

By the Committees on Appropriations; Health Policy; and Children, Families, and Elder Affairs

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1 A bill to be entitled
2 An act relating to assisted living facilities;
3 amending s. 394.4574, F.S.; providing that Medicaid
4 managed care plans are responsible for enrolled mental
5 health residents; providing that managing entities
6 under contract with the Department of Children and
7 Families are responsible for mental health residents
8 who are not enrolled with a Medicaid managed care
9 plan; deleting a provision to conform to changes made
10 by the act; requiring that the community living
11 support plan be completed and provided to the
12 administrator of a facility upon the mental health
13 resident's admission; requiring the community living
14 support plan to be updated when there is a significant
15 change to the mental health resident's behavioral
16 health; requiring the case manager assigned to a
17 mental health resident of an assisted living facility
18 that holds a limited mental health license to keep a
19 record of the date and time of face-to-face
20 interactions with the resident and to make the record
21 available to the responsible entity for inspection;
22 requiring that the record be maintained for a
23 specified time; requiring the responsible entity to
24 ensure that there is adequate and consistent
25 monitoring and enforcement of community living support
26 plans and cooperative agreements and that concerns are
27 reported to the appropriate regulatory oversight
28 organization under certain circumstances; amending s.
29 400.0074, F.S.; requiring that an administrative

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30 assessment conducted by a local council be
31 comprehensive in nature and focus on factors affecting
32 the rights, health, safety, and welfare of residents
33 in the facilities; requiring a local council to
34 conduct an exit consultation with the facility
35 administrator or administrator designee to discuss
36 issues and concerns in areas affecting the rights,
37 health, safety, and welfare of residents and make
38 recommendations for improvement; amending s. 400.0078,
39 F.S.; requiring that a resident or a representative of
40 a resident of a long-term care facility be informed
41 that retaliatory action cannot be taken against a
42 resident for presenting grievances or for exercising
43 any other resident right; amending s. 429.07, F.S.;
44 revising the requirement that an extended congregate
45 care license be issued to certain facilities that have
46 been licensed as assisted living facilities under
47 certain circumstances and authorizing the issuance of
48 such license if a specified condition is met;
49 providing the purpose of an extended congregate care
50 license; providing that the initial extended
51 congregate care license of an assisted living facility
52 is provisional under certain circumstances; requiring
53 a licensee to notify the Agency for Health Care
54 Administration if it accepts a resident who qualifies
55 for extended congregate care services; requiring the
56 agency to inspect the facility for compliance with the
57 requirements of an extended congregate care license;
58 requiring the issuance of an extended congregate care

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59 license under certain circumstances; requiring the
60 licensee to immediately suspend extended congregate
61 care services under certain circumstances; requiring a
62 registered nurse representing the agency to visit the
63 facility at least twice a year, rather than quarterly,
64 to monitor residents who are receiving extended
65 congregate care services; authorizing the agency to
66 waive one of the required yearly monitoring visits
67 under certain circumstances; authorizing the agency to
68 deny or revoke a facility's extended congregate care
69 license; requiring a registered nurse representing the
70 agency to visit the facility at least annually, rather
71 than twice a year, to monitor residents who are
72 receiving limited nursing services; providing that
73 such monitoring visits may be conducted in conjunction
74 with other inspections by the agency; authorizing the
75 agency to waive the required yearly monitoring visit
76 for a facility that is licensed to provide limited
77 nursing services under certain circumstances; amending
78 s. 429.075, F.S.; requiring that an assisted living
79 facility that serves one or more mental health
80 residents, rather than three or more residents, obtain
81 a limited mental health license; amending s. 429.14,
82 F.S.; revising the circumstances under which the
83 agency may deny, revoke, or suspend the license of an
84 assisted living facility and impose an administrative
85 fine; requiring the agency to deny or revoke the
86 license of an assisted living facility under certain
87 circumstances; requiring the agency to impose an

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88 immediate moratorium on the license of an assisted
89 living facility under certain circumstances; deleting
90 a provision requiring the agency to provide a list of
91 facilities with denied, suspended, or revoked licenses
92 to the Department of Business and Professional
93 Regulation; exempting a facility from the 45-day
94 notice requirement if it is required to relocate some
95 or all of its residents; amending s. 429.178, F.S.;
96 conforming cross-references; amending s. 429.19, F.S.;
97 revising the amounts and uses of administrative fines;
98 requiring the agency to levy a fine for violations
99 that are corrected before an inspection if
100 noncompliance occurred within a specified period of
101 time; deleting factors that the agency is required to
102 consider in determining penalties and fines; amending
103 s. 429.256, F.S.; revising the term "assistance with
104 self-administration of medication" as it relates to
105 the Assisted Living Facilities Act; amending s.
106 429.28, F.S.; providing notice requirements to inform
107 facility residents that the identity of the resident
108 and complainant in any complaint made to the State
109 Long-Term Care Ombudsman Program or a local long-term
110 care ombudsman council is confidential and that
111 retaliatory action may not be taken against a resident
112 for presenting grievances or for exercising any other
113 resident right; requiring that a facility that
114 terminates an individual's residency after the filing
115 of a complaint be fined if good cause is not shown for
116 the termination; amending s. 429.34, F.S.; requiring

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117 certain persons to report elder abuse in assisted
118 living facilities; requiring the agency to regularly
119 inspect every licensed assisted living facility;
120 requiring the agency to conduct more frequent
121 inspections under certain circumstances; requiring the
122 licensee to pay a fee for the cost of additional
123 inspections; requiring the agency to annually adjust
124 the fee; amending s. 429.41, F.S.; providing that
125 certain staffing requirements apply only to residents
126 in continuing care facilities who are receiving
127 relevant services; amending s. 429.52, F.S.; requiring
128 each newly hired employee of an assisted living
129 facility to attend a preservice orientation provided
130 by the assisted living facility; requiring the
131 employee and administrator to sign a statement that
132 the employee completed the required preservice
133 orientation and keep the signed statement in the
134 employee's personnel record; requiring 2 additional
135 hours of training for assistance with medication;
136 conforming a cross-reference; requiring the Office of
137 Program Policy Analysis and Government Accountability
138 to study the reliability of facility surveys and
139 submit to the Governor and the Legislature its
140 findings and recommendations; requiring the agency to
141 implement a rating system of assisted living
142 facilities by a specified date, adopt rules, and
143 create content for the agency's website that makes
144 available to consumers information regarding assisted
145 living facilities; providing criteria for the content;

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146 providing appropriations; providing an effective date.

