2012

1	A bill to be entitled
2	An act relating to nursing home facilities; amending
3	s. 400.021, F.S.; revising definitions of the terms
4	"geriatric outpatient clinic" and "resident care plan"
5	and defining the term "therapeutic spa services";
6	amending s. 400.141, F.S.; revising provisions
7	relating to facilities eligible to share programming
8	and staff; deleting requirements for the submission of
9	certain reports to the Agency for Health Care
10	Administration; creating s. 400.172, F.S.; providing
11	requirements for a nursing home facility operated by a
12	licensee that provides respite care services;
13	providing for rights of persons receiving respite care
14	in nursing home facilities; requiring a prospective
15	respite care recipient to provide certain information
16	to the nursing home facility; amending s. 400.141,
17	F.S.; revising provisions relating to other needed
18	services provided by licensed nursing home facilities,
19	including respite care, adult day, and therapeutic spa
20	services; amending s. 408.0435, F.S.; revising the
21	period of time allotted for approval of the nursing
22	home moratorium on a certificate of need for
23	additional community nursing home beds; amending s.
24	429.905, F.S.; defining the term "day" for purposes of
25	day care services provided to adults who are not
26	residents; amending s. 651.118, F.S.; providing a
27	funding limitation on sheltered nursing home beds used
28	to provide assisted living, rather than extended
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29 congregate care services; authorizing certain sharing 30 of areas, services, and staff between such sheltered 31 beds and nursing home beds in those facilities; 32 providing an effective date. 33 34 WHEREAS, the Legislature recognizes that the use of nursing 35 homes has decreased over the past decade because of alternatives 36 that are now available to consumers, and 37 WHEREAS, nursing homes continue to be a valuable resource 38 and should be used to the fullest extent possible to provide 39 traditional nursing care to the most impaired persons as well as providing services to frail or disabled persons who choose to 40 41 remain in the community or who may need a less skilled level of 42 care, and 43 WHEREAS, regulatory requirements should be flexible enough 44 to allow nursing homes to diversify but continue to include 45 sufficient protections to ensure the best care possible to consumers, NOW, THEREFORE, 46 47 48 Be It Enacted by the Legislature of the State of Florida: 49 50 Section 1. Subsections (8) and (16) of section 400.021, Florida Statutes, are amended, and subsection (19) is added to 51 that section, to read: 52 53 400.021 Definitions.-When used in this part, unless the 54 context otherwise requires, the term: 55 (8)"Geriatric outpatient clinic" means a site for providing outpatient health care to persons 60 years of age or 56 Page 2 of 10

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57 older, which is staffed by a registered nurse, or a physician 58 assistant, or a licensed practical nurse under the direct 59 <u>supervision of a registered nurse, advanced registered nurse</u> 60 practitioner, physician assistant, or physician.

61 "Resident care plan" means a written plan developed, (16)62 maintained, and reviewed not less than quarterly by a registered 63 nurse, with participation from other facility staff and the 64 resident or his or her designee or legal representative, which 65 includes a comprehensive assessment of the needs of an individual resident; the type and frequency of services required 66 to provide the necessary care for the resident to attain or 67 68 maintain the highest practicable physical, mental, and psychosocial well-being; a listing of services provided within 69 70 or outside the facility to meet those needs; and an explanation 71 of service goals. The resident care plan must be signed by the 72 director of nursing or another registered nurse employed by the 73 facility to whom institutional responsibilities have been 74 delegated and by the resident, the resident's designee, or the 75 resident's legal representative. The facility may not use an 76 agency or temporary registered nurse to satisfy the foregoing 77 requirement and must document the institutional responsibilit 78 that have been delegated to the registered nurse.

79 (19) "Therapeutic spa services" means bathing, nail, and 80 <u>hair care services and other similar services related to</u> 81 <u>personal hygiene.</u> 82 Section 2. Paragraph (g) of subsection (1) of section 83 400.141, Florida Statutes, is amended to read: 84 400.141 Administration and management of nursing home

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85 facilities.-

86 (1) Every licensed facility shall comply with all87 applicable standards and rules of the agency and shall:

