



377856

LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
04/16/2015	.	
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The Committee on Appropriations (Garcia) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. 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



377856

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

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

21 A Medicaid managed care plan or a managing entity shall ~~The~~
22 ~~department must~~ ensure that:

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

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



377856

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

48 (c) The community living support plan, as defined in s.
49 429.02, has been prepared by a mental health resident and his or
50 her a mental health case manager ~~of that resident~~ in
51 consultation with the administrator of the facility or the
52 administrator's designee. The plan must be completed and
53 provided to the administrator of the assisted living facility
54 with a limited mental health license in which the mental health
55 resident lives upon the resident's admission. The support plan
56 and the agreement may be in one document. The agency may not
57 cite an assisted living facility for not possessing a resident's
58 community living support plan if the facility can document that
59 it has requested the plan for that resident.

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

63 (e) The mental health services provider assigns a case
64 manager to each mental health resident for whom the entity is
65 responsible ~~who lives in an assisted living facility with a~~
66 ~~limited mental health license.~~ The case manager shall coordinate
67 ~~is responsible for coordinating~~ the development ~~of~~ and
68 implementation of the community living support plan defined in



377856

69 s. 429.02. The plan must be updated at least annually, or when
70 there is a significant change in the resident's behavioral
71 health status, such as an inpatient admission or a change in
72 medication, level of service, or residence. Each case manager
73 shall keep a record of the date and time of any face-to-face
74 interaction with the resident and make the record available to
75 the responsible entity for inspection. The record must be
76 retained for at least 2 years after the date of the most recent
77 interaction.

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

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

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



377856

98 and access to emergency psychiatric care.

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

102 400.0074 Local ombudsman council onsite administrative
103 assessments.—

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

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

116 (h) Upon completion of an administrative assessment, the
117 local council shall conduct an exit consultation with the
118 facility administrator or administrator's designee to discuss
119 issues and concerns in areas affecting residents' rights,
120 health, safety, and welfare and, if needed, make recommendations
121 for improvement.

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

124 400.0078 Citizen access to State Long-Term Care Ombudsman
125 Program services.—

126 (2) ~~Every resident or representative of a resident shall~~



377856

127 ~~receive,~~ Upon admission to a long-term care facility, each
128 resident or representative of a resident must receive
129 information regarding the purpose of the State Long-Term Care
130 Ombudsman Program, the statewide toll-free telephone number for
131 receiving complaints, information that retaliatory action cannot
132 be taken against a resident for presenting grievances or for
133 exercising any other resident right, and other relevant
134 information regarding how to contact the program. Each resident
135 or his or her representative ~~Residents or their representatives~~
136 must be furnished additional copies of this information upon
137 request.

138 Section 4. Paragraph (c) of subsection (4) of section
139 409.212, Florida Statutes, is amended to read:

140 409.212 Optional supplementation.—

141 (4) In addition to the amount of optional supplementation
142 provided by the state, a person may receive additional
143 supplementation from third parties to contribute to his or her
144 cost of care. Additional supplementation may be provided under
145 the following conditions:

146 (c) The additional supplementation shall not exceed four
147 ~~two~~ times the provider rate recognized under the optional state
148 supplementation program.

149 Section 5. Subsection (13) of section 429.02, Florida
150 Statutes, is amended to read:

151 429.02 Definitions.—When used in this part, the term:

152 (13) "Limited nursing services" means acts that may be
153 performed by a person licensed under ~~pursuant to part I of~~
154 ~~chapter 464 by persons licensed thereunder while carrying out~~
155 ~~their professional duties but limited to those acts which the~~



377856

156 ~~department specifies by rule. Acts which may be specified by~~
157 ~~rule as allowable~~ Limited nursing services shall be for persons
158 who meet the admission criteria established by the department
159 for assisted living facilities and shall not be complex enough
160 to require 24-hour nursing supervision and may include such
161 services as the application and care of routine dressings, and
162 care of casts, braces, and splints.

163 Section 6. Paragraphs (b) and (c) of subsection (3) of
164 section 429.07, Florida Statutes, are amended to read:

165 429.07 License required; fee.—

166 (3) In addition to the requirements of s. 408.806, each
167 license granted by the agency must state the type of care for
168 which the license is granted. Licenses shall be issued for one
169 or more of the following categories of care: standard, extended
170 congregate care, limited nursing services, or limited mental
171 health.

