

By the Committees on Appropriations; and Health Policy; and
Senators Sobel and Gaetz

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1 A bill to be entitled
2 An act relating to assisted living facilities;
3 amending s. 394.4574, F.S.; providing that Medicaid
4 managed care plans are responsible for enrolled mental
5 health residents; providing that managing entities
6 under contract with the Department of Children and
7 Families are responsible for mental health residents
8 who are not enrolled with a Medicaid managed care
9 plan; requiring that a community living support plan
10 be completed and provided to the administrator of a
11 facility within a specified period after the
12 resident's admission; restricting the agency from
13 imposing a fine if the facility has requested the
14 community living support plan; requiring that the
15 community living support plan be updated when there is
16 a significant change to the mental health resident's
17 behavioral health; requiring a mental health resident
18 case manager to keep certain records of interactions
19 with the resident and to make the records available
20 for inspection; requiring retention of the records for
21 a specified period; requiring the responsible entity
22 to ensure monitoring and implementation of community
23 living support plans and cooperative agreements;
24 amending s. 400.0074, F.S.; requiring a local
25 ombudsman council to conduct comprehensive onsite
26 administrative assessments; requiring a local council
27 to conduct an exit consultation with the facility
28 administrator or administrator designee; amending s.
29 400.0078, F.S.; requiring that a long-term care

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30 resident or resident representative be informed of
31 resident immunity from retaliatory action for
32 presenting grievances or exercising resident rights;
33 amending s. 409.212, F.S.; increasing the cap on
34 additional supplementation that a person may receive
35 under certain conditions; amending s. 429.02, F.S.;
36 revising the definition of the term "limited nursing
37 services"; amending s. 429.07, F.S.; requiring that an
38 extended congregate care license be issued to certain
39 facilities licensed as assisted living facilities
40 under certain circumstances and authorizing the
41 issuance of such a license if a specified condition is
42 met; providing that the initial extended congregate
43 care license is provisional under certain
44 circumstances; requiring a licensee to notify the
45 agency of acceptance of a resident who qualifies for
46 extended congregate care services; requiring the
47 agency to inspect the facility for compliance with
48 license requirements; requiring the licensee to
49 suspend extended congregate care services under
50 certain circumstances; revising the frequency of
51 monitoring visits to a facility by a registered nurse
52 representing the agency; authorizing the agency to
53 waive a required yearly monitoring visit under certain
54 circumstances; authorizing the agency to deny or
55 revoke a facility's extended congregate care license;
56 authorizing the agency to waive the required yearly
57 monitoring visit for a facility that is licensed to
58 provide limited nursing services under certain

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59 circumstances; amending s. 429.075, F.S.; requiring an
60 assisted living facility that serves mental health
61 residents to obtain a limited mental health license;
62 requiring a limited mental health facility to provide
63 written evidence that certain documentation was sent
64 to the department within a specified period; amending
65 s. 429.14, F.S.; requiring the agency to deny or
66 revoke the license of an assisted living facility
67 under certain circumstances; requiring the agency to
68 impose an immediate moratorium on the license of an
69 assisted living facility under certain circumstances;
70 deleting a requirement that the agency provide a list
71 of facilities with denied, suspended, or revoked
72 licenses to the Department of Business and
73 Professional Regulation; exempting a facility from the
74 45-day notice requirement if it is required to
75 relocate residents; amending s. 429.178, F.S.;

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

77 requiring the agency to levy a fine for violations
78 that are corrected before an inspection if
79 noncompliance occurred within a specified period of
80 time; requiring the agency to double fine amounts
81 under certain circumstances; amending s. 429.256,
82 F.S.; revising the term "assistance with self-
83 administration of medication" as it relates to the
84 Assisted Living Facilities Act; amending s. 429.27,
85 F.S.; revising the amount of cash for which a facility
86 may provide safekeeping for a resident; amending s.
87 429.28, F.S.; providing notice requirements regarding

