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LEGISLATIVE ACTION

Senate	.	House
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Floor: 10/AD/3R	.	Floor: SEN1/RC
05/01/2014 08:06 PM	.	05/02/2014 10:11 PM
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Senator Sobel moved the following:

**Senate Amendment (with title amendment)**

Between lines 1104 and 1105  
insert:

Section 27. Section 394.4574, Florida Statutes, is amended  
to read:

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

(1) As used in this section, the term "mental health  
resident" ~~"mental health resident,"~~ for purposes of this



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12 ~~section,~~ means an individual who receives social security  
13 disability income due to a mental disorder as determined by the  
14 Social Security Administration or receives supplemental security  
15 income due to a mental disorder as determined by the Social  
16 Security Administration and receives optional state  
17 supplementation.

18 (2) Medicaid managed care plans are responsible for  
19 Medicaid-enrolled mental health residents, and managing entities  
20 under contract with the department are responsible for mental  
21 health residents who are not enrolled in a Medicaid health plan.

22 A Medicaid managed care plan or a managing entity, as  
23 appropriate, shall ~~The department must~~ ensure that:

24 (a) A mental health resident has been assessed by a  
25 psychiatrist, clinical psychologist, clinical social worker, or  
26 psychiatric nurse, or an individual who is supervised by one of  
27 these professionals, and determined to be appropriate to reside  
28 in an assisted living facility. The documentation must be  
29 provided to the administrator of the facility within 30 days  
30 after the mental health resident has been admitted to the  
31 facility. An evaluation completed upon discharge from a state  
32 mental hospital meets the requirements of this subsection  
33 related to appropriateness for placement as a mental health  
34 resident if it was completed within 90 days before ~~prior to~~  
35 admission to the facility.

36 (b) A cooperative agreement, as required in s. 429.075, is  
37 developed by ~~between~~ the mental health care services provider  
38 that serves a mental health resident and the administrator of  
39 the assisted living facility with a limited mental health  
40 license in which the mental health resident is living. ~~Any~~



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41 ~~entity that provides Medicaid prepaid health plan services shall~~  
42 ~~ensure the appropriate coordination of health care services with~~  
43 ~~an assisted living facility in cases where a Medicaid recipient~~  
44 ~~is both a member of the entity's prepaid health plan and a~~  
45 ~~resident of the assisted living facility. If the entity is at~~  
46 ~~risk for Medicaid targeted case management and behavioral health~~  
47 ~~services, the entity shall inform the assisted living facility~~  
48 ~~of the procedures to follow should an emergent condition arise.~~

49 (c) The community living support plan, as defined in s.  
50 429.02, has been prepared by a mental health resident and his or  
51 her a mental health case manager ~~of that resident~~ in  
52 consultation with the administrator of the facility or the  
53 administrator's designee. The plan must be completed and  
54 provided to the administrator of the assisted living facility  
55 with a limited mental health license in which the mental health  
56 resident lives within 30 days after the resident's admission.  
57 The support plan and the agreement may be in one document.

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

61 (e) The mental health services provider assigns a case  
62 manager to each mental health resident for whom the entity is  
63 responsible who lives in an assisted living facility with a  
64 limited mental health license. The case manager shall coordinate  
65 is responsible for coordinating the development ~~of~~ and  
66 implementation of the community living support plan defined in  
67 s. 429.02. The plan must be updated at least annually, or when  
68 there is a significant change in the resident's behavioral  
69 health status, such as an inpatient admission or a change in



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70 medication, level of service, or residence. Each case manager  
71 shall keep a record of the date and time of any face-to-face  
72 interaction with the resident and make the record available to  
73 the responsible entity for inspection. The record must be  
74 retained for at least 2 years after the date of the most recent  
75 interaction.

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

79 (g) Concerns are reported to the appropriate regulatory  
80 oversight organization if a regulated provider fails to deliver  
81 appropriate services or otherwise acts in a manner that has the  
82 potential to result in harm to the resident.

83 (3) The Secretary of Children and ~~Families~~ Family Services,  
84 in consultation with the Agency for Health Care Administration,  
85 shall ~~annually~~ require each district administrator to develop,  
86 with community input, a detailed annual plan that demonstrates  
87 ~~detailed plans that demonstrate~~ how the district will ensure the  
88 provision of state-funded mental health and substance abuse  
89 treatment services to residents of assisted living facilities  
90 that hold a limited mental health license. This plan ~~These plans~~  
91 must be consistent with the substance abuse and mental health  
92 district plan developed pursuant to s. 394.75 and must address  
93 case management services; access to consumer-operated drop-in  
94 centers; access to services during evenings, weekends, and  
95 holidays; supervision of the clinical needs of the residents;  
96 and access to emergency psychiatric care.

97 Section 28. Subsection (1) of section 400.0074, Florida  
98 Statutes, is amended, and paragraph (h) is added to subsection



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99 (2) of that section, to read:

100 400.0074 Local ombudsman council onsite administrative  
101 assessments.-

102 (1) In addition to any specific investigation conducted  
103 pursuant to a complaint, the local council shall conduct, at  
104 least annually, an onsite administrative assessment of each  
105 nursing home, assisted living facility, and adult family-care  
106 home within its jurisdiction. This administrative assessment  
107 must be comprehensive in nature and must ~~shall~~ focus on factors  
108 affecting residents' the rights, health, safety, and welfare ~~of~~  
109 ~~the residents~~. Each local council is encouraged to conduct a  
110 similar onsite administrative assessment of each additional  
111 long-term care facility within its jurisdiction.

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

114 (h) The local council shall conduct an exit consultation  
115 with the facility administrator or administrator designee to  
116 discuss issues and concerns in areas affecting residents'  
117 rights, health, safety, and welfare and, if needed, make  
118 recommendations for improvement.

119 Section 29. Subsection (2) of section 400.0078, Florida  
120 Statutes, is amended to read:

121 400.0078 Citizen access to State Long-Term Care Ombudsman  
122 Program services.-

123 (2) ~~Every resident or representative of a resident shall~~  
124 ~~receive,~~ Upon admission to a long-term care facility, each  
125 resident or representative of a resident must receive  
126 information regarding the purpose of the State Long-Term Care  
127 Ombudsman Program, the statewide toll-free telephone number for



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128 receiving complaints, information that retaliatory action cannot  
129 be taken against a resident for presenting grievances or for  
130 exercising any other resident right, and other relevant  
131 information regarding how to contact the program. Each resident  
132 or his or her representative ~~Residents or their representatives~~  
133 must be furnished additional copies of this information upon  
134 request.

