

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 period; 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

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CODING: Words ~~stricken~~ are deletions; words underlined are additions.

27 | reported to the appropriate regulatory oversight
28 | organization under certain circumstances; amending s.
29 | 400.0074, F.S.; requiring that an administrative
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 nursing
33 | home residents; requiring a local council to conduct
34 | an exit consultation with the facility administrator
35 | or administrator designee to discuss issues and
36 | concerns in areas affecting the rights, health,
37 | 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 | requiring that an extended congregate care license be
45 | issued to certain facilities that have been licensed
46 | as assisted living facilities under certain
47 | circumstances and authorizing the issuance of such
48 | license if a specified condition is met; providing the
49 | purpose of an extended congregate care license;
50 | providing that the initial extended congregate care
51 | license of an assisted living facility is provisional
52 | under certain circumstances; requiring a licensee to

53 | notify the Agency for Health Care Administration if it
54 | accepts a resident who qualifies for extended
55 | congregate care services; requiring the agency to
56 | inspect the facility for compliance with the
57 | requirements of an extended congregate care license;
58 | requiring the issuance of an extended congregate care
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 agency inspections; authorizing the agency
75 | to waive the required yearly monitoring visit for a
76 | facility that is licensed to provide limited nursing
77 | services under certain circumstances; amending s.
78 | 429.075, F.S.; requiring an assisted living facility

79 | that serves one or more mental health residents to
80 | obtain a limited mental health license; amending s.
81 | 429.14, F.S.; revising the circumstances under which
82 | the agency may deny, revoke, or suspend the license of
83 | an assisted living facility and impose an
84 | administrative fine; requiring the agency to deny or
85 | revoke the license of an assisted living facility
86 | under certain circumstances; requiring the agency to
87 | impose an immediate moratorium on the license of an
88 | assisted living facility under certain circumstances;
89 | deleting a provision requiring the agency to provide a
90 | list of facilities with denied, suspended, or revoked
91 | licenses to the Department of Business and
92 | Professional Regulation; exempting a facility from the
93 | 45-day notice requirement if it is required to
94 | relocate some or all of its residents; amending s.
95 | 429.178, F.S.; conforming cross-references; amending
96 | s. 429.19, F.S.; revising the amounts and uses of
97 | administrative fines; requiring the agency to levy a
98 | fine for violations that are corrected before an
99 | inspection if noncompliance occurred within a
100 | specified period of time; deleting factors that the
101 | agency is required to consider in determining
102 | penalties and fines; amending s. 429.256, F.S.;
103 | revising the term "assistance with self-administration
104 | of medication" as it relates to the Assisted Living

105 Facilities Act; amending s. 429.28, F.S.; providing
106 notice requirements to inform facility residents that
107 the identity of the resident and complainant in any
108 complaint made to the State Long-Term Care Ombudsman
109 Program or a local long-term care ombudsman council is
110 confidential and that retaliatory action cannot be
111 taken against a resident for presenting grievances or
112 for exercising any other resident right; requiring
113 that a facility that terminates an individual's
114 residency after the filing of a complaint be fined if
115 good cause is not shown for the termination; amending
116 s. 429.34, F.S.; requiring certain persons to report
117 elder abuse in assisted living facilities; requiring
118 the agency to regularly inspect every licensed
119 assisted living facility; requiring the agency to
120 conduct more frequent inspections under certain
121 circumstances; requiring the licensee to pay a fee for
122 the cost of additional inspections; requiring the
123 agency to annually adjust the fee; amending s. 429.41,
124 F.S.; providing that certain staffing requirements
125 apply only to residents in continuing care facilities
126 who are receiving the relevant service; amending s.
127 429.52, F.S.; requiring each newly hired employee of
128 an assisted living facility to attend a preservice
129 orientation provided by the assisted living facility;
130 requiring the employee and administrator to sign a

131 statement that the employee completed the required
 132 pre-service orientation and keep the signed statement
 133 in the employee's personnel record; requiring
 134 additional hours of training for assistance with
 135 medication; conforming a cross-reference; creating s.
 136 429.55, F.S.; requiring the Office of Program Policy
 137 Analysis and Government Accountability to study the
 138 reliability of facility surveys and submit to the
 139 Governor and the Legislature its findings and
 140 recommendations; requiring the agency to implement a
 141 rating system of assisted living facilities by a
 142 specified date, adopt rules, and create content for
 143 the agency's website that makes available to consumers
 144 information regarding assisted living facilities;
 145 providing criteria for the content; providing an
 146 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," ~~for purposes of this section,~~ means an individual who

157 receives social security disability income due to a mental
158 disorder as determined by the Social Security Administration or
159 receives supplemental security income due to a mental disorder
160 as determined by the Social Security Administration and receives
161 optional state supplementation.