172 (b) An extended congregate care license shall be issued to
173 each facility that has been licensed as an assisted living
174 facility for 2 or more years and that provides services
175 ~~facilities providing~~, directly or through contract, ~~services~~
176 beyond those authorized in paragraph (a), including services
177 performed by persons licensed under part I of chapter 464 and
178 supportive services, as defined by rule, to persons who would
179 otherwise be disqualified from continued residence in a facility
180 licensed under this part. An extended congregate care license
181 may be issued to a facility that has a provisional extended
182 congregate care license and meets the requirements for licensure
183 under subparagraph 2. The primary purpose of extended congregate
184 care services is to allow residents the option of remaining in a



377856

185 familiar setting from which they would otherwise be disqualified
186 for continued residency as they become more impaired. A facility
187 licensed to provide extended congregate care services may also
188 admit an individual who exceeds the admission criteria for a
189 facility with a standard license if the individual is determined
190 appropriate for admission to the extended congregate care
191 facility.

192 1. In order for extended congregate care services to be
193 provided, the agency must first determine that all requirements
194 established in law and rule are met and must specifically
195 designate, on the facility's license, that such services may be
196 provided and whether the designation applies to all or part of
197 the facility. This ~~Such~~ designation may be made at the time of
198 initial licensure or licensure renewal ~~relicensure~~, or upon
199 request in writing by a licensee under this part and part II of
200 chapter 408. The notification of approval or the denial of the
201 request shall be made in accordance with part II of chapter 408.
202 Each existing facility that qualifies ~~facilities qualifying~~ to
203 provide extended congregate care services must have maintained a
204 standard license and may not have been subject to administrative
205 sanctions during the previous 2 years, or since initial
206 licensure if the facility has been licensed for less than 2
207 years, for any of the following reasons:

- 208 a. A class I or class II violation;
- 209 b. Three or more repeat or recurring class III violations
210 of identical or similar resident care standards from which a
211 pattern of noncompliance is found by the agency;
- 212 c. Three or more class III violations that were not
213 corrected in accordance with the corrective action plan approved



377856

214 by the agency;

215 d. Violation of resident care standards which results in
216 requiring the facility to employ the services of a consultant
217 pharmacist or consultant dietitian;

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

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

224
225 The agency may deny or revoke a facility's extended congregate
226 care license if it fails to meet the criteria for an extended
227 congregate care license as provided in this subparagraph.

228 2. If an assisted living facility has been licensed for
229 less than 2 years, the initial extended congregate care license
230 must be provisional and may not exceed 6 months. The licensee
231 shall notify the agency, in writing, when it admits at least one
232 extended congregate care resident, after which an unannounced
233 inspection shall be made to determine compliance with
234 requirements of an extended congregate care license. A licensee
235 that has a provisional extended congregate care license which
236 demonstrates compliance with all of the requirements of an
237 extended congregate care license during the inspection shall be
238 issued an extended congregate care license. In addition to
239 sanctions authorized under this part, if violations are found
240 during the inspection and the licensee fails to demonstrate
241 compliance with all assisted living requirements during a
242 followup inspection, the licensee shall immediately suspend



377856

243 extended congregate care services, and the provisional extended
244 congregate care license expires. The agency may extend the
245 provisional license for not more than 1 month in order to
246 complete a followup visit.

247 3.2- A facility that is licensed to provide extended
248 congregate care services shall maintain a written progress
249 report on each person who receives services which describes the
250 type, amount, duration, scope, and outcome of services that are
251 rendered and the general status of the resident's health. A
252 registered nurse, or appropriate designee, representing the
253 agency shall visit the facility at least twice a year ~~quarterly~~
254 to monitor residents who are receiving extended congregate care
255 services and to determine if the facility is in compliance with
256 this part, part II of chapter 408, and relevant rules. One of
257 the visits may be in conjunction with the regular survey. The
258 monitoring visits may be provided through contractual
259 arrangements with appropriate community agencies. A registered
260 nurse shall serve as part of the team that inspects the
261 facility. The agency may waive one of the required yearly
262 monitoring visits for a facility that has:

263 a. Held an extended congregate care license for at least 24
264 months; ~~been licensed for at least 24 months to provide extended~~
265 ~~congregate care services, if, during the inspection, the~~
266 ~~registered nurse determines that extended congregate care~~
267 ~~services are being provided appropriately, and if the facility~~
268 ~~has~~

269 b. No class I or class II violations and no uncorrected
270 class III violations; and-

271 c. No ombudsman council complaints that resulted in a



377856

272 citation for licensure ~~The agency must first consult with the~~
273 ~~long-term care ombudsman council for the area in which the~~
274 ~~facility is located to determine if any complaints have been~~
275 ~~made and substantiated about the quality of services or care.~~
276 ~~The agency may not waive one of the required yearly monitoring~~
277 ~~visits if complaints have been made and substantiated.~~

278 4.3. A facility that is licensed to provide extended
279 congregate care services must:

280 a. Demonstrate the capability to meet unanticipated
281 resident service needs.

282 b. Offer a physical environment that promotes a homelike
283 setting, provides for resident privacy, promotes resident
284 independence, and allows sufficient congregate space as defined
285 by rule.