135 Section 30. Subsection (13) of section 429.02, Florida  
136 Statutes, is amended to read:

137 429.02 Definitions.—When used in this part, the term:

138 (13) "Limited nursing services" means acts that may be  
139 performed by a person licensed under ~~pursuant to part I of~~  
140 ~~chapter 464 by persons licensed thereunder while carrying out~~  
141 ~~their professional duties but limited to those acts which the~~  
142 ~~department specifies by rule. Acts which may be specified by~~  
143 ~~rule as allowable~~ Limited nursing services shall be for persons  
144 who meet the admission criteria established by the department  
145 for assisted living facilities and shall not be complex enough  
146 to require 24-hour nursing supervision and may include such  
147 services as the application and care of routine dressings, and  
148 care of casts, braces, and splints.

149 Section 31. Paragraphs (b) and (c) of subsection (3) of  
150 section 429.07, Florida Statutes, are amended to read:

151 429.07 License required; fee.—

152 (3) In addition to the requirements of s. 408.806, each  
153 license granted by the agency must state the type of care for  
154 which the license is granted. Licenses shall be issued for one  
155 or more of the following categories of care: standard, extended  
156 congregate care, limited nursing services, or limited mental



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157 health.

158 (b) An extended congregate care license shall be issued to  
159 each facility that has been licensed as an assisted living  
160 facility for 2 or more years and that provides services  
161 ~~facilities providing~~, directly or through contract, ~~services~~  
162 beyond those authorized in paragraph (a), including services  
163 performed by persons licensed under part I of chapter 464 and  
164 supportive services, as defined by rule, to persons who would  
165 otherwise be disqualified from continued residence in a facility  
166 licensed under this part. An extended congregate care license  
167 may be issued to a facility that has a provisional extended  
168 congregate care license and meets the requirements for licensure  
169 under subparagraph 2. The primary purpose of extended congregate  
170 care services is to allow residents the option of remaining in a  
171 familiar setting from which they would otherwise be disqualified  
172 for continued residency as they become more impaired. A facility  
173 licensed to provide extended congregate care services may also  
174 admit an individual who exceeds the admission criteria for a  
175 facility with a standard license, if he or she is determined  
176 appropriate for admission to the extended congregate care  
177 facility.

178 1. In order for extended congregate care services to be  
179 provided, the agency must first determine that all requirements  
180 established in law and rule are met and must specifically  
181 designate, on the facility's license, that such services may be  
182 provided and whether the designation applies to all or part of  
183 the facility. This ~~Such~~ designation may be made at the time of  
184 initial licensure or licensure renewal ~~relicensure~~, or upon  
185 request in writing by a licensee under this part and part II of



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186 chapter 408. The notification of approval or the denial of the  
187 request shall be made in accordance with part II of chapter 408.  
188 Each existing facility that qualifies ~~facilities qualifying~~ to  
189 provide extended congregate care services must have maintained a  
190 standard license and may not have been subject to administrative  
191 sanctions during the previous 2 years, or since initial  
192 licensure if the facility has been licensed for less than 2  
193 years, for any of the following reasons:

194 a. A class I or class II violation;

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

198 c. Three or more class III violations that were not  
199 corrected in accordance with the corrective action plan approved  
200 by the agency;

201 d. Violation of resident care standards which results in  
202 requiring the facility to employ the services of a consultant  
203 pharmacist or consultant dietitian;

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

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

210  
211 The agency may deny or revoke a facility's extended congregate  
212 care license for not meeting the criteria for an extended  
213 congregate care license as provided in this subparagraph.

214 2. If an assisted living facility has been licensed for





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215 less than 2 years, the initial extended congregate care license  
216 must be provisional and may not exceed 6 months. Within the  
217 first 3 months after the provisional license is issued, the  
218 licensee shall notify the agency, in writing, when it has  
219 admitted at least one extended congregate care resident, after  
220 which an unannounced inspection shall be made to determine  
221 compliance with requirements of an extended congregate care  
222 license. Failure to admit an extended congregate care resident  
223 within the first 3 months shall render the extended congregate  
224 care license void. A licensee that has a provisional extended  
225 congregate care license which demonstrates compliance with all  
226 of the requirements of an extended congregate care license  
227 during the inspection shall be issued an extended congregate  
228 care license. In addition to sanctions authorized under this  
229 part, if violations are found during the inspection and the  
230 licensee fails to demonstrate compliance with all assisted  
231 living requirements during a followup inspection, the licensee  
232 shall immediately suspend extended congregate care services, and  
233 the provisional extended congregate care license expires. The  
234 agency may extend the provisional license for not more than 1  
235 month in order to complete a followup visit.

236 3.2. A facility that is licensed to provide extended  
237 congregate care services shall maintain a written progress  
238 report on each person who receives services which describes the  
239 type, amount, duration, scope, and outcome of services that are  
240 rendered and the general status of the resident's health. A  
241 registered nurse, or appropriate designee, representing the  
242 agency shall visit the facility at least twice a year ~~quarterly~~  
243 to monitor residents who are receiving extended congregate care



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244 services and to determine if the facility is in compliance with  
245 this part, part II of chapter 408, and relevant rules. One of  
246 the visits may be in conjunction with the regular survey. The  
247 monitoring visits may be provided through contractual  
248 arrangements with appropriate community agencies. A registered  
249 nurse shall serve as part of the team that inspects the  
250 facility. The agency may waive one of the required yearly  
251 monitoring visits for a facility that has:

252 a. Held an extended congregate care license for at least 24  
253 months; ~~been licensed for at least 24 months to provide extended~~  
254 ~~congregate care services, if, during the inspection, the~~  
255 ~~registered nurse determines that extended congregate care~~  
256 ~~services are being provided appropriately, and if the facility~~  
257 ~~has~~

258 b. No class I or class II violations and no uncorrected  
259 class III violations; and-

260 c. No ombudsman council complaints that resulted in a  
261 citation for licensure ~~The agency must first consult with the~~  
262 ~~long term care ombudsman council for the area in which the~~  
263 ~~facility is located to determine if any complaints have been~~  
264 ~~made and substantiated about the quality of services or care.~~  
265 ~~The agency may not waive one of the required yearly monitoring~~  
266 ~~visits if complaints have been made and substantiated.~~

267 4.3- A facility that is licensed to provide extended  
268 congregate care services must:

269 a. Demonstrate the capability to meet unanticipated  
270 resident service needs.

271 b. Offer a physical environment that promotes a homelike  
272 setting, provides for resident privacy, promotes resident



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273 independence, and allows sufficient congregate space as defined  
274 by rule.

275 c. Have sufficient staff available, taking into account the  
276 physical plant and firesafety features of the building, to  
277 assist with the evacuation of residents in an emergency.