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

168 (a) A mental health resident has been assessed by a
169 psychiatrist, clinical psychologist, clinical social worker, or
170 psychiatric nurse, or an individual who is supervised by one of
171 these professionals, and determined to be appropriate to reside
172 in an assisted living facility. The documentation must be
173 provided to the administrator of the facility within 30 days
174 after the mental health resident has been admitted to the
175 facility. An evaluation completed upon discharge from a state
176 mental hospital meets the requirements of this subsection
177 related to appropriateness for placement as a mental health
178 resident if it was completed within 90 days before ~~prior to~~
179 admission to the facility.

180 (b) A cooperative agreement, as required in s. 429.075, is
181 developed by ~~between~~ the mental health care services provider
182 that serves a mental health resident and the administrator of

183 the assisted living facility with a limited mental health
184 license in which the mental health resident is living. ~~Any~~
185 ~~entity that provides Medicaid prepaid health plan services shall~~
186 ~~ensure the appropriate coordination of health care services with~~
187 ~~an assisted living facility in cases where a Medicaid recipient~~
188 ~~is both a member of the entity's prepaid health plan and a~~
189 ~~resident of the assisted living facility. If the entity is at~~
190 ~~risk for Medicaid targeted case management and behavioral health~~
191 ~~services, the entity shall inform the assisted living facility~~
192 ~~of the procedures to follow should an emergent condition arise.~~

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

202 (d) The assisted living facility with a limited mental
203 health license is provided with documentation that the
204 individual meets the definition of a mental health resident.

205 (e) The mental health services provider assigns a case
206 manager to each mental health resident for whom the entity is
207 responsible ~~who lives in an assisted living facility with a~~
208 ~~limited mental health license~~. The case manager shall coordinate

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

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

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

227 (3) The Secretary of Children and ~~Family~~ Families
 228 ~~Services~~, in consultation with the Agency for Health Care
 229 Administration, shall ~~annually~~ require each district
 230 administrator to develop, with community input, a detailed
 231 annual plan that demonstrates ~~detailed plans that demonstrate~~
 232 how the district will ensure the provision of state-funded
 233 mental health and substance abuse treatment services to
 234 residents of assisted living facilities that hold a limited

235 mental health license. This plan ~~These plans~~ must be consistent
236 with the substance abuse and mental health district plan
237 developed pursuant to s. 394.75 and must address case management
238 services; access to consumer-operated drop-in centers; access to
239 services during evenings, weekends, and holidays; supervision of
240 the clinical needs of the residents; and access to emergency
241 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'
 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

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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
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 relicensure, or upon request in writing by
316 a licensee under this part and part II of chapter 408. The
317 notification of approval or the denial of the request shall be
318 made in accordance with part II of chapter 408. Each existing
319 facility that qualifies ~~facilities qualifying~~ to provide
320 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
340 part 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 for
346 less than 2 years, the initial extended congregate care license
347 must be provisional and may not exceed 6 months. Within the
348 first 3 months after the provisional license is issued, the
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 with a provisional extended
356 congregate care license that demonstrates compliance with all of
357 the requirements of an extended congregate care license during
358 the inspection shall be issued an extended congregate care
359 license. In addition to sanctions authorized under this part, if
360 violations are found during the inspection and the licensee
361 fails to demonstrate compliance with all assisted living
362 requirements during a followup inspection, the licensee shall
363 immediately suspend extended congregate care services, and the
364 provisional extended congregate care license expires. The agency

365 may extend the provisional license for not more than 1 month in
366 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
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
384 24 months; ~~been licensed for at least 24 months to provide~~
385 ~~extended congregate care services, if, during the inspection,~~
386 ~~the 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
407 the 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
420 a 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~~
435 ~~services is to allow residents, as they become more impaired,~~
436 ~~the option of remaining in a familiar setting from which they~~
437 ~~would otherwise be disqualified for continued residency. A~~
438 ~~facility licensed to provide extended congregate care services~~
439 ~~may also admit an individual who exceeds the admission criteria~~
440 ~~for a 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~~
 454 ~~may result in denial of extended congregate care license~~
 455 ~~renewal.~~

