

By Senator Garcia

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1 A bill to be entitled
 2 An act relating to hospice care; amending s. 400.6005,
 3 F.S.; revising legislative findings and intent;
 4 amending s. 400.601, F.S.; redefining the term
 5 “hospice”; defining the terms “hospice program” and
 6 “seriously ill”; amending s. 400.609, F.S.; clarifying
 7 provisions relating to hospice services; creating s.
 8 400.6093, F.S.; authorizing hospices, or providers
 9 operating under contract with a hospice, to provide
 10 palliative care to seriously ill patients and their
 11 family members; providing construction; amending s.
 12 400.6095, F.S.; making technical changes; providing an
 13 effective date.

14
 15 Be It Enacted by the Legislature of the State of Florida:

16
 17 Section 1. Section 400.6005, Florida Statutes, is amended
 18 to read:

19 400.6005 Legislative findings and intent.—The Legislature
 20 finds that a terminally ill patient ~~individuals and their~~
 21 ~~families,~~ who is ~~are~~ no longer pursuing curative medical
 22 treatment and the patient’s family, should have the opportunity
 23 to select a support system that allows ~~permits~~ the patient to
 24 exercise maximum independence and dignity during the final days
 25 of life. The Legislature also finds that a seriously ill patient
 26 and the patient’s family should have the opportunity to select a
 27 support system that provides palliative care and supportive care
 28 and allows the patient to exercise maximum independence while
 29 receiving such care. The Legislature finds that hospice care

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30 provides a cost-effective and less intrusive form of medical
31 care while meeting the social, psychological, and spiritual
32 needs of terminally ill and seriously ill patients and their
33 families. The intent of this part is to provide for the
34 development, establishment, and enforcement of basic standards
35 to ensure the safe and adequate care of persons receiving
36 hospice services.

37 Section 2. Section 400.601, Florida Statutes, is amended to
38 read:

39 400.601 Definitions.—As used in this part, the term:

40 (1) "Agency" means the Agency for Health Care
41 Administration.

42 (2) "Department" means the Department of Elderly Affairs.

43 (3) "Hospice" means a centrally administered corporation or
44 a limited liability company that provides a continuum of
45 palliative care and supportive care for a ~~the terminally ill~~
46 patient and his or her family.

47 (4) "Hospice care team" means an interdisciplinary team of
48 qualified professionals and volunteers who, in consultation with
49 a ~~the~~ patient, the patient's family, and the patient's primary
50 or attending physician, collectively assess, coordinate, and
51 provide the appropriate palliative care and supportive care to
52 hospice patients and their families.

53 (5) "Hospice program" means a program offered by a hospice
54 which provides a continuum of palliative care and supportive
55 care for a patient and his or her family.

56 (6) ~~(5)~~ "Hospice residential unit" means a homelike living
57 facility, other than a facility licensed under other parts of
58 this chapter, under chapter 395, or under chapter 429, which

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59 ~~that~~ is operated by a hospice for the benefit of its patients
60 and is considered by a patient who lives there to be his or her
61 primary residence.

62 (7)~~(6)~~ "Hospice services" means items and services
63 furnished to a terminally ill patient and family by a hospice,
64 or by others under arrangements with such a program, in a place
65 of temporary or permanent residence used as the patient's home
66 for the purpose of maintaining the patient at home; or, if the
67 patient needs short-term institutionalization, the services are
68 ~~shall be~~ furnished in cooperation with those contracted
69 institutions or in the hospice inpatient facility.

70 (8)~~(7)~~ "Palliative care" means services or interventions
71 furnished to a seriously ill patient and family which are not
72 curative but are provided for the reduction or abatement of pain
73 and human suffering.

74 (9)~~(8)~~ "Patient" means the terminally ill or seriously ill
75 individual receiving ~~hospice~~ services from a hospice.

76 (10)~~(9)~~ "Plan of care" means a written assessment by the
77 hospice of each patient's and family's needs and preferences,
78 and the services to be provided by the hospice to meet those
79 needs.

80 (11) "Seriously ill" means that the person has a life-
81 threatening medical condition that may be irreversible and may
82 continue indefinitely, and which may be managed through
83 palliative care.

84 (12)~~(10)~~ "Terminally ill" means that the patient has a
85 medical prognosis that his or her life expectancy is 1 year or
86 less if the illness runs its normal course.

87 Section 3. Section 400.609, Florida Statutes, is amended to

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88 read:

89 400.609 Hospice services.—Each hospice shall provide a
90 continuum of hospice services which affords ~~afford~~ the
91 terminally ill patient and the family of the patient a range of
92 service delivery which can be tailored to specific needs and
93 preferences of the terminally ill patient and family at any
94 point ~~in time~~ throughout the length of care ~~for the terminally~~
95 ~~ill patient~~ and during the bereavement period. These services
96 must be available 24 hours a day, 7 days a week, and must
97 include:

98 (1) SERVICES.—

99 (a) The hospice care team shall directly provide the
100 following core services: nursing services, social work services,
101 pastoral or counseling services, dietary counseling, and
102 bereavement counseling services. Physician services may be
103 provided by the hospice directly or through contract. A hospice
104 may also use contracted staff if necessary to supplement hospice
105 employees in order to meet the needs of patients during periods
106 of peak patient loads or under extraordinary circumstances.

