Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Commerce Committee Representative Yarborough offered the following:

Amendment (with title amendment)

Remove lines 628-2094 and insert:

office.

Notwithstanding chapter 120, only the provider, the escrow
agent, and the office have a substantial interest in any office
decision regarding release of escrow funds in any proceedings
under chapter 120 or this chapter.
(9) The office may not approve any application that
includes in the plan of financing any encumbrance of the
operating reserves or renewal and replacement reserves required
by this chapter.

382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

1

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

16	(10) The office may not issue a certificate of authority
17	for a facility that does not have a component that is to be
18	licensed pursuant to part II of chapter 400 or part I of chapter
19	429, or that does not offer personal services or nursing
20	services through written contractual agreement. A written
21	contractual agreement must be disclosed in the contract for
22	continuing care or continuing care at-home and is subject to s.
23	<u>651.1151.</u>
24	Section 7. Subsections (2), (3), (6), and (8) of section
25	651.022, Florida Statutes, are amended, and subsection (5) of
26	that section is republished, to read:
27	651.022 Provisional certificate of authority;
28	application
29	(2) The application for a provisional certificate of
30	authority <u>must</u> shall be on a form prescribed by the commission
31	and <u>must</u> shall contain the following information:
32	(a) If the applicant or provider is a corporation, a copy
33	of the articles of incorporation and bylaws; if the applicant or
34	provider is a partnership or other unincorporated association, a
35	copy of the partnership agreement, articles of association, or
36	other membership agreement; and, if the applicant or provider is
37	a trust, a copy of the trust agreement or instrument.
38	(b) The full names, residences, and business addresses of:
39	1. The proprietor, if the applicant or provider is an
40	individual.
3	882139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

2. Every partner or member, if the applicant or provider is a partnership or other unincorporated association, however organized, having fewer than 50 partners or members, together with the business name and address of the partnership or other organization.

46 3. The principal partners or members, if the applicant or 47 provider is a partnership or other unincorporated association, 48 however organized, having 50 or more partners or members, together with the business name and business address of the 49 partnership or other organization. If such unincorporated 50 organization has officers and a board of directors, the full 51 52 name and business address of each officer and director may be 53 set forth in lieu of the full name and business address of its 54 principal members.

55 4. The corporation and each officer and director thereof,56 if the applicant or provider is a corporation.

57 5. Every trustee and officer, if the applicant or provider 58 is a trust.

59 6. The manager, whether an individual, corporation,60 partnership, or association.

61 7. Any stockholder holding at least a 10 percent interest
62 in the operations of the facility in which the care is to be
63 offered.

64 8. Any person whose name is required to be provided in the 65 application under this paragraph and who owns any interest in or 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

receives any remuneration from, directly or indirectly, any 66 67 professional service firm, association, trust, partnership, or 68 corporation providing goods, leases, or services to the facility 69 for which the application is made, with a real or anticipated 70 value of \$10,000 or more, and the name and address of the 71 professional service firm, association, trust, partnership, or 72 corporation in which such interest is held. The applicant shall 73 describe such goods, leases, or services and the probable cost 74 to the facility or provider and shall describe why such goods, 75 leases, or services should not be purchased from an independent 76 entity.

9. Any person, corporation, partnership, association, or
trust owning land or property leased to the facility, along with
a copy of the lease agreement.

80 10. Any affiliated parent or subsidiary corporation or 81 partnership.

82 (c)1. Evidence that the applicant is reputable and of 83 responsible character. If the applicant is a firm, association, 84 organization, partnership, business trust, corporation, or 85 company, the form must shall require evidence that the members 86 or shareholders are reputable and of responsible character, and the person in charge of providing care under a certificate of 87 88 authority are shall likewise be required to produce evidence of being reputable and of responsible character. 89

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 4 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

90 2. Evidence satisfactory to the office of the ability of 91 the applicant to comply with the provisions of this chapter and 92 with rules adopted by the commission pursuant to this chapter. 93 A statement of whether a person identified in the 3. 94 application for a provisional certificate of authority or the 95 administrator or manager of the facility, if such person has 96 been designated, or any such person living in the same location: 97 Has been convicted of a felony or has pleaded nolo a. contendere to a felony charge, or has been held liable or has 98 been enjoined in a civil action by final judgment, if the felony 99 or civil action involved fraud, embezzlement, fraudulent 100 101 conversion, or misappropriation of property. Is subject to a currently effective injunctive or 102 b. 103 restrictive order or federal or state administrative order 104 relating to business activity or health care as a result of an

105 action brought by a public agency or department, including, 106 without limitation, an action affecting a license under chapter 107 400 or chapter 429.

109 The statement <u>must</u> shall set forth the court or agency, the date 110 of conviction or judgment, and the penalty imposed or damages 111 assessed, or the date, nature, and issuer of the order. Before 112 determining whether a provisional certificate of authority is to 113 be issued, the office may make an inquiry to determine the

382139 - h1033-line 628.docx

108

Published On: 4/17/2019 5:52:14 PM

Page 5 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

114 accuracy of the information submitted pursuant to subparagraphs
115 1., 2., and 3. 1. and 2.

(d) The contracts for continuing care and continuing care at-home to be entered into between the provider and residents which meet the minimum requirements of s. 651.055 or s. 651.057 and which include a statement describing the procedures required by law relating to the release of escrowed entrance fees. Such statement may be furnished through an addendum.

(e) Any advertisement or other written material proposedto be used in the solicitation of residents.

124 Such other reasonable data, financial statements, and (f) 125 pertinent information as the commission or office may reasonably 126 require with respect to the provider or the facility, including 127 the most recent audited financial report statements of 128 comparable facilities currently or previously owned, managed, or 129 developed by the applicant or its principal, to assist in 130 determining the financial viability of the project and the 131 management capabilities of its managers and owners.

(g) The forms of the residency contracts, reservation contracts, escrow agreements, and wait list contracts, if applicable, which are proposed to be used by the provider in the furnishing of care. The office shall approve contracts and escrow agreements that comply with ss. 651.023(1)(c), 651.033, 651.055, and 651.057. Thereafter, no other form of contract or

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 6 of 62

(2019)

Bill No. CS/CS/HB 1033

Amendment No. 1

138 agreement may be used by the provider until it has been 139 submitted to the office and approved. 140 141 If any material change occurs in the facts set forth in an application filed with the office pursuant to this subsection, 142 143 an amendment setting forth such change must be filed with the 144 office within 10 business days after the applicant becomes aware 145 of such change, and a copy of the amendment must be sent by registered mail to the principal office of the facility and to 146 147 the principal office of the controlling company. In addition to the information required in subsection 148 (3) (2), an applicant for a provisional certificate of authority 149 150 shall submit a market feasibility study with appropriate 151 financial, marketing, and actuarial assumptions for the first 5 152 years of operations. The market feasibility study must shall 153 include at least the following information: 154 (a) A description of the proposed facility, including the location, size, anticipated completion date, and the proposed 155 156 construction program. 157 An identification and evaluation of the primary and, (b) 158 if appropriate, the secondary market areas of the facility and 159 the projected unit sales per month. Projected revenues, including anticipated entrance 160 (C) fees; monthly service fees; nursing care revenues rates, if 161 382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

Page 7 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

162 applicable; and all other sources of revenue, including the 163 total amount of debt financing required. 164 (d) Projected expenses, including staffing requirements and salaries; cost of property, plant, and equipment, including 165 166 depreciation expense; interest expense; marketing expense; and 167 other operating expenses. 168 (e) A projected balance sheet Current assets and 169 liabilities of the applicant. Expectations of the financial condition of the 170 (f) project, including the projected cash flow, and a projected 171 balance sheet and an estimate of the funds anticipated to be 172 173 necessary to cover startup losses. 174 The inflation factor, if any, assumed in the (q) 175 feasibility study for the proposed facility and how and where it 176 is applied. 177 (h) Project costs and the total amount of debt financing 178 required, marketing projections, resident fees and charges, the competition, resident contract provisions, and other factors 179 180 that which affect the feasibility of the facility. 181 Appropriate population projections, including (i) 182 morbidity and mortality assumptions. 183 The name of the person who prepared the feasibility (j) study and the experience of such person in preparing similar 184 studies or otherwise consulting in the field of continuing care. 185 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 8 of 62

(2019)

Bill No. CS/CS/HB 1033

Amendment No. 1

186 The preparer of the feasibility study may be the provider or a 187 contracted third party. 188 Any other information that the applicant deems (k) 189 relevant and appropriate to enable the office to make a more 190 informed determination. 191 Within 30 days after receipt of an application for (5)(a) 192 a provisional certificate of authority, the office shall examine 193 the application and shall notify the applicant in writing, specifically setting forth and specifically requesting any 194 195 additional information the office is permitted by law to 196 require. If the application submitted is determined by the 197 office to be substantially incomplete so as to require substantial additional information, including biographical 198 199 information, the office may return the application to the 200 applicant with a written notice that the application as received 201 is substantially incomplete and, therefore, unacceptable for filing without further action required by the office. Any filing 202 203 fee received shall be refunded to the applicant.