147
148 Be It Enacted by the Legislature of the State of Florida:

149
150 Section 1. Section 394.4574, Florida Statutes, is amended
151 to read:

152 394.4574 ~~Department~~ Responsibilities for coordination of
153 services for a mental health resident who resides in an assisted
154 living facility that holds a limited mental health license.-

155 (1) As used in this section, the term "mental health
156 resident" ~~"mental health resident," for purposes of this~~
157 ~~section,~~ means an individual who receives social security
158 disability income due to a mental disorder as determined by the
159 Social Security Administration or receives supplemental security
160 income due to a mental disorder as determined by the Social
161 Security Administration and receives optional state
162 supplementation.

163 (2) Medicaid managed care plans are responsible for
164 Medicaid-enrolled mental health residents, and managing entities
165 under contract with the department are responsible for mental
166 health residents who are not enrolled in a Medicaid health plan.
167 A Medicaid managed care plan or a managing entity, as
168 appropriate, shall ~~The department must~~ ensure that:

169 (a) A mental health resident has been assessed by a
170 psychiatrist, clinical psychologist, clinical social worker, or
171 psychiatric nurse, or an individual who is supervised by one of
172 these professionals, and determined to be appropriate to reside
173 in an assisted living facility. The documentation must be
174 provided to the administrator of the facility within 30 days

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175 after the mental health resident has been admitted to the
176 facility. An evaluation completed upon discharge from a state
177 mental hospital meets the requirements of this subsection
178 related to appropriateness for placement as a mental health
179 resident if it was completed within 90 days before ~~prior to~~
180 admission to the facility.

181 (b) A cooperative agreement, as required in s. 429.075, is
182 developed by ~~between~~ the mental health care services provider
183 that serves a mental health resident and the administrator of
184 the assisted living facility with a limited mental health
185 license in which the mental health resident is living. ~~Any~~
186 ~~entity that provides Medicaid prepaid health plan services shall~~
187 ~~ensure the appropriate coordination of health care services with~~
188 ~~an assisted living facility in cases where a Medicaid recipient~~
189 ~~is both a member of the entity's prepaid health plan and a~~
190 ~~resident of the assisted living facility. If the entity is at~~
191 ~~risk for Medicaid targeted case management and behavioral health~~
192 ~~services, the entity shall inform the assisted living facility~~
193 ~~of the procedures to follow should an emergent condition arise.~~

194 (c) The community living support plan, as defined in s.
195 429.02, has been prepared by a mental health resident and his or
196 her ~~a~~ mental health case manager ~~of that resident~~ in
197 consultation with the administrator of the facility or the
198 administrator's designee. The plan must be completed and
199 provided to the administrator of the assisted living facility
200 with a limited mental health license in which the mental health
201 resident lives upon the resident's admission. The support plan
202 and the agreement may be in one document.

203 (d) The assisted living facility with a limited mental

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204 health license is provided with documentation that the
205 individual meets the definition of a mental health resident.

206 (e) The mental health services provider assigns a case
207 manager to each mental health resident for whom the entity is
208 responsible ~~who lives in an assisted living facility with a~~
209 ~~limited mental health license~~. The case manager shall coordinate
210 ~~is responsible for coordinating~~ the development ~~of~~ and
211 implementation of the community living support plan defined in
212 s. 429.02. The plan must be updated at least annually, or when
213 there is a significant change in the resident's behavioral
214 health status, such as an inpatient admission or a change in
215 medication, level of service, or residence. Each case manager
216 shall keep a record of the date and time of any face-to-face
217 interaction with the resident and make the record available to
218 the responsible entity for inspection. The record must be
219 retained for at least 2 years after the date of the most recent
220 interaction.

221 (f) Adequate and consistent monitoring and enforcement of
222 community living support plans and cooperative agreements are
223 conducted by the resident's case manager.

224 (g) Concerns are reported to the appropriate regulatory
225 oversight organization if a regulated provider fails to deliver
226 appropriate services or otherwise acts in a manner that has the
227 potential to result in harm to the resident.

228 (3) The Secretary of Children and Families ~~Family Services~~,
229 in consultation with the Agency for Health Care Administration,
230 shall ~~annually~~ require each district administrator to develop,
231 with community input, a detailed annual plan that demonstrates
232 ~~detailed plans that demonstrate~~ how the district will ensure the

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233 provision of state-funded mental health and substance abuse
234 treatment services to residents of assisted living facilities
235 that hold a limited mental health license. This plan ~~These plans~~
236 must be consistent with the substance abuse and mental health
237 district plan developed pursuant to s. 394.75 and must address
238 case management services; access to consumer-operated drop-in
239 centers; access to services during evenings, weekends, and
240 holidays; supervision of the clinical needs of the residents;
241 and access to emergency psychiatric care.

242 Section 2. Subsection (1) of section 400.0074, Florida
243 Statutes, is amended, and paragraph (h) is added to subsection
244 (2) of that section, to read:

245 400.0074 Local ombudsman council onsite administrative
246 assessments.—

247 (1) In addition to any specific investigation conducted
248 pursuant to a complaint, the local council shall conduct, at
249 least annually, an onsite administrative assessment of each
250 nursing home, assisted living facility, and adult family-care
251 home within its jurisdiction. This administrative assessment
252 must be comprehensive in nature and must ~~shall~~ focus on factors
253 affecting residents' ~~the~~ rights, health, safety, and welfare ~~of~~
254 ~~the residents~~. Each local council is encouraged to conduct a
255 similar onsite administrative assessment of each additional
256 long-term care facility within its jurisdiction.

257 (2) An onsite administrative assessment conducted by a
258 local council shall be subject to the following conditions:

259 (h) The local council shall conduct an exit consultation
260 with the facility administrator or administrator designee to
261 discuss issues and concerns in areas affecting residents'

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262 rights, health, safety, and welfare and, if needed, make
263 recommendations for improvement.

264 Section 3. Subsection (2) of section 400.0078, Florida
265 Statutes, is amended to read:

266 400.0078 Citizen access to State Long-Term Care Ombudsman
267 Program services.—

268 (2) ~~Every resident or representative of a resident shall~~
269 ~~receive,~~ Upon admission to a long-term care facility, each
270 resident or representative of a resident must receive
271 information regarding the purpose of the State Long-Term Care
272 Ombudsman Program, the statewide toll-free telephone number for
273 receiving complaints, information that retaliatory action cannot
274 be taken against a resident for presenting grievances or for
275 exercising any other resident right, and other relevant
276 information regarding how to contact the program. Each resident
277 or his or her representative ~~Residents or their representatives~~
278 must be furnished additional copies of this information upon
279 request.

