory board. The agency may
54 investigate, as it deems appropriate, any such incident and
55 prescribe measures that must or may be taken in response to the
56 incident. The agency shall review each report ~~incident~~ and
57 determine whether it potentially involved conduct by the health
58 care professional who is subject to disciplinary action, in
59 which case the provisions of s. 456.073 shall apply.

60 ~~(8)(a) Each facility shall complete the investigation and~~
61 ~~submit an adverse incident report to the agency for each adverse~~
62 ~~incident within 15 calendar days after its occurrence. If, after~~
63 ~~a complete investigation, the risk manager determines that the~~
64 ~~incident was not an adverse incident as defined in subsection~~
65 ~~(5), the facility shall include this information in the report.~~
66 ~~The agency shall develop a form for reporting this information.~~

67 ~~(b) The information reported to the agency pursuant to~~
68 ~~paragraph (a) which relates to persons licensed under chapter~~
69 ~~458, chapter 459, chapter 461, or chapter 466 shall be reviewed~~
70 ~~by the agency. The agency shall determine whether any of the~~
71 ~~incidents potentially involved conduct by a health care~~



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72 ~~professional who is subject to disciplinary action, in which~~
73 ~~case the provisions of s. 456.073 shall apply.~~

74 ~~(c) The report submitted to the agency must also contain~~
75 ~~the name of the risk manager of the facility.~~

76 ~~(d) The adverse incident report is confidential as provided~~
77 ~~by law and is not discoverable or admissible in any civil or~~
78 ~~administrative action, except in disciplinary proceedings by the~~
79 ~~agency or the appropriate regulatory board.~~

80 ~~(10) By the 10th of each month, each facility subject to~~
81 ~~this section shall report any notice received pursuant to s.~~
82 ~~400.0233(2) and each initial complaint that was filed with the~~
83 ~~clerk of the court and served on the facility during the~~
84 ~~previous month by a resident or a resident's family member,~~
85 ~~guardian, conservator, or personal legal representative. The~~
86 ~~report must include the name of the resident, the resident's~~
87 ~~date of birth and social security number, the Medicaid~~
88 ~~identification number for Medicaid-eligible persons, the date or~~
89 ~~dates of the incident leading to the claim or dates of~~
90 ~~residency, if applicable, and the type of injury or violation of~~
91 ~~rights alleged to have occurred. Each facility shall also submit~~
92 ~~a copy of the notices received pursuant to s. 400.0233(2) and~~
93 ~~complaints filed with the clerk of the court. This report is~~
94 ~~confidential as provided by law and is not discoverable or~~
95 ~~admissible in any civil or administrative action, except in such~~
96 ~~actions brought by the agency to enforce the provisions of this~~
97 ~~part.~~

98 Section 13. Subsection (5) of section 400.23, Florida
99 Statutes, is amended to read:

100 400.23 Rules; evaluation and deficiencies; licensure



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101 status.-

102 (5) The agency, in collaboration with the Division of
103 Children's Medical Services of the Department of Health, must,
104 ~~no later than December 31, 1993,~~ adopt rules for:

105 (a) Minimum standards of care for persons under 21 years of
106 age who reside in nursing home facilities. ~~The rules must~~
107 ~~include a methodology for reviewing a nursing home facility~~
108 ~~under ss. 408.031-408.045 which serves only persons under 21~~
109 ~~years of age.~~ A facility may be exempted ~~exempt~~ from these
110 standards for specific persons between 18 and 21 years of age,
111 if the person's physician agrees that minimum standards of care
112 based on age are not necessary.

113 (b) Minimum staffing requirements for persons under 21
114 years of age who reside in nursing home facilities, which apply
115 in lieu of the requirements contained in subsection (3).

116 1. For persons under 21 years of age who require skilled
117 care:

118 a. A minimum combined average of 3.9 hours of direct care
119 per resident per day must be provided by licensed nurses,
120 respiratory therapists, respiratory care practitioners, and
121 certified nursing assistants.