278 d. Adopt and follow policies and procedures that maximize  
279 resident independence, dignity, choice, and decisionmaking to  
280 permit residents to age in place, so that moves due to changes  
281 in functional status are minimized or avoided.

282 e. Allow residents or, if applicable, a resident's  
283 representative, designee, surrogate, guardian, or attorney in  
284 fact to make a variety of personal choices, participate in  
285 developing service plans, and share responsibility in  
286 decisionmaking.

287 f. Implement the concept of managed risk.

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

290 h. In addition to the training mandated in s. 429.52,  
291 provide specialized training as defined by rule for facility  
292 staff.

293 ~~5.4~~. A facility that is licensed to provide extended  
294 congregate care services is exempt from the criteria for  
295 continued residency set forth in rules adopted under s. 429.41.  
296 A licensed facility must adopt its own requirements within  
297 guidelines for continued residency set forth by rule. However,  
298 the facility may not serve residents who require 24-hour nursing  
299 supervision. A licensed facility that provides extended  
300 congregate care services must also provide each resident with a  
301 written copy of facility policies governing admission and



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302 retention.

303 ~~5. The primary purpose of extended congregate care services~~  
304 ~~is to allow residents, as they become more impaired, the option~~  
305 ~~of remaining in a familiar setting from which they would~~  
306 ~~otherwise be disqualified for continued residency. A facility~~  
307 ~~licensed to provide extended congregate care services may also~~  
308 ~~admit an individual who exceeds the admission criteria for a~~  
309 ~~facility with a standard license, if the individual is~~  
310 ~~determined appropriate for admission to the extended congregate~~  
311 ~~care facility.~~

312 6. Before the admission of an individual to a facility  
313 licensed to provide extended congregate care services, the  
314 individual must undergo a medical examination as provided in s.  
315 429.26(4) and the facility must develop a preliminary service  
316 plan for the individual.

317 7. ~~If~~ When a facility can no longer provide or arrange for  
318 services in accordance with the resident's service plan and  
319 needs and the facility's policy, the facility must ~~shall~~ make  
320 arrangements for relocating the person in accordance with s.  
321 429.28(1)(k).

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

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

327 1. In order for limited nursing services to be provided in  
328 a facility licensed under this part, the agency must first  
329 determine that all requirements established in law and rule are  
330 met and must specifically designate, on the facility's license,



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331 that such services may be provided. ~~This~~ ~~Such~~ designation may be  
332 made at the time of initial licensure or licensure renewal  
333 ~~relicensure~~, or upon request in writing by a licensee under this  
334 part and part II of chapter 408. Notification of approval or  
335 denial of such request shall be made in accordance with part II  
336 of chapter 408. An existing facility that qualifies ~~facilities~~  
337 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have  
338 maintained a standard license and may not have been subject to  
339 administrative sanctions that affect the health, safety, and  
340 welfare of residents for the previous 2 years or since initial  
341 licensure if the facility has been licensed for less than 2  
342 years.

343 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide  
344 limited nursing services shall maintain a written progress  
345 report on each person who receives such nursing services. The  
346 ~~which~~ report must describe ~~describes~~ the type, amount, duration,  
347 scope, and outcome of services that are rendered and the general  
348 status of the resident's health. A registered nurse representing  
349 the agency shall visit the facility ~~such facilities~~ at least  
350 annually ~~twice a year~~ to monitor residents who are receiving  
351 limited nursing services and to determine if the facility is in  
352 compliance with applicable provisions of this part, part II of  
353 chapter 408, and related rules. The monitoring visits may be  
354 provided through contractual arrangements with appropriate  
355 community agencies. A registered nurse shall also serve as part  
356 of the team that inspects such facility. Visits may be in  
357 conjunction with other agency inspections. The agency may waive  
358 the required yearly monitoring visit for a facility that has:

359 a. Had a limited nursing services license for at least 24



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360 months;

361 b. No class I or class II violations and no uncorrected  
362 class III violations; and

363 c. No ombudsman council complaints that resulted in a  
364 citation for licensure.

365 3. A person who receives limited nursing services under  
366 this part must meet the admission criteria established by the  
367 agency for assisted living facilities. When a resident no longer  
368 meets the admission criteria for a facility licensed under this  
369 part, arrangements for relocating the person shall be made in  
370 accordance with s. 429.28(1)(k), unless the facility is licensed  
371 to provide extended congregate care services.

372 Section 32. Section 429.075, Florida Statutes, is amended  
373 to read:

374 429.075 Limited mental health license.—An assisted living  
375 facility that serves one ~~three~~ or more mental health residents  
376 must obtain a limited mental health license.

377 (1) To obtain a limited mental health license, a facility  
378 must hold a standard license as an assisted living facility,  
379 must not have any current uncorrected ~~deficiencies or~~  
380 violations, and must ensure that, within 6 months after  
381 receiving a limited mental health license, the facility  
382 administrator and the staff of the facility who are in direct  
383 contact with mental health residents must complete training of  
384 no less than 6 hours related to their duties. This ~~Such~~  
385 designation may be made at the time of initial licensure or  
386 relicensure or upon request in writing by a licensee under this  
387 part and part II of chapter 408. Notification of approval or  
388 denial of such request shall be made in accordance with this



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389 part, part II of chapter 408, and applicable rules. This  
390 training must ~~will~~ be provided by or approved by the Department  
391 of Children and Families ~~Family Services~~.

392 (2) A facility that is ~~Facilities~~ licensed to provide  
393 services to mental health residents must ~~shall~~ provide  
394 appropriate supervision and staffing to provide for the health,  
395 safety, and welfare of such residents.

396 (3) A facility that has a limited mental health license  
397 must:

398 (a) Have a copy of each mental health resident's community  
399 living support plan and the cooperative agreement with the  
400 mental health care services provider or provide written evidence  
401 that a request for the community living support plan and the  
402 cooperative agreement was sent to the Medicaid managed care plan  
403 or managing entity under contract with the Department of  
404 Children and Families within 72 hours after admission. The  
405 support plan and the agreement may be combined.

406 (b) Have documentation ~~that is~~ provided by the Department  
407 of Children and Families ~~Family Services~~ that each mental health  
408 resident has been assessed and determined to be able to live in  
409 the community in an assisted living facility that has ~~with~~ a  
410 limited mental health license or provide written evidence that a  
411 request for documentation was sent to the Department of Children  
412 and Families within 72 hours after admission.

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

417 (d) Assist the mental health resident in carrying out the



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418 activities identified in the individual's community living  
419 support plan.

420 (4) A facility that has ~~with~~ a limited mental health  
421 license may enter into a cooperative agreement with a private  
422 mental health provider. For purposes of the limited mental  
423 health license, the private mental health provider may act as  
424 the case manager.