88 If the facility has a standard license or is a Gold (q) 89 Seal facility, exceeds the minimum required hours of licensed 90 nursing and certified nursing assistant direct care per resident 91 per day, and is part of a continuing care facility licensed 92 under chapter 651 or a retirement community that offers other 93 services pursuant to part III of this chapter or part I or part 94 III of chapter 429 on a single campus, be allowed to share 95 programming and staff. At the time of inspection and in the 96 semiannual report required pursuant to paragraph (o), a continuing care facility or retirement community that uses this 97 98 option must demonstrate through staffing records that minimum staffing requirements for the facility were met. Licensed nurses 99 100 and certified nursing assistants who work in the nursing home 101 facility may be used to provide services elsewhere on campus if 102 the facility exceeds the minimum number of direct care hours 103 required per resident per day and the total number of residents 104 receiving direct care services from a licensed nurse or a 105 certified nursing assistant does not cause the facility to 106 violate the staffing ratios required under s. 400.23(3)(a). 107 Compliance with the minimum staffing ratios must shall be based 108 on the total number of residents receiving direct care services, 109 regardless of where they reside on campus. If the facility receives a conditional license, it may not share staff until the 110 111 conditional license status ends. This paragraph does not restrict the agency's authority under federal or state law to 112 Page 4 of 10

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HB 787 2012 113 require additional staff if a facility is cited for deficiencies 114 in care which are caused by an insufficient number of certified 115 nursing assistants or licensed nurses. The agency may adopt 116 rules for the documentation necessary to determine compliance 117 with this provision. Section 3. Section 400.172, Florida Statutes, is created 118 119 to read: 120 400.172 Respite care provided in nursing home facilities.-121 (1) For each person admitted for respite care as 122 authorized under s. 400.141(1)(f), a nursing home facility 123 operated by a licensee must: 124 (a) Have a written abbreviated plan of care that, at a minimum, includes nutritional requirements, medication orders, 125 126 physician orders, nursing assessments, and dietary preferences. 127 The nursing or physician assessments may take the place of all 128 other assessments required for full-time residents. 129 (b) Have a contract that, at a minimum, specifies the 130 services to be provided to a resident receiving respite care, 131 including charges for services, activities, equipment, emergency 132 medical services, and the administration of medications. If 133 multiple admissions for a single person for respite care are 134 anticipated, the original contract is valid for 1 year after the 135 date the contract is executed. 136 (c) Ensure that each resident is released to his or her 137 caregiver or an individual designated in writing by the 138 caregiver. 139 (2) A person admitted under the respite care program 140 shall: Page 5 of 10

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141 (a) Be exempt from department rules relating to the 142 discharge planning process. 143 (b) Be covered by the residents' rights specified in s. 144 400.022(1)(a) - (o) and (r) - (t). Funds or property of the resident 145 are not be considered trust funds subject to the requirements of 146 s. 400.022(1)(h) until the resident has been in the facility for 147 more than 14 consecutive days. 148 (c) Be allowed to use his or her personal medications during the respite stay if permitted by facility policy. The 149 150 facility must obtain a physician's order for the medications. 151 The caregiver may provide information regarding the medications 152 as part of the nursing assessment and that information must 153 agree with the physician's order. Medications shall be released 154 with the resident upon discharge in accordance with current 155 physician's orders. 156 (d) Be entitled to reside in the facility for a total of 157 60 days within a contract year or for a total of 60 days within 158 a calendar year if the contract is for less than 12 months. 159 However, each single stay may not exceed 14 days. If a stay 160 exceeds 14 consecutive days, the facility must comply with all 161 assessment and care planning requirements applicable to nursing 162 home residents. 163 (e) Reside in a licensed nursing home bed. 164 (3) A prospective respite care resident must provide 165 medical information from a physician, physician assistant, or 166 nurse practitioner and any other information provided by the 167 primary caregiver required by the facility before or when the 168 person is admitted to receive respite care. The medical

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169 information must include a physician's order for respite care 170 and proof of a physical examination by a licensed physician, 171 physician assistant, or nurse practitioner. The physician's 172 order and physical examination may be used to provide 173 intermittent respite care for up to 12 months after the date the 174 order is written. 175 (4) The facility shall assume the duties of the primary 176 caregiver. To ensure continuity of care and services, the 177 resident may retain his or her personal physician and shall have access to medically necessary services such as physical therapy, 178 occupational therapy, or speech therapy, as needed. The facility 179 180 shall arrange for transportation of the resident to these 181 services, if necessary. 182 Section 4. Paragraph (f) of subsection (1) of section 183 400.141, Florida Statutes, is amended to read: 184 400.141 Administration and management of nursing home facilities.-185 186 Every licensed facility shall comply with all (1) 187 applicable standards and rules of the agency and shall: 188 Be allowed and encouraged by the agency to provide (f) 189 other needed services under certain conditions. If the facility 190 has a standard licensure status, and has had no class I or class 191 II deficiencies during the past 2 years or has been awarded a 192 Gold Seal under the program established in s. 400.235, it may be 193 encouraged by the agency to provide services, including, but not limited to, respite, therapeutic spa, and adult day services to 194 nonresidents, which enable individuals to move in and out of the 195 196 facility. A facility is not subject to any additional licensure Page 7 of 10