122 b. A minimum licensed nursing staffing of 1.0 hour of
123 direct care per resident per day must be provided.

124 c. No more than 1.5 hours of certified nursing assistant
125 care per resident per day may be counted in determining the
126 minimum direct care hours required.

127 d. One registered nurse must be on duty on the site 24
128 hours per day on the unit where children reside.

129 2. For persons under 21 years of age who are medically



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130 fragile:

131 a. A minimum combined average of 5.0 hours of direct care
132 per resident per day must be provided by licensed nurses,
133 respiratory therapists, respiratory care practitioners, and
134 certified nursing assistants.

135 b. A minimum licensed nursing staffing of 1.7 hours of
136 direct care per resident per day must be provided.

137 c. No more than 1.5 hours of certified nursing assistant
138 care per resident per day may be counted in determining the
139 minimum direct care hours required.

140 d. One registered nurse must be on duty on the site 24
141 hours per day on the unit where children reside.

142 Section 14. Subsection (1) of section 400.275, Florida
143 Statutes, is amended to read:

144 400.275 Agency duties.—

145 (1) ~~The agency shall ensure that each newly hired nursing~~
146 ~~home surveyor, as a part of basic training, is assigned full-~~
147 ~~time to a licensed nursing home for at least 2 days within a 7-~~
148 ~~day period to observe facility operations outside of the survey~~
149 ~~process before the surveyor begins survey responsibilities. Such~~
150 ~~observations may not be the sole basis of a deficiency citation~~
151 ~~against the facility.~~ The agency may not assign an individual to
152 be a member of a survey team for purposes of a survey,
153 evaluation, or consultation visit at a nursing home facility in
154 which the surveyor was an employee within the preceding 2 ~~5~~
155 years.

156 Section 15. For the purpose of incorporating the amendment
157 made by this act to section 400.509, Florida Statutes, in a
158 reference thereto, paragraph (a) of subsection (6) of section



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159 400.506, Florida Statutes, is reenacted, and subsection (18) is
160 added to that section, to read:

161 400.506 Licensure of nurse registries; requirements;
162 penalties.—

163 (6) (a) A nurse registry may refer for contract in private
164 residences registered nurses and licensed practical nurses
165 registered and licensed under part I of chapter 464, certified
166 nursing assistants certified under part II of chapter 464, home
167 health aides who present documented proof of successful
168 completion of the training required by rule of the agency, and
169 companions or homemakers for the purposes of providing those
170 services authorized under s. 400.509(1). A licensed nurse
171 registry shall ensure that each certified nursing assistant
172 referred for contract by the nurse registry and each home health
173 aide referred for contract by the nurse registry is adequately
174 trained to perform the tasks of a home health aide in the home
175 setting. Each person referred by a nurse registry must provide
176 current documentation that he or she is free from communicable
177 diseases.

178 (18) An administrator may manage only one nurse registry,
179 except that an administrator may manage up to five registries if
180 all five registries have identical controlling interests as
181 defined in s. 408.803 and are located within one agency
182 geographic service area or within an immediately contiguous
183 county. An administrator shall designate, in writing, for each
184 licensed entity, a qualified alternate administrator to serve
185 during the administrator's absence.

186 Section 16. Subsection (1) of section 400.509, Florida
187 Statutes, is amended to read:



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188 400.509 Registration of particular service providers exempt
189 from licensure; certificate of registration; regulation of
190 registrants.—

191 (1) Any organization that provides companion services or
192 homemaker services and does not provide a home health service to
193 a person is exempt from licensure under this part. However, any
194 organization that provides companion services or homemaker
195 services must register with the agency. An organization under
196 contract with the Agency for Persons with Disabilities which
197 provides companion services only for persons with a
198 developmental disability, as defined in s. 393.063, is exempt
199 from registration.