(b) Within 15 days after receipt of all of the requested additional information, the office shall notify the applicant in writing that all of the requested information has been received and the application is deemed to be complete as of the date of the notice. Failure to so notify the applicant in writing within the 15-day period shall constitute acknowledgment by the office that it has received all requested additional information, and

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 9 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

211 the application shall be deemed to be complete for purposes of 212 review upon the date of the filing of all of the requested 213 additional information.

214 (6) Within 45 days after the date an application is deemed 215 complete as set forth in paragraph (5) (b), the office shall 216 complete its review and issue a provisional certificate of authority to the applicant based upon its review and a 217 218 determination that the application meets all requirements of law, that the feasibility study was based on sufficient data and 219 reasonable assumptions, and that the applicant will be able to 220 221 provide continuing care or continuing care at-home as proposed 222 and meet all financial and contractual obligations related to 223 its operations, including the financial requirements of this 224 chapter. If the application is denied, the office shall notify 225 the applicant in writing, citing the specific failures to meet 226 the provisions of this chapter. Such denial entitles the 227 applicant to a hearing pursuant to chapter 120.

(8) The office <u>may shall</u> not approve any application <u>that</u>
which includes in the plan of financing any encumbrance of the
operating reserves <u>or renewal and replacement reserves</u> required
by this chapter.

232 Section 8. Subsection (1) and subsections (4) through (9) 233 of section 651.023, Florida Statutes, are amended, and 234 subsection (2) of that section is republished, to read:

651.023 Certificate of authority; application.-

382139 - h1033-line 628.docx

235

Published On: 4/17/2019 5:52:14 PM

Page 10 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

(1) After issuance of a provisional certificate of
authority, the office shall issue to the holder of such
provisional certificate a certificate of authority if the holder
of the provisional certificate provides the office with the
following information:

(a) Any material change in status with respect to the
information required to be filed under s. 651.022(2) in the
application for the provisional certificate.

(b) A feasibility study prepared by an independent
consultant which contains all of the information required by s.
651.022(3) and financial forecasts or projections prepared in
accordance with standards adopted by the American Institute of
Certified Public Accountants or in accordance with standards for
feasibility studies or continuing care retirement communities
adopted by the Actuarial Standards Board.

251 1. The study must also contain an independent evaluation 252 and examination opinion, or a comparable opinion acceptable to 253 the office, by the consultant who prepared the study, of the 254 underlying assumptions used as a basis for the forecasts or 255 projections in the study and that the assumptions are reasonable 256 and proper and the project as proposed is feasible.

257 <u>1.2.</u> The study must take into account project costs,
 actual marketing results to date and marketing projections,
 259 resident fees and charges, competition, resident contract

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 11 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

260 provisions, and any other factors which affect the feasibility 261 of operating the facility.

262 2.3. If the study is prepared by an independent certified public accountant, it must contain an examination opinion or a 263 264 compilation report acceptable to the office containing a 265 financial forecast or projections for the first 5 $\frac{3}{2}$ years of operations which take into account an actuary's mortality and 266 morbidity assumptions as the study relates to turnover, rates, 267 fees, and charges and financial projections having a compilation 268 269 opinion for the next 3 years. If the study is prepared by an 270 independent consulting actuary, it must contain mortality and 271 morbidity assumptions as the study relates to turnover, rates, 272 fees, and charges data and an actuary's signed opinion that the 273 project as proposed is feasible and that the study has been 274 prepared in accordance with standards adopted by the American 275 Academy of Actuaries.

276 Subject to subsection (4), a provider may submit an (C) application for a certificate of authority and any required 277 278 exhibits upon submission of documents evidencing proof that the project has a minimum of 30 percent of the units reserved for 279 280 which the provider is charging an entrance fee. This does not 281 apply to an application for a certificate of authority for the acquisition of a facility for which a certificate of authority 282 was issued before October 1, 1983, to a provider who 283 subsequently becomes a debtor in a case under the United States 284

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 12 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

285 Bankruptcy Code, 11 U.S.C. ss. 101 et seq., or to a provider for 286 which the department has been appointed receiver pursuant to 287 part II of chapter 631.

(d) <u>Documents evidencing</u> Proof that commitments have been
secured for both construction financing and long-term financing
or a documented plan acceptable to the office has been adopted
by the applicant for long-term financing.

(e) <u>Documents evidencing</u> Proof that all conditions of the
lender have been satisfied to activate the commitment to
disburse funds other than the obtaining of the certificate of
authority, the completion of construction, or the closing of the
purchase of realty or buildings for the facility.

297 Documents evidencing Proof that the aggregate amount (f) of entrance fees received by or pledged to the applicant, plus 298 299 anticipated proceeds from any long-term financing commitment, 300 plus funds from all other sources in the actual possession of 301 the applicant, equal at least 100 percent of the aggregate cost of constructing or purchasing, equipping, and furnishing the 302 303 facility plus 100 percent of the anticipated startup losses of the facility. 304

305 (g) <u>A</u> complete audited financial <u>report</u> statements of the
306 applicant, prepared by an independent certified public
307 accountant in accordance with generally accepted accounting
308 principles, as of the date the applicant commenced business
309 operations or for the fiscal year that ended immediately

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 13 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

321

310 preceding the date of application, whichever is later, and 311 complete unaudited quarterly financial statements attested to by 312 the applicant after the date of the last audit.

313 (h) <u>Documents evidencing</u> Proof that the applicant has 314 complied with the escrow requirements of subsection (5) or 315 subsection (7) and will be able to comply with s. 651.035.

(i) Such other reasonable data, financial statements, and pertinent information as the commission or office may require with respect to the applicant or the facility, to determine the financial status of the facility and the management capabilities of its managers and owners.

322 If any material change occurs in the facts set forth in an 323 application filed with the office pursuant to this subsection, 324 an amendment setting forth such change must be filed with the 325 office within 10 business days after the applicant becomes aware 326 of such change, and a copy of the amendment must be sent by 327 registered mail to the principal office of the facility and to 328 the principal office of the controlling company.

(2) Within 30 days after receipt of the information required under subsection (1), the office shall examine such information and notify the provider in writing, specifically requesting any additional information the office is permitted by law to require. Within 15 days after receipt of all of the requested additional information, the office shall notify the

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 14 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

335 provider in writing that all of the requested information has 336 been received and the application is deemed to be complete as of 337 the date of the notice. Failure to notify the applicant in writing within the 15-day period constitutes acknowledgment by 338 339 the office that it has received all requested additional 340 information, and the application shall be deemed complete for 341 purposes of review on the date of filing all of the required 342 additional information.

(4) The office shall issue a certificate of authority upon determining that the applicant meets all requirements of law and has submitted all of the information required by this section, that all escrow requirements have been satisfied, and that the fees prescribed in s. 651.015(2) have been paid.

348 (a) A Notwithstanding satisfaction of the 30-percent 349 minimum reservation requirement of paragraph (1)(c), no 350 certificate of authority may not shall be issued until 351 documentation evidencing that the project has a minimum of 50 percent of the units reserved for which the provider is charging 352 353 an entrance fee, and proof is provided to the office. If a 354 provider offering continuing care at-home is applying for a 355 certificate of authority or approval of an expansion pursuant to 356 s. 651.021(2), the same minimum reservation requirements must be 357 met for the continuing care and continuing care at-home 358 contracts, independently of each other.

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 15 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

359 In order for a unit to be considered reserved under (b) 360 this section, the provider must collect a minimum deposit of the 361 lesser of \$40,000 or 10 percent of the then-current entrance fee 362 for that unit, and may assess a forfeiture penalty of 2 percent 363 of the entrance fee due to termination of the reservation 364 contract after 30 days for any reason other than the death or 365 serious illness of the resident, the failure of the provider to 366 meet its obligations under the reservation contract, or other circumstances beyond the control of the resident that equitably 367 entitle the resident to a refund of the resident's deposit. The 368 369 reservation contract must state the cancellation policy and the 370 terms of the continuing care or continuing care at-home contract 371 to be entered into.