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

289 d. Adopt and follow policies and procedures that maximize
290 resident independence, dignity, choice, and decisionmaking to
291 permit residents to age in place, so that moves due to changes
292 in functional status are minimized or avoided.

293 e. Allow residents or, if applicable, a resident's
294 representative, designee, surrogate, guardian, or attorney in
295 fact to make a variety of personal choices, participate in
296 developing service plans, and share responsibility in
297 decisionmaking.

298 f. Implement the concept of managed risk.

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



377856

301 h. In addition to the training mandated in s. 429.52,
302 provide specialized training as defined by rule for facility
303 staff.

304 ~~5.4.~~ A facility that is licensed to provide extended
305 congregate care services is exempt from the criteria for
306 continued residency set forth in rules adopted under s. 429.41.
307 A licensed facility must adopt its own requirements within
308 guidelines for continued residency set forth by rule. However,
309 the facility may not serve residents who require 24-hour nursing
310 supervision. A licensed facility that provides extended
311 congregate care services must also provide each resident with a
312 written copy of facility policies governing admission and
313 retention.

314 ~~5. The primary purpose of extended congregate care services~~
315 ~~is to allow residents, as they become more impaired, the option~~
316 ~~of remaining in a familiar setting from which they would~~
317 ~~otherwise be disqualified for continued residency. A facility~~
318 ~~licensed to provide extended congregate care services may also~~
319 ~~admit an individual who exceeds the admission criteria for a~~
320 ~~facility with a standard license, if the individual is~~
321 ~~determined appropriate for admission to the extended congregate~~
322 ~~care facility.~~

323 6. Before the admission of an individual to a facility
324 licensed to provide extended congregate care services, the
325 individual must undergo a medical examination as provided in s.
326 429.26(4) and the facility must develop a preliminary service
327 plan for the individual.

328 7. If ~~When~~ a facility can no longer provide or arrange for
329 services in accordance with the resident's service plan and



377856

330 needs and the facility's policy, the facility must ~~shall~~ make
331 arrangements for relocating the person in accordance with s.
332 429.28(1)(k).

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

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

338 1. In order for limited nursing services to be provided in
339 a facility licensed under this part, the agency must first
340 determine that all requirements established in law and rule are
341 met and must specifically designate, on the facility's license,
342 that such services may be provided. This ~~Such~~ designation may be
343 made at the time of initial licensure or licensure renewal
344 ~~relicensure~~, or upon request in writing by a licensee under this
345 part and part II of chapter 408. Notification of approval or
346 denial of such request shall be made in accordance with part II
347 of chapter 408. An existing facility that qualifies ~~facilities~~
348 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
349 maintained a standard license and may not have been subject to
350 administrative sanctions that affect the health, safety, and
351 welfare of residents for the previous 2 years or since initial
352 licensure if the facility has been licensed for less than 2
353 years.

354 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide
355 limited nursing services shall maintain a written progress
356 report on each person who receives such nursing services. The
357 ~~which~~ report must describe ~~describes~~ the type, amount, duration,
358 scope, and outcome of services that are rendered and the general



377856

359 status of the resident's health. A registered nurse representing
360 the agency shall visit the facility ~~such facilities~~ at least
361 annually ~~twice a year~~ to monitor residents who are receiving
362 limited nursing services and to determine if the facility is in
363 compliance with applicable provisions of this part, part II of
364 chapter 408, and related rules. The monitoring visits may be
365 provided through contractual arrangements with appropriate
366 community agencies. A registered nurse shall also serve as part
367 of the team that inspects such facility. Visits may be in
368 conjunction with other agency inspections. The agency may waive
369 the required yearly monitoring visit for a facility that has:

370 a. Had a limited nursing services license for at least 24
371 months;

372 b. No class I or class II violations and no uncorrected
373 class III violations; and

374 c. No ombudsman council complaints that resulted in a
375 citation for licensure.

376 3. A person who receives limited nursing services under
377 this part must meet the admission criteria established by the
378 agency for assisted living facilities. When a resident no longer
379 meets the admission criteria for a facility licensed under this
380 part, arrangements for relocating the person shall be made in
381 accordance with s. 429.28(1)(k), unless the facility is licensed
382 to provide extended congregate care services.

383 Section 7. Section 429.075, Florida Statutes, is amended to
384 read:

385 429.075 Limited mental health license.—An assisted living
386 facility that serves one ~~three~~ or more mental health residents
387 must obtain a limited mental health license.



377856

388 (1) To obtain a limited mental health license, a facility
389 must hold a standard license as an assisted living facility,
390 must not have any current uncorrected ~~deficiencies or~~
391 violations, and must ensure that, within 6 months after
392 receiving a limited mental health license, the facility
393 administrator and the staff of the facility who are in direct
394 contact with mental health residents must complete training of
395 no less than 6 hours related to their duties. This ~~Such~~
396 designation may be made at the time of initial licensure or
397 licensure renewal ~~relicensure~~ or upon request in writing by a
398 licensee under this part and part II of chapter 408.
399 Notification of approval or denial of such request shall be made
400 in accordance with this part, part II of chapter 408, and
401 applicable rules. This training must ~~will~~ be provided by or
402 approved by the Department of Children and Families.