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88 confidentiality of resident identity in a complaint
89 made to the State Long-Term Care Ombudsman Program or
90 a local long-term care ombudsman council and immunity
91 from retaliatory action for presenting grievances or
92 exercising resident rights; requiring the agency to
93 adopt rules; providing a fine if a facility terminates
94 an individual's residency after the filing of a
95 complaint if good cause is not shown for the
96 termination; amending s. 429.34, F.S.; requiring
97 certain persons to report elder abuse in assisted
98 living facilities; requiring the agency to regularly
99 inspect a licensed assisted living facility; requiring
100 the agency to conduct periodic inspections; amending
101 s. 429.41, F.S.; providing that certain staffing
102 requirements apply only to residents in continuing
103 care facilities who are receiving certain services;
104 amending s. 429.52, F.S.; requiring each newly hired
105 employee of an assisted living facility to attend a
106 preservice orientation; requiring the employee and
107 administrator to sign a statement of completion and
108 keep the statement in the employee's personnel record;
109 requiring additional hours of training for assistance
110 with medication; creating s. 429.55, F.S.; directing
111 the agency to create an assisted living facility
112 consumer information website; providing criteria for
113 webpage content; providing content requirements;
114 authorizing the agency to adopt rules; providing an
115 effective date.
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117 Be It Enacted by the Legislature of the State of Florida:

118

119 Section 1. Section 394.4574, Florida Statutes, is amended
120 to read:

121 394.4574 ~~Department~~ Responsibilities for coordination of
122 services for a mental health resident who resides in an assisted
123 living facility that holds a limited mental health license.—

124 (1) As used in this section, the term "mental health
125 resident," ~~for purposes of this section,~~ means an individual who
126 receives social security disability income due to a mental
127 disorder as determined by the Social Security Administration or
128 receives supplemental security income due to a mental disorder
129 as determined by the Social Security Administration and receives
130 optional state supplementation.

131 (2) Medicaid managed care plans are responsible for
132 Medicaid-enrolled mental health residents, and managing entities
133 under contract with the department are responsible for mental
134 health residents who are not enrolled in a Medicaid health plan.
135 A Medicaid managed care plan or a managing entity shall ~~The~~
136 ~~department~~ must ensure that:

137 (a) A mental health resident has been assessed by a
138 psychiatrist, clinical psychologist, clinical social worker, or
139 psychiatric nurse, or an individual who is supervised by one of
140 these professionals, and determined to be appropriate to reside
141 in an assisted living facility. The documentation must be
142 provided to the administrator of the facility within 30 days
143 after the mental health resident has been admitted to the
144 facility. An evaluation completed upon discharge from a state
145 mental hospital meets the requirements of this subsection

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146 related to appropriateness for placement as a mental health
147 resident if it was completed within 90 days before ~~prior to~~
148 admission to the facility.

149 (b) A cooperative agreement, as required in s. 429.075, is
150 developed by ~~between~~ the mental health care services provider
151 that serves a mental health resident and the administrator of
152 the assisted living facility with a limited mental health
153 license in which the mental health resident is living. ~~Any~~
154 ~~entity that provides Medicaid prepaid health plan services shall~~
155 ~~ensure the appropriate coordination of health care services with~~
156 ~~an assisted living facility in cases where a Medicaid recipient~~
157 ~~is both a member of the entity's prepaid health plan and a~~
158 ~~resident of the assisted living facility. If the entity is at~~
159 ~~risk for Medicaid targeted case management and behavioral health~~
160 ~~services, the entity shall inform the assisted living facility~~
161 ~~of the procedures to follow should an emergent condition arise.~~

162 (c) The community living support plan, as defined in s.
163 429.02, has been prepared by a mental health resident and his or
164 her a mental health case manager ~~of that resident~~ in
165 consultation with the administrator of the facility or the
166 administrator's designee. The plan must be completed and
167 provided to the administrator of the assisted living facility
168 with a limited mental health license in which the mental health
169 resident lives upon the resident's admission. The support plan
170 and the agreement may be in one document. The agency may not
171 cite an assisted living facility for not possessing a resident's
172 community living support plan if the facility can document that
173 it has requested the plan for that resident.