(5) Up to 25 percent of the moneys paid for all or any part of an initial entrance fee may be included or pledged for the construction or purchase of the facility or as security for long-term financing. <u>As used in this section</u>, the term "initial entrance fee" means the total entrance fee charged by the facility to the first occupant of a unit.

378 (a) A minimum of 75 percent of the moneys paid for all or 379 any part of an initial entrance fee collected for continuing 380 care or continuing care at-home <u>must shall</u> be placed in an 381 escrow account or on deposit with the department as prescribed 382 in s. 651.033.

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 16 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

(b) For an expansion as provided in s. 651.021(2), a minimum of 75 percent of the moneys paid for all or any part of an initial entrance fee collected for continuing care and 50 percent of the moneys paid for all or any part of an initial fee collected for continuing care at-home shall be placed in an escrow account or on deposit with the department as prescribed in s. 651.033.

(6) The provider is entitled to secure release of the
moneys held in escrow within 7 days after receipt by the office
of an affidavit from the provider, along with appropriate copies
to verify, and notification to the escrow agent by certified
mail, that the following conditions have been satisfied:

395

(a) A certificate of occupancy has been issued.

(b) Payment in full has been received for at least 70 percent of the total units of a phase or of the total of the combined phases constructed. If a provider offering continuing care at-home is applying for a release of escrowed entrance fees, the same minimum requirement must be met for the continuing care and continuing care at-home contracts, independently of each other.

403 (c) The consultant who prepared the feasibility study 404 required by this section or a substitute approved by the office 405 certifies within 12 months before the date of filing for office 406 approval that there has been no material adverse change in 407 status with regard to the feasibility study. If a material

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 17 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

408 adverse change exists at the time of submission, sufficient 409 information acceptable to the office and the feasibility 410 consultant must be submitted which remedies the adverse 411 condition. 412 (c) (d) Documents evidencing Proof that commitments have 413 been secured or a documented plan adopted by the applicant has been approved by the office for long-term financing. 414 415 (d) (e) Documents evidencing Proof that the provider has sufficient funds to meet the requirements of s. 651.035, which 416 may include funds deposited in the initial entrance fee account. 417 418 (e) (f) Documents evidencing Proof as to the intended application of the proceeds upon release and documentation proof 419 420 that the entrance fees when released will be applied as 421 represented to the office. 422 (f) If any material change occurred in the facts set forth 423 in the application filed with the office pursuant to subsection 424 (1), the applicant timely filed the amendment setting forth such 425 change with the office and sent copies of the amendment to the 426 principal office of the facility and to the principal office of 427 the controlling company as required under that subsection. 428 429 Notwithstanding chapter 120, no person, other than the provider, the escrow agent, and the office, may have a substantial 430 interest in any office decision regarding release of escrow 431 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 18 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

432 funds in any proceedings under chapter 120 or this chapter433 regarding release of escrow funds.

434 (7) In lieu of the provider fulfilling the requirements in 435 subsection (5) and paragraphs (6) (b) and (c) $\frac{(d)}{(d)}$, the office may 436 authorize the release of escrowed funds to retire all 437 outstanding debts on the facility and equipment upon application 438 of the provider and upon the provider's showing that the 439 provider will grant to the residents a first mortgage on the land, buildings, and equipment that constitute the facility, and 440 that the provider has satisfied paragraphs (6) (a) $\frac{1}{r}$ (c) $\frac{1}{r}$ and (d) 441 442 (e). Such mortgage shall secure the refund of the entrance fee 443 in the amount required by this chapter. The granting of such mortgage is subject to the following: 444

445 (a) The first mortgage is granted to an independent trust 446 that is beneficially held by the residents. The document 447 creating the trust must include a provision that agrees to an 448 annual audit and will furnish to the office all information the office may reasonably require. The mortgage may secure payment 449 450 on bonds issued to the residents or trustee. Such bonds are 451 redeemable after termination of the residency contract in the 452 amount and manner required by this chapter for the refund of an 453 entrance fee.

(b) Before granting a first mortgage to the residents, all
construction must be substantially completed and substantially
all equipment must be purchased. No part of the entrance fees

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 19 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

457 may be pledged as security for a construction loan or otherwise 458 used for construction expenses before the completion of 459 construction.

460 (c) If the provider is leasing the land or buildings used
461 by the facility, the leasehold interest must be for a term of at
462 least 30 years.

463 (8) The timeframes provided under s. 651.022(5) and (6) apply to applications submitted under s. 651.021(2). The office 464 may not issue a certificate of authority to a facility that does 465 466 not have a component that is to be licensed pursuant to part II 467 of chapter 400 or to part I of chapter 429 or that does not 468 offer personal services or nursing services through written 469 contractual agreement. A written contractual agreement must be 470 disclosed in the contract for continuing care or continuing care 471 at-home and is subject to the provisions of s. 651.1151, 472 relating to administrative, vendor, and management contracts.

(9) The office may not approve an application that
includes in the plan of financing any encumbrance of the
operating reserves <u>or renewal and replacement reserves</u> required
by this chapter.

477 Section 9. Section 651.024, Florida Statutes, is amended 478 to read:

479 6

651.024 Acquisition.-

480(1)A person who seeks to assume the role of general481partner of a provider or to otherwise assume ownership or

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 20 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

482	possession of, or control over, 10 percent or more of a
483	provider, a controlling company of the provider, or a provider's
484	assets, based on the balance sheet from the most recent
485	financial audit report filed with the office, is issued a
486	certificate of authority to operate a continuing care facility
487	or a provisional certificate of authority shall be subject to
488	the provisions of s. 628.4615 and is not required to make
489	filings pursuant to s. 651.022, s. 651.023, or s. 651.0245.
490	(2) A person who seeks to acquire and become the provider
491	for a facility is subject to s. 651.0245 and is not required to
492	make filings pursuant to ss. 628.4615, 651.022, and 651.023.
493	(3) In addition to the provider or the controlling
494	company, the office has standing to petition a circuit court
495	under s. 628.4615(9).
496	Section 10. Section 651.0245, Florida Statutes, is created
497	to read:
498	651.0245 Application for the simultaneous acquisition of a
499	facility and issuance of a certificate of authority
500	(1) Except with the prior written approval of the office,
501	a person may not, individually or in conjunction with any
502	affiliated person of such person, directly or indirectly acquire
503	a facility operating under a subsisting certificate of authority
504	and engage in the business of providing continuing care.
505	(2) An applicant seeking simultaneous acquisition of a
506	facility and issuance of a certificate of authority must:
3	882139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 21 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

507	(a) Comply with the notice requirements of s.
508	<u>628.4615(2)(a); and</u>
509	(b) File an application in the form required by the office
510	and cooperate with the office's review of the application.
511	(3) The commission shall adopt by rule application
512	requirements equivalent to those described in ss. 628.4615(4)
513	and (5), 651.022(2), and 651.023(1)(b). The office shall review
514	the application and issue an approval or disapproval of the
515	filing in accordance with ss. $628.4615(6)(a)$ and (c), $(7)-(10)$,
516	and (14); and 651.023(1)(b).
517	(4) In addition to the provider or the controlling
518	company, the office has standing to petition a circuit court
519	under s. 628.4615(9).
520	(5) A person may rebut a presumption of control by filing
521	a disclaimer of control with the office on a form prescribed by
522	the commission. The disclaimer must fully disclose all material
523	relationships and bases for affiliation between the person and
524	the provider or facility, as well as the basis for disclaiming
525	the affiliation. In lieu of such form, a person or acquiring
526	party may file with the office a copy of a Schedule 13G filed
527	with the Securities and Exchange Commission pursuant to Rule
528	13d-1(b) or (c), 17 C.F.R. s. 240.13d-1, under the Securities
529	Exchange Act of 1934, as amended. After a disclaimer has been
530	filed, the provider or facility is relieved of any duty to
531	register or report under this section which may arise out of the
3	882139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 22 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