403 (2) A facility that is ~~Facilities~~ licensed to provide
404 services to mental health residents must ~~shall~~ provide
405 appropriate supervision and staffing to provide for the health,
406 safety, and welfare of such residents.

407 (3) A facility that has a limited mental health license
408 must:

409 (a) Have a copy of each mental health resident's community
410 living support plan and the cooperative agreement with the
411 mental health care services provider or provide written evidence
412 that a request for the community living support plan and the
413 cooperative agreement was sent to the Medicaid managed care plan
414 or managing entity under contract with the Department of
415 Children and Families within 72 hours after admission. The
416 support plan and the agreement may be combined.



377856

417 (b) Have documentation ~~that is~~ provided by the Department
418 of Children and Families that each mental health resident has
419 been assessed and determined to be able to live in the community
420 in an assisted living facility that has ~~with~~ a limited mental
421 health license or provide written evidence that a request for
422 documentation was sent to the department within 72 hours after
423 admission.

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

428 (d) Assist the mental health resident in carrying out the
429 activities identified in the resident's ~~individual's~~ community
430 living support plan.

431 (4) A facility that has ~~with~~ a limited mental health
432 license may enter into a cooperative agreement with a private
433 mental health provider. For purposes of the limited mental
434 health license, the private mental health provider may act as
435 the case manager.

436 Section 8. Section 429.14, Florida Statutes, is amended to
437 read:

438 429.14 Administrative penalties.—

439 (1) In addition to the requirements of part II of chapter
440 408, the agency may deny, revoke, and suspend any license issued
441 under this part and impose an administrative fine in the manner
442 provided in chapter 120 against a licensee for a violation of
443 ~~any provision of~~ this part, part II of chapter 408, or
444 applicable rules, or for any of the following actions by a
445 licensee, ~~for the actions of~~ any person subject to level 2



377856

446 background screening under s. 408.809, or ~~for the actions of~~ any
447 facility staff ~~employee~~:

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

450 (b) A ~~The~~ determination by the agency that the owner lacks
451 the financial ability to provide continuing adequate care to
452 residents.

453 (c) Misappropriation or conversion of the property of a
454 resident of the facility.

455 (d) Failure to follow the criteria and procedures provided
456 under part I of chapter 394 relating to the transportation,
457 voluntary admission, and involuntary examination of a facility
458 resident.

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

- 461 1. One or more cited class I violations ~~deficiencies~~.
462 2. Three or more cited class II violations ~~deficiencies~~.
463 3. Five or more cited class III violations ~~deficiencies~~
464 that have been cited on a single survey and have not been
465 corrected within the times specified.

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

468 (g) Violation of a moratorium.

469 (h) Failure of the license applicant, the licensee during
470 licensure renewal ~~relicensure~~, or a licensee that holds a
471 provisional license to meet the minimum license requirements of
472 this part, or related rules, at the time of license application
473 or renewal.

474 (i) An intentional or negligent life-threatening act in



377856

475 violation of the uniform firesafety standards for assisted
476 living facilities or other firesafety standards which ~~that~~
477 threatens the health, safety, or welfare of a resident of a
478 facility, as communicated to the agency by the local authority
479 having jurisdiction or the State Fire Marshal.

480 (j) Knowingly operating any unlicensed facility or
481 providing without a license any service that must be licensed
482 under this chapter or chapter 400.

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

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

490 (3) The agency may deny or revoke a license of an ~~to any~~
491 applicant or controlling interest as defined in part II of
492 chapter 408 which has or had a 25 percent ~~25-percent~~ or greater
493 financial or ownership interest in any other facility that is
494 licensed under this part, or in any entity licensed by this
495 state or another state to provide health or residential care, if
496 that ~~which~~ facility or entity during the 5 years before ~~prior to~~
497 the application for a license closed due to financial inability
498 to operate; had a receiver appointed or a license denied,
499 suspended, or revoked; was subject to a moratorium; or had an
500 injunctive proceeding initiated against it.

501 (4) The agency shall deny or revoke the license of an
502 assisted living facility if any of the following apply:

503 (a) There are two moratoria, issued pursuant to this part



377856

504 or part II of chapter 408, within a 2-year period which are
505 imposed by final order.

506 (b) The facility is cited for two or more class I
507 violations arising from unrelated circumstances during the same
508 survey or investigation.