425 Section 33. Section 429.14, Florida Statutes, is amended to  
426 read:

427 429.14 Administrative penalties.—

428 (1) In addition to the requirements of part II of chapter  
429 408, the agency may deny, revoke, and suspend any license issued  
430 under this part and impose an administrative fine in the manner  
431 provided in chapter 120 against a licensee for a violation of  
432 any provision of this part, part II of chapter 408, or  
433 applicable rules, or for any of the following actions by a  
434 licensee, ~~for the actions of~~ any person subject to level 2  
435 background screening under s. 408.809, or ~~for the actions of~~ any  
436 facility staff ~~employee~~:

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

439 (b) A ~~The~~ determination by the agency that the owner lacks  
440 the financial ability to provide continuing adequate care to  
441 residents.

442 (c) Misappropriation or conversion of the property of a  
443 resident of the facility.

444 (d) Failure to follow the criteria and procedures provided  
445 under part I of chapter 394 relating to the transportation,  
446 voluntary admission, and involuntary examination of a facility





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447 resident.

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

- 450 1. One or more cited class I violations ~~deficiencies~~.  
451 2. Three or more cited class II violations ~~deficiencies~~.  
452 3. Five or more cited class III violations ~~deficiencies~~  
453 that have been cited on a single survey and have not been  
454 corrected within the times specified.

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

457 (g) Violation of a moratorium.

458 (h) Failure of the license applicant, the licensee during  
459 licensure renewal ~~relicensure~~, or a licensee that holds a  
460 provisional license to meet the minimum license requirements of  
461 this part, or related rules, at the time of license application  
462 or renewal.

463 (i) An intentional or negligent life-threatening act in  
464 violation of the uniform firesafety standards for assisted  
465 living facilities or other firesafety standards which ~~that~~  
466 threatens the health, safety, or welfare of a resident of a  
467 facility, as communicated to the agency by the local authority  
468 having jurisdiction or the State Fire Marshal.

469 (j) Knowingly operating any unlicensed facility or  
470 providing without a license any service that must be licensed  
471 under this chapter or chapter 400.

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

474 (2) Upon notification by the local authority having  
475 jurisdiction or by the State Fire Marshal, the agency may deny



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476 or revoke the license of an assisted living facility that fails  
477 to correct cited fire code violations that affect or threaten  
478 the health, safety, or welfare of a resident of a facility.

479 (3) The agency may deny or revoke a license of an ~~to any~~  
480 applicant or controlling interest as defined in part II of  
481 chapter 408 which has or had a 25 percent ~~25-percent~~ or greater  
482 financial or ownership interest in any other facility that is  
483 licensed under this part, or in any entity licensed by this  
484 state or another state to provide health or residential care, if  
485 that ~~which~~ facility or entity during the 5 years before ~~prior to~~  
486 the application for a license closed due to financial inability  
487 to operate; had a receiver appointed or a license denied,  
488 suspended, or revoked; was subject to a moratorium; or had an  
489 injunctive proceeding initiated against it.

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

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

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

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

504 (5) An action taken by the agency to suspend, deny, or



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505 revoke a facility's license under this part or part II of  
506 chapter 408, in which the agency claims that the facility owner  
507 or an employee of the facility has threatened the health,  
508 safety, or welfare of a resident of the facility, must be heard  
509 by the Division of Administrative Hearings of the Department of  
510 Management Services within 120 days after receipt of the  
511 facility's request for a hearing, unless that time limitation is  
512 waived by both parties. The administrative law judge shall ~~must~~  
513 render a decision within 30 days after receipt of a proposed  
514 recommended order.

515 (6) As provided under s. 408.814, the agency shall impose  
516 an immediate moratorium on an assisted living facility that  
517 fails to provide the agency access to the facility or prohibits  
518 the agency from conducting a regulatory inspection. The licensee  
519 may not restrict agency staff in accessing and copying records  
520 or in conducting confidential interviews with facility staff or  
521 any individual who receives services from the facility provide  
522 ~~to the Division of Hotels and Restaurants of the Department of~~  
523 ~~Business and Professional Regulation, on a monthly basis, a list~~  
524 ~~of those assisted living facilities that have had their licenses~~  
525 ~~denied, suspended, or revoked or that are involved in an~~  
526 ~~appellate proceeding pursuant to s. 120.60 related to the~~  
527 ~~denial, suspension, or revocation of a license.~~

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

531 (8) If a facility is required to relocate some or all of  
532 its residents due to agency action, that facility is exempt from  
533 the 45 days' notice requirement imposed under s. 429.28(1)(k).



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534 This subsection does not exempt the facility from any deadlines  
535 for corrective action set by the agency.

536 Section 34. Paragraphs (a) and (b) of subsection (2) of  
537 section 429.178, Florida Statutes, are amended to read:

538 429.178 Special care for persons with Alzheimer's disease  
539 or other related disorders.—

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

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

556 Section 35. Section 429.19, Florida Statutes, is amended to  
557 read:

558 429.19 Violations; imposition of administrative fines;  
559 grounds.—

560 (1) In addition to the requirements of part II of chapter  
561 408, the agency shall impose an administrative fine in the  
562 manner provided in chapter 120 for the violation of any



563 provision of this part, part II of chapter 408, and applicable  
564 rules by an assisted living facility, for the actions of any  
565 person subject to level 2 background screening under s. 408.809,  
566 for the actions of any facility employee, or for an intentional  
567 or negligent act seriously affecting the health, safety, or  
568 welfare of a resident of the facility.

569 (2) Each violation of this part and adopted rules must  
570 ~~shall~~ be classified according to the nature of the violation and  
571 the gravity of its probable effect on facility residents. The  
572 scope of a violation may be cited as an isolated, patterned, or  
573 widespread deficiency. An isolated deficiency is a deficiency  
574 affecting one or a very limited number of residents, or  
575 involving one or a very limited number of staff, or a situation  
576 that occurred only occasionally or in a very limited number of  
577 locations. A patterned deficiency is a deficiency in which more  
578 than a very limited number of residents are affected, or more  
579 than a very limited number of staff are affected, or the  
580 situation has occurred in several locations, or the same  
581 resident or residents have been affected by repeated occurrences  
582 of the same deficient practice but the effect of the deficient  
583 practice is not found to be pervasive throughout the facility. A  
584 widespread deficiency is a deficiency in which the problems  
585 causing the deficiency are pervasive in the facility or  
586 represent systemic failure that has affected or has the  
587 potential to affect a large portion of the facility's residents.