280 Section 4. Paragraphs (b) and (c) of subsection (3) of
281 section 429.07, Florida Statutes, are amended to read:

282 429.07 License required; fee.—

283 (3) In addition to the requirements of s. 408.806, each
284 license granted by the agency must state the type of care for
285 which the license is granted. Licenses shall be issued for one
286 or more of the following categories of care: standard, extended
287 congregate care, limited nursing services, or limited mental
288 health.

289 (b) An extended congregate care license shall be issued to
290 each facility that has been licensed as an assisted living

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291 facility for 2 or more years and that provides services
292 ~~facilities providing~~, directly or through contract, ~~services~~
293 beyond those authorized in paragraph (a), including services
294 performed by persons licensed under part I of chapter 464 and
295 supportive services, as defined by rule, to persons who would
296 otherwise be disqualified from continued residence in a facility
297 licensed under this part. An extended congregate care license
298 may be issued to a facility that has a provisional extended
299 congregate care license and meets the requirements for licensure
300 under subparagraph 2. The primary purpose of extended congregate
301 care services is to allow residents the option of remaining in a
302 familiar setting from which they would otherwise be disqualified
303 for continued residency as they become more impaired. A facility
304 licensed to provide extended congregate care services may also
305 admit an individual who exceeds the admission criteria for a
306 facility with a standard license, if he or she is determined
307 appropriate for admission to the extended congregate care
308 facility.

309 1. In order for extended congregate care services to be
310 provided, the agency must first determine that all requirements
311 established in law and rule are met and must specifically
312 designate, on the facility's license, that such services may be
313 provided and whether the designation applies to all or part of
314 the facility. This ~~Such~~ designation may be made at the time of
315 initial licensure or licensure renewal ~~relicensure~~, or upon
316 request in writing by a licensee under this part and part II of
317 chapter 408. The notification of approval or the denial of the
318 request shall be made in accordance with part II of chapter 408.
319 Each existing facility that qualifies ~~facilities qualifying~~ to

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320 provide extended congregate care services must have maintained a
321 standard license and may not have been subject to administrative
322 sanctions during the previous 2 years, or since initial
323 licensure if the facility has been licensed for less than 2
324 years, for any of the following reasons:

325 a. A class I or class II violation;

326 b. Three or more repeat or recurring class III violations
327 of identical or similar resident care standards from which a
328 pattern of noncompliance is found by the agency;

329 c. Three or more class III violations that were not
330 corrected in accordance with the corrective action plan approved
331 by the agency;

332 d. Violation of resident care standards which results in
333 requiring the facility to employ the services of a consultant
334 pharmacist or consultant dietitian;

335 e. Denial, suspension, or revocation of a license for
336 another facility licensed under this part in which the applicant
337 for an extended congregate care license has at least 25 percent
338 ownership interest; or

339 f. Imposition of a moratorium pursuant to this part or part
340 II of chapter 408 or initiation of injunctive proceedings.

341
342 The agency may deny or revoke a facility's extended congregate
343 care license for not meeting the criteria for an extended
344 congregate care license as provided in this subparagraph.

345 2. If an assisted living facility has been licensed
346 for less than 2 years, the initial extended congregate care
347 license must be provisional and may not exceed 6 months. Within
348 the first 3 months after the provisional license is issued, the

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349 licensee shall notify the agency, in writing, when it has
350 admitted at least one extended congregate care resident, after
351 which an unannounced inspection shall be made to determine
352 compliance with requirements of an extended congregate care
353 license. Failure to admit an extended congregate care resident
354 within the first 3 months shall render the extended congregate
355 care license void. A licensee that has a provisional extended
356 congregate care license which demonstrates compliance with all
357 of the requirements of an extended congregate care license
358 during the inspection shall be issued an extended congregate
359 care license. In addition to sanctions authorized under this
360 part, if violations are found during the inspection and the
361 licensee fails to demonstrate compliance with all assisted
362 living requirements during a followup inspection, the licensee
363 shall immediately suspend extended congregate care services, and
364 the provisional extended congregate care license expires. The
365 agency may extend the provisional license for not more than 1
366 month in order to complete a followup visit.

367 3.2. A facility that is licensed to provide extended
368 congregate care services shall maintain a written progress
369 report on each person who receives services which describes the
370 type, amount, duration, scope, and outcome of services that are
371 rendered and the general status of the resident's health. A
372 registered nurse, or appropriate designee, representing the
373 agency shall visit the facility at least twice a year ~~quarterly~~
374 to monitor residents who are receiving extended congregate care
375 services and to determine if the facility is in compliance with
376 this part, part II of chapter 408, and relevant rules. One of
377 the visits may be in conjunction with the regular survey. The

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378 monitoring visits may be provided through contractual
379 arrangements with appropriate community agencies. A registered
380 nurse shall serve as part of the team that inspects the
381 facility. The agency may waive one of the required yearly
382 monitoring visits for a facility that has:

383 a. Held an extended congregate care license for at least 24
384 months; been licensed for at least 24 months to provide extended
385 congregate care services, if, during the inspection, the
386 registered nurse determines that extended congregate care
387 services are being provided appropriately, and if the facility
388 has

389 b. No class I or class II violations and no uncorrected
390 class III violations; and-

391 c. No ombudsman council complaints that resulted in a
392 citation for licensure ~~The agency must first consult with the~~
393 ~~long-term care ombudsman council for the area in which the~~
394 ~~facility is located to determine if any complaints have been~~
395 ~~made and substantiated about the quality of services or care.~~
396 ~~The agency may not waive one of the required yearly monitoring~~
397 ~~visits if complaints have been made and substantiated.~~

398 4.3- A facility that is licensed to provide extended
399 congregate care services must:

400 a. Demonstrate the capability to meet unanticipated
401 resident service needs.

402 b. Offer a physical environment that promotes a homelike
403 setting, provides for resident privacy, promotes resident
404 independence, and allows sufficient congregate space as defined
405 by rule.

406 c. Have sufficient staff available, taking into account the

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407 physical plant and firesafety features of the building, to
408 assist with the evacuation of residents in an emergency.

409 d. Adopt and follow policies and procedures that maximize
410 resident independence, dignity, choice, and decisionmaking to
411 permit residents to age in place, so that moves due to changes
412 in functional status are minimized or avoided.

413 e. Allow residents or, if applicable, a resident's
414 representative, designee, surrogate, guardian, or attorney in
415 fact to make a variety of personal choices, participate in
416 developing service plans, and share responsibility in
417 decisionmaking.

418 f. Implement the concept of managed risk.

419 g. Provide, directly or through contract, the services of a
420 person licensed under part I of chapter 464.

421 h. In addition to the training mandated in s. 429.52,
422 provide specialized training as defined by rule for facility
423 staff.