532	provider's or facility's relationship with the person, unless
533	the office disallows the disclaimer.
534	(6) The commission may adopt rules as necessary to
535	administer this section.
536	Section 11. Section 651.0246, Florida Statutes, is created
537	to read:
538	651.0246 Expansions.—
539	(1)(a) A provider must obtain written approval from the
540	office before commencing construction or marketing for an
541	expansion of a certificated facility equivalent to the addition
542	of at least 20 percent of existing units or 20 percent or more
543	of the number of continuing care at-home contracts. If the
544	provider has exceeded the current statewide median for days cash
545	on hand, debt service coverage ratio, and total facility
546	occupancy for the most recent two consecutive annual reporting
547	periods, the provider is automatically granted approval to
548	expand the total number of existing units by up to 35 percent
549	upon submitting a letter to the office indicating the total
550	number of planned units in the expansion, the proposed sources
551	and uses of funds, and an attestation that the provider
552	understands and pledges to comply with all minimum liquid
553	reserve and escrow account requirements. As used in this
554	section, the term "existing units" means the sum of the total
555	number of independent living units and assisted living units
556	identified in the most recent annual report filed with the
	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 23 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

557	office pursuant to s. 651.026. For purposes of this section, the
558	statewide median for days cash on hand, debt service coverage
559	ratio, and total facility occupancy is the median calculated in
560	the most recent annual report submitted by the office to the
561	Continuing Care Advisory Council pursuant to s. 651.121(8). This
562	section does not apply to construction for which a certificate
563	of need from the Agency for Health Care Administration is
564	required.
565	(b) The application for the approval of an addition
566	consisting of 20 percent or more of existing units or continuing
567	care at-home contracts must be on forms adopted by the
568	commission. The application must include the feasibility study
569	required by this section and such other information as
570	reasonably requested by the office. If the expansion is only for
571	continuing care at-home contracts, an actuarial study prepared
572	by an independent actuary in accordance with standards adopted
573	by the American Academy of Actuaries which presents the
574	financial impact of the expansion may be substituted for the
575	feasibility study.
576	(c) In determining whether an expansion should be
577	approved, the office shall consider:
578	1. Whether the application meets all requirements of law;
579	2. Whether the feasibility study was based on sufficient
580	data and reasonable assumptions; and
3	82139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 24 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

581	3. Whether the applicant will be able to provide
582	continuing care or continuing care at-home as proposed and meet
583	all financial obligations related to its operations, including
584	the financial requirements of this chapter.
585	
586	If the application is denied, the office must notify the
587	applicant in writing, citing the specific failures to meet the
588	provisions of this chapter. A denial entitles the applicant to a
589	hearing pursuant to chapter 120.
590	(2) A provider applying for expansion of a certificated
591	facility must submit all of the following:
592	(a) A feasibility study prepared by an independent
593	certified public accountant. The feasibility study must include
594	at least the following information:
595	1. A description of the facility and proposed expansion,
596	including the location, the size, the anticipated completion
597	date, and the proposed construction program.
598	2. An identification and evaluation of the primary and, if
599	applicable, secondary market areas of the facility and the
600	projected unit sales per month.
601	3. Projected revenues, including anticipated entrance
602	fees; monthly service fees; nursing care revenues, if
603	applicable; and all other sources of revenue.
604	4. Projected expenses, including for staffing requirements
605	and salaries; the cost of property, plant, and equipment,
3	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM
	Page 25 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

606 including depreciation expense; interest expense; marketing 607 expense; and other operating expenses. 608 5. A projected balance sheet of the applicant. 6. The expectations for the financial condition of the 609 610 project, including the projected cash flow and an estimate of 611 the funds anticipated to be necessary to cover startup losses. 7. The inflation factor, if any, assumed in the study for 612 613 the proposed expansion and how and where it is applied. 8. Project costs; the total amount of debt financing 614 615 required; marketing projections; resident rates, fees, and 616 charges; the competition; resident contract provisions; and 617 other factors that affect the feasibility of the facility. 618 9. Appropriate population projections, including morbidity 619 and mortality assumptions. 620 10. The name of the person who prepared the feasibility 621 study and his or her experience in preparing similar studies or 622 otherwise consulting in the field of continuing care. 623 11. Financial forecasts or projections prepared in 624 accordance with standards adopted by the American Institute of 625 Certified Public Accountants or in accordance with standards for 626 feasibility studies for continuing care retirement communities 627 adopted by the Actuarial Standards Board. 12. An independent evaluation and examination opinion for 628 629 the first 5 years of operations, or a comparable opinion 630 acceptable to the office, by the consultant who prepared the 382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

Page 26 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

631	study, of the underlying assumptions used as a basis for the
632	forecasts or projections in the study and that the assumptions
633	are reasonable and proper and the project as proposed is
634	feasible.
635	13. Any other information that the provider deems relevant
636	and appropriate to provide to enable the office to make a more
637	informed determination.
638	(b) Such other reasonable data, financial statements, and
639	pertinent information as the commission or office may require
640	with respect to the applicant or the facility to determine the
641	financial status of the facility and the management capabilities
642	of its managers and owners.
643	
644	If any material change occurs in the facts set forth in an
645	application filed with the office pursuant to this section, an
646	amendment setting forth such change must be filed with the
647	office within 10 business days after the applicant becomes aware
648	of such change, and a copy of the amendment must be sent by
649	registered mail to the principal office of the facility and to
650	the principal office of the controlling company.
651	(3) A minimum of 75 percent of the moneys paid for all or
652	any part of an initial entrance fee or reservation deposit
653	collected for units in the expansion and 50 percent of the
654	moneys paid for all or any part of an initial fee collected for
655	continuing care at-home contracts in the expansion must be
	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 27 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

656	placed in an escrow account or on deposit with the department as
657	prescribed in s. 651.033. Up to 25 percent of the moneys paid
658	for all or any part of an initial entrance fee or reservation
659	deposit may be included or pledged for the construction or
660	purchase of the facility or as security for long-term financing.
661	As used in this section, the term "initial entrance fee" means
662	the total entrance fee charged by the facility to the first
663	occupant of a unit.
664	(4) The provider is entitled to secure release of the
665	moneys held in escrow within 7 days after receipt by the office
666	of an affidavit from the provider, along with appropriate copies
667	to verify, and notification to the escrow agent by certified
668	mail that the following conditions have been satisfied:
669	(a) A certificate of occupancy has been issued.
670	(b) Payment in full has been received for at least 50
671	percent of the total units of a phase or of the total of the
672	combined phases constructed. If a provider offering continuing
673	care at-home is applying for a release of escrowed entrance
674	fees, the same minimum requirement must be met for the
675	continuing care and continuing care at-home contracts
676	independently of each other.
677	(c) Documents evidencing that commitments have been
678	secured or that a documented plan adopted by the applicant has
679	been approved by the office for long-term financing.
	382139 - h1033-line 628.docx
	Published On• $4/17/2019$ 5•52•14 PM

Published On: 4/17/2019 5:52:14 PM

Page 28 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

680	(d) Documents evidencing that the provider has sufficient
681	funds to meet the requirements of s. 651.035, which may include
682	funds deposited in the initial entrance fee account.
683	(e) Documents evidencing the intended application of the
684	proceeds upon release and documentation that the entrance fees,
685	when released, will be applied as represented to the office.
686	
687	Notwithstanding chapter 120, only the provider, the escrow
688	agent, and the office have a substantial interest in any office
689	decision regarding release of escrow funds in any proceedings
690	under chapter 120 or this chapter.
691	(5)(a) Within 30 days after receipt of an application for
692	expansion, the office shall examine the application and shall
693	notify the applicant in writing, specifically requesting any
694	additional information that the office is authorized to require.
695	Within 15 days after the office receives all the requested
696	additional information, the office shall notify the applicant in
697	writing that the requested information has been received and
698	that the application is deemed complete as of the date of the
699	notice. Failure to notify the applicant in writing within the
700	15-day period constitutes acknowledgement by the office that it
701	has received all requested additional information, and the
702	application is deemed complete for purposes of review on the
703	date the applicant files all of the required additional
704	information. If the application submitted is determined by the
l	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 29 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