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197 requirements for providing these services. Respite care may be 198 offered to persons in need of short-term or temporary nursing 199 home services. Respite care must be provided in accordance with 200 this part and rules adopted by the agency. However, the agency 201 shall, by rule, adopt modified requirements for resident 202 assessment, resident care plans, resident contracts, physician 203 orders, and other provisions, as appropriate, for short-term or 204 temporary nursing home services. Providers of adult day services 205 must comply with the requirements of s. 429.905(2). The agency shall allow for shared programming and staff in a facility which 206 207 meets minimum standards and offers services pursuant to this 208 paragraph, but, if the facility is cited for deficiencies in 209 patient care, may require additional staff and programs 210 appropriate to the needs of service recipients. A person who 211 receives respite care may not be counted as a resident of the 212 facility for purposes of the facility's licensed capacity unless 213 that person receives 24-hour respite care. A person receiving 214 either respite care for 24 hours or longer or adult day services 215 must be included when calculating minimum staffing for the 216 facility. Any costs and revenues generated by a nursing home 217 facility from nonresidential programs or services shall be 218 excluded from the calculations of Medicaid per diems for nursing 219 home institutional care reimbursement. 220 Section 5. Subsection (1) of section 408.0435, Florida 221 Statutes, is amended to read: 408.0435 Moratorium on nursing home certificates of need.-222

(1) Notwithstanding the establishment of need as provided
for in this chapter, a certificate of need for additional

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225 community nursing home beds may not be approved by the agency 226 until Medicaid managed care is implemented statewide pursuant to 227 ss. 409.961-409.985 or October 1, 2016, whichever is <u>later</u> 228 earlier.

229 Section 6. Subsection (2) of section 429.905, Florida 230 Statutes, is amended to read:

231 429.905 Exemptions; monitoring of adult day care center 232 programs colocated with assisted living facilities or licensed 233 nursing home facilities.-

A licensed assisted living facility, a licensed 234 (2) 235 hospital, or a licensed nursing home facility may provide 236 services during the day which include, but are not limited to, 237 social, health, therapeutic, recreational, nutritional, and 238 respite services, to adults who are not residents. Such a 239 facility need not be licensed as an adult day care center; 240 however, the agency must monitor the facility during the regular 241 inspection and at least biennially to ensure adequate space and 242 sufficient staff. If an assisted living facility, a hospital, or 243 a nursing home holds itself out to the public as an adult day 244 care center, it must be licensed as such and meet all standards 245 prescribed by statute and rule. For the purpose of this 246 subsection, the term "day" means any portion of a 24-hour day.

247 Section 7. Subsection (8) of section 651.118, Florida 248 Statutes, is amended to read:

249 651.118 Agency for Health Care Administration;
 250 certificates of need; sheltered beds; community beds.-

(8) A provider may petition the Agency for Health CareAdministration to use a designated number of sheltered nursing

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253 home beds to provide assisted living extended congregate care as 254 defined in s. 429.02 if the beds are in a distinct area of the 255 nursing home which can be adapted to meet the requirements for 256 an assisted living facility as defined in s. 429.02 extended 257 congregate care. The provider may subsequently use such beds as 258 sheltered beds after notifying the agency of the intended 259 change. Any sheltered beds used to provide assisted living 260 extended congregate care pursuant to this subsection may not 261 qualify for funding under the Medicaid waiver. Any sheltered 262 beds used to provide assisted living extended congregate care 263 pursuant to this subsection may share common areas, services, 264 and staff with beds designated for nursing home care, provided 265 that all of the beds are under common ownership. For the 266 purposes of this subsection, fire and life safety codes 267 applicable to nursing home facilities shall apply.

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Section 8. This act shall take effect July 1, 2012.

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