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

590 1. ~~(a)~~ Class "I" violations are defined in s. 408.813. The  
591 agency shall impose an administrative fine for a cited class I



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592 violation of \$5,000 for an isolated deficiency; \$7,500 for a  
593 patterned deficiency; and \$10,000 for a widespread deficiency.  
594 If the agency has knowledge of a class I violation that occurred  
595 within 12 months before an inspection, a fine must be levied for  
596 that violation, regardless of whether the noncompliance is  
597 corrected before the inspection ~~in an amount not less than~~  
598 ~~\$5,000 and not exceeding \$10,000 for each violation.~~

599 2. (b) Class "II" violations are defined in s. 408.813. The  
600 agency shall impose an administrative fine for a cited class II  
601 violation of \$1,000 for an isolated deficiency; \$3,000 for a  
602 patterned deficiency; and \$5,000 for a widespread deficiency ~~in~~  
603 ~~an amount not less than \$1,000 and not exceeding \$5,000 for each~~  
604 ~~violation.~~

605 3. (e) Class "III" violations are defined in s. 408.813. The  
606 agency shall impose an administrative fine for a cited class III  
607 violation of \$500 for an isolated deficiency; \$750 for a  
608 patterned deficiency; and \$1,000 for a widespread deficiency ~~in~~  
609 ~~an amount not less than \$500 and not exceeding \$1,000 for each~~  
610 ~~violation.~~

611 4. (d) Class "IV" violations are defined in s. 408.813. The  
612 agency shall impose an administrative fine for a cited class IV  
613 violation of \$100 for an isolated deficiency; \$150 for a  
614 patterned deficiency; and \$200 for a widespread deficiency ~~in an~~  
615 ~~amount not less than \$100 and not exceeding \$200 for each~~  
616 ~~violation.~~

617 (b) Any fine imposed for a class I violation or a class II  
618 violation must be doubled if a facility was previously cited for  
619 one or more class I or class II violations during the agency's  
620 last licensure inspection or any inspection or complaint



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621 investigation since the last licensure inspection.

622 (c) Notwithstanding ss. 408.813(2)(c) and 408.832, if a  
623 facility is cited for 10 or more class III violations during an  
624 inspection or survey, the agency shall impose a fine for each  
625 violation.

626 (d) Notwithstanding the fine amounts specified in  
627 subparagraphs (a)1.-4., and regardless of the class of violation  
628 cited, the agency shall impose an administrative fine of \$500 on  
629 a facility that is found not to be in compliance with the  
630 background screening requirements as provided in s. 408.809.

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

634 ~~(a) The gravity of the violation, including the probability~~  
635 ~~that death or serious physical or emotional harm to a resident~~  
636 ~~will result or has resulted, the severity of the action or~~  
637 ~~potential harm, and the extent to which the provisions of the~~  
638 ~~applicable laws or rules were violated.~~

639 ~~(b) Actions taken by the owner or administrator to correct~~  
640 ~~violations.~~

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

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

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

645 ~~(3)-(4) Each day of continuing violation after the date~~  
646 ~~established by the agency fixed for correction termination of~~  
647 ~~the violation, as ordered by the agency, constitutes an~~  
648 ~~additional, separate, and distinct violation.~~

649 ~~(4)-(5) An Any~~ action taken to correct a violation shall be



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650 documented in writing by the owner or administrator of the  
651 facility and verified through followup visits by agency  
652 personnel. The agency may impose a fine and, in the case of an  
653 owner-operated facility, revoke or deny a facility's license  
654 when a facility administrator fraudulently misrepresents action  
655 taken to correct a violation.

656 (5)~~(6)~~ A ~~Any~~ facility whose owner fails to apply for a  
657 change-of-ownership license in accordance with part II of  
658 chapter 408 and operates the facility under the new ownership is  
659 subject to a fine of \$5,000.

660 (6)~~(7)~~ In addition to any administrative fines imposed, the  
661 agency may assess a survey fee, equal to the lesser of one half  
662 of the facility's biennial license and bed fee or \$500, to cover  
663 the cost of conducting initial complaint investigations that  
664 result in the finding of a violation that was the subject of the  
665 complaint or monitoring visits conducted under s. 429.28(3)(c)  
666 to verify the correction of the violations.

667 (7)~~(8)~~ During an inspection, the agency shall make a  
668 reasonable attempt to discuss each violation with the owner or  
669 administrator of the facility, before ~~prior to~~ written  
670 notification.

671 (8)~~(9)~~ The agency shall develop and disseminate an annual  
672 list of all facilities sanctioned or fined for violations of  
673 state standards, the number and class of violations involved,  
674 the penalties imposed, and the current status of cases. The list  
675 shall be disseminated, at no charge, to the Department of  
676 Elderly Affairs, the Department of Health, the Department of  
677 Children and Families ~~Family Services~~, the Agency for Persons  
678 with Disabilities, the area agencies on aging, the Florida





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679 Statewide Advocacy Council, and the state and local ombudsman  
680 councils. The Department of Children and ~~Families~~ Family  
681 ~~Services~~ shall disseminate the list to service providers under  
682 contract to the department who are responsible for referring  
683 persons to a facility for residency. The agency may charge a fee  
684 commensurate with the cost of printing and postage to other  
685 interested parties requesting a copy of this list. This  
686 information may be provided electronically or through the  
687 agency's website ~~Internet site~~.

688 Section 36. Subsection (3) and paragraph (c) of subsection  
689 (4) of section 429.256, Florida Statutes, are amended to read:

690 429.256 Assistance with self-administration of medication.—

691 (3) Assistance with self-administration of medication  
692 includes:

693 (a) Taking the medication, in its previously dispensed,  
694 properly labeled container, including an insulin syringe that is  
695 prefilled with the proper dosage by a pharmacist and an insulin  
696 pen that is prefilled by the manufacturer, from where it is  
697 stored, and bringing it to the resident.

698 (b) In the presence of the resident, reading the label,  
699 opening the container, removing a prescribed amount of  
700 medication from the container, and closing the container.

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

704 (d) Applying topical medications.

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

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



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708 (g) Assisting with the use of a nebulizer, including  
709 removing the cap of a nebulizer, opening the unit dose of  
710 nebulizer solution, and pouring the prescribed premeasured dose  
711 of medication into the dispensing cup of the nebulizer.

712 (h) Using a glucometer to perform blood-glucose level  
713 checks.

714 (i) Assisting with putting on and taking off antiembolism  
715 stockings.

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

718 (k) Assisting with the use of a continuous positive airway  
719 pressure (CPAP) device, but not with titrating the prescribed  
720 setting of the device.

721 (l) Assisting with measuring vital signs.

722 (m) Assisting with colostomy bags.