200 Section 17. Paragraph (i) of subsection (1) and subsection
201 (4) of section 400.606, Florida Statutes, are amended to read:

202 400.606 License; application; renewal; conditional license
203 or permit; certificate of need.—

204 (1) In addition to the requirements of part II of chapter
205 408, the initial application and change of ownership application
206 must be accompanied by a plan for the delivery of home,
207 residential, and homelike inpatient hospice services to
208 terminally ill persons and their families. Such plan must
209 contain, but need not be limited to:

210 ~~(i) The projected annual operating cost of the hospice.~~

211
212 If the applicant is an existing licensed health care provider,
213 the application must be accompanied by a copy of the most recent
214 profit-loss statement and, if applicable, the most recent
215 licensure inspection report.

216 (4) A freestanding hospice facility that is primarily



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217 engaged in providing inpatient and related services and that is
218 not otherwise licensed as a health care facility shall ~~be~~
219 ~~required to~~ obtain a certificate of need. However, a
220 freestanding hospice facility that has ~~with~~ six or fewer beds is
221 ~~shall~~ not ~~be~~ required to comply with institutional standards
222 such as, but not limited to, standards requiring sprinkler
223 systems, emergency electrical systems, or special lavatory
224 devices.

225 Section 18. Section 400.915, Florida Statutes, is amended
226 to read:

227 400.915 Construction and renovation; requirements.—The
228 requirements for the construction or renovation of a PPEC center
229 shall comply with:

230 (1) The provisions of chapter 553, which pertain to
231 building construction standards, including plumbing, electrical
232 code, glass, manufactured buildings, accessibility for the
233 physically disabled;

234 (2) The provisions of s. 633.022 and applicable rules
235 pertaining to physical minimum standards for nonresidential
236 child care physical facilities in rule 10M-12.003, Florida
237 Administrative Code, Child Care Standards; and

238 (3) The standards or rules adopted pursuant to this part
239 and part II of chapter 408.

240 Section 19. Section 400.931, Florida Statutes, is amended
241 to read:

242 400.931 Application for license; ~~fee; provisional license;~~
243 ~~temporary permit.~~—

244 (1) In addition to the requirements of part II of chapter
245 408, the applicant must file with the application satisfactory



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246 proof that the home medical equipment provider is in compliance
247 with this part and applicable rules, including:

248 (a) A report, by category, of the equipment to be provided,
249 indicating those offered either directly by the applicant or
250 through contractual arrangements with existing providers.

251 Categories of equipment include:

- 252 1. Respiratory modalities.
- 253 2. Ambulation aids.
- 254 3. Mobility aids.
- 255 4. Sickroom setup.
- 256 5. Disposables.

257 (b) A report, by category, of the services to be provided,
258 indicating those offered either directly by the applicant or
259 through contractual arrangements with existing providers.

260 Categories of services include:

- 261 1. Intake.
- 262 2. Equipment selection.
- 263 3. Delivery.
- 264 4. Setup and installation.
- 265 5. Patient training.
- 266 6. Ongoing service and maintenance.
- 267 7. Retrieval.

268 (c) A listing of those with whom the applicant contracts,
269 both the providers the applicant uses to provide equipment or
270 services to its consumers and the providers for whom the
271 applicant provides services or equipment.

272 (2) An applicant for initial licensure, change of
273 ownership, or license renewal to operate a licensed home medical
274 equipment provider at a location outside the state must submit



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275 documentation of accreditation or an application for
276 accreditation from an accrediting organization that is
277 recognized by the agency. An applicant that has applied for
278 accreditation must provide proof of accreditation that is not
279 conditional or provisional within 120 days after the date the
280 agency receives the application for licensure or the application
281 shall be withdrawn from further consideration. Such
282 accreditation must be maintained by the home medical equipment
283 provider in order to maintain licensure. ~~As an alternative to~~
284 ~~submitting proof of financial ability to operate as required in~~
285 ~~s. 408.810(8), the applicant may submit a \$50,000 surety bond to~~
286 ~~the agency.~~

287 (3) As specified in part II of chapter 408, the home
288 medical equipment provider must also obtain and maintain
289 professional and commercial liability insurance. Proof of
290 liability insurance, as defined in s. 624.605, must be submitted
291 with the application. The agency shall set the required amounts
292 of liability insurance by rule, but the required amount must not
293 be less than \$250,000 per claim. In the case of contracted
294 services, it is required that the contractor have liability
295 insurance not less than \$250,000 per claim.