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

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

177 (e) The mental health services provider assigns a case
178 manager to each mental health resident for whom the entity is
179 responsible ~~who lives in an assisted living facility with a~~
180 ~~limited mental health license~~. The case manager shall coordinate
181 ~~is responsible for coordinating~~ the development ~~of~~ and
182 implementation of the community living support plan defined in
183 s. 429.02. The plan must be updated at least annually, or when
184 there is a significant change in the resident's behavioral
185 health status, such as an inpatient admission or a change in
186 medication, level of service, or residence. Each case manager
187 shall keep a record of the date and time of any face-to-face
188 interaction with the resident and make the record available to
189 the responsible entity for inspection. The record must be
190 retained for at least 2 years after the date of the most recent
191 interaction.

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

195 (g) Concerns are reported to the appropriate regulatory
196 oversight organization if a regulated provider fails to deliver
197 appropriate services or otherwise acts in a manner that has the
198 potential to result in harm to the resident.

199 (3) The Secretary of Children and Families, in consultation
200 with the Agency for Health Care Administration, shall annually
201 require each district administrator to develop, with community
202 input, a detailed annual plan that demonstrates ~~detailed plans~~
203 ~~that demonstrate~~ how the district will ensure the provision of

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204 state-funded mental health and substance abuse treatment
205 services to residents of assisted living facilities that hold a
206 limited mental health license. This plan ~~These plans~~ must be
207 consistent with the substance abuse and mental health district
208 plan developed pursuant to s. 394.75 and must address case
209 management services; access to consumer-operated drop-in
210 centers; access to services during evenings, weekends, and
211 holidays; supervision of the clinical needs of the residents;
212 and access to emergency psychiatric care.

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

216 400.0074 Local ombudsman council onsite administrative
217 assessments.—

218 (1) In addition to any specific investigation conducted
219 pursuant to a complaint, the local council shall conduct, at
220 least annually, an onsite administrative assessment of each
221 nursing home, assisted living facility, and adult family-care
222 home within its jurisdiction. This administrative assessment
223 must be comprehensive in nature and must ~~shall~~ focus on factors
224 affecting residents' ~~the~~ rights, health, safety, and welfare ~~of~~
225 ~~the residents~~. Each local council is encouraged to conduct a
226 similar onsite administrative assessment of each additional
227 long-term care facility within its jurisdiction.

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

230 (h) Upon completion of an administrative assessment, the
231 local council shall conduct an exit consultation with the
232 facility administrator or administrator's designee to discuss

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233 issues and concerns in areas affecting residents' rights,
234 health, safety, and welfare and, if needed, make recommendations
235 for improvement.

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

238 400.0078 Citizen access to State Long-Term Care Ombudsman
239 Program services.—

240 (2) ~~Every resident or representative of a resident shall~~
241 ~~receive,~~ Upon admission to a long-term care facility, each
242 resident or representative of a resident must receive
243 information regarding the purpose of the State Long-Term Care
244 Ombudsman Program, the statewide toll-free telephone number for
245 receiving complaints, information that retaliatory action cannot
246 be taken against a resident for presenting grievances or for
247 exercising any other resident right, and other relevant
248 information regarding how to contact the program. Each resident
249 or his or her representative ~~Residents or their representatives~~
250 must be furnished additional copies of this information upon
251 request.

252 Section 4. Paragraph (c) of subsection (4) of section
253 409.212, Florida Statutes, is amended to read:

254 409.212 Optional supplementation.—

255 (4) In addition to the amount of optional supplementation
256 provided by the state, a person may receive additional
257 supplementation from third parties to contribute to his or her
258 cost of care. Additional supplementation may be provided under
259 the following conditions:

260 (c) The additional supplementation shall not exceed four
261 ~~two~~ times the provider rate recognized under the optional state

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262 supplementation program.

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

265 429.02 Definitions.—When used in this part, the term:

266 (13) "Limited nursing services" means acts that may be
267 performed by a person licensed under ~~pursuant to~~ part I of
268 chapter 464 ~~by persons licensed thereunder while carrying out~~
269 ~~their professional duties but limited to those acts which the~~
270 ~~department specifies by rule. Acts which may be specified by~~
271 ~~rule as allowable~~ Limited nursing services shall be for persons
272 who meet the admission criteria established by the department
273 for assisted living facilities and shall not be complex enough
274 to require 24-hour nursing supervision and may include such
275 services as the application and care of routine dressings, and
276 care of casts, braces, and splints.