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

459 1. In order for limited nursing services to be provided in
 460 a facility licensed under this part, the agency must first
 461 determine that all requirements established in law and rule are
 462 met and must specifically designate, on the facility's license,
 463 that such services may be provided. This ~~Such~~ designation may be
 464 made at the time of initial licensure or licensure renewal
 465 ~~relicensure~~, or upon request in writing by a licensee under this
 466 part and part II of chapter 408. Notification of approval or
 467 denial of such request shall be made in accordance with part II
 468 of chapter 408. An existing facility that qualifies facilities

469 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
470 maintained a standard license and may not have been subject to
471 administrative sanctions that affect the health, safety, and
472 welfare of residents for the previous 2 years or since initial
473 licensure if the facility has been licensed for less than 2
474 years.

475 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide
476 limited nursing services shall maintain a written progress
477 report on each person who receives such nursing services. The
478 ~~which~~ report must describe ~~describes~~ the type, amount, duration,
479 scope, and outcome of services that are rendered and the general
480 status of the resident's health. A registered nurse representing
481 the agency shall visit the facility ~~such facilities~~ at least
482 annually ~~twice a year~~ to monitor residents who are receiving
483 limited nursing services and to determine if the facility is in
484 compliance with applicable provisions of this part, part II of
485 chapter 408, and related rules. The monitoring visits may be
486 provided through contractual arrangements with appropriate
487 community agencies. A registered nurse shall also serve as part
488 of the team that inspects such facility. Visits may be in
489 conjunction with other agency inspections. The agency may waive
490 the required yearly monitoring visit for a facility that has:
491 a. Had a limited nursing services license for at least 24
492 months;
493 b. No class I or class II violations and no uncorrected
494 class III violations; and

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

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

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

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

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

521 part, part II of chapter 408, and applicable rules. This
522 training must ~~will~~ be provided by or approved by the Department
523 of Children and Families ~~Family 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
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
564 the 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.

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 relicensure, or a licensee that holds a provisional license to
 586 meet the minimum license requirements of this part, or related
 587 rules, at the time of license application or renewal.

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

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

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

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

604 (3) The agency may deny or revoke a license of an ~~to any~~
 605 applicant or controlling interest as defined in part II of
 606 chapter 408 which has or had a 25 percent ~~25-percent~~ or greater
 607 financial or ownership interest in any other facility that is
 608 licensed under this part, or in any entity licensed by this
 609 state or another state to provide health or residential care, if
 610 that ~~which~~ facility or entity during the 5 years prior to the
 611 application for a license closed due to financial inability to
 612 operate; had a receiver appointed or a license denied,
 613 suspended, or revoked; was subject to a moratorium; or had an
 614 injunctive proceeding initiated against it.

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

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

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

623 (c) The facility is cited for two or more class I
 624 violations arising from separate surveys or investigations

625 ~~within a 2-year period that has two or more class I violations~~
626 ~~that are similar or identical to violations identified by the~~
627 ~~agency during a survey, inspection, monitoring visit, or~~
628 ~~complaint investigation occurring within the previous 2 years.~~

629 (5) An action taken by the agency to suspend, deny, or
630 revoke a facility's license under this part or part II of
631 chapter 408, in which the agency claims that the facility owner
632 or an employee of the facility has threatened the health,
633 safety, or welfare of a resident of the facility, must be heard
634 by the Division of Administrative Hearings of the Department of
635 Management Services within 120 days after receipt of the
636 facility's request for a hearing, unless that time limitation is
637 waived by both parties. The administrative law judge shall ~~must~~
638 render a decision within 30 days after receipt of a proposed
639 recommended order.

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

651 ~~are involved in an appellate proceeding pursuant to s. 120.60~~
 652 ~~related to the denial, suspension, or revocation of a license.~~

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

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

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

663 429.178 Special care for persons with Alzheimer's disease
 664 or other related disorders.—

665 (2)(a) An individual who is employed by a facility that
 666 provides special care for residents who have ~~with~~ Alzheimer's
 667 disease or other related disorders, and who has regular contact
 668 with such residents, must complete up to 4 hours of initial
 669 dementia-specific training developed or approved by the
 670 department. The training must ~~shall~~ be completed within 3 months
 671 after beginning employment and satisfy ~~shall satisfy~~ the core
 672 training requirements of s. 429.52(3)(g) ~~429.52(2)(g)~~.