296 (4) When a change of the general manager of a home medical
297 equipment provider occurs, the licensee must notify the agency
298 of the change within 45 days.

299 (5) In accordance with s. 408.805, an applicant or a
300 licensee shall pay a fee for each license application submitted
301 under this part, part II of chapter 408, and applicable rules.
302 The amount of the fee shall be established by rule and may not
303 exceed \$300 per biennium. The agency shall set the fees in an



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304 amount that is sufficient to cover its costs in carrying out its
305 responsibilities under this part. However, state, county, or
306 municipal governments applying for licenses under this part are
307 exempt from the payment of license fees.

308 (6) An applicant for initial licensure, renewal, or change
309 of ownership shall also pay an inspection fee not to exceed
310 \$400, which shall be paid by all applicants except those not
311 subject to licensure inspection by the agency as described in s.
312 400.933.

313 Section 20. Paragraph (a) of subsection (2) of section
314 408.033, Florida Statutes, is amended to read:

315 408.033 Local and state health planning.—

316 (2) FUNDING.—

317 (a) The Legislature intends that the cost of local health
318 councils be borne by assessments on selected health care
319 facilities subject to facility licensure by the Agency for
320 Health Care Administration, including abortion clinics, assisted
321 living facilities, ambulatory surgical centers, birthing
322 centers, clinical laboratories except community nonprofit blood
323 banks and clinical laboratories operated by practitioners for
324 exclusive use regulated under s. 483.035, home health agencies,
325 hospices, hospitals, intermediate care facilities for the
326 developmentally disabled, nursing homes, health care clinics,
327 and multiphasic testing centers and by assessments on
328 organizations subject to certification by the agency pursuant to
329 chapter 641, part III, including health maintenance
330 organizations and prepaid health clinics. Fees assessed may be
331 collected prospectively at the time of licensure renewal and
332 prorated for the licensure period.



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333 Section 21. Subsection (2) of section 408.034, Florida
334 Statutes, is amended to read:

335 408.034 Duties and responsibilities of agency; rules.—

336 (2) In the exercise of its authority to issue licenses to
337 health care facilities and health service providers, as provided
338 under chapters 393 and 395 and parts II, ~~and~~ IV, and VIII of
339 chapter 400, the agency may not issue a license to any health
340 care facility or health service provider that fails to receive a
341 certificate of need or an exemption for the licensed facility or
342 service.

343 Section 22. Section 408.10, Florida Statutes, is amended to
344 read:

345 408.10 Consumer complaints.—The agency shall:

346 ~~(1)~~ publish and make available to the public a toll-free
347 telephone number for the purpose of handling consumer complaints
348 and shall serve as a liaison between consumer entities and other
349 private entities and governmental entities for the disposition
350 of problems identified by consumers of health care.

351 ~~(2) Be empowered to investigate consumer complaints~~
352 ~~relating to problems with health care facilities' billing~~
353 ~~practices and issue reports to be made public in any cases where~~
354 ~~the agency determines the health care facility has engaged in~~
355 ~~billing practices which are unreasonable and unfair to the~~
356 ~~consumer.~~

357 Section 23. Subsection (11) of section 408.802, Florida
358 Statutes, is repealed.

359 Section 24. Subsection (3) is added to section 408.804,
360 Florida Statutes, to read:

361 408.804 License required; display.—



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362 (3) Any person who knowingly alters, defaces, or falsifies
363 a license certificate issued by the agency, or causes or
364 procures any person to commit such an offense, commits a
365 misdemeanor of the second degree, punishable as provided in s.
366 775.082 or s. 775.083. Any licensee or provider who displays an
367 altered, defaced, or falsified license certificate is subject to
368 the penalties set forth in s. 408.815 and an administrative fine
369 of \$1,000 for each day of illegal display.