705	office to be substantially incomplete so as to require
706	substantial additional information, including biographical
707	information, the office may return the application to the
708	applicant with a written notice stating that the application as
709	received is substantially incomplete and, therefore, is
710	unacceptable for filing without further action required by the
711	office. Any filing fee received must be refunded to the
712	applicant.
713	(b) An application is deemed complete upon the office
714	receiving all requested information and the applicant correcting
715	any error or omission of which the applicant was timely notified
716	or when the time for such notification has expired. The office
717	shall notify the applicant in writing of the date on which the
718	application was deemed complete.
719	(6) Within 45 days after the date on which an application
720	is deemed complete as provided in paragraph (5)(b), the office
721	shall complete its review and, based upon its review, approve an
722	expansion by the applicant and issue a determination that the
723	application meets all requirements of law, that the feasibility
724	study was based on sufficient data and reasonable assumptions,
725	and that the applicant will be able to provide continuing care
726	or continuing care at-home as proposed and meet all financial
727	and contractual obligations related to its operations, including
728	the financial requirements of this chapter. If the application
729	is denied, the office must notify the applicant in writing,
3	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 30 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

730 citing the specific failures to meet the requirements of this 731 chapter. The denial entitles the applicant to a hearing pursuant 732 to chapter 120. 733 Section 12. Paragraphs (b) and (c) of subsection (2) and 734 subsection (3) of section 651.026, Florida Statutes, are 735 amended, subsection (10) is added to that section, and paragraph 736 (a) of subsection (2) of that section is republished, to read: 737 651.026 Annual reports.-The annual report shall be in such form as the 738 (2) 739 commission prescribes and shall contain at least the following: 740 Any change in status with respect to the information (a) 741 required to be filed under s. 651.022(2). 742 A financial report statements audited by an (b) 743 independent certified public accountant which must contain, for 744 two or more periods if the facility has been in existence that 745 long, all of the following: 746 1. An accountant's opinion and, in accordance with 747 generally accepted accounting principles: 748 a. A balance sheet; 749 b. A statement of income and expenses; 750 c. A statement of equity or fund balances; and 751 d. A statement of changes in cash flows. 752 2. Notes to the financial report statements considered 753 customary or necessary for full disclosure or adequate 382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM Page 31 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

754 understanding of the financial <u>report</u> statements, financial 755 condition, and operation.

756

(c) The following financial information:

757 1. A detailed listing of the assets maintained in the 758 liquid reserve as required under s. 651.035 and in accordance 759 with part II of chapter 625;

2. A schedule giving additional information relating to 760 761 property, plant, and equipment having an original cost of at least \$25,000, so as to show in reasonable detail with respect 762 763 to each separate facility original costs, accumulated 764 depreciation, net book value, appraised value or insurable value 765 and date thereof, insurance coverage, encumbrances, and net 766 equity of appraised or insured value over encumbrances. Any 767 property not used in continuing care must be shown separately 768 from property used in continuing care;

769 3. The level of participation in Medicare or Medicaid770 programs, or both;

4. A statement of all fees required of residents, including, but not limited to, a statement of the entrance fee charged, the monthly service charges, the proposed application of the proceeds of the entrance fee by the provider, and the plan by which the amount of the entrance fee is determined if the entrance fee is not the same in all cases; and

777 5. Any change or increase in fees if the provider changes 778 the scope of, or the rates for, care or services, regardless of 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 32 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

779 whether the change involves the basic rate or only those 780 services available at additional costs to the resident; -781 6. If the provider has more than one certificated 782 facility, or has operations that are not licensed under this 783 chapter, it shall submit a balance sheet, statement of income 784 and expenses, statement of equity or fund balances, and statement of cash flows for each facility licensed under this 785 786 chapter as supplemental information to the audited financial 787 report statements required under paragraph (b); and. 788 7. The management's calculation of the provider's debt 789 service coverage ratio, occupancy, and days cash on hand for the 790 current reporting period. 791 The commission shall adopt by rule additional (3) 792 meaningful measures of assessing the financial viability of a 793 provider. The rule may include the following factors: 794 (a) Debt service coverage ratios. 795 (b) Current ratios. 796 (c) Adjusted current ratios. 797 (d) Cash flows. 798 (e) Occupancy rates. 799 (f) Other measures, ratios, or trends. (g) Other factors as may be appropriate. 800 801 (10) By August 1 annually, the office shall publish on its 802 website an annual industry report for the preceding calendar year which contains all of the following: 803 382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

Page 33 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

804	(a) The median days cash on hand for all providers.
805	(b) The median debt service coverage ratio for all
806	providers.
807	(c) The median occupancy rate for all providers by
808	setting, including independent living, assisted living, skilled
809	nursing, and the entire facility.
810	(d) Documentation of the office's compliance with
811	requirements in s. 651.105(1) relating to examination
812	timeframes. Documentation must include the number of
813	examinations completed in the preceding calendar year, the
814	number of such examinations for which the report has been
815	issued, and the percentage of all examinations completed within
816	the statutorily required timeframes.
817	(e) The number of annual reports submitted to the office
818	pursuant to this section in the preceding calendar year and the
819	percentage of such reports that the office has reviewed in order
820	to determine whether a regulatory action level event has
821	occurred.
822	Section 13. Section 651.0261, Florida Statutes, is amended
823	to read:
824	651.0261 Quarterly and monthly statements
825	(1) Within 45 days after the end of each fiscal quarter,
826	each provider shall file a quarterly unaudited financial
827	statement of the provider or of the facility in the form
828	prescribed by commission rule and days cash on hand, occupancy,
l	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 34 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

829	debt service coverage ratio, and a detailed listing of the	
830		
	assets maintained in the liquid reserve as required under s.	
831	651.035. The last quarterly statement for a fiscal year is not	
832	required if a provider does not have pending a regulatory action	
833	level event, impairment, or a corrective action plan. If a	
834	provider falls below two or more of the thresholds set forth in	
835	s. 651.011(25) at the end of any fiscal quarter, the provider	
836	shall submit to the office, at the same time as the quarterly	
837	statement, an explanation of the circumstances and a description	
838	of the actions it will take to meet the requirements.	
839	(2) If the office finds, pursuant to rules of the	
840	$\operatorname{commission}_{m{r}}$ that such information is needed to properly monitor	
841	the financial condition of a provider or facility or is	
842	otherwise needed to protect the public interest, the office may	
843	require the provider to file <u>:</u>	
844	(a) Within 25 days after the end of each month, a monthly	
845	unaudited financial statement of the provider or of the facility	
846	in the form prescribed by the commission by rule and a detailed	
847	listing of the assets maintained in the liquid reserve as	
848	required under s. 651.035, within 45 days after the end of each	
849	fiscal quarter, a quarterly unaudited financial statement of the	
850	provider or of the facility in the form prescribed by the	
851	commission by rule. The commission may by rule require all or	
852	part of the statements or filings required under this section to	
853	be submitted by electronic means in a computer-readable form	
 382139 - h1033-line 628.docx		
	Published On: 4/17/2019 5:52:14 PM	

Page 35 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

854	compatible with the electronic data format specified by the	
855	commission.	
856	(b) Such other data, financial statements, and pertinent	
857	information as the commission or office may reasonably require	
858	with respect to the provider or the facility, its directors, or	
859	its trustees; or with respect to any parent, subsidiary, or	
860	affiliate, if the provider or facility relies on a contractual	
861	or financial relationship with such parent, subsidiary, or	
862	affiliate in order to meet the financial requirements of this	
863	chapter, to determine the financial status of the provider or of	
864	the facility and the management capabilities of its managers and	
865	owners.	
866	(3) A filing under subsection (2) may be required if any	
867	of the following applies:	
868	(a) The provider is:	
869	1. Subject to administrative supervision proceedings;	
870	2. Subject to a corrective action plan resulting from a	
871	regulatory action level event and for up to 2 years after the	
872	factors that caused the regulatory action level event have been	
873	corrected; or	
874	3. Subject to delinquency or receivership proceedings or	
875	has filed for bankruptcy.	
876	(b) The provider or facility displays a declining	
877	financial position.	
 382139 - h1033-line 628.docx		
Published On: 4/17/2019 5:52:14 PM		

Page 36 of 62
Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

878	(c) A change of ownership of the provider or facility has
879	occurred within the previous 2 years.
880	(d) The provider is found to be impaired.
881	(4) The commission may by rule require all or part of the
882	statements or filings required under this section to be
883	submitted by electronic means in a computer-readable format
884	compatible with an electronic data format specified by the
885	commission.
886	Section 14. Section 651.028, Florida Statutes, is amended
887	to read:
888	651.028 Accredited facilities.— If A provider <u>or facility</u> is
889	deemed accredited under this statute if it is accredited without
890	stipulations or conditions by a process found by the <u>commission</u>
891	office to be acceptable, and substantially equivalent to the
892	provisions of this chapter, the office may, pursuant to rule of
893	the commission, waive any requirements of this chapter with
894	respect to the provider if the office finds that such waivers
895	are not inconsistent and consistent with the security
896	protections intended by this chapter.
897	Section 15. Subsections (1), (2), (3), and (5) of section
898	651.033, Florida Statutes, are amended, and subsection (6) is
899	added to that section, to read:
900	651.033 Escrow accounts
	382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 37 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

901 (1) When funds are required to be deposited in an escrow 902 account pursuant to <u>s. 651.0215</u>, s. 651.022, s. 651.023, <u>s.</u> 903 651.0246, s. 651.035, or s. 651.055:

904 The escrow account must shall be established in a (a) 905 Florida bank, Florida savings and loan association, or Florida 906 trust company, or a national bank that is chartered and 907 supervised by the Office of the Comptroller of the Currency 908 within the United States Department of the Treasury and that has 909 a branch in this state, which is acceptable to the office, or 910 such funds must be deposited on deposit with the department; and 911 the funds deposited therein shall be kept and maintained in an 912 account separate and apart from the provider's business 913 accounts.