424 5.4. A facility that is licensed to provide extended
425 congregate care services is exempt from the criteria for
426 continued residency set forth in rules adopted under s. 429.41.
427 A licensed facility must adopt its own requirements within
428 guidelines for continued residency set forth by rule. However,
429 the facility may not serve residents who require 24-hour nursing
430 supervision. A licensed facility that provides extended
431 congregate care services must also provide each resident with a
432 written copy of facility policies governing admission and
433 retention.

434 ~~5. The primary purpose of extended congregate care services~~
435 ~~is to allow residents, as they become more impaired, the option~~

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436 ~~of remaining in a familiar setting from which they would~~
437 ~~otherwise be disqualified for continued residency. A facility~~
438 ~~licensed to provide extended congregate care services may also~~
439 ~~admit an individual who exceeds the admission criteria for a~~
440 ~~facility with a standard license, if the individual is~~
441 ~~determined appropriate for admission to the extended congregate~~
442 ~~care facility.~~

443 6. Before the admission of an individual to a facility
444 licensed to provide extended congregate care services, the
445 individual must undergo a medical examination as provided in s.
446 429.26(4) and the facility must develop a preliminary service
447 plan for the individual.

448 7. ~~If~~ When a facility can no longer provide or arrange for
449 services in accordance with the resident's service plan and
450 needs and the facility's policy, the facility must ~~shall~~ make
451 arrangements for relocating the person in accordance with s.
452 429.28(1)(k).

453 ~~8. Failure to provide extended congregate care services may~~
454 ~~result in denial of extended congregate care license renewal.~~

455 (c) A limited nursing services license shall be issued to a
456 facility that provides services beyond those authorized in
457 paragraph (a) and as specified in this paragraph.

458 1. In order for limited nursing services to be provided in
459 a facility licensed under this part, the agency must first
460 determine that all requirements established in law and rule are
461 met and must specifically designate, on the facility's license,
462 that such services may be provided. This ~~Such~~ designation may be
463 made at the time of initial licensure or licensure renewal
464 ~~relicensure~~, or upon request in writing by a licensee under this

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465 part and part II of chapter 408. Notification of approval or
466 denial of such request shall be made in accordance with part II
467 of chapter 408. An existing facility that qualifies ~~facilities~~
468 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
469 maintained a standard license and may not have been subject to
470 administrative sanctions that affect the health, safety, and
471 welfare of residents for the previous 2 years or since initial
472 licensure if the facility has been licensed for less than 2
473 years.

474 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide
475 limited nursing services shall maintain a written progress
476 report on each person who receives such nursing services. The
477 ~~which~~ report must describe ~~describes~~ the type, amount, duration,
478 scope, and outcome of services that are rendered and the general
479 status of the resident's health. A registered nurse representing
480 the agency shall visit the facility ~~such facilities~~ at least
481 annually ~~twice a year~~ to monitor residents who are receiving
482 limited nursing services and to determine if the facility is in
483 compliance with applicable provisions of this part, part II of
484 chapter 408, and related rules. The monitoring visits may be
485 provided through contractual arrangements with appropriate
486 community agencies. A registered nurse shall also serve as part
487 of the team that inspects such facility. Visits may be in
488 conjunction with other agency inspections. The agency may waive
489 the required yearly monitoring visit for a facility that has:

490 a. Had a limited nursing services license for at least 24
491 months;

492 b. No class I or class II violations and no uncorrected
493 class III violations; and

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494 c. No ombudsman council complaints that resulted in a
 495 citation for licensure.

496 3. A person who receives limited nursing services under
 497 this part must meet the admission criteria established by the
 498 agency for assisted living facilities. When a resident no longer
 499 meets the admission criteria for a facility licensed under this
 500 part, arrangements for relocating the person shall be made in
 501 accordance with s. 429.28(1)(k), unless the facility is licensed
 502 to provide extended congregate care services.

503 Section 5. Section 429.075, Florida Statutes, is amended to
 504 read:

505 429.075 Limited mental health license.—An assisted living
 506 facility that serves one ~~three~~ or more mental health residents
 507 must obtain a limited mental health license.

508 (1) To obtain a limited mental health license, a facility
 509 must hold a standard license as an assisted living facility,
 510 must not have any current uncorrected ~~deficiencies or~~
 511 violations, and must ensure that, within 6 months after
 512 receiving a limited mental health license, the facility
 513 administrator and the staff of the facility who are in direct
 514 contact with mental health residents must complete training of
 515 no less than 6 hours related to their duties. This ~~Such~~
 516 designation may be made at the time of initial licensure or
 517 licensure renewal ~~relicensure~~ or upon request in writing by a
 518 licensee under this part and part II of chapter 408.
 519 Notification of approval or denial of such request shall be made
 520 in accordance with this part, part II of chapter 408, and
 521 applicable rules. This training must ~~will~~ be provided by or
 522 approved by the Department of Children and Families ~~Family~~

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523 ~~Services.~~

524 (2) A facility that is ~~Facilities~~ licensed to provide
525 services to mental health residents must ~~shall~~ provide
526 appropriate supervision and staffing to provide for the health,
527 safety, and welfare of such residents.

528 (3) A facility that has a limited mental health license
529 must:

530 (a) Have a copy of each mental health resident's community
531 living support plan and the cooperative agreement with the
532 mental health care services provider. The support plan and the
533 agreement may be combined.

534 (b) Have documentation ~~that is~~ provided by the Department
535 of Children and Families ~~Family Services~~ that each mental health
536 resident has been assessed and determined to be able to live in
537 the community in an assisted living facility that has ~~with~~ a
538 limited mental health license.

539 (c) Make the community living support plan available for
540 inspection by the resident, the resident's legal guardian or
541 ~~the resident's~~ health care surrogate, and other individuals who
542 have a lawful basis for reviewing this document.

543 (d) Assist the mental health resident in carrying out the
544 activities identified in the individual's community living
545 support plan.

546 (4) A facility that has ~~with~~ a limited mental health
547 license may enter into a cooperative agreement with a private
548 mental health provider. For purposes of the limited mental
549 health license, the private mental health provider may act as
550 the case manager.

551 Section 6. Section 429.14, Florida Statutes, is amended to

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552 read:

553 429.14 Administrative penalties.—

554 (1) In addition to the requirements of part II of chapter
555 408, the agency may deny, revoke, and suspend any license issued
556 under this part and impose an administrative fine in the manner
557 provided in chapter 120 against a licensee for a violation of
558 any provision of this part, part II of chapter 408, or
559 applicable rules, or for any of the following actions by a
560 licensee, ~~for the actions of~~ any person subject to level 2
561 background screening under s. 408.809, or ~~for the actions of~~ any
562 facility staff ~~employee~~:

563 (a) An intentional or negligent act seriously affecting the
564 health, safety, or welfare of a resident of the facility.