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

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

726 Section 37. Subsections (2), (5), and (6) of section  
727 429.28, Florida Statutes, are amended to read:

728 429.28 Resident bill of rights.—

729 (2) The administrator of a facility shall ensure that a  
730 written notice of the rights, obligations, and prohibitions set  
731 forth in this part is posted in a prominent place in each  
732 facility and read or explained to residents who cannot read. The  
733 ~~This~~ notice must ~~shall~~ include the name, address, and telephone  
734 numbers of the local ombudsman council, the ~~and~~ central abuse  
735 hotline, and, if ~~when~~ applicable, Disability Rights Florida ~~the~~  
736 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~



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737 ~~Florida local advocacy council~~, where complaints may be lodged.  
738 The notice must state that a complaint made to the Office of  
739 State Long-Term Care Ombudsman or a local long-term care  
740 ombudsman council, the names and identities of the residents  
741 involved in the complaint, and the identity of complainants are  
742 kept confidential pursuant to s. 400.0077 and that retaliatory  
743 action cannot be taken against a resident for presenting  
744 grievances or for exercising any other resident right. The  
745 facility must ensure a resident's access to a telephone to call  
746 the local ombudsman council, central abuse hotline, and  
747 Disability Rights Florida Advocacy Center for Persons with  
748 Disabilities, Inc., and the Florida local advocacy council.

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

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

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

755 (c) Files a civil action alleging a violation of the  
756 provisions of this part or notifies a state attorney or the  
757 Attorney General of a possible violation of such provisions.

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

764 Section 38. Section 429.34, Florida Statutes, is amended to  
765 read:



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766 429.34 Right of entry and inspection.-

767 (1) In addition to the requirements of s. 408.811, any duly  
768 designated officer or employee of the department, the Department  
769 of Children and Families ~~Family Services~~, the Medicaid Fraud  
770 Control Unit of the Office of the Attorney General, the state or  
771 local fire marshal, or a member of the state or local long-term  
772 care ombudsman council has ~~shall have~~ the right to enter  
773 unannounced upon and into the premises of any facility licensed  
774 pursuant to this part in order to determine the state of  
775 compliance with ~~the provisions of~~ this part, part II of chapter  
776 408, and applicable rules. Data collected by the state or local  
777 long-term care ombudsman councils or the state or local advocacy  
778 councils may be used by the agency in investigations involving  
779 violations of regulatory standards. A person specified in this  
780 section who knows or has reasonable cause to suspect that a  
781 vulnerable adult has been or is being abused, neglected, or  
782 exploited shall immediately report such knowledge or suspicion  
783 to the central abuse hotline pursuant to chapter 415.

784 (2) The agency shall inspect each licensed assisted living  
785 facility at least once every 24 months to determine compliance  
786 with this chapter and related rules. If an assisted living  
787 facility is cited for one or more class I violations or two or  
788 more class II violations arising from separate surveys within a  
789 60-day period or due to unrelated circumstances during the same  
790 survey, the agency must conduct an additional licensure  
791 inspection within 6 months. In addition to any fines imposed on  
792 the facility under s. 429.19, the licensee shall pay a fee for  
793 the cost of the additional inspection equivalent to the standard  
794 assisted living facility license and per-bed fees, without



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795 exception for beds designated for recipients of optional state  
796 supplementation. The agency shall adjust the fee in accordance  
797 with s. 408.805.

798 Section 39. Subsection (2) of section 429.41, Florida  
799 Statutes, is amended to read:

800 429.41 Rules establishing standards.-

801 (2) In adopting any rules pursuant to this part, the  
802 department, in conjunction with the agency, shall make distinct  
803 standards for facilities based upon facility size; the types of  
804 care provided; the physical and mental capabilities and needs of  
805 residents; the type, frequency, and amount of services and care  
806 offered; and the staffing characteristics of the facility. Rules  
807 developed pursuant to this section may ~~shall~~ not restrict the  
808 use of shared staffing and shared programming in facilities that  
809 are part of retirement communities that provide multiple levels  
810 of care and otherwise meet the requirements of law and rule. If  
811 a continuing care facility licensed under chapter 651 or a  
812 retirement community offering multiple levels of care obtains a  
813 license pursuant to this chapter for a building or part of a  
814 building designated for independent living, staffing  
815 requirements established in rule apply only to residents who  
816 receive personal services, limited nursing services, or extended  
817 congregate care services under this part. Such facilities shall  
818 retain a log listing the names and unit number for residents  
819 receiving these services. The log must be available to surveyors  
820 upon request. Except for uniform firesafety standards, the  
821 department shall adopt by rule separate and distinct standards  
822 for facilities with 16 or fewer beds and for facilities with 17  
823 or more beds. The standards for facilities with 16 or fewer beds



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824 ~~must shall~~ be appropriate for a noninstitutional residential  
825 environment;~~7~~ ~~however, provided that~~ the structure may not be is  
826 ~~no~~ more than two stories in height and all persons who cannot  
827 exit the facility unassisted in an emergency must reside on the  
828 first floor. The department, in conjunction with the agency, may  
829 make other distinctions among types of facilities as necessary  
830 to enforce the provisions of this part. Where appropriate, the  
831 agency shall offer alternate solutions for complying with  
832 established standards, based on distinctions made by the  
833 department and the agency relative to the physical  
834 characteristics of facilities and the types of care offered  
835 ~~therein.~~

836 Section 40. Present subsections (1) through (11) of section  
837 429.52, Florida Statutes, are redesignated as subsections (2)  
838 through (12), respectively, a new subsection (1) is added to  
839 that section, and present subsections (5) and (9) of that  
840 section are amended, to read:

841 429.52 Staff training and educational programs; core  
842 educational requirement.—

843 (1) Effective October 1, 2014, each new assisted living  
844 facility employee who has not previously completed core training  
845 must attend a preservice orientation provided by the facility  
846 before interacting with residents. The preservice orientation  
847 must be at least 2 hours in duration and cover topics that help  
848 the employee provide responsible care and respond to the needs  
849 of facility residents. Upon completion, the employee and the  
850 administrator of the facility must sign a statement that the  
851 employee completed the required preservice orientation. The  
852 facility must keep the signed statement in the employee's



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853 personnel record.

854 (6)~~(5)~~ Staff involved with the management of medications  
855 and assisting with the self-administration of medications under  
856 s. 429.256 must complete a minimum of 6 ~~4~~ additional hours of  
857 training provided by a registered nurse, licensed pharmacist, or  
858 department staff. The department shall establish by rule the  
859 minimum requirements of this additional training.

860 (10)~~(9)~~ The training required by this section other than  
861 the preservice orientation must ~~shall~~ be conducted by persons  
862 registered with the department as having the requisite  
863 experience and credentials to conduct the training. A person  
864 seeking to register as a trainer must provide the department  
865 with proof of completion of the minimum core training education  
866 requirements, successful passage of the competency test  
867 established under this section, and proof of compliance with the  
868 continuing education requirement in subsection (5) ~~(4)~~.