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

279 429.07 License required; fee.—

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

286 (b) An extended congregate care license shall be issued to
287 each facility that has been licensed as an assisted living
288 facility for 2 or more years and that provides services
289 ~~facilities providing~~, directly or through contract, ~~services~~
290 beyond those authorized in paragraph (a), including services

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

306 1. In order for extended congregate care services to be
307 provided, the agency must first determine that all requirements
308 established in law and rule are met and must specifically
309 designate, on the facility's license, that such services may be
310 provided and whether the designation applies to all or part of
311 the facility. This ~~Such~~ designation may be made at the time of
312 initial licensure or licensure renewal ~~relicensure~~, or upon
313 request in writing by a licensee under this part and part II of
314 chapter 408. The notification of approval or the denial of the
315 request shall be made in accordance with part II of chapter 408.
316 Each existing facility that qualifies ~~facilities qualifying~~ to
317 provide extended congregate care services must have maintained a
318 standard license and may not have been subject to administrative
319 sanctions during the previous 2 years, or since initial

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320 licensure if the facility has been licensed for less than 2
321 years, for any of the following reasons:

322 a. A class I or class II violation;

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

326 c. Three or more class III violations that were not
327 corrected in accordance with the corrective action plan approved
328 by the agency;

329 d. Violation of resident care standards which results in
330 requiring the facility to employ the services of a consultant
331 pharmacist or consultant dietitian;

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

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

338
339 The agency may deny or revoke a facility's extended congregate
340 care license if it fails to meet the criteria for an extended
341 congregate care license as provided in this subparagraph.

342 2. If an assisted living facility has been licensed for
343 less than 2 years, the initial extended congregate care license
344 must be provisional and may not exceed 6 months. The licensee
345 shall notify the agency, in writing, when it admits at least one
346 extended congregate care resident, after which an unannounced
347 inspection shall be made to determine compliance with
348 requirements of an extended congregate care license. A licensee

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349 that has a provisional extended congregate care license which
350 demonstrates compliance with all of the requirements of an
351 extended congregate care license during the inspection shall be
352 issued an extended congregate care license. In addition to
353 sanctions authorized under this part, if violations are found
354 during the inspection and the licensee fails to demonstrate
355 compliance with all assisted living requirements during a
356 followup inspection, the licensee shall immediately suspend
357 extended congregate care services, and the provisional extended
358 congregate care license expires. The agency may extend the
359 provisional license for not more than 1 month in order to
360 complete a followup visit.

361 3.2. A facility that is licensed to provide extended
362 congregate care services shall maintain a written progress
363 report on each person who receives services which describes the
364 type, amount, duration, scope, and outcome of services that are
365 rendered and the general status of the resident's health. A
366 registered nurse, or appropriate designee, representing the
367 agency shall visit the facility at least twice a year ~~quarterly~~
368 to monitor residents who are receiving extended congregate care
369 services and to determine if the facility is in compliance with
370 this part, part II of chapter 408, and relevant rules. One of
371 the visits may be in conjunction with the regular survey. The
372 monitoring visits may be provided through contractual
373 arrangements with appropriate community agencies. A registered
374 nurse shall serve as part of the team that inspects the
375 facility. The agency may waive one of the required yearly
376 monitoring visits for a facility that has:

377 a. Held an extended congregate care license for at least 24

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378 ~~months; been licensed for at least 24 months to provide extended~~
379 ~~congregate care services, if, during the inspection, the~~
380 ~~registered nurse determines that extended congregate care~~
381 ~~services are being provided appropriately, and if the facility~~
382 ~~has~~

383 b. No class I or class II violations and no uncorrected
384 class III violations; and-

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

392 4.3. A facility that is licensed to provide extended
393 congregate care services must:

394 a. Demonstrate the capability to meet unanticipated
395 resident service needs.

396 b. Offer a physical environment that promotes a homelike
397 setting, provides for resident privacy, promotes resident
398 independence, and allows sufficient congregate space as defined
399 by rule.