370 Section 25. Paragraph (d) of subsection (2) of section
371 408.806, Florida Statutes, is amended, and paragraph (e) is
372 added to that subsection, to read:

373 408.806 License application process.-

374 (2)

375 ~~(d) The agency shall notify the licensee by mail or~~
376 ~~electronically at least 90 days before the expiration of a~~
377 ~~license that a renewal license is necessary to continue~~
378 ~~operation.~~ The licensee's failure to timely file submit a
379 renewal application and license application fee with the agency
380 shall result in a \$50 per day late fee charged to the licensee
381 by the agency; however, the aggregate amount of the late fee may
382 not exceed 50 percent of the licensure fee or \$500, whichever is
383 less. The agency shall provide a courtesy notice to the licensee
384 by United States mail, electronically, or by any other manner at
385 its address of record or mailing address, if provided, at least
386 90 days before the expiration of a license. This courtesy notice
387 must inform the licensee of the expiration of the license. If
388 the agency does not provide the courtesy notice or the licensee
389 does not receive the courtesy notice, the licensee continues to
390 be legally obligated to timely file the renewal application and



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391 license application fee with the agency and is not excused from
392 the payment of a late fee. If an application is received after
393 the required filing date and exhibits a hand-canceled postmark
394 obtained from a United States post office dated on or before the
395 required filing date, no fine will be levied.

396 (e) The applicant must pay the late fee before a late
397 application is considered complete and failure to pay the late
398 fee is considered an omission from the application for licensure
399 pursuant to paragraph (3) (b).

400 Section 26. Paragraph (b) of subsection (1) of section
401 408.8065, Florida Statutes, is amended to read:

402 408.8065 Additional licensure requirements for home health
403 agencies, home medical equipment providers, and health care
404 clinics.—

405 (1) An applicant for initial licensure, or initial
406 licensure due to a change of ownership, as a home health agency,
407 home medical equipment provider, or health care clinic shall:

408 (b) Submit projected ~~pro-forma~~ financial statements,
409 including a balance sheet, income and expense statement, and a
410 statement of cash flows for the first 2 years of operation which
411 provide evidence that the applicant has sufficient assets,
412 credit, and projected revenues to cover liabilities and
413 expenses.

414
415 All documents required under this subsection must be prepared in
416 accordance with generally accepted accounting principles and may
417 be in a compilation form. The financial statements must be
418 signed by a certified public accountant.

419 Section 27. Subsection (9) of section 408.810, Florida



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420 Statutes, is amended to read:

421 408.810 Minimum licensure requirements.—In addition to the
422 licensure requirements specified in this part, authorizing
423 statutes, and applicable rules, each applicant and licensee must
424 comply with the requirements of this section in order to obtain
425 and maintain a license.

426 (9) A controlling interest may not withhold from the agency
427 any evidence of financial instability, including, but not
428 limited to, checks returned due to insufficient funds,
429 delinquent accounts, nonpayment of withholding taxes, unpaid
430 utility expenses, nonpayment for essential services, or adverse
431 court action concerning the financial viability of the provider
432 or any other provider licensed under this part that is under the
433 control of the controlling interest. A controlling interest
434 shall notify the agency within 10 days after a court action to
435 initiate bankruptcy, foreclosure, or eviction proceedings
436 concerning the provider in which the controlling interest is a
437 petitioner or defendant. Any person who violates this subsection
438 commits a misdemeanor of the second degree, punishable as
439 provided in s. 775.082 or s. 775.083. Each day of continuing
440 violation is a separate offense.

441 Section 28. Subsection (3) is added to section 408.813,
442 Florida Statutes, to read:

443 408.813 Administrative fines; violations.—As a penalty for
444 any violation of this part, authorizing statutes, or applicable
445 rules, the agency may impose an administrative fine.

446 (3) The agency may impose an administrative fine for a
447 violation that is not designated as a class I, class II, class
448 III, or class IV violation. Unless otherwise specified by law,



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449 the amount of the fine may not exceed \$500 for each violation.