869 Section 41. The Legislature finds that consistent  
870 regulation of assisted living facilities benefits residents and  
871 operators of such facilities. To determine whether surveys are  
872 consistent between surveys and surveyors, the Office of Program  
873 Policy Analysis and Government Accountability (OPPAGA) shall  
874 conduct a study of intersurveyor reliability for assisted living  
875 facilities. By November 1, 2014, OPPAGA shall report its  
876 findings to the Governor, the President of the Senate, and the  
877 Speaker of the House of Representatives and make any  
878 recommendations for improving intersurveyor reliability.

879 Section 42. Section 429.55, Florida Statutes, is created to  
880 read:

881 429.55 Public access to data; rating system and comment



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882 page.-

883 (1) The Legislature finds that consumers need additional  
884 information on the quality of care and service in assisted  
885 living facilities in order to select the best facility for  
886 themselves or their loved ones.

887 (2) By March 1, 2015, the agency shall implement a rating  
888 system for assisted living facilities based on facility  
889 inspections, violations, complaints, and agency visits to assist  
890 consumers and residents. The agency may adopt rules to  
891 administer this subsection.

892 (3) By November 1, 2014, the agency shall provide,  
893 maintain, and update at least quarterly, electronically  
894 accessible data on assisted living facilities. Such data must be  
895 searchable, downloadable, and available in generally accepted  
896 formats. The agency shall include all content in its possession  
897 on November 1, 2014, on the website and add additional content  
898 from facilities as their licenses are renewed. At a minimum,  
899 such data must include:

900 (a) Information on each assisted living facility licensed  
901 under this part, including:

- 902 1. The name and address of the facility.
- 903 2. The number and type of licensed beds in the facility.
- 904 3. The types of licenses held by the facility.
- 905 4. The facility's license expiration date and status.
- 906 5. Proprietary or nonproprietary status of the licensee.
- 907 6. Any affiliation with a company or other organization  
908 owning or managing more than one assisted living facility in  
909 this state.
- 910 7. The total number of clients that the facility is





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911 licensed to serve and the most recently available occupancy  
912 levels.

913 8. The number of private and semiprivate rooms offered.  
914 9. The bed-hold policy.  
915 10. The religious affiliation, if any, of the assisted  
916 living facility.  
917 11. The languages spoken by the staff.  
918 12. Availability of nurses.  
919 13. Forms of payment accepted, including, but not limited  
920 to, Medicaid, Medicaid long-term managed care, private  
921 insurance, health maintenance organization, United States  
922 Department of Veterans Affairs, CHAMPUS program, or workers'  
923 compensation coverage.  
924 14. Indication if the licensee is operating under  
925 bankruptcy protection.  
926 15. Recreational and other programs available.  
927 16. Special care units or programs offered.  
928 17. Whether the facility is a part of a retirement  
929 community that offers other services pursuant to this part or  
930 part III of this chapter, part II or part III of chapter 400, or  
931 chapter 651.  
932 18. Links to the State Long-Term Care Ombudsman Program  
933 website and the program's statewide toll-free telephone number.  
934 19. Links to the websites of the providers or their  
935 affiliates.  
936 20. Other relevant information that the agency currently  
937 collects.  
938 (b) A list of the facility's violations, including, for  
939 each violation:



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940           1. A summary of the violation presented in a manner  
941 understandable by the general public;  
942           2. Any sanctions imposed by final order; and  
943           3. The date the corrective action was confirmed by the  
944 agency.  
945           (c) Links to inspection reports on file with the agency.  
946           (4) The agency shall provide a monitored comment webpage  
947 that allows members of the public to comment on specific  
948 assisted living facilities licensed to operate in this state. At  
949 a minimum, the comment webpage must allow members of the public  
950 to identify themselves, provide comments on their experiences  
951 with, or observations of, an assisted living facility, and view  
952 others' comments.  
953           (a) The agency shall review comments for profanities and  
954 redact any profanities before posting the comments to the  
955 webpage. After redacting any profanities, the agency shall post  
956 all comments, and shall retain all comments as they were  
957 originally submitted, which are subject to the requirements of  
958 chapter 119 and which shall be retained by the agency for  
959 inspection by the public without further redaction pursuant to  
960 retention schedules and disposal processes for such records.  
961           (b) A controlling interest, as defined in s. 408.803 in an  
962 assisted living facility, or an employee or owner of an assisted  
963 living facility, is prohibited from posting comments on the  
964 page. A controlling interest, employee, or owner may respond to  
965 comments on the page, and the agency shall ensure that such  
966 responses are identified as being from a representative of the  
967 facility.  
968           (5) The agency may provide links to third-party websites



969 that use the data published pursuant to this section to assist  
970 consumers in evaluating the quality of care and service in  
971 assisted living facilities.

972 Section 43. For the 2014-2015 fiscal year, the sums of  
973 \$156,943 in recurring funds and \$7,546 in nonrecurring funds  
974 from the Health Care Trust Fund and two full-time equivalent  
975 senior attorney positions with associated salary rate of 103,652  
976 are appropriated to the Agency for Health Care Administration  
977 for the purpose of implementing the regulatory provisions of  
978 this act.

979 Section 44. For the 2014-2015 fiscal year, for the purpose  
980 of implementing and maintaining the public information website  
981 enhancements provided under this act:

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

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

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

995  
996 ===== T I T L E A M E N D M E N T =====

997 And the title is amended as follows:



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998 Delete line 78  
999 and insert:  
1000 tissue donations; amending s. 394.4574, F.S.;  
1001 providing that Medicaid managed care plans are  
1002 responsible for enrolled mental health residents;  
1003 providing that managing entities under contract with  
1004 the Department of Children and Families are  
1005 responsible for mental health residents who are not  
1006 enrolled with a Medicaid managed care plan; deleting a  
1007 provision to conform to changes made by the act;  
1008 requiring that the community living support plan be  
1009 completed and provided to the administrator of a  
1010 facility after the mental health resident's admission;  
1011 requiring the community living support plan to be  
1012 updated when there is a significant change to the  
1013 mental health resident's behavioral health; requiring  
1014 the case manager assigned to a mental health resident  
1015 of an assisted living facility that holds a limited  
1016 mental health license to keep a record of the date and  
1017 time of face-to-face interactions with the resident  
1018 and to make the record available to the responsible  
1019 entity for inspection; requiring that the record be  
1020 maintained for a specified time; requiring the  
1021 responsible entity to ensure that there is adequate  
1022 and consistent monitoring and enforcement of community  
1023 living support plans and cooperative agreements and  
1024 that concerns are reported to the appropriate  
1025 regulatory oversight organization under certain  
1026 circumstances; amending s. 400.0074, F.S.; requiring