107 (b) Each hospice must also provide or arrange for such
108 additional services as are needed to meet the palliative and
109 support needs of the patient and family. These services may
110 include, but are not limited to, physical therapy, occupational
111 therapy, speech therapy, massage therapy, home health aide
112 services, infusion therapy, provision of medical supplies and
113 durable medical equipment, day care, homemaker and chore
114 services, and funeral services.

115 (2) HOSPICE HOME CARE.—Hospice care and services provided
116 in a private home shall be the primary form of care. The goal of

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117 hospice home care shall be to provide adequate training and
118 support to encourage self-sufficiency and allow patients and
119 families to maintain the patient comfortably at home for as long
120 as possible. The services of the hospice home care program shall
121 be of the highest quality and shall be provided by the hospice
122 care team.

123 (3) HOSPICE RESIDENTIAL CARE.—Hospice care and services, to
124 the extent practicable and compatible with the needs and
125 preferences of the patient, may be provided by the hospice care
126 team to a patient living in an assisted living facility, adult
127 family-care home, nursing home, hospice residential unit or
128 facility, or other nondomestic place of permanent or temporary
129 residence. A resident or patient living in an assisted living
130 facility, adult family-care home, nursing home, or other
131 facility subject to state licensing who has been admitted to a
132 hospice program shall be considered a hospice patient, and the
133 hospice program shall be responsible for coordinating and
134 ensuring the delivery of hospice care and services to such
135 person pursuant to the standards and requirements of this part
136 and rules adopted under this part.

137 (4) HOSPICE INPATIENT CARE.—The inpatient component of care
138 is a short-term adjunct to hospice home care and hospice
139 residential care and shall be used only for pain control,
140 symptom management, or respite care. The total number of
141 inpatient days for all hospice patients in any 12-month period
142 may not exceed 20 percent of the total number of hospice days
143 for all the hospice patients of the licensed hospice. Hospice
144 inpatient care shall be under the direct administration of the
145 hospice, whether the inpatient facility is a freestanding

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146 hospice facility or part of a facility licensed pursuant to
147 chapter 395 or part II of this chapter. The facility or rooms
148 within a facility used for the hospice inpatient component of
149 care shall be arranged, administered, and managed in such a
150 manner as to provide privacy, dignity, comfort, warmth, and
151 safety for the terminally ill patient and the family. Every
152 possible accommodation must be made to create as homelike an
153 atmosphere as practicable. To facilitate overnight family
154 visitation within the facility, rooms must be limited to no more
155 than double occupancy; and, whenever possible, both occupants
156 must be hospice patients. There must be a continuum of care and
157 a continuity of caregivers between the hospice home program and
158 the inpatient aspect of care to the extent practicable and
159 compatible with the preferences of the patient and his or her
160 family. Fees charged for hospice inpatient care, whether
161 provided directly by the hospice or through contract, must be
162 made available upon request to the Agency for Health Care
163 Administration. The hours for daily operation and the location
164 of the place where the services are provided must be determined,
165 to the extent practicable, by the accessibility of such services
166 to the patients and families served by the hospice.

167 (5) BEREAVEMENT COUNSELING.—The hospice bereavement program
168 must be a comprehensive program, under professional supervision,
169 that provides a continuum of formal and informal supportive
170 services to the family for a minimum of 1 year after the
171 patient's death. This subsection does not constitute an
172 additional exemption from chapter 490 or chapter 491.

173 Section 4. Section 400.6093, Florida Statutes, is created
174 to read:

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175 400.6093 Community palliative care services.—A hospice may
176 provide palliative care to a seriously ill patient and his or
177 her family members. Such palliative care may be provided to
178 manage the side effects of treatment for a progressive disease
179 or medical or surgical condition. Such care may be provided
180 directly by the hospice or by other providers under contract
181 with the hospice. This section does not preclude the provision
182 of palliative care to seriously ill patients or their family
183 members by any other health care provider or health care
184 facility otherwise authorized to provide such care. This section
185 does not mandate or prescribe additional Medicaid coverage.

186 Section 5. Subsections (1) and (2) of section 400.6095,
187 Florida Statutes, are amended to read:

188 400.6095 Patient admission; assessment; plan of care;
189 discharge; death.—

190 (1) Each hospice shall make its services available to all
191 terminally ill patients ~~persons~~ and their families without
192 regard to age, gender, national origin, sexual orientation,
193 disability, diagnosis, cost of therapy, ability to pay, or life
194 circumstances. A hospice may ~~shall~~ not impose any value or
195 belief system on its patients or their families and shall
196 respect the values and belief systems of its patients and their
197 families.

198 (2) Admission of a terminally ill patient to a hospice
199 program shall be made upon a diagnosis and prognosis of terminal
200 illness by a physician licensed pursuant to chapter 458 or
201 chapter 459 and must ~~shall~~ be dependent on the expressed request
202 and informed consent of the patient.

203 Section 6. This act shall take effect July 1, 2018.