565 (b) A ~~The~~ determination by the agency that the owner lacks
566 the financial ability to provide continuing adequate care to
567 residents.

568 (c) Misappropriation or conversion of the property of a
569 resident of the facility.

570 (d) Failure to follow the criteria and procedures provided
571 under part I of chapter 394 relating to the transportation,
572 voluntary admission, and involuntary examination of a facility
573 resident.

574 (e) A citation for ~~of~~ any of the following violations
575 ~~deficiencies~~ as specified in s. 429.19:

- 576 1. One or more cited class I violations ~~deficiencies~~.
- 577 2. Three or more cited class II violations ~~deficiencies~~.
- 578 3. Five or more cited class III violations ~~deficiencies~~
579 that have been cited on a single survey and have not been
580 corrected within the times specified.

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581 (f) Failure to comply with the background screening
582 standards of this part, s. 408.809(1), or chapter 435.

583 (g) Violation of a moratorium.

584 (h) Failure of the license applicant, the licensee during
585 licensure renewal ~~relicensure~~, or a licensee that holds a
586 provisional license to meet the minimum license requirements of
587 this part, or related rules, at the time of license application
588 or renewal.

589 (i) An intentional or negligent life-threatening act in
590 violation of the uniform firesafety standards for assisted
591 living facilities or other firesafety standards which ~~that~~
592 threatens the health, safety, or welfare of a resident of a
593 facility, as communicated to the agency by the local authority
594 having jurisdiction or the State Fire Marshal.

595 (j) Knowingly operating any unlicensed facility or
596 providing without a license any service that must be licensed
597 under this chapter or chapter 400.

598 (k) Any act constituting a ground upon which application
599 for a license may be denied.

600 (2) Upon notification by the local authority having
601 jurisdiction or by the State Fire Marshal, the agency may deny
602 or revoke the license of an assisted living facility that fails
603 to correct cited fire code violations that affect or threaten
604 the health, safety, or welfare of a resident of a facility.

605 (3) The agency may deny or revoke a license of an ~~to any~~
606 applicant or controlling interest as defined in part II of
607 chapter 408 which has or had a 25 percent ~~25-percent~~ or greater
608 financial or ownership interest in any other facility that is
609 licensed under this part, or in any entity licensed by this

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610 state or another state to provide health or residential care, if
611 that ~~which~~ facility or entity during the 5 years before ~~prior to~~
612 the application for a license closed due to financial inability
613 to operate; had a receiver appointed or a license denied,
614 suspended, or revoked; was subject to a moratorium; or had an
615 injunctive proceeding initiated against it.

616 (4) The agency shall deny or revoke the license of an
617 assisted living facility if:

618 (a) There are two moratoria, issued pursuant to this part
619 or part II of chapter 408, within a 2-year period which are
620 imposed by final order;

621 (b) The facility is cited for two or more class I
622 violations arising from unrelated circumstances during the same
623 survey or investigation; or

624 (c) The facility is cited for two or more class I
625 violations arising from separate surveys or investigations
626 within a 2-year period ~~that has two or more class I violations~~
627 ~~that are similar or identical to violations identified by the~~
628 ~~agency during a survey, inspection, monitoring visit, or~~
629 ~~complaint investigation occurring within the previous 2 years.~~

630 (5) An action taken by the agency to suspend, deny, or
631 revoke a facility's license under this part or part II of
632 chapter 408, in which the agency claims that the facility owner
633 or an employee of the facility has threatened the health,
634 safety, or welfare of a resident of the facility, must be heard
635 by the Division of Administrative Hearings of the Department of
636 Management Services within 120 days after receipt of the
637 facility's request for a hearing, unless that time limitation is
638 waived by both parties. The administrative law judge shall ~~must~~

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639 render a decision within 30 days after receipt of a proposed
640 recommended order.

641 (6) As provided under s. 408.814, the agency shall impose
642 an immediate moratorium on an assisted living facility that
643 fails to provide the agency access to the facility or prohibits
644 the agency from conducting a regulatory inspection. The licensee
645 may not restrict agency staff in accessing and copying records
646 or in conducting confidential interviews with facility staff or
647 any individual who receives services from the facility provide
648 ~~to the Division of Hotels and Restaurants of the Department of~~
649 ~~Business and Professional Regulation, on a monthly basis, a list~~
650 ~~of those assisted living facilities that have had their licenses~~
651 ~~denied, suspended, or revoked or that are involved in an~~
652 ~~appellate proceeding pursuant to s. 120.60 related to the~~
653 ~~denial, suspension, or revocation of a license.~~

654 (7) Agency notification of a license suspension or
655 revocation, or denial of a license renewal, shall be posted and
656 visible to the public at the facility.

657 (8) If a facility is required to relocate some or all of
658 its residents due to agency action, that facility is exempt from
659 the 45 days' notice requirement imposed under s. 429.28(1)(k).
660 This subsection does not exempt the facility from any deadlines
661 for corrective action set by the agency.

662 Section 7. Paragraphs (a) and (b) of subsection (2) of
663 section 429.178, Florida Statutes, are amended to read:

664 429.178 Special care for persons with Alzheimer's disease
665 or other related disorders.-

666 (2) (a) An individual who is employed by a facility that
667 provides special care for residents who have ~~with~~ Alzheimer's

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668 disease or other related disorders, and who has regular contact
669 with such residents, must complete up to 4 hours of initial
670 dementia-specific training developed or approved by the
671 department. The training must ~~shall~~ be completed within 3 months
672 after beginning employment and satisfy ~~shall satisfy~~ the core
673 training requirements of s. 429.52(3)(g) ~~s. 429.52(2)(g)~~.

674 (b) A direct caregiver who is employed by a facility that
675 provides special care for residents who have ~~with~~ Alzheimer's
676 disease or other related disorders, ~~and who~~ provides direct care
677 to such residents, ~~must~~ complete the required initial training
678 and 4 additional hours of training developed or approved by the
679 department. The training must ~~shall~~ be completed within 9 months
680 after beginning employment and satisfy ~~shall satisfy~~ the core
681 training requirements of s. 429.52(3)(g) ~~s. 429.52(2)(g)~~.

682 Section 8. Section 429.19, Florida Statutes, is amended to
683 read:

684 429.19 Violations; imposition of administrative fines;
685 grounds.—

686 (1) In addition to the requirements of part II of chapter
687 408, the agency shall impose an administrative fine in the
688 manner provided in chapter 120 for the violation of any
689 provision of this part, part II of chapter 408, and applicable
690 rules by an assisted living facility, for the actions of any
691 person subject to level 2 background screening under s. 408.809,
692 for the actions of any facility employee, or for an intentional
693 or negligent act seriously affecting the health, safety, or
694 welfare of a resident of the facility.