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

403 d. Adopt and follow policies and procedures that maximize
404 resident independence, dignity, choice, and decisionmaking to
405 permit residents to age in place, so that moves due to changes
406 in functional status are minimized or avoided.

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407 e. Allow residents or, if applicable, a resident's
408 representative, designee, surrogate, guardian, or attorney in
409 fact to make a variety of personal choices, participate in
410 developing service plans, and share responsibility in
411 decisionmaking.

412 f. Implement the concept of managed risk.

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

415 h. In addition to the training mandated in s. 429.52,
416 provide specialized training as defined by rule for facility
417 staff.

418 5.4. A facility that is licensed to provide extended
419 congregate care services is exempt from the criteria for
420 continued residency set forth in rules adopted under s. 429.41.
421 A licensed facility must adopt its own requirements within
422 guidelines for continued residency set forth by rule. However,
423 the facility may not serve residents who require 24-hour nursing
424 supervision. A licensed facility that provides extended
425 congregate care services must also provide each resident with a
426 written copy of facility policies governing admission and
427 retention.

428 ~~5. The primary purpose of extended congregate care services~~
429 ~~is to allow residents, as they become more impaired, the option~~
430 ~~of remaining in a familiar setting from which they would~~
431 ~~otherwise be disqualified for continued residency. A facility~~
432 ~~licensed to provide extended congregate care services may also~~
433 ~~admit an individual who exceeds the admission criteria for a~~
434 ~~facility with a standard license, if the individual is~~
435 ~~determined appropriate for admission to the extended congregate~~

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436 ~~care facility.~~

437 6. Before the admission of an individual to a facility
438 licensed to provide extended congregate care services, the
439 individual must undergo a medical examination as provided in s.
440 429.26(4) and the facility must develop a preliminary service
441 plan for the individual.

442 7. ~~If~~ When a facility can no longer provide or arrange for
443 services in accordance with the resident's service plan and
444 needs and the facility's policy, the facility must ~~shall~~ make
445 arrangements for relocating the person in accordance with s.
446 429.28(1)(k).

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

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

452 1. In order for limited nursing services to be provided in
453 a facility licensed under this part, the agency must first
454 determine that all requirements established in law and rule are
455 met and must specifically designate, on the facility's license,
456 that such services may be provided. This ~~Such~~ designation may be
457 made at the time of initial licensure or licensure renewal
458 ~~relicensure~~, or upon request in writing by a licensee under this
459 part and part II of chapter 408. Notification of approval or
460 denial of such request shall be made in accordance with part II
461 of chapter 408. An existing facility that qualifies ~~facilities~~
462 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
463 maintained a standard license and may not have been subject to
464 administrative sanctions that affect the health, safety, and

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465 welfare of residents for the previous 2 years or since initial
466 licensure if the facility has been licensed for less than 2
467 years.

468 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide
469 limited nursing services shall maintain a written progress
470 report on each person who receives such nursing services. The~~7~~
471 ~~which~~ report must describe ~~describes~~ the type, amount, duration,
472 scope, and outcome of services that are rendered and the general
473 status of the resident's health. A registered nurse representing
474 the agency shall visit the facility ~~such facilities~~ at least
475 annually ~~twice a year~~ to monitor residents who are receiving
476 limited nursing services and to determine if the facility is in
477 compliance with applicable provisions of this part, part II of
478 chapter 408, and related rules. The monitoring visits may be
479 provided through contractual arrangements with appropriate
480 community agencies. A registered nurse shall also serve as part
481 of the team that inspects such facility. Visits may be in
482 conjunction with other agency inspections. The agency may waive
483 the required yearly monitoring visit for a facility that has:

484 a. Had a limited nursing services license for at least 24
485 months;

486 b. No class I or class II violations and no uncorrected
487 class III violations; and

488 c. No ombudsman council complaints that resulted in a
489 citation for licensure.

490 3. A person who receives limited nursing services under
491 this part must meet the admission criteria established by the
492 agency for assisted living facilities. When a resident no longer
493 meets the admission criteria for a facility licensed under this

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494 part, arrangements for relocating the person shall be made in
495 accordance with s. 429.28(1)(k), unless the facility is licensed
496 to provide extended congregate care services.