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

515 (5) An action taken by the agency to suspend, deny, or
516 revoke a facility's license under this part or part II of
517 chapter 408, in which the agency claims that the facility owner
518 or an employee of the facility has threatened the health,
519 safety, or welfare of a resident of the facility, shall be heard
520 by the Division of Administrative Hearings of the Department of
521 Management Services within 120 days after receipt of the
522 facility's request for a hearing, unless that time limitation is
523 waived by both parties. The administrative law judge shall ~~must~~
524 render a decision within 30 days after receipt of a proposed
525 recommended order.

526 (6) As provided under s. 408.814, the agency shall impose
527 an immediate moratorium on an assisted living facility that
528 fails to provide the agency access to the facility or prohibits
529 the agency from conducting a regulatory inspection. The licensee
530 may not restrict agency staff in accessing and copying records
531 or in conducting confidential interviews with facility staff or
532 any individual who receives services from the facility. If



377856

533 requested by the facility, the agency must reimburse the
534 facility for all reasonable costs related to the accessing and
535 copying of records required under this subsection ~~provide to the~~
536 ~~Division of Hotels and Restaurants of the Department of Business~~
537 ~~and Professional Regulation, on a monthly basis, a list of those~~
538 ~~assisted living facilities that have had their licenses denied,~~
539 ~~suspended, or revoked or that are involved in an appellate~~
540 ~~proceeding pursuant to s. 120.60 related to the denial,~~
541 ~~suspension, or revocation of a license.~~

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

545 (8) If a facility is required to relocate some or all of
546 its residents due to agency action, that facility is exempt from
547 the 45 days' notice requirement imposed under s. 429.28(1)(k).
548 This subsection does not exempt the facility from any deadline
549 for corrective action set by the agency.

550 Section 9. Paragraphs (a) and (b) of subsection (2) of
551 section 429.178, Florida Statutes, are amended to read:

552 429.178 Special care for persons with Alzheimer's disease
553 or other related disorders.—

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



377856

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

570 Section 10. Paragraphs (e) and (f) are added to subsection
571 (2) of section 429.19, Florida Statutes, to read:

572 429.19 Violations; imposition of administrative fines;
573 grounds.—

574 (2) Each violation of this part and adopted rules shall be
575 classified according to the nature of the violation and the
576 gravity of its probable effect on facility residents. The agency
577 shall indicate the classification on the written notice of the
578 violation as follows:

579 (e) Any fine imposed by the agency for a cited class I or
580 class II violation must be doubled if the agency finds that such
581 violation has not been corrected within six months of the
582 citation being issued.

583 (f) Regardless of the class of violation cited, instead of
584 the fine amounts listed in paragraphs (a)-(d), the agency shall
585 impose an administrative fine of \$500 if a facility is found not
586 to be in compliance with the background screening requirements
587 as provided in s. 408.809.

588 Section 11. Subsection (3) and paragraph (c) of subsection
589 (4) of section 429.256, Florida Statutes, are amended to read:

590 429.256 Assistance with self-administration of medication.—



377856

591 (3) Assistance with self-administration of medication
592 includes:

593 (a) Taking the medication, in its previously dispensed,
594 properly labeled container, including an insulin syringe that is
595 prefilled with the proper dosage by a pharmacist and an insulin
596 pen that is prefilled by the manufacturer, from where it is
597 stored, and bringing it to the resident.

598 (b) In the presence of the resident, reading the label,
599 opening the container, removing a prescribed amount of
600 medication from the container, and closing the container.

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

604 (d) Applying topical medications.

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

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

608 (g) Assisting with the use of a nebulizer, including
609 removing the cap of a nebulizer, opening the unit dose of
610 nebulizer solution, and pouring the prescribed premeasured dose
611 of medication into the dispensing cup of the nebulizer.

612 (h) Using a glucometer to perform blood-glucose level
613 checks.

614 (i) Assisting with putting on and taking off antiembolism
615 stockings.

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

618 (k) Assisting with the use of a continuous positive airway
619 pressure (CPAP) device, but not with titrating the prescribed



377856

620 setting of the device.

621 (l) Assisting with measuring vital signs.

622 (m) Assisting with colostomy bags.

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

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

626 Section 12. Subsection (3) of section 429.27, Florida
627 Statutes, is amended to read:

628 429.27 Property and personal affairs of residents.—

629 (3) A facility, upon mutual consent with the resident,
630 shall provide for the safekeeping in the facility of personal
631 effects not in excess of \$500 and funds of the resident not in
632 excess of \$500 ~~\$200~~ cash, and shall keep complete and accurate
633 records of all such funds and personal effects received. If a
634 resident is absent from a facility for 24 hours or more, the
635 facility may provide for the safekeeping of the resident's
636 personal effects in excess of \$500.