695 (2) Each violation of this part and adopted rules must
696 ~~shall~~ be classified according to the nature of the violation and

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697 the gravity of its probable effect on facility residents.

698 (a) The agency shall indicate the classification on the
699 written notice of the violation as follows:

700 1.(a) Class "I" violations are defined in s. 408.813. The
701 agency shall impose an administrative fine of \$7,500 for each a
702 cited class I violation in a facility that is licensed for fewer
703 than 100 beds at the time of the violation in an amount not less
704 than \$5,000 and not exceeding \$10,000 for each violation. The
705 agency shall impose an administrative fine of \$11,250 for each
706 cited class I violation in a facility that is licensed for 100
707 or more beds at the time of the violation. If the agency has
708 knowledge of a class I violation which occurred within 12 months
709 before an inspection, a fine must be levied for that violation
710 whether or not the noncompliance was corrected before the
711 inspection.

712 2.(b) Class "II" violations are defined in s. 408.813. The
713 agency shall impose an administrative fine of \$3,000 for each a
714 cited class II violation in a facility that is licensed for
715 fewer than 100 beds at the time of the violation in an amount
716 not less than \$1,000 and not exceeding \$5,000 for each
717 violation. The agency shall impose an administrative fine of
718 \$4,500 for each cited class II violation in a facility that is
719 licensed for 100 or more beds at the time of the violation.

720 3.(c) Class "III" violations are defined in s. 408.813. The
721 agency shall impose an administrative fine of \$750 for each a
722 cited class III violation in a facility that is licensed for
723 fewer than 100 beds at the time of the violation in an amount
724 not less than \$500 and not exceeding \$1,000 for each violation.
725 The agency shall impose an administrative fine of \$1,125 for

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726 each cited class III violation in a facility that is licensed
727 for 100 or more beds at the time of the violation.

728 4. ~~(d)~~ Class "IV" violations are defined in s. 408.813. The
729 agency shall impose an administrative fine of \$150 for each a
730 cited class IV violation in a facility that is licensed for
731 fewer than 100 beds at the time of the violation ~~in an amount~~
732 not less than \$100 and not exceeding \$200 for each violation.
733 The agency shall impose an administrative fine of \$225 for each
734 cited class IV violation in a facility that is licensed for 100
735 or more beds at the time of the violation.

736 (b) Any fine imposed for a class I violation or a class II
737 violation must be doubled if a facility was previously cited for
738 one or more class I or class II violations during the agency's
739 last licensure inspection or any inspection or complaint
740 investigation since the last licensure inspection.

741 (c) Notwithstanding s. 408.813(2)(c) and (d) and s.
742 408.832, a fine must be imposed for each class III or class IV
743 violation, regardless of correction, if a facility was
744 previously cited for one or more class III or class IV
745 violations during the agency's last licensure inspection or any
746 inspection or complaint investigation since the last licensure
747 inspection for the same regulatory violation. A fine imposed for
748 class III or class IV violations must be doubled if a facility
749 was previously cited for one or more class III or class IV
750 violations during the agency's last two licensure inspections
751 for the same regulatory violation.

752 (d) Regardless of the class of violation cited, instead of
753 the fine amounts listed in subparagraphs (a)1.-4., the agency
754 shall impose an administrative fine of \$500 if a facility is

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755 found not to be in compliance with the background screening
756 requirements as provided in s. 408.809.

757 ~~(3) For purposes of this section, in determining if a~~
758 ~~penalty is to be imposed and in fixing the amount of the fine,~~
759 ~~the agency shall consider the following factors:~~

760 ~~(a) The gravity of the violation, including the probability~~
761 ~~that death or serious physical or emotional harm to a resident~~
762 ~~will result or has resulted, the severity of the action or~~
763 ~~potential harm, and the extent to which the provisions of the~~
764 ~~applicable laws or rules were violated.~~

765 ~~(b) Actions taken by the owner or administrator to correct~~
766 ~~violations.~~

767 ~~(c) Any previous violations.~~

768 ~~(d) The financial benefit to the facility of committing or~~
769 ~~continuing the violation.~~

770 ~~(e) The licensed capacity of the facility.~~

771 (3)~~(4)~~ Each day of continuing violation after the date
772 established by the agency ~~fixed~~ for correction ~~termination~~ of
773 the violation, ~~as ordered by the agency,~~ constitutes an
774 additional, separate, and distinct violation.

775 (4)~~(5)~~ An ~~Any~~ action taken to correct a violation shall be
776 documented in writing by the owner or administrator of the
777 facility and verified through followup visits by agency
778 personnel. The agency may impose a fine and, in the case of an
779 owner-operated facility, revoke or deny a facility's license
780 when a facility administrator fraudulently misrepresents action
781 taken to correct a violation.

782 (5)~~(6)~~ A ~~Any~~ facility whose owner fails to apply for a
783 change-of-ownership license in accordance with part II of

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784 chapter 408 and operates the facility under the new ownership is
785 subject to a fine of \$5,000.

786 (6)~~(7)~~ In addition to any administrative fines imposed, the
787 agency may assess a survey fee, equal to the lesser of one half
788 of the facility's biennial license and bed fee or \$500, to cover
789 the cost of conducting initial complaint investigations that
790 result in the finding of a violation that was the subject of the
791 complaint or monitoring visits conducted under s. 429.28(3)(c)
792 to verify the correction of the violations.

793 (7)~~(8)~~ During an inspection, the agency shall make a
794 reasonable attempt to discuss each violation with the owner or
795 administrator of the facility, before ~~prior to~~ written
796 notification.

797 (8)~~(9)~~ The agency shall develop and disseminate an annual
798 list of all facilities sanctioned or fined for violations of
799 state standards, the number and class of violations involved,
800 the penalties imposed, and the current status of cases. The list
801 shall be disseminated, at no charge, to the Department of
802 Elderly Affairs, the Department of Health, the Department of
803 Children and Families ~~Family Services~~, the Agency for Persons
804 with Disabilities, the area agencies on aging, the Florida
805 Statewide Advocacy Council, and the state and local ombudsman
806 councils. The Department of Children and Families ~~Family~~
807 ~~Services~~ shall disseminate the list to service providers under
808 contract to the department who are responsible for referring
809 persons to a facility for residency. The agency may charge a fee
810 commensurate with the cost of printing and postage to other
811 interested parties requesting a copy of this list. This
812 information may be provided electronically or through the

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813 agency's website ~~Internet site~~.