497 Section 7. Section 429.075, Florida Statutes, is amended to
498 read:

499 429.075 Limited mental health license.—An assisted living
500 facility that serves one ~~three~~ or more mental health residents
501 must obtain a limited mental health license.

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

517 (2) A facility that is ~~Facilities~~ licensed to provide
518 services to mental health residents must ~~shall~~ provide
519 appropriate supervision and staffing to provide for the health,
520 safety, and welfare of such residents.

521 (3) A facility that has a limited mental health license
522 must:

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523 (a) Have a copy of each mental health resident's community
524 living support plan and the cooperative agreement with the
525 mental health care services provider or provide written evidence
526 that a request for the community living support plan and the
527 cooperative agreement was sent to the Medicaid managed care plan
528 or managing entity under contract with the Department of
529 Children and Families within 72 hours after admission. The
530 support plan and the agreement may be combined.

531 (b) Have documentation ~~that is~~ provided by the Department
532 of Children and Families that each mental health resident has
533 been assessed and determined to be able to live in the community
534 in an assisted living facility that has ~~with~~ a limited mental
535 health license or provide written evidence that a request for
536 documentation was sent to the department within 72 hours after
537 admission.

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

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

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

550 Section 8. Section 429.14, Florida Statutes, is amended to
551 read:

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552 429.14 Administrative penalties.—

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

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

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

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

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

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

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

580 (f) Failure to comply with the background screening

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581 standards of this part, s. 408.809(1), or chapter 435.

582 (g) Violation of a moratorium.

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

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

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

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

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

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

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

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

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

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

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

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

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639 recommended order.

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

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

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

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

666 429.178 Special care for persons with Alzheimer's disease
667 or other related disorders.-

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

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

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

686 429.19 Violations; imposition of administrative fines;
687 grounds.—

688 (2) Each violation of this part and adopted rules shall be
689 classified according to the nature of the violation and the
690 gravity of its probable effect on facility residents. The agency
691 shall indicate the classification on the written notice of the
692 violation as follows:

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

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

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

704 429.256 Assistance with self-administration of medication.—

705 (3) Assistance with self-administration of medication
706 includes:

707 (a) Taking the medication, in its previously dispensed,
708 properly labeled container, including an insulin syringe that is
709 prefilled with the proper dosage by a pharmacist and an insulin
710 pen that is prefilled by the manufacturer, from where it is
711 stored, and bringing it to the resident.

712 (b) In the presence of the resident, reading the label,
713 opening the container, removing a prescribed amount of
714 medication from the container, and closing the container.

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

718 (d) Applying topical medications.

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

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

722 (g) Assisting with the use of a nebulizer, including
723 removing the cap of a nebulizer, opening the unit dose of
724 nebulizer solution, and pouring the prescribed premeasured dose
725 of medication into the dispensing cup of the nebulizer.

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726 (h) Using a glucometer to perform blood-glucose level
727 checks.

728 (i) Assisting with putting on and taking off antiembolism
729 stockings.

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

732 (k) Assisting with the use of a continuous positive airway
733 pressure (CPAP) device, but not with titrating the prescribed
734 setting of the device.

735 (l) Assisting with measuring vital signs.

736 (m) Assisting with colostomy bags.

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

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

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

742 429.27 Property and personal affairs of residents.—

743 (3) A facility, upon mutual consent with the resident,
744 shall provide for the safekeeping in the facility of personal
745 effects not in excess of \$500 and funds of the resident not in
746 excess of \$500 ~~\$200~~ cash, and shall keep complete and accurate
747 records of all such funds and personal effects received. If a
748 resident is absent from a facility for 24 hours or more, the
749 facility may provide for the safekeeping of the resident's
750 personal effects in excess of \$500.