637 Section 13. Subsections (2), (5), and (6) of section
638 429.28, Florida Statutes, are amended to read:

639 429.28 Resident bill of rights.—

640 (2) The administrator of a facility shall ensure that a
641 written notice of the rights, obligations, and prohibitions set
642 forth in this part is posted in a prominent place in each
643 facility and read or explained to residents who cannot read. The
644 ~~This~~ notice must ~~shall~~ include the name, address, and telephone
645 numbers of the local ombudsman council, the ~~and~~ central abuse
646 hotline, and, if ~~when~~ applicable, Disability Rights Florida ~~the~~
647 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
648 ~~Florida local advocacy council,~~ where complaints may be lodged.



377856

649 The notice must state that a complaint made to the Office of
650 State Long-Term Care Ombudsman or a local long-term care
651 ombudsman council, the names and identities of the residents
652 involved in the complaint, and the identity of complainants are
653 kept confidential pursuant to s. 400.0077 and that retaliatory
654 action cannot be taken against a resident for presenting
655 grievances or for exercising any other resident right. The
656 facility must ensure a resident's access to a telephone to call
657 the local ombudsman council, central abuse hotline, and
658 Disability Rights Florida Advocacy Center for Persons with
659 Disabilities, Inc., and the Florida local advocacy council.

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

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

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

666 (c) Files a civil action alleging a violation of the
667 provisions of this part or notifies a state attorney or the
668 Attorney General of a possible violation of such provisions.

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

675 Section 14. Section 429.34, Florida Statutes, is amended to
676 read:

677 429.34 Right of entry and inspection.-



377856

678 (1) In addition to the requirements of s. 408.811, any duly
679 designated officer or employee of the department, the Department
680 of Children and Families, the Medicaid Fraud Control Unit of the
681 Office of the Attorney General, the state or local fire marshal,
682 or a member of the state or local long-term care ombudsman
683 council has ~~shall have~~ the right to enter unannounced upon and
684 into the premises of any facility licensed pursuant to this part
685 in order to determine the state of compliance with ~~the~~
686 ~~provisions of~~ this part, part II of chapter 408, and applicable
687 rules. Data collected by the state or local long-term care
688 ombudsman councils or the state or local advocacy councils may
689 be used by the agency in investigations involving violations of
690 regulatory standards. A person specified in this section who
691 knows or has reasonable cause to suspect that a vulnerable adult
692 has been or is being abused, neglected, or exploited shall
693 immediately report such knowledge or suspicion to the central
694 abuse hotline pursuant to chapter 415.

695 (2) The agency shall inspect each licensed assisted living
696 facility at least once every 24 months to determine compliance
697 with this chapter and related rules. If an assisted living
698 facility is cited for one or more class I violations or two or
699 more class II violations arising from separate surveys within a
700 60-day period or due to unrelated circumstances during the same
701 survey, the agency must conduct an additional licensure
702 inspection within 6 months.

703 Section 15. Subsection (2) of section 429.41, Florida
704 Statutes, is amended to read:

705 429.41 Rules establishing standards.—

706 (2) In adopting any rules pursuant to this part, the



377856

707 department, in conjunction with the agency, shall make distinct
708 standards for facilities based upon facility size; the types of
709 care provided; the physical and mental capabilities and needs of
710 residents; the type, frequency, and amount of services and care
711 offered; and the staffing characteristics of the facility. Rules
712 developed pursuant to this section may ~~shall~~ not restrict the
713 use of shared staffing and shared programming in facilities that
714 are part of retirement communities that provide multiple levels
715 of care and otherwise meet the requirements of law and rule. If
716 a continuing care facility licensed under chapter 651 or a
717 retirement community offering multiple levels of care obtains a
718 license pursuant to this chapter for a building or part of a
719 building designated for independent living, staffing
720 requirements established in rule apply only to residents who
721 receive personal services, limited nursing services, or extended
722 congregate care services under this part. Such facilities shall
723 retain a log listing the names and unit number for residents
724 receiving these services. The log must be available to surveyors
725 upon request. Except for uniform firesafety standards, the
726 department shall adopt by rule separate and distinct standards
727 for facilities with 16 or fewer beds and for facilities with 17
728 or more beds. The standards for facilities with 16 or fewer beds
729 must ~~shall~~ be appropriate for a noninstitutional residential
730 environment; however, provided that the structure may not be ~~is~~
731 ~~no~~ more than two stories in height and all persons who cannot
732 exit the facility unassisted in an emergency must reside on the
733 first floor. The department, in conjunction with the agency, may
734 make other distinctions among types of facilities as necessary
735 to enforce the provisions of this part. Where appropriate, the



377856

736 agency shall offer alternate solutions for complying with
737 established standards, based on distinctions made by the
738 department and the agency relative to the physical
739 characteristics of facilities and the types of care offered
740 therein.