450 Unclassified violations include:

451 (a) Violating any term or condition of a license.

452 (b) Violating any provision of this part, authorizing
453 statutes, or applicable rules.

454 (c) Exceeding licensed capacity.

455 (d) Providing services beyond the scope of the license.

456 (e) Violating a moratorium imposed pursuant to s. 408.814.

457

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

459 And the title is amended as follows:

460 Delete line 42

461 and insert:

462 years of full-time practice in pain medicine; amending
463 s. 400.1183, F.S.; revising requirements relating to
464 nursing home facility grievance reports; amending s.
465 400.142, F.S.; deleting the agency's authority to
466 adopt rules relating to orders not to resuscitate;
467 amending s. 400.147, F.S.; revising provisions
468 relating to adverse incident reports; deleting certain
469 reporting requirements; amending s. 400.23, F.S.;
470 specifying the content of rules relating to nursing
471 home facility staffing requirements for residents
472 under 21 years of age; amending s. 400.275, F.S.;
473 revising agency duties with regard to training nursing
474 home surveyor teams; revising requirements for team
475 members; reenacting s. 400.506(6)(a), F.S., relating
476 to licensure of nurse registries, respectively, to
477 incorporate the amendment made to s. 400.509, F.S., in



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478 references thereto; authorizing an administrator to
479 manage up to five nurse registries under certain
480 circumstances; requiring an administrator to
481 designate, in writing, for each licensed entity, a
482 qualified alternate administrator to serve during the
483 administrator's absence; amending s. 400.509, F.S.;
484 providing that organizations that provide companion or
485 homemaker services only to persons with developmental
486 disabilities, under contract with the Agency for
487 Persons with Disabilities, are exempt from
488 registration with the Agency for Health Care
489 Administration; amending s. 400.606, F.S.; revising
490 the content requirements of the plan accompanying an
491 initial or change-of-ownership application for
492 licensure of a hospice; revising requirements relating
493 to certificates of need for certain hospice
494 facilities; amending s. 400.915, F.S.; correcting an
495 obsolete cross-reference to administrative rules;
496 amending s. 400.931, F.S.; requiring each applicant
497 for initial licensure, change of ownership, or license
498 renewal to operate a licensed home medical equipment
499 provider at a location outside the state to submit
500 documentation of accreditation, or an application for
501 accreditation, from an accrediting organization that
502 is recognized by the Agency for Health Care
503 Administration; requiring an applicant that has
504 applied for accreditation to provide proof of
505 accreditation within a specified time; deleting a
506 requirement that an applicant for a home medical



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507 equipment provider license submit a surety bond to the
508 agency; amending s. 408.033, F.S.; providing that fees
509 assessed on selected health care facilities and
510 organizations may be collected prospectively at the
511 time of licensure renewal and prorated for the
512 licensing period; amending s. 408.034, F.S.; revising
513 agency authority relating to licensing of intermediate
514 care facilities for the developmentally disabled;
515 amending s. 408.10, F.S.; removing agency authority to
516 investigate certain consumer complaints; repealing s.
517 408.802(11), F.S., removing applicability of part II
518 of ch. 408, F.S., relating to general licensure
519 requirements, to private review agents; amending s.
520 408.804, F.S.; providing penalties for altering,
521 defacing, or falsifying a license certificate issued
522 by the agency or displaying such an altered, defaced,
523 or falsified certificate; amending s. 408.806, F.S.;
524 revising agency responsibilities for notification of
525 licensees of impending expiration of a license;
526 requiring payment of a late fee for a license
527 application to be considered complete under certain
528 circumstances; amending s. 408.8065, F.S.; revising
529 the requirements for becoming licensed as a home
530 health agency, home medical equipment provider, or
531 health care clinic; amending s. 408.810, F.S.;
532 requiring that the controlling interest of a health
533 care licensee notify the agency of certain court
534 proceedings; providing a penalty; amending s. 408.813,
535 F.S.; authorizing the agency to impose fines for



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unclassified violations of part II of ch. 408, F.S.;
amending