751 Section 13. Subsections (2), (5), and (6) of section
752 429.28, Florida Statutes, are amended to read:

753 429.28 Resident bill of rights.—

754 (2) The administrator of a facility shall ensure that a

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755 written notice of the rights, obligations, and prohibitions set
756 forth in this part is posted in a prominent place in each
757 facility and read or explained to residents who cannot read. The
758 ~~This~~ notice must ~~shall~~ include the name, address, and telephone
759 numbers of the local ombudsman council, the ~~and~~ central abuse
760 hotline, and, if ~~when~~ applicable, Disability Rights Florida ~~the~~
761 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
762 ~~Florida local advocacy council~~, where complaints may be lodged.
763 The notice must state that a complaint made to the Office of
764 State Long-Term Care Ombudsman or a local long-term care
765 ombudsman council, the names and identities of the residents
766 involved in the complaint, and the identity of complainants are
767 kept confidential pursuant to s. 400.0077 and that retaliatory
768 action cannot be taken against a resident for presenting
769 grievances or for exercising any other resident right. The
770 facility must ensure a resident's access to a telephone to call
771 the local ombudsman council, central abuse hotline, and
772 Disability Rights Florida ~~Advocacy Center for Persons with~~
773 ~~Disabilities, Inc., and the Florida local advocacy council.~~

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

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

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

780 (c) Files a civil action alleging a violation of the
781 provisions of this part or notifies a state attorney or the
782 Attorney General of a possible violation of such provisions.

783 (6) A ~~Any~~ facility that ~~which~~ terminates the residency of

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784 an individual who participated in activities specified in
785 subsection (5) must ~~shall~~ show good cause in a court of
786 competent jurisdiction. If good cause is not shown, the agency
787 shall impose a fine of \$2,500 in addition to any other penalty
788 assessed against the facility.

789 Section 14. Section 429.34, Florida Statutes, is amended to
790 read:

791 429.34 Right of entry and inspection.-

792 (1) In addition to the requirements of s. 408.811, any duly
793 designated officer or employee of the department, the Department
794 of Children and Families, the Medicaid Fraud Control Unit of the
795 Office of the Attorney General, the state or local fire marshal,
796 or a member of the state or local long-term care ombudsman
797 council has ~~shall have~~ the right to enter unannounced upon and
798 into the premises of any facility licensed pursuant to this part
799 in order to determine the state of compliance with ~~the~~
800 ~~provisions of~~ this part, part II of chapter 408, and applicable
801 rules. Data collected by the state or local long-term care
802 ombudsman councils or the state or local advocacy councils may
803 be used by the agency in investigations involving violations of
804 regulatory standards. A person specified in this section who
805 knows or has reasonable cause to suspect that a vulnerable adult
806 has been or is being abused, neglected, or exploited shall
807 immediately report such knowledge or suspicion to the central
808 abuse hotline pursuant to chapter 415.

809 (2) The agency shall inspect each licensed assisted living
810 facility at least once every 24 months to determine compliance
811 with this chapter and related rules. If an assisted living
812 facility is cited for one or more class I violations or two or

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813 more class II violations arising from separate surveys within a
814 60-day period or due to unrelated circumstances during the same
815 survey, the agency must conduct an additional licensure
816 inspection within 6 months.

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

819 429.41 Rules establishing standards.—

820 (2) In adopting any rules pursuant to this part, the
821 department, in conjunction with the agency, shall make distinct
822 standards for facilities based upon facility size; the types of
823 care provided; the physical and mental capabilities and needs of
824 residents; the type, frequency, and amount of services and care
825 offered; and the staffing characteristics of the facility. Rules
826 developed pursuant to this section may ~~shall~~ not restrict the
827 use of shared staffing and shared programming in facilities that
828 are part of retirement communities that provide multiple levels
829 of care and otherwise meet the requirements of law and rule. If
830 a continuing care facility licensed under chapter 651 or a
831 retirement community offering multiple levels of care obtains a
832 license pursuant to this chapter for a building or part of a
833 building designated for independent living, staffing
834 requirements established in rule apply only to residents who
835 receive personal services, limited nursing services, or extended
836 congregate care services under this part. Such facilities shall
837 retain a log listing the names and unit number for residents
838 receiving these services. The log must be available to surveyors
839 upon request. Except for uniform firesafety standards, the
840 department shall adopt by rule separate and distinct standards
841 for facilities with 16 or fewer beds and for facilities with 17