(b) An escrow agreement shall be entered into between the 914 915 bank, savings and loan association, or trust company and the 916 provider of the facility; the agreement shall state that its 917 purpose is to protect the resident or the prospective resident; and, upon presentation of evidence of compliance with applicable 918 919 portions of this chapter, or upon order of a court of competent 920 jurisdiction, the escrow agent shall release and pay over the 921 funds, or portions thereof, together with any interest accrued 922 thereon or earned from investment of the funds, to the provider 923 or resident as directed.

924 (c) Any agreement establishing an escrow account required 925 under the provisions of this chapter is shall be subject to

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 38 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

926 approval by the office. The agreement <u>must</u> shall be in writing 927 and shall contain, in addition to any other provisions required 928 by law, a provision whereby the escrow agent agrees to abide by 929 the duties imposed <u>by paragraphs (b) and (e), (3)(a), (3)(b),</u> 930 and (5)(a) and subsection (6) under this section.

931 (d) All funds deposited in an escrow account, if invested, shall be invested as set forth in part II of chapter 625; 932 933 however, such investment may not diminish the funds held in 934 escrow below the amount required by this chapter. Funds 935 deposited in an escrow account are not subject to charges by the 936 escrow agent except escrow agent fees associated with 937 administering the accounts, or subject to any liens, judgments, 938 garnishments, creditor's claims, or other encumbrances against 939 the provider or facility except as provided in s. 651.035(1).

940 (e) At the request of either the provider or the office,
941 the escrow agent shall issue a statement indicating the status
942 of the escrow account.

943 Notwithstanding s. 651.035(7), In addition, the escrow (2) 944 agreement shall provide that the escrow agent or another person 945 designated to act in the escrow agent's place and the provider, 946 except as otherwise provided in s. 651.035, shall notify the 947 office in writing at least 10 days before the withdrawal of any portion of any funds required to be escrowed under the 948 provisions of s. 651.035. However, in the event of an emergency 949 950 and upon petition by the provider, the office may waive the 10-382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

Page 39 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

951 day notification period and allow a withdrawal of up to 10 952 percent of the required minimum liquid reserve. The office shall 953 have 3 working days to deny the petition for the emergency 10percent withdrawal. If the office fails to deny the petition 954 955 within 3 working days, the petition is shall be deemed to have 956 been granted by the office. For purposes the purpose of this section, the term "working day" means each day that is not a 957 Saturday, Sunday, or legal holiday as defined by Florida law. 958 Also, for purposes the purpose of this section, the day the 959 960 petition is received by the office is shall not be counted as 961 one of the 3 days.

962 (3) In addition, When entrance fees are required to be 963 deposited in an escrow account pursuant to <u>s. 651.0215</u>, <u>s.</u> 964 651.022, <u>s. 651.023</u>, <u>s. 651.0246</u>, or <u>s. 651.055</u>:

965 The provider shall deliver to the resident a written (a) 966 receipt. The receipt must show the payor's name and address, the 967 date, the price of the care contract, and the amount of money paid. A copy of each receipt, together with the funds, must 968 969 shall be deposited with the escrow agent or as provided in 970 paragraph (c). The escrow agent must shall release such funds to 971 the provider 7 days after the date of receipt of the funds by 972 the escrow agent if the provider, operating under a certificate of authority issued by the office, has met the requirements of 973 s. 651.0215(8), s. 651.023(6), or s. 651.0246. However, if the 974 975 resident rescinds the contract within the 7-day period, the 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 40 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

976 escrow agent <u>must</u> shall release the escrowed fees to the 977 resident.

978 (b) At the request of an individual resident of a
979 facility, the escrow agent shall issue a statement indicating
980 the status of the resident's portion of the escrow account.

981 (c) At the request of an individual resident of a 982 facility, the provider may hold the check for the 7-day period 983 and <u>may shall</u> not deposit it during this time period. If the 984 resident rescinds the contract within the 7-day period, the 985 check <u>must shall</u> be immediately returned to the resident. Upon 986 the expiration of the 7 days, the provider shall deposit the 987 check.

988 (d) A provider may assess a nonrefundable fee, which is 989 separate from the entrance fee, for processing a prospective 990 resident's application for continuing care or continuing care 991 at-home.

992 (5) When funds are required to be deposited in an escrow
 993 account pursuant to <u>s. 651.0215</u>, <u>s. 651.022</u>, <u>s. 651.023</u>, <u>s.</u>
 994 <u>651.0246</u>, or <u>s. 651.035</u>, the following shall apply:

995 (a) The escrow agreement <u>must</u> shall require that the 996 escrow agent furnish the provider with a quarterly statement 997 indicating the amount of any disbursements from or deposits to 998 the escrow account and the condition of the account during the 999 period covered by the statement. The agreement <u>must</u> shall 1000 require that the statement be furnished to the provider by the

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 41 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

escrow agent on or before the 10th day of the month following 1001 the end of the quarter for which the statement is due. If the 1002 1003 escrow agent does not provide the quarterly statement to the 1004 provider on or before the 10th day of the month following the 1005 month for which the statement is due, the office may, in its 1006 discretion, levy against the escrow agent a fine not to exceed 1007 \$25 a day for each day of noncompliance with the provisions of 1008 this subsection.

(b) If the escrow agent does not provide the quarterly statement to the provider on or before the 10th day of the month following the quarter for which the statement is due, the provider shall, on or before the 15th day of the month following the quarter for which the statement is due, send a written request for the statement to the escrow agent by certified mail return receipt requested.

(c) On or before the 20th day of the month following the quarter for which the statement is due, the provider shall file with the office a copy of the escrow agent's statement or, if the provider has not received the escrow agent's statement, a copy of the written request to the escrow agent for the statement.

(d) The office may, in its discretion, in addition to any
other penalty that may be provided for under this chapter, levy
a fine against the provider not to exceed \$25 a day for each day