741 Section 16. Present subsections (1) through (11) of section
742 429.52, Florida Statutes, are redesignated as subsections (2)
743 through (12), respectively, a new subsection (1) is added to
744 that section, and present subsections (5) and (9) of that
745 section are amended, to read:

746 429.52 Staff training and educational programs; core
747 educational requirement.—

748 (1) Effective October 1, 2015, each new assisted living
749 facility employee who has not previously completed core training
750 must attend a preservice orientation provided by the facility
751 before interacting with residents. The preservice orientation
752 must be at least 2 hours in duration and cover topics that help
753 the employee provide responsible care and respond to the needs
754 of facility residents. Upon completion, the employee and the
755 administrator of the facility must sign a statement that the
756 employee completed the required preservice orientation. The
757 facility must keep the signed statement in the employee's
758 personnel record.

759 (6)-(5) Staff involved with the management of medications
760 and assisting with the self-administration of medications under
761 s. 429.256 must complete a minimum of 6 4 additional hours of
762 training provided by a registered nurse, licensed pharmacist, or
763 department staff. The department shall establish by rule the
764 minimum requirements of this additional training.



377856

765 (10)~~(9)~~ The training required by this section other than
766 the preservice orientation must shall be conducted by persons
767 registered with the department as having the requisite
768 experience and credentials to conduct the training. A person
769 seeking to register as a trainer must provide the department
770 with proof of completion of the minimum core training education
771 requirements, successful passage of the competency test
772 established under this section, and proof of compliance with the
773 continuing education requirement in subsection (5)~~(4)~~.

774 Section 17. Section 429.55, Florida Statutes, is created to
775 read:

776 429.55 Consumer information website.—The Legislature finds
777 that consumers need additional information on the quality of
778 care and service in assisted living facilities in order to
779 select the best facility for themselves or their loved ones.
780 Therefore, the Agency for Health Care Administration shall
781 create content that is easily accessible through the home page
782 of the agency's website either directly or indirectly through
783 links to one or more other established websites of the agency's
784 choosing. The website must be searchable by facility name,
785 license type, city, or zip code. By November 1, 2015, the agency
786 shall include all content in its possession on the website and
787 add content when received from facilities. At a minimum, the
788 content must include:

789 (1) Information on each licensed assisted living facility,
790 including, but not limited to:

791 (a) The name and address of the facility.

792 (b) The name of the owner or operator of the facility.

793 (c) The number and type of licensed beds in the facility.



377856

- 794 (d) The types of licenses held by the facility.
- 795 (e) The facility's license expiration date and status.
- 796 (f) The total number of clients that the facility is
797 licensed to serve and the most recently available occupancy
798 levels.
- 799 (g) The number of private and semiprivate rooms offered.
- 800 (h) The bed-hold policy.
- 801 (i) The religious affiliation, if any, of the assisted
802 living facility.
- 803 (j) The languages spoken by the staff.
- 804 (k) Availability of nurses.
- 805 (l) Forms of payment accepted, including, but not limited
806 to, Medicaid, Medicaid long-term managed care, private
807 insurance, health maintenance organization, United States
808 Department of Veterans Affairs, CHAMPUS program, or workers'
809 compensation coverage.
- 810 (m) Indication if the licensee is operating under
811 bankruptcy protection.
- 812 (n) Recreational and other programs available.
- 813 (o) Special care units or programs offered.
- 814 (p) Whether the facility is a part of a retirement
815 community that offers other services pursuant to this part or
816 part III of this chapter, part II or part III of chapter 400, or
817 chapter 651.
- 818 (q) Links to the State Long-Term Care Ombudsman Program
819 website and the program's statewide toll-free telephone number.
- 820 (r) Links to the websites of the providers.
- 821 (s) Other relevant information that the agency currently
822 collects.



377856

823 (2) Survey and violation information for the facility,
824 including a list of the facility's violations committed during
825 the previous 60 months, which on July 1, 2015, may include
826 violations committed on or after July 1, 2010. The list shall be
827 updated monthly and include for each violation:

828 (a) A summary of the violation, including all licensure,
829 revisit, and complaint survey information, presented in a manner
830 understandable by the general public.

831 (b) Any sanctions imposed by final order.

832 (c) The date the corrective action was confirmed by the
833 agency.

834 (3) Links to inspection reports that the agency has on
835 file.

836 (4) The agency may adopt rules to administer this section.
837 Section 18. This act shall take effect July 1, 2015.