673 (b) A direct caregiver who is employed by a facility that
 674 provides special care for residents who have ~~with~~ Alzheimer's
 675 disease or other related disorders, ~~and who~~ provides direct care
 676 to such residents, ~~and who~~ must complete the required initial training

677 and 4 additional hours of training developed or approved by the
 678 department. The training must ~~shall~~ be completed within 9 months
 679 after beginning employment and satisfy ~~shall satisfy~~ the core
 680 training requirements of s. 429.52(3)(g) ~~429.52(2)(g)~~.

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

683 429.19 Violations; imposition of administrative fines;
 684 grounds.—

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

694 (2) Each violation of this part and adopted rules must
 695 ~~shall~~ be classified according to the nature of the violation and
 696 the gravity of its probable effect on facility residents. The
 697 agency shall indicate the classification on the written notice
 698 of the violation as follows:

699 (a) Class "I" violations are defined in s. 408.813. The
 700 agency shall impose an administrative fine of \$7,500 for each a
 701 cited class I violation in a facility that is licensed for fewer
 702 than 100 beds at the time of the violation ~~in an amount not less~~

703 ~~than \$5,000 and not exceeding \$10,000 for each violation. The~~
704 agency shall impose an administrative fine of \$11,250 for each
705 cited class I violation in a facility that is licensed for 100
706 or more beds at the time of the violation. If the agency has
707 knowledge of a class I violation which occurred within 12 months
708 before an inspection, a fine must be levied for that violation,
709 regardless of whether the noncompliance is corrected before the
710 inspection.

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

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

727 (d) Class "IV" violations are defined in s. 408.813. The
728 agency shall impose an administrative fine of \$150 for each a

729 cited class IV violation in a facility that is licensed for
730 fewer than 100 beds at the time of the violation ~~in an amount~~
731 ~~not less than \$100 and not exceeding \$200 for each violation.~~
732 The agency shall impose an administrative fine of \$225 for each
733 cited class IV violation in a facility that is licensed for 100
734 or more beds at the time of the violation.

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

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

751 (g) Regardless of the class of violation cited, instead of
752 the fine amounts listed in paragraphs (a)-(d), the agency shall
753 impose an administrative fine of \$500 if a facility is found not
754 to be in compliance with the background screening requirements

755 as provided in s. 408.809.

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

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

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

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

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

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

770 (3)(4) Each day of continuing violation after the date
771 established by the agency ~~fixed~~ for correction ~~termination~~ of
772 the violation, ~~as ordered by the agency,~~ constitutes an
773 additional, separate, and distinct violation.

774 (4)(5) An ~~Any~~ action taken to correct a violation shall be
775 documented in writing by the owner or administrator of the
776 facility and verified through followup visits by agency
777 personnel. The agency may impose a fine and, in the case of an
778 owner-operated facility, revoke or deny a facility's license
779 when a facility administrator fraudulently misrepresents action
780 taken to correct a violation.

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781 (5)~~(6)~~ A ~~Any~~ facility whose owner fails to apply for a
782 change-of-ownership license in accordance with part II of
783 chapter 408 and operates the facility under the new ownership is
784 subject to a fine of \$5,000.

785 (6)~~(7)~~ In addition to any administrative fines imposed,
786 the agency may assess a survey fee, equal to the lesser of one
787 half of the facility's biennial license and bed fee or \$500, to
788 cover the cost of conducting initial complaint investigations
789 that result in the finding of a violation that was the subject
790 of the complaint or monitoring visits conducted under s.
791 429.28(3)(c) to verify the correction of the violations.

792 (7)~~(8)~~ During an inspection, the agency shall make a
793 reasonable attempt to discuss each violation with the owner or
794 administrator of the facility, prior to written notification.