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 42 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1025	the provider fails to comply with the provisions of this
1026	subsection.
1027	(e) Funds held on deposit with the department are exempt
1028	from the reporting requirements of this subsection.
1029	(6) Except as described in paragraph (3)(a), the escrow
1030	agent may not release or otherwise allow the transfer of funds
1031	without the written approval of the office, unless the
1032	withdrawal is from funds in excess of the amounts required by
1033	ss. 651.0215, 651.022, 651.023, 651.0246, 651.035, and 651.055.
1034	Section 16. Section 651.034, Florida Statutes, is created
1035	to read:
1036	651.034 Financial and operating requirements for
1037	providers
1038	(1) (a) If a regulatory action level event occurs, the
1039	office must:
1040	1. Require the provider to prepare and submit a corrective
1041	action plan or, if applicable, a revised corrective action plan;
1042	2. Perform an examination pursuant to s. 651.105 or an
1043	analysis, as the office considers necessary, of the assets,
1044	liabilities, and operations of the provider, including a review
1045	of the corrective action plan or the revised corrective action
1046	plan; and
1047	3. After the examination or analysis, issue a corrective
1048	order, if necessary, specifying any corrective actions that the
1049	office determines are required.
3	82139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 43 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1050	(b) In determining corrective actions, the office shall
1051	consider any factor relevant to the provider based upon the
1052	office's examination or analysis of the assets, liabilities, and
1053	operations of the provider. The provider must submit the
1054	corrective action plan or the revised corrective action plan
1055	within 30 days after the occurrence of the regulatory action
1056	level event. The office shall review and approve or disapprove
1057	the corrective action plan within 45 business days.
1058	(c) The office may use members of the Continuing Care
1059	Advisory Council, individually or as a group, or may retain
1060	actuaries, investment experts, and other consultants to review a
1061	provider's corrective action plan or revised corrective action
1062	plan, examine or analyze the assets, liabilities, and operations
1063	of a provider, and formulate the corrective order with respect
1064	to the provider. The costs and expenses relating to consultants
1065	must be borne by the affected provider.
1066	(2) Except when the office's remedial rights are suspended
1067	pursuant to s. 651.114(11)(a), the office must take action
1068	necessary to place an impaired provider under regulatory
1069	control, including any remedy available under part I of chapter
1070	631. An impairment is sufficient grounds for the department to
1071	be appointed as receiver as provided in chapter 631, except when
1072	the office's remedial rights are suspended pursuant to s.
1073	651.114(11)(a). If the office's remedial rights are suspended
1074	pursuant to s. 651.114(11)(a), the impaired provider must make
3	882139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 44 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1075	available to the office copies of any corrective action plan
1076	approved by the third-party lender or trustee to cure the
1077	impairment and any related required report. For purposes of s.
1078	631.051, impairment of a provider is defined according to the
1079	term "impaired" under s. 651.011. The office may forego taking
1080	action for up to 180 days after the impairment if the office
1081	finds there is a reasonable expectation that the impairment may
1082	be eliminated within the 180-day period.
1083	(3) There is no liability on the part of, and a cause of
1084	action may not arise against, the commission, department, or
1085	office, or their employees or agents, for any action they take
1086	in the performance of their powers and duties under this
1087	section.
1088	(4) The office shall transmit any notice that may result
1089	in regulatory action by registered mail, certified mail, or any
1090	other method of transmission which includes documentation of
1091	receipt by the provider. Notice is effective when the provider
1092	receives it.
1093	(5) This section is supplemental to the other laws of this
1094	state and does not preclude or limit any power or duty of the
1095	department or office under those laws or under the rules adopted
1096	pursuant to those laws.
1097	(6) The office may exempt a provider from subsection (1)
1098	or subsection (2) until stabilized occupancy is reached or until
1099	the time projected to achieve stabilized occupancy as reported
3	882139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 45 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1100 in the last feasibility study required by the office as part of 1101 an application filing under s. 651.0215, s. 651.023, s. 651.024, 1102 or s. 651.0246 has elapsed, but for no longer than 5 years after 1103 the date of issuance of the certificate of occupancy. 1104 (7) The commission may adopt rules to administer this section, including, but not limited to, rules regarding 1105 corrective action plans, revised corrective action plans, 1106 corrective orders, and procedures to be followed in the event of 1107 1108 a regulatory action level event or an impairment.

1109 Section 17. Paragraphs (a), (b), and (c) of subsection (1) 1110 of section 651.035, Florida Statutes, are amended, and 1111 subsections (7) through (11) are added to that section, to read: 1112 651.035 Minimum liquid reserve requirements.-

(1) A provider shall maintain in escrow a minimum liquid reserve consisting of the following reserves, as applicable:

Each provider shall maintain in escrow as a debt 1115 (a) service reserve the aggregate amount of all principal and 1116 interest payments due during the fiscal year on any mortgage 1117 1118 loan or other long-term financing of the facility, including property taxes as recorded in the audited financial report 1119 1120 statements required under s. 651.026. The amount must include 1121 any leasehold payments and all costs related to such payments. If principal payments are not due during the fiscal year, the 1122 provider must shall maintain in escrow as a minimum liquid 1123 1124 reserve an amount equal to interest payments due during the next 382139 - h1033-line 628.docx

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Published On: 4/17/2019 5:52:14 PM

Page 46 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1125 12 months on any mortgage loan or other long-term financing of the facility, including property taxes. If a provider does not 1126 1127 have a mortgage loan or other financing on the facility, the 1128 provider must deposit monthly in escrow as a minimum liquid 1129 reserve an amount equal to one-twelfth of the annual property 1130 tax liability as indicated in the most recent tax notice provided pursuant to s. 197.322(3), and must annually pay 1131 1132 property taxes out of such escrow.

A provider that has outstanding indebtedness that 1133 (b) 1134 requires a debt service reserve to be held in escrow pursuant to a trust indenture or mortgage lien on the facility and for which 1135 the debt service reserve may only be used to pay principal and 1136 interest payments on the debt that the debtor is obligated to 1137 1138 pay, and which may include property taxes and insurance, may 1139 include such debt service reserve in computing the minimum liquid reserve needed to satisfy this subsection if the provider 1140 1141 furnishes to the office a copy of the agreement under which such 1142 debt service is held, together with a statement of the amount 1143 being held in escrow for the debt service reserve, certified by 1144 the lender or trustee and the provider to be correct. The 1145 trustee shall provide the office with any information concerning the debt service reserve account upon request of the provider or 1146 the office. Any such separate debt service reserves are not 1147 subject to the transfer provisions set forth in subsection (8). 1148

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 47 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1149 Each provider shall maintain in escrow an operating (C) reserve equal to 30 percent of the total operating expenses 1150 1151 projected in the feasibility study required by s. 651.023 for the first 12 months of operation. Thereafter, each provider 1152 1153 shall maintain in escrow an operating reserve equal to 15 1154 percent of the total operating expenses in the annual report filed pursuant to s. 651.026. If a provider has been in 1155 1156 operation for more than 12 months, the total annual operating expenses must shall be determined by averaging the total annual 1157 operating expenses reported to the office by the number of 1158 annual reports filed with the office within the preceding 3-year 1159 1160 period subject to adjustment if there is a change in the number of facilities owned. For purposes of this subsection, total 1161 1162 annual operating expenses include all expenses of the facility 1163 except: depreciation and amortization; interest and property taxes included in paragraph (a); extraordinary expenses that are 1164 1165 adequately explained and documented in accordance with generally accepted accounting principles; liability insurance premiums in 1166 1167 excess of those paid in calendar year 1999; and changes in the 1168 obligation to provide future services to current residents. For 1169 providers initially licensed during or after calendar year 1999, 1170 liability insurance must shall be included in the total operating expenses in an amount not to exceed the premium paid 1171 during the first 12 months of facility operation. Beginning 1172 January 1, 1993, The operating reserves required under this 1173 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 48 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1174 subsection must shall be in an unencumbered account held in escrow for the benefit of the residents. Such funds may not be 1175 1176 encumbered or subject to any liens or charges by the escrow 1177 agent or judgments, garnishments, or creditors' claims against 1178 the provider or facility. However, if a facility had a lien, 1179 mortgage, trust indenture, or similar debt instrument in place before January 1, 1993, which encumbered all or any part of the 1180 1181 reserves required by this subsection and such funds were used to meet the requirements of this subsection, then such arrangement 1182 may be continued, unless a refinancing or acquisition has 1183 occurred, and the provider is shall be in compliance with this 1184 1185 subsection.

1186 <u>(7) (a) A provider may withdraw funds held in escrow</u> 1187 without the approval of the office if the amount held in escrow 1188 exceeds the requirements of this section and if the withdrawal 1189 will not affect compliance with this section.

(b)1. For all other proposed withdrawals, in order to receive the consent of the office, the provider must file documentation showing why the withdrawal is necessary for the continued operation of the facility and such additional information as the office reasonably requires.

1195 <u>2. The office shall notify the provider when the filing is</u> 1196 <u>deemed complete. If the provider has complied with all prior</u> 1197 <u>requests for information, the filing is deemed complete after 30</u> 1198 days without communication from the office.

