A bill to be entitled 1 2 An act relating to nurse registries; amending s. 3 400.462, F.S.; defining the term "satellite office"; 4 amending s. 400.506, F.S.; providing for the licensure 5 of more than one nurse registry operational site 6 within the same geographic service area; authorizing a 7 licensed nurse registry to operate a satellite office; requiring a nurse registry operational site to keep 8 9 all original records; requiring a nurse registry to 10 provide notice and certain evidence before it 11 relocates an operational site or opens a satellite 12 office; revising an exemption from a penalty imposed for a nurse registry that provides remuneration to 13 14 certain persons; reenacting s. 400.497, F.S., relating 15 to rules establishing minimum standards, to incorporate the amendment made to s. 400.506, F.S., in 16 a reference thereto; reenacting s. 400.506(3), F.S., 17 relating to a nurse registry license application fee, 18 19 to incorporate the amendment made to s. 400.506, F.S., 20 in a reference thereto; reenacting s. 817.505(3)(h), 21 F.S., relating to an exception from prohibition

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

against patient brokering, to incorporate the

thereto; providing an effective date.

amendment made to s. 400.506, F.S., in a reference

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Section 1. Subsections (28) and (29) of section 400.462, Florida Statues, are renumbered as subsections (29) and (30), respectively, and a new subsection (28) is added to that section to read:

400.462 Definitions.—As used in this part, the term:

- (28) "Satellite office" means a secondary office of a nurse registry established pursuant to s. 400.506(1) in the same geographic service area as a licensed nurse registry operational site.
- Section 2. Subsection (1) and paragraph (a) of subsection (15) of section 400.506, Florida Statutes, are amended to read:
 400.506 Licensure of nurse registries; requirements;
 penalties.—
- (1) (a) A nurse registry is exempt from the licensing requirements of a home health agency but must be licensed as a nurse registry. The requirements of part II of chapter 408 apply to the provision of services that require licensure pursuant to ss. 400.506-400.518 and part II of chapter 408 and to entities licensed by or applying for such license from the Agency for Health Care Administration pursuant to ss. 400.506-400.518. A license issued by the agency is required for the operation of a nurse registry. Each operational site of the nurse registry must be licensed, unless there is more than one site within the geographic service area for which a license is issued. In such case, a county. If there is more than one site within a county,

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only one license per county is required. each operational site within the geographic service area must be listed on the license.

- (b) A licensed nurse registry may operate a satellite office as defined in s. 400.462. The nurse registry operational site must administer all satellite offices. A satellite office may store supplies and records, register and process contractors, and conduct business by telephone as is done at other operational sites. Nurse registries may use signs and advertisements to notify the public of the location of a satellite office. All original records must be kept at the operational site.
- (c) A nurse registry must provide notice, in writing, to the agency at the state and area office levels, as required by agency rule, of a proposed change of address for an operational site or the opening of a satellite office. Before relocating an operational site or opening a satellite office, the nurse registry must submit evidence of its legal right to use the proposed property, as well as a certificate of occupancy, a certificate of use, or other evidence that the property is zoned for nurse registry use.
- (15) (a) The agency may deny, suspend, or revoke the license of a nurse registry and shall impose a fine of \$5,000 against a nurse registry that:
- 1. Provides services to residents in an assisted living facility for which the nurse registry does not receive fair

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79 market value remuneration.

- 2. Provides staffing to an assisted living facility for which the nurse registry does not receive fair market value remuneration.
- 3. Fails to provide the agency, upon request, with copies of all contracts with assisted living facilities which were executed within the last 5 years.
- 4. Gives remuneration to a case manager, discharge planner, facility-based staff member, or third-party vendor who is involved in the discharge planning process of a facility licensed under chapter 395 or this chapter and from whom the nurse registry receives referrals. A nurse registry is exempt from this subparagraph if it does not bill the Florida Medicaid program or the Medicare program or share a controlling interest with any entity licensed, registered, or certified under part II of chapter 408 that bills the Florida Medicaid program or the Medicare program.
- 5. Gives remuneration to a physician, a member of the physician's office staff, or an immediate family member of the physician, and the nurse registry received a patient referral in the last 12 months from that physician or the physician's office staff. A nurse registry is exempt from this subparagraph if it does not bill the Florida Medicaid program or the Medicare program or share a controlling interest with any entity licensed, registered, or certified under part II of chapter 408 that bills the Florida Medicaid program or the Medicare program.