1027 that an administrative assessment conducted by a local  
1028 council be comprehensive in nature and focus on  
1029 factors affecting the rights, health, safety, and  
1030 welfare of residents in the facilities; requiring a  
1031 local council to conduct an exit consultation with the  
1032 facility administrator or administrator designee to  
1033 discuss issues and concerns in areas affecting the  
1034 rights, health, safety, and welfare of residents and  
1035 make recommendations for improvement; amending s.  
1036 400.0078, F.S.; requiring that a resident or a  
1037 representative of a resident of a long-term care  
1038 facility be informed that retaliatory action cannot be  
1039 taken against a resident for presenting grievances or  
1040 for exercising any other resident right; amending s.  
1041 429.02, F.S.; revising the definition of the term  
1042 "limited nursing services"; amending s. 429.07, F.S.;  
1043 revising the requirement that an extended congregate  
1044 care license be issued to certain facilities that have  
1045 been licensed as assisted living facilities under  
1046 certain circumstances and authorizing the issuance of  
1047 such license if a specified condition is met;  
1048 providing the purpose of an extended congregate care  
1049 license; providing that the initial extended  
1050 congregate care license of an assisted living facility  
1051 is provisional under certain circumstances; requiring  
1052 a licensee to notify the Agency for Health Care  
1053 Administration if it accepts a resident who qualifies  
1054 for extended congregate care services; requiring the  
1055 agency to inspect the facility for compliance with the



1056 requirements of an extended congregate care license;  
1057 requiring the issuance of an extended congregate care  
1058 license under certain circumstances; requiring the  
1059 licensee to immediately suspend extended congregate  
1060 care services under certain circumstances; requiring a  
1061 registered nurse representing the agency to visit the  
1062 facility at least twice a year, rather than quarterly,  
1063 to monitor residents who are receiving extended  
1064 congregate care services; authorizing the agency to  
1065 waive one of the required yearly monitoring visits  
1066 under certain circumstances; authorizing the agency to  
1067 deny or revoke a facility's extended congregate care  
1068 license; requiring a registered nurse representing the  
1069 agency to visit the facility at least annually, rather  
1070 than twice a year, to monitor residents who are  
1071 receiving limited nursing services; providing that  
1072 such monitoring visits may be conducted in conjunction  
1073 with other inspections by the agency; authorizing the  
1074 agency to waive the required yearly monitoring visit  
1075 for a facility that is licensed to provide limited  
1076 nursing services under certain circumstances; amending  
1077 s. 429.075, F.S.; requiring an assisted living  
1078 facility that serves one or more mental health  
1079 residents to obtain a limited mental health license;  
1080 revising the methods employed by a limited mental  
1081 health facility relating to placement requirements to  
1082 include providing written evidence that a request for  
1083 a community living support plan, a cooperative  
1084 agreement, and assessment documentation was sent to



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1085 the Department of Children and Families within 72  
1086 hours after admission; amending s. 429.14, F.S.;

1087 revising the circumstances under which the agency may  
1088 deny, revoke, or suspend the license of an assisted  
1089 living facility and impose an administrative fine;  
1090 requiring the agency to deny or revoke the license of  
1091 an assisted living facility under certain  
1092 circumstances; requiring the agency to impose an  
1093 immediate moratorium on the license of an assisted  
1094 living facility under certain circumstances; deleting  
1095 a provision requiring the agency to provide a list of  
1096 facilities with denied, suspended, or revoked licenses  
1097 to the Department of Business and Professional  
1098 Regulation; exempting a facility from the 45-day  
1099 notice requirement if it is required to relocate some  
1100 or all of its residents; amending s. 429.178, F.S.;

1101 conforming cross-references; amending s. 429.19, F.S.;

1102 revising the amounts and uses of administrative fines;  
1103 requiring the agency to levy a fine for violations  
1104 that are corrected before an inspection if  
1105 noncompliance occurred within a specified period of  
1106 time; deleting factors that the agency is required to  
1107 consider in determining penalties and fines; amending  
1108 s. 429.256, F.S.; revising the term "assistance with  
1109 self-administration of medication" as it relates to  
1110 the Assisted Living Facilities Act; amending s.  
1111 429.28, F.S.; providing notice requirements to inform  
1112 facility residents that the identity of the resident  
1113 and complainant in any complaint made to the State



1114 Long-Term Care Ombudsman Program or a local long-term  
1115 care ombudsman council is confidential and that  
1116 retaliatory action may not be taken against a resident  
1117 for presenting grievances or for exercising any other  
1118 resident right; requiring that a facility that  
1119 terminates an individual's residency after the filing  
1120 of a complaint be fined if good cause is not shown for  
1121 the termination; amending s. 429.34, F.S.; requiring  
1122 certain persons to report elder abuse in assisted  
1123 living facilities; requiring the agency to regularly  
1124 inspect every licensed assisted living facility;  
1125 requiring the agency to conduct more frequent  
1126 inspections under certain circumstances; requiring the  
1127 licensee to pay a fee for the cost of additional  
1128 inspections; requiring the agency to annually adjust  
1129 the fee; amending s. 429.41, F.S.; providing that  
1130 certain staffing requirements apply only to residents  
1131 in continuing care facilities who are receiving  
1132 relevant services; amending s. 429.52, F.S.; requiring  
1133 each newly hired employee of an assisted living  
1134 facility to attend a preservice orientation provided  
1135 by the assisted living facility; requiring the  
1136 employee and administrator to sign a statement that  
1137 the employee completed the required preservice  
1138 orientation and keep the signed statement in the  
1139 employee's personnel record; requiring 2 additional  
1140 hours of training for assistance with medication;  
1141 conforming a cross-reference; requiring the Office of  
1142 Program Policy Analysis and Government Accountability





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1143 to study the reliability of facility surveys and  
1144 submit to the Governor and the Legislature its  
1145 findings and recommendations; creating s. 429.55,  
1146 F.S.; requiring the Agency for Health Care  
1147 Administration to implement a rating system of  
1148 assisted living facilities by a specified date;  
1149 authorizing the agency to adopt rules; requiring the  
1150 Agency for Health Care Administration to provide  
1151 specified data on assisted living facilities by a  
1152 certain date; providing minimum requirements for such  
1153 data; authorizing the agency to create a comment  
1154 webpage regarding assisted living facilities;  
1155 providing minimum requirements; authorizing the agency  
1156 to provide links to certain third-party websites;  
1157 providing appropriations; providing an effective date.