814 Section 9. Subsection (3) and paragraph (c) of subsection
815 (4) of section 429.256, Florida Statutes, are amended to read:

816 429.256 Assistance with self-administration of medication.—

817 (3) Assistance with self-administration of medication
818 includes:

819 (a) Taking the medication, in its previously dispensed,
820 properly labeled container, including an insulin syringe that is
821 prefilled with the proper dosage by a pharmacist and an insulin
822 pen that is prefilled by the manufacturer, from where it is
823 stored, and bringing it to the resident.

824 (b) In the presence of the resident, reading the label,
825 opening the container, removing a prescribed amount of
826 medication from the container, and closing the container.

827 (c) Placing an oral dosage in the resident's hand or
828 placing the dosage in another container and helping the resident
829 by lifting the container to his or her mouth.

830 (d) Applying topical medications.

831 (e) Returning the medication container to proper storage.

832 (f) Keeping a record of when a resident receives assistance
833 with self-administration under this section.

834 (g) Assisting with the use of a nebulizer, including
835 removing the cap of a nebulizer, opening the unit dose of
836 nebulizer solution, and pouring the prescribed premeasured dose
837 of medication into the dispensing cup of the nebulizer.

838 (h) Using a glucometer to perform blood-glucose level
839 checks.

840 (i) Assisting with putting on and taking off antiembolism
841 stockings.

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842 (j) Assisting with applying and removing an oxygen cannula,
843 but not with titrating the prescribed oxygen settings.

844 (k) Assisting with the use of a continuous positive airway
845 pressure (CPAP) device, but not with titrating the prescribed
846 setting of the device.

847 (l) Assisting with measuring vital signs.

848 (m) Assisting with colostomy bags.

849 (4) Assistance with self-administration does not include:

850 ~~(c) Administration of medications through intermittent~~
851 ~~positive pressure breathing machines or a nebulizer.~~

852 Section 10. Subsections (2), (5), and (6) of section
853 429.28, Florida Statutes, are amended to read:

854 429.28 Resident bill of rights.—

855 (2) The administrator of a facility shall ensure that a
856 written notice of the rights, obligations, and prohibitions set
857 forth in this part is posted in a prominent place in each
858 facility and read or explained to residents who cannot read. The
859 ~~This~~ notice must ~~shall~~ include the name, address, and telephone
860 numbers of the local ombudsman council, the ~~and~~ central abuse
861 hotline, and, if when applicable, Disability Rights Florida ~~the~~
862 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
863 ~~Florida local advocacy council~~, where complaints may be lodged.
864 The notice must state that a complaint made to the Office of
865 State Long-Term Care Ombudsman or a local long-term care
866 ombudsman council, the names and identities of the residents
867 involved in the complaint, and the identity of complainants are
868 kept confidential pursuant to s. 400.0077 and that retaliatory
869 action cannot be taken against a resident for presenting
870 grievances or for exercising any other resident right. The

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871 facility must ensure a resident's access to a telephone to call
 872 the local ombudsman council, central abuse hotline, and
 873 Disability Rights Florida Advocacy Center for Persons with
 874 Disabilities, Inc., and the Florida local advocacy council.

875 (5) A ~~No~~ facility or employee of a facility may not serve
 876 notice upon a resident to leave the premises or take any other
 877 retaliatory action against any person who:

878 (a) Exercises any right set forth in this section.

879 (b) Appears as a witness in any hearing, inside or outside
 880 the facility.

881 (c) Files a civil action alleging a violation of the
 882 provisions of this part or notifies a state attorney or the
 883 Attorney General of a possible violation of such provisions.

884 (6) A ~~Any~~ facility that ~~which~~ terminates the residency of
 885 an individual who participated in activities specified in
 886 subsection (5) must ~~shall~~ show good cause in a court of
 887 competent jurisdiction. If good cause is not shown, the agency
 888 shall impose a fine of \$2,500 in addition to any other penalty
 889 assessed against the facility.

890 Section 11. Section 429.34, Florida Statutes, is amended to
 891 read:

892 429.34 Right of entry and inspection.—

893 (1) In addition to the requirements of s. 408.811, any duly
 894 designated officer or employee of the department, the Department
 895 of Children and Families ~~Family Services~~, the Medicaid Fraud
 896 Control Unit of the Office of the Attorney General, the state or
 897 local fire marshal, or a member of the state or local long-term
 898 care ombudsman council has ~~shall have~~ the right to enter
 899 unannounced upon and into the premises of any facility licensed

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900 pursuant to this part in order to determine the state of
901 compliance with ~~the provisions of~~ this part, part II of chapter
902 408, and applicable rules. Data collected by the state or local
903 long-term care ombudsman councils or the state or local advocacy
904 councils may be used by the agency in investigations involving
905 violations of regulatory standards. A person specified in this
906 section who knows or has reasonable cause to suspect that a
907 vulnerable adult has been or is being abused, neglected, or
908 exploited shall immediately report such knowledge or suspicion
909 to the central abuse hotline pursuant to chapter 415.

910 (2) The agency shall inspect each licensed assisted living
911 facility at least once every 24 months to determine compliance
912 with this chapter and related rules. If an assisted living
913 facility is cited for one or more class I violations or two or
914 more class II violations arising from separate surveys within a
915 60-day period or due to unrelated circumstances during the same
916 survey, the agency must conduct an additional licensure
917 inspection within 6 months. In addition to any fines imposed on
918 the facility under s. 429.19, the licensee shall pay a fee for
919 the cost of the additional inspection equivalent to the standard
920 assisted living facility license and per-bed fees, without
921 exception for beds designated for recipients of optional state
922 supplementation. The agency shall adjust the fee in accordance
923 with s. 408.805.