Section 3. For the purpose of incorporating the amendment made by this act to section 400.506, Florida Statutes, in a reference thereto, section 400.497, Florida Statutes, is reenacted to read:

400.497 Rules establishing minimum standards.—The agency shall adopt, publish, and enforce rules to implement part II of chapter 408 and this part, including, as applicable, ss. 400.506 and 400.509, which must provide reasonable and fair minimum standards relating to:

- (1) The home health aide competency test and home health aide training. The agency shall create the home health aide competency test and establish the curriculum and instructor qualifications for home health aide training. Licensed home health agencies may provide this training and shall furnish documentation of such training to other licensed home health agencies upon request. Successful passage of the competency test by home health aides may be substituted for the training required under this section and any rule adopted pursuant thereto.
- (2) Shared staffing. The agency shall allow shared staffing if the home health agency is part of a retirement community that provides multiple levels of care, is located on one campus, is licensed under this chapter or chapter 429, and otherwise meets the requirements of law and rule.
- (3) The criteria for the frequency of onsite licensure surveys.

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(4) Licensure application and renewal.

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- (5) Oversight by the director of nursing. The agency shall develop rules related to:
- (a) Standards that address oversight responsibilities by the director of nursing of skilled nursing and personal care services provided by the home health agency's staff;
- (b) Requirements for a director of nursing to provide to the agency, upon request, a certified daily report of the home health services provided by a specified direct employee or contracted staff member on behalf of the home health agency. The agency may request a certified daily report only for a period not to exceed 2 years prior to the date of the request; and
- (c) A quality assurance program for home health services provided by the home health agency.
- (6) Conditions for using a recent unannounced licensure inspection for the inspection required in s. 408.806 related to a licensure application associated with a change in ownership of a licensed home health agency.
- (7) The requirements for onsite and electronic accessibility of supervisory personnel of home health agencies.
 - (8) Information to be included in patients' records.
 - (9) Geographic service areas.
- (10) Preparation of a comprehensive emergency management plan pursuant to s. 400.492.
- (a) The Agency for Health Care Administration shall adopt rules establishing minimum criteria for the plan and plan

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updates, with the concurrence of the Department of Health and in consultation with the Division of Emergency Management.

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- (b) The rules must address the requirements in s. 400.492. In addition, the rules shall provide for the maintenance of patient-specific medication lists that can accompany patients who are transported from their homes.
- The plan is subject to review and approval by the county health department. During its review, the county health department shall contact state and local health and medical stakeholders when necessary. The county health department shall complete its review to ensure that the plan is in accordance with the criteria in the Agency for Health Care Administration rules within 90 days after receipt of the plan and shall approve the plan or advise the home health agency of necessary revisions. If the home health agency fails to submit a plan or fails to submit the requested information or revisions to the county health department within 30 days after written notification from the county health department, the county health department shall notify the Agency for Health Care Administration. The agency shall notify the home health agency that its failure constitutes a deficiency, subject to a fine of \$5,000 per occurrence. If the plan is not submitted, information is not provided, or revisions are not made as requested, the agency may impose the fine.
- (d) For any home health agency that operates in more than one county, the Department of Health shall review the plan,

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after consulting with state and local health and medical stakeholders when necessary. The department shall complete its review within 90 days after receipt of the plan and shall approve the plan or advise the home health agency of necessary revisions. The department shall make every effort to avoid imposing differing requirements on a home health agency that operates in more than one county as a result of differing or conflicting comprehensive plan requirements of the counties in which the home health agency operates.

- (e) The requirements in this subsection do not apply to:
- 1. A facility that is certified under chapter 651 and has a licensed home health agency used exclusively by residents of the facility; or
- 2. A retirement community that consists of residential units for independent living and either a licensed nursing home or an assisted living facility, and has a licensed home health agency used exclusively by the residents of the retirement community, provided the comprehensive emergency management plan for the facility or retirement community provides for continuous care of all residents with special needs during an emergency.

Section 4. For the purpose of incorporating the amendment made by this act to section 400.506, Florida Statutes, in a reference thereto, subsection (3) of section 400.506, Florida Statutes, is reenacted to read:

400.506 Licensure of nurse registries; requirements; penalties.—

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(3) In accordance with s. 408.805, an applicant or
licensee shall pay a fee for each license application submitted
under ss. 400.506-400.518, part II of chapter 408, and
applicable rules. The amount of the fee shall be established by
rule and may not exceed \$2,000 per biennium.

- Section 5. For the purpose of incorporating the amendment made by this act to section 400.506, Florida Statutes, in a reference thereto, paragraph (h) of subsection (3) of section 817.505, Florida Statutes, is reenacted to read:
- 817.505 Patient brokering prohibited; exceptions; penalties.—
 - (3) This section shall not apply to:

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- (h) Commissions or fees paid to a nurse registry licensed under s. 400.506 for referring persons providing health care services to clients of the nurse registry.
- Section 6. This act shall take effect July 1, 2015.