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842 or more beds. The standards for facilities with 16 or fewer beds
843 must ~~shall~~ be appropriate for a noninstitutional residential
844 environment; however, provided that the structure may not be ~~is~~
845 ~~no~~ more than two stories in height and all persons who cannot
846 exit the facility unassisted in an emergency must reside on the
847 first floor. The department, in conjunction with the agency, may
848 make other distinctions among types of facilities as necessary
849 to enforce the provisions of this part. Where appropriate, the
850 agency shall offer alternate solutions for complying with
851 established standards, based on distinctions made by the
852 department and the agency relative to the physical
853 characteristics of facilities and the types of care offered
854 therein.

855 Section 16. Present subsections (1) through (11) of section
856 429.52, Florida Statutes, are redesignated as subsections (2)
857 through (12), respectively, a new subsection (1) is added to
858 that section, and present subsections (5) and (9) of that
859 section are amended, to read:

860 429.52 Staff training and educational programs; core
861 educational requirement.—

862 (1) Effective October 1, 2015, each new assisted living
863 facility employee who has not previously completed core training
864 must attend a preservice orientation provided by the facility
865 before interacting with residents. The preservice orientation
866 must be at least 2 hours in duration and cover topics that help
867 the employee provide responsible care and respond to the needs
868 of facility residents. Upon completion, the employee and the
869 administrator of the facility must sign a statement that the
870 employee completed the required preservice orientation. The

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871 facility must keep the signed statement in the employee's
872 personnel record.

873 (6)~~(5)~~ Staff involved with the management of medications
874 and assisting with the self-administration of medications under
875 s. 429.256 must complete a minimum of 6 ~~4~~ additional hours of
876 training provided by a registered nurse, licensed pharmacist, or
877 department staff. The department shall establish by rule the
878 minimum requirements of this additional training.

879 (10)~~(9)~~ The training required by this section other than
880 the preservice orientation must shall be conducted by persons
881 registered with the department as having the requisite
882 experience and credentials to conduct the training. A person
883 seeking to register as a trainer must provide the department
884 with proof of completion of the minimum core training education
885 requirements, successful passage of the competency test
886 established under this section, and proof of compliance with the
887 continuing education requirement in subsection (5)~~(4)~~.

888 Section 17. Section 429.55, Florida Statutes, is created to
889 read:

890 429.55 Consumer information website.—The Legislature finds
891 that consumers need additional information on the quality of
892 care and service in assisted living facilities in order to
893 select the best facility for themselves or their loved ones.
894 Therefore, the Agency for Health Care Administration shall
895 create content that is easily accessible through the home page
896 of the agency's website either directly or indirectly through
897 links to one or more other established websites of the agency's
898 choosing. The website must be searchable by facility name,
899 license type, city, or zip code. By November 1, 2015, the agency

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900 shall include all content in its possession on the website and
901 add content when received from facilities. At a minimum, the
902 content must include:

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

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

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

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

908 (d) The types of licenses held by the facility.

909 (e) The facility's license expiration date and status.

910 (f) The total number of clients that the facility is
911 licensed to serve and the most recently available occupancy
912 levels.

913 (g) The number of private and semiprivate rooms offered.

914 (h) The bed-hold policy.

915 (i) The religious affiliation, if any, of the assisted
916 living facility.

917 (j) The languages spoken by the staff.

918 (k) Availability of nurses.

919 (l) 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 (m) Indication if the licensee is operating under
925 bankruptcy protection.

926 (n) Recreational and other programs available.

927 (o) Special care units or programs offered.

928 (p) Whether the facility is a part of a retirement

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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 (q) Links to the State Long-Term Care Ombudsman Program
933 website and the program's statewide toll-free telephone number.

934 (r) Links to the websites of the providers.

935 (s) Other relevant information that the agency currently
936 collects.

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

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

945 (b) Any sanctions imposed by final order.

946 (c) The date the corrective action was confirmed by the
947 agency.

948 (3) Links to inspection reports that the agency has on
949 file.

950 (4) The agency may adopt rules to administer this section.

951 Section 18. This act shall take effect July 1, 2015.