795 (8)~~(9)~~ The agency shall develop and disseminate an annual
796 list of all facilities sanctioned or fined for violations of
797 state standards, the number and class of violations involved,
798 the penalties imposed, and the current status of cases. The list
799 shall be disseminated, at no charge, to the Department of
800 Elderly Affairs, the Department of Health, the Department of
801 Children and Families ~~Family Services~~, the Agency for Persons
802 with Disabilities, the area agencies on aging, the Florida
803 Statewide Advocacy Council, and the state and local ombudsman
804 councils. The Department of Children and Families ~~Family~~
805 ~~Services~~ shall disseminate the list to service providers under
806 contract to the department who are responsible for referring

807 persons to a facility for residency. The agency may charge a fee
808 commensurate with the cost of printing and postage to other
809 interested parties requesting a copy of this list. This
810 information may be provided electronically or through the
811 agency's website ~~Internet site~~.

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

814 429.256 Assistance with self-administration of
815 medication.—

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

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

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

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

829 (d) Applying topical medications.

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

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

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

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

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

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

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

846 (l) Assisting with measuring vital signs.

847 (m) Assisting with colostomy bags.

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

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

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

853 429.28 Resident bill of rights.—

854 (2) The administrator of a facility shall ensure that a
 855 written notice of the rights, obligations, and prohibitions set
 856 forth in this part is posted in a prominent place in each
 857 facility and read or explained to residents who cannot read. The
 858 ~~This~~ notice must ~~shall~~ include the name, address, and telephone

859 numbers of the local ombudsman council, the ~~and~~ central abuse
 860 hotline, and, if ~~when~~ applicable, Disability Rights Florida the
 861 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
 862 ~~Florida local advocacy council~~, where complaints may be lodged.
 863 The notice must state that a complaint made to the Office of
 864 State Long-Term Care Ombudsman or a local long-term care
 865 ombudsman council, the names and identities of the residents
 866 involved in the complaint, and the identity of complainants are
 867 kept confidential pursuant to s. 400.0077 and that retaliatory
 868 action cannot be taken against a resident for presenting
 869 grievances or for exercising any other resident right. The
 870 facility must ensure a resident's access to a telephone to call
 871 the local ombudsman council, central abuse hotline, and
 872 Disability Rights Florida Advocacy Center for Persons with
 873 ~~Disabilities, Inc., and the Florida local advocacy council.~~

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

- 877 (a) Exercises any right set forth in this section.
- 878 (b) Appears as a witness in any hearing, inside or outside
 879 the facility.
- 880 (c) Files a civil action alleging a violation of the
 881 provisions of this part or notifies a state attorney or the
 882 Attorney General of a possible violation of such provisions.

883 (6) A ~~Any~~ facility that ~~which~~ terminates the residency of
 884 an individual who participated in activities specified in

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885 subsection (5) must ~~shall~~ show good cause in a court of
886 competent jurisdiction. If good cause is not shown, the agency
887 shall impose a fine of \$2,500 in addition to any other penalty
888 assessed against the facility.

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

891 429.34 Right of entry and inspection.—

892 (1) In addition to the requirements of s. 408.811, any
893 duly designated officer or employee of the department, the
894 Department of Children and Families ~~Family Services~~, the
895 Medicaid Fraud Control Unit of the Office of the Attorney
896 General, the state or local fire marshal, or a member of the
897 state or local long-term care ombudsman council has ~~shall have~~
898 the right to enter unannounced upon and into the premises of any
899 facility licensed pursuant to this part in order to determine
900 the state of compliance with ~~the provisions of~~ this part, part
901 II of chapter 408, and applicable rules. Data collected by the
902 state or local long-term care ombudsman councils or the state or
903 local advocacy councils may be used by the agency in
904 investigations involving violations of regulatory standards. A
905 person specified in this section who knows or has reasonable
906 cause to suspect that a vulnerable adult has been or is being
907 abused, neglected, or exploited shall immediately report such
908 knowledge or suspicion to the central abuse hotline pursuant to
909 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
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 licenses a
939 building or part of a building designated for independent living
940 for assisted living, staffing requirements established in rule
941 apply only to residents who receive personal, limited nursing,
942 or extended congregate care services under this part. Such
943 facilities shall retain a log listing the names and unit number
944 for residents receiving these services. The log must be
945 available to surveyors upon request. Except for uniform
946 firesafety standards, the department shall adopt by rule
947 separate and distinct standards for facilities with 16 or fewer
948 beds and for facilities with 17 or more beds. The standards for
949 facilities with 16 or fewer beds must ~~shall~~ be appropriate for a
950 noninstitutional residential environment; it ~~however, provided~~
951 ~~that~~ the structure may not be ~~is no~~ more than two stories in
952 height and all persons who cannot exit the facility unassisted
953 in an emergency must reside on the first floor. The department,
954 in conjunction with the agency, may make other distinctions
955 among types of facilities as necessary to enforce the provisions
956 of this part. Where appropriate, the agency shall offer
957 alternate solutions for complying with established standards,
958 based on distinctions made by the department and the agency
959 relative to the physical characteristics of facilities and the
960 types of care offered ~~therein~~.