838
839 ===== T I T L E A M E N D M E N T =====

840 And the title is amended as follows:

841 Delete everything before the enacting clause
842 and insert:

843 A bill to be entitled
844 An act relating to assisted living facilities;
845 amending s. 394.4574, F.S.; providing that Medicaid
846 managed care plans are responsible for enrolled mental
847 health residents; providing that managing entities
848 under contract with the Department of Children and
849 Families are responsible for mental health residents
850 who are not enrolled with a Medicaid managed care
851 plan; requiring that a community living support plan



377856

852 be completed and provided to the administrator of a
853 facility within a specified period after the
854 resident's admission; restricting the agency from
855 imposing a fine if the facility has requested the
856 community living support plan; requiring that the
857 community living support plan be updated when there is
858 a significant change to the mental health resident's
859 behavioral health; requiring a mental health resident
860 case manager to keep certain records of interactions
861 with the resident and to make the records available
862 for inspection; requiring retention of the records for
863 a specified period; requiring the responsible entity
864 to ensure monitoring and implementation of community
865 living support plans and cooperative agreements;
866 amending s. 400.0074, F.S.; requiring a local
867 ombudsman council to conduct comprehensive onsite
868 administrative assessments; requiring a local council
869 to conduct an exit consultation with the facility
870 administrator or administrator designee; amending s.
871 400.0078, F.S.; requiring that a long-term care
872 resident or resident representative be informed of
873 resident immunity from retaliatory action for
874 presenting grievances or exercising resident rights;
875 amending s. 409.212, F.S.; increasing the cap on
876 additional supplementation that a person may receive
877 under certain conditions; amending s. 429.02, F.S.;
878 revising the definition of the term "limited nursing
879 services"; amending s. 429.07, F.S.; requiring that an
880 extended congregate care license be issued to certain



377856

881 facilities licensed as assisted living facilities
882 under certain circumstances and authorizing the
883 issuance of such license if a specified condition is
884 met; providing that the initial extended congregate
885 care license is provisional under certain
886 circumstances; requiring a licensee to notify the
887 agency of acceptance of a resident who qualifies for
888 extended congregate care services; requiring the
889 agency to inspect the facility for compliance with
890 license requirements; requiring the licensee to
891 suspend extended congregate care services under
892 certain circumstances; revising the frequency of
893 monitoring visits to a facility by a registered nurse
894 representing the agency; authorizing the agency to
895 waive a required yearly monitoring visit under certain
896 circumstances; authorizing the agency to deny or
897 revoke a facility's extended congregate care license;
898 authorizing the agency to waive the required yearly
899 monitoring visit for a facility that is licensed to
900 provide limited nursing services under certain
901 circumstances; amending s. 429.075, F.S.; requiring an
902 assisted living facility that serves mental health
903 residents to obtain a limited mental health license;
904 requiring a limited mental health facility to provide
905 written evidence that certain documentation was sent
906 to the department within a specified period; amending
907 s. 429.14, F.S.; requiring the agency to deny or
908 revoke the license of an assisted living facility
909 under certain circumstances; requiring the agency to



377856

910 impose an immediate moratorium on the license of an
911 assisted living facility under certain circumstances;
912 deleting a requirement that the agency provide a list
913 of facilities with denied, suspended, or revoked
914 licenses to the Department of Business and
915 Professional Regulation; exempting a facility from the
916 45-day notice requirement if it is required to
917 relocate residents; amending s. 429.178, F.S.;
918 conforming cross-references; amending s. 429.19, F.S.;
919 requiring the agency to levy a fine for violations
920 that are corrected before an inspection if
921 noncompliance occurred within a specified period of
922 time; requiring the agency to double fine amounts
923 under certain circumstances; amending s. 429.256,
924 F.S.; revising the term "assistance with self-
925 administration of medication" as it relates to the
926 Assisted Living Facilities Act; amending s. 429.27,
927 F.S.; revising the amount of cash for which a facility
928 may provide safekeeping for a resident; amending s.
929 429.28, F.S.; providing notice requirements regarding
930 confidentiality of resident identity in a complaint
931 made to the State Long-Term Care Ombudsman Program or
932 a local long-term care ombudsman council and immunity
933 from retaliatory action for presenting grievances or
934 exercising resident rights; requiring the agency to
935 adopt rules; providing a fine if a facility terminates
936 an individual's residency after the filing of a
937 complaint if good cause is not shown for the
938 termination; amending s. 429.34, F.S.; requiring



377856

939 certain persons to report elder abuse in assisted
940 living facilities; requiring the agency to regularly
941 inspect a licensed assisted living facility; requiring
942 the agency to conduct periodic inspections; amending
943 s. 429.41, F.S.; providing that certain staffing
944 requirements apply only to residents in continuing
945 care facilities who are receiving certain services;
946 amending s. 429.52, F.S.; requiring each newly hired
947 employee of an assisted living facility to attend a
948 preservice orientation; requiring the employee and
949 administrator to sign a statement of completion and
950 keep the statement in the employee's personnel record;
951 requiring additional hours of training for assistance
952 with medication; creating s. 429.55, F.S.; directing
953 the agency to create an assisted living facility
954 consumer information website; providing criteria for
955 webpage content; providing content requirements;
956 authorizing the agency to adopt rules; providing an
957 effective date.