924 Section 12. Subsection (2) of section 429.41, Florida
925 Statutes, is amended to read:

926 429.41 Rules establishing standards.—

927 (2) In adopting any rules pursuant to this part, the
928 department, in conjunction with the agency, shall make distinct

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929 standards for facilities based upon facility size; the types of
930 care provided; the physical and mental capabilities and needs of
931 residents; the type, frequency, and amount of services and care
932 offered; and the staffing characteristics of the facility. Rules
933 developed pursuant to this section may ~~shall~~ not restrict the
934 use of shared staffing and shared programming in facilities that
935 are part of retirement communities that provide multiple levels
936 of care and otherwise meet the requirements of law and rule. If
937 a continuing care facility licensed under chapter 651 or a
938 retirement community offering multiple levels of care obtains a
939 license pursuant to this chapter for a building or part of a
940 building designated for independent living, staffing
941 requirements established in rule apply only to residents who
942 receive personal services, limited nursing services, or extended
943 congregate care services under this part. Such facilities shall
944 retain a log listing the names and unit number for residents
945 receiving these services. The log must be available to surveyors
946 upon request. Except for uniform firesafety standards, the
947 department shall adopt by rule separate and distinct standards
948 for facilities with 16 or fewer beds and for facilities with 17
949 or more beds. The standards for facilities with 16 or fewer beds
950 must ~~shall~~ be appropriate for a noninstitutional residential
951 environment; 7 however, provided that the structure may not be ~~is~~
952 ~~no~~ more than two stories in height and all persons who cannot
953 exit the facility unassisted in an emergency must reside on the
954 first floor. The department, in conjunction with the agency, may
955 make other distinctions among types of facilities as necessary
956 to enforce the provisions of this part. Where appropriate, the
957 agency shall offer alternate solutions for complying with

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958 established standards, based on distinctions made by the
 959 department and the agency relative to the physical
 960 characteristics of facilities and the types of care offered
 961 therein.

962 Section 13. Present subsections (1) through (11) of section
 963 429.52, Florida Statutes, are redesignated as subsections (2)
 964 through (12), respectively, a new subsection (1) is added to
 965 that section, and present subsections (5) and (9) of that
 966 section are amended, to read:

967 429.52 Staff training and educational programs; core
 968 educational requirement.—

969 (1) Effective October 1, 2014, each new assisted living
 970 facility employee who has not previously completed core training
 971 must attend a preservice orientation provided by the facility
 972 before interacting with residents. The preservice orientation
 973 must be at least 2 hours in duration and cover topics that help
 974 the employee provide responsible care and respond to the needs
 975 of facility residents. Upon completion, the employee and the
 976 administrator of the facility must sign a statement that the
 977 employee completed the required preservice orientation. The
 978 facility must keep the signed statement in the employee's
 979 personnel record.

980 (6)~~(5)~~ Staff involved with the management of medications
 981 and assisting with the self-administration of medications under
 982 s. 429.256 must complete a minimum of 6 ~~4~~ additional hours of
 983 training provided by a registered nurse, licensed pharmacist, or
 984 department staff. The department shall establish by rule the
 985 minimum requirements of this additional training.

986 (10)~~(9)~~ The training required by this section other than

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987 the preservice orientation must ~~shall~~ be conducted by persons
988 registered with the department as having the requisite
989 experience and credentials to conduct the training. A person
990 seeking to register as a trainer must provide the department
991 with proof of completion of the minimum core training education
992 requirements, successful passage of the competency test
993 established under this section, and proof of compliance with the
994 continuing education requirement in subsection (5) ~~(4)~~.

995 Section 14. The Legislature finds that consistent
996 regulation of assisted living facilities benefits residents and
997 operators of such facilities. To determine whether surveys are
998 consistent between surveys and surveyors, the Office of Program
999 Policy Analysis and Government Accountability (OPPAGA) shall
1000 conduct a study of intersurveyor reliability for assisted living
1001 facilities. By November 1, 2014, OPPAGA shall report its
1002 findings to the Governor, the President of the Senate, and the
1003 Speaker of the House of Representatives and make any
1004 recommendations for improving intersurveyor reliability.

1005 Section 15. The Legislature finds that consumers need
1006 additional information on the quality of care and service in
1007 assisted living facilities in order to select the best facility
1008 for themselves or their loved ones. Therefore, the Agency for
1009 Health Care Administration shall:

1010 (1) Implement a rating system for assisted living
1011 facilities by March 1, 2015. The agency shall adopt rules to
1012 administer this subsection.

1013 (2) By November 1, 2014, create content that is easily
1014 accessible through the front page of the agency's website. At a
1015 minimum, the content must include:

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- 1016 (a) Information on each licensed assisted living facility,
1017 including, but not limited to:
- 1018 1. The name and address of the facility.
 - 1019 2. The number and type of licensed beds in the facility.
 - 1020 3. The types of licenses held by the facility.
 - 1021 4. The facility's license expiration date and status.
 - 1022 5. Other relevant information that the agency currently
1023 collects.
- 1024 (b) A list of the facility's violations, including, for
1025 each violation:
- 1026 1. A summary of the violation which is presented in a
1027 manner understandable by the general public;
 - 1028 2. Any sanctions imposed by final order; and
 - 1029 3. The date the corrective action was confirmed by the
1030 agency.
- 1031 (c) Links to inspection reports that the agency has on
1032 file.
- 1033 (d) A monitored comment page, maintained by the agency,
1034 which allows members of the public to anonymously comment on
1035 assisted living facilities that are licensed to operate in this
1036 state. This comment page must, at a minimum, allow members of
1037 the public to post comments on their experiences with, or
1038 observations of, an assisted living facility and to review other
1039 people's comments. Comments posted to the agency's comment page
1040 may not contain profanity and are intended to provide meaningful
1041 feedback about the assisted living facility. The agency shall
1042 review comments for profane content before the comments are
1043 posted to the page. A controlling interest, as defined in s.
1044 408.803, Florida Statutes, in an assisted living facility, or an

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1045 employee or owner of an assisted living facility, is prohibited
1046 from posting comments on the page, except that a controlling
1047 interest, employee, or owner may respond to comments on the
1048 page, and the agency shall ensure that the responses are
1049 identified as being from a representative of the facility.

1050 Section 16. For the 2014-2015 fiscal year, the sums of
1051 \$156,943 in recurring funds and \$7,546 in nonrecurring funds
1052 from the Health Care Trust Fund and two full-time equivalent
1053 senior attorney positions with associated salary rate of 103,652
1054 are appropriated to the Agency for Health Care Administration
1055 for the purpose of implementing the regulatory provisions of
1056 this act.

1057 Section 17. For the 2014-2015 fiscal year, for the purpose
1058 of implementing and maintaining the public information website
1059 enhancements provided under this act:

1060 (1) The sums of \$72,435 in recurring funds and \$3,773 in
1061 nonrecurring funds from the Health Care Trust Fund and one full-
1062 time equivalent health services and facilities consultant
1063 position with associated salary rate of 46,560 are appropriated
1064 to the Agency for Health Care Administration;

1065 (2) The sums of \$30,000 in recurring funds and \$15,000 in
1066 nonrecurring funds from the Health Care Trust Fund are
1067 appropriated to the Agency for Health Care Administration for
1068 software purchase, installation, and maintenance services; and

1069 (3) The sums of \$2,474 in recurring funds and \$82,806 in
1070 nonrecurring funds from the Health Care Trust Fund are
1071 appropriated to the Agency for Health Care Administration for
1072 contracted services.

1073 Section 18. This act shall take effect July 1, 2014.