961 Section 13. Subsections (1) through (11) of section
962 429.52, Florida Statutes, are renumbered as subsections (2)

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963 through (12), respectively, a new subsection (1) is added to
964 that section, and present subsections (5) and (9) of that
965 section are amended, to read:

966 429.52 Staff training and educational programs; core
967 educational requirement.—

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

979 (6)~~(5)~~ Staff involved with the management of medications
980 and assisting with the self-administration of medications under
981 s. 429.256 must complete a minimum of 6 4 additional hours of
982 training provided by a registered nurse, licensed pharmacist, or
983 department staff. The department shall establish by rule the
984 minimum requirements of this additional training.

985 (10)~~(9)~~ The training required by this section other than
986 the preservice orientation must ~~shall~~ be conducted by persons
987 registered with the department as having the requisite
988 experience and credentials to conduct the training. A person

989 seeking to register as a trainer must provide the department
 990 with proof of completion of the minimum core training education
 991 requirements, successful passage of the competency test
 992 established under this section, and proof of compliance with the
 993 continuing education requirement in subsection (5) ~~(4)~~.

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

1015 website either directly or indirectly through a link to another
 1016 established website or websites of the agency's choosing. The
 1017 website must be searchable by facility name, city, or zip code.
 1018 At a minimum, the content must include:

1019 (a) Information on each licensed assisted living facility,
 1020 including, but not limited to:

- 1021 1. The name and address of the facility.
- 1022 2. The number and type of licensed beds in the facility.
- 1023 3. The types of licenses held by the facility.
- 1024 4. The facility's license expiration date and status.
- 1025 5. Proprietary or nonproprietary status of the licensee.
- 1026 6. Any affiliation with a company or other organization
 1027 owning or managing more than one assisted living facility in
 1028 this state.
- 1029 7. The total number of clients that the facility is
 1030 licensed to serve and the most recently available occupancy
 1031 levels.
- 1032 8. The number of private and semiprivate rooms offered.
- 1033 9. The bed-hold policy.
- 1034 10. The religious affiliation, if any, of the assisted
 1035 living facility.
- 1036 11. The languages spoken by the staff.
- 1037 12. Availability of nurses.
- 1038 13. Forms of payment accepted, including, but not limited
 1039 to, Medicaid, Medicaid long-term managed care, private
 1040 insurance, health maintenance organization, Veterans

1041 Administration, CHAMPUS program, or workers' compensation
 1042 coverage.

1043 14. Indication if the licensee is operating under
 1044 bankruptcy protection.

1045 15. Recreational and other programs available.

1046 16. Special care units or programs offered.

1047 17. Whether the facility provides mental health services,
 1048 as defined in s. 394.67, Florida Statutes, to residents with
 1049 mental illness and the number of mental health residents.

1050 18. Whether the facility is a part of a retirement
 1051 community that offers other services pursuant to part II or part
 1052 III of chapter 400, part I or part III of chapter 429, or
 1053 chapter 651, Florida Statutes.

1054 19. Links to the State Long-Term Care Ombudsman Program
 1055 website and the program's statewide toll-free telephone number.

1056 20. Links to the Internet websites of the providers or
 1057 their affiliates.

1058 21. Other relevant information that the agency currently
 1059 collects.

1060 (b) Survey and violation information for the facility,
 1061 including a list of the facility's violations committed during
 1062 the previous 60 months, which upon the effective date of this
 1063 act may include violations committed on or after July 1, 2009.
 1064 The list shall be updated monthly and include for each
 1065 violation:

1066 1. A summary of the violation, including all licensure,

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1067 revisit, and complaint survey information, presented in a manner
1068 understandable by the general public.

1069 2. Any sanctions imposed by final order.

1070 3. The date the corrective action was confirmed by the
1071 agency.

1072 (c) Links to inspection reports that the agency has on
1073 file.

1074 Section 16. This act shall take effect July 1, 2014.