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 49 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1199 3. Within 30 days after the date a file is deemed 1200 complete, the office shall provide the provider with written 1201 notice of its approval or disapproval of the request. The office 1202 may disapprove any request to withdraw such funds if it 1203 determines that the withdrawal is not in the best interest of 1204 the residents. 1205 (8) The office may order the immediate transfer of up to 1206 100 percent of the funds held in the minimum liquid reserve to 1207 the custody of the department pursuant to part III of chapter 1208 625 if the office finds that the provider is impaired or 1209 insolvent. The office may order such a transfer regardless of 1210 whether the office has suspended or revoked, or intends to 1211 suspend or revoke, the certificate of authority of the provider. (9) Each facility shall file with the office annually, 1212 1213 together with the annual report required by s. 651.026, a 1214 calculation of its minimum liquid reserve determined in 1215 accordance with this section on a form prescribed by the 1216 commission. 1217 (10) Any increase in the minimum liquid reserve must be 1218 funded not later than 61 days after the minimum liquid reserve 1219 calculation is due to be filed as provided in s. 651.026. 1220 (11) If the minimum liquid reserve is less than the 1221 required minimum amount at the end of any fiscal quarter due to 1222 a change in the market value of the invested funds, the provider must fund the shortfall within 10 business days. 1223 382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

Page 50 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1224	Section 18. Effective July 1, 2019, section 651.043,
1225	Florida Statutes, is created to read:
1226	651.043 Approval of change in management
1227	(1) A contract with a management company entered into
1228	after July 1, 2019, must be in writing and include a provision
1229	that the contract will be canceled upon issuance of an order by
1230	the office pursuant to this section and without the application
1231	of a cancellation fee or penalty. If a provider contracts with a
1232	management company, a separate written contract is not required
1233	for the individual manager employed by the management company or
1234	contractor hired by the management company to oversee a
1235	facility. If a management company executes a contract with an
1236	individual manager or contractor, the contract is not required
1237	to be submitted to the office unless requested by the office.
1238	(2) A provider shall notify the office, in writing or
1239	electronically, of any change in management within 10 business
1240	days. For each new management company or manager not employed by
1241	a management company, the provider shall submit to the office
1242	the information required by s. 651.022(2) and a copy of the
1243	written management contract, if applicable.
1244	(3) For a provider that is found to be impaired or that
1245	has a regulatory action level event pending, the office may
1246	disapprove new management and order the provider to remove the
1247	new management after reviewing the information required under
1248	subsection (2).
3	82139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 51 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1249	(4) For a provider other than that specified in subsection
1250	(3), the office may disapprove new management and order the
1251	provider to remove the new management after receiving the
1252	required information under subsection (2), if the office:
1253	(a) Finds that the new management is incompetent or
1254	untrustworthy;
1255	(b) Finds that the new management is so lacking in
1256	managerial experience as to make the proposed operation
1257	hazardous to the residents or potential residents;
1258	(c) Finds that the new management is so lacking in
1259	experience, ability, and standing as to jeopardize the
1260	reasonable promise of successful operation; or
1261	(d) Has good reason to believe that the new management is
1262	affiliated directly or indirectly through ownership, control, or
1263	business relations with any person or persons whose business
1264	operations are or have been marked by manipulation of assets or
1265	accounts or by bad faith, to the detriment of residents,
1266	stockholders, investors, creditors, or the public.
1267	
1268	The office shall complete its review as required under
1269	subsections (3) and (4) and, if applicable, issue notice of
1270	disapproval of the new management within 30 business days after
1271	the filing is deemed complete. A filing is deemed complete upon
1272	the office's receipt of all requested information and the
1273	provider's correction of any error or omission for which the
	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 52 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1274	provider was timely notified. If the office does not issue
1275	notice of disapproval of the new management within 30 business
1276	days after the filing is deemed complete, the new management is
1277	deemed approved.
1278	(5) Management disapproved by the office must be removed
1279	within 30 days after receipt by the provider of notice of such
1280	disapproval.
1281	(6) The office may revoke, suspend, or take other
1282	administrative action against the certificate of authority of
1283	the provider if the provider:
1284	(a) Fails to timely remove management disapproved by the
1285	office;
1286	(b) Fails to timely notify the office of a change in
1287	management;
1288	(c) Appoints new management without a written contract
1289	when a written contract is required under this section; or
1290	(d) Repeatedly appoints management that was previously
1291	disapproved by the office or that is not approvable under
1292	subsection (4).
1293	(7) The provider shall remove any management immediately
1294	upon discovery of either of the following conditions, if the
1295	conditions were not disclosed in the notice to the office
1296	required under subsection (2):
1297	(a) That a manager has been found guilty of, or has pled
1298	guilty or no contest to, a felony charge, or has been held
	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 53 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1299	liable or has been enjoined in a civil action by final judgment,
1300	if the felony or civil action involved fraud, embezzlement,
1301	fraudulent conversion, or misappropriation of property.
1302	(b) That a manager is now, or was in the past, affiliated,
1303	directly or indirectly, through ownership interest of 10 percent
1304	or more in, or control of, any business, corporation, or other
1305	entity that has been found guilty of or has pled guilty or no
1306	contest to a felony charge, or has been held liable or has been
1307	enjoined in a civil action by final judgment, if the felony or
1308	civil action involved fraud, embezzlement, fraudulent
1309	conversion, or misappropriation of property.
1310	
1311	The failure to remove such management is grounds for revocation
1312	or suspension of the provider's certificate of authority.
1313	Section 19. Section 651.051, Florida Statutes, is amended
1314	to read:
1315	651.051 Maintenance of assets and records in state <u>All</u>
1316	records and assets of a provider must be maintained or readily
1317	accessible in this state or, if the provider's corporate office
1318	is located in another state, such records must be electronically
1319	stored in a manner that will ensure that the records are readily
1320	accessible to the office. No records or assets may be removed
1321	from this state by a provider unless the office consents to such
1322	removal in writing before such removal. Such consent <u>must</u> $rac{ ext{shall}}{ ext{shall}}$
1323	be based upon the provider's submitting satisfactory evidence
	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM
	Page 54 of 62

Page 54 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1324 that the removal will facilitate and make more economical the operations of the provider and will not diminish the service or 1325 1326 protection thereafter to be given the provider's residents in 1327 this state. Before Prior to such removal, the provider shall 1328 give notice to the president or chair of the facility's 1329 residents' council. If such removal is part of a cash management 1330 system which has been approved by the office, disclosure of the 1331 system must shall meet the notification requirements. The 1332 electronic storage of records on a web-based, secured storage 1333 platform by contract with a third party is acceptable if the 1334 records are readily accessible to the office.

Section 20. Subsection (3) of section 651.055, Florida Statutes, is amended to read:

1337 651.055 Continuing care contracts; right to rescind.-1338 The contract must include or be accompanied by a (3)statement, printed in boldfaced type, which reads: "This 1339 1340 facility and all other continuing care facilities (also known as 1341 life plan communities) in the State of Florida are regulated by 1342 the Office of Insurance Regulation pursuant to chapter 651, 1343 Florida Statutes. A copy of the law is on file in this facility. 1344 The law gives you or your legal representative the right to 1345 inspect our most recent financial statement and inspection report before signing the contract. The financial structure of a 1346 1347 continuing care provider can be complex, and the decision to enter into a contract for continuing care is a long-term 1348

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 55 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1349	commitment between a resident and the continuing care provider.
1350	You may wish to consult an attorney or financial advisor before
1351	entering into such contract."
1352	Section 21. Subsection (2) of section 651.057, Florida
1353	Statutes, is amended to read:
1354	651.057 Continuing care at-home contracts
1355	(2) A provider that holds a certificate of authority and
1356	wishes to offer continuing care at-home must also:
1357	(a) Submit a business plan to the office with the
1358	following information:
1359	1. A description of the continuing care at-home services
1360	that will be provided, the market to be served, and the fees to
1361	be charged;
1362	2. A copy of the proposed continuing care at-home
1363	contract;
1364	3. An actuarial study prepared by an independent actuary
1365	in accordance with the standards adopted by the American Academy
1366	of Actuaries which presents the impact of providing continuing
1367	care at-home on the overall operation of the facility; and
1368	4. A market feasibility study that meets the requirements
1369	of s. 651.022(3) and documents that there is sufficient interest
1370	in continuing care at-home contracts to support such a program;
1371	(b) Demonstrate to the office that the proposal to offer
1372	continuing care at-home contracts to individuals who do not
	382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 56 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1373 immediately move into the facility will not place the provider in an unsound financial condition; 1374 1375 (c) Comply with the requirements of s. 651.0246(1) s. 1376 651.021(2), except that an actuarial study may be substituted 1377 for the feasibility study; and 1378 Comply with the requirements of this chapter. (d) Section 22. Subsection (1) of section 651.071, Florida 1379 1380 Statutes, is amended to read: 1381 651.071 Contracts as preferred claims on liquidation or 1382 receivership.-1383 In the event of receivership or liquidation (1)1384 proceedings against a provider, all continuing care and 1385 continuing care at-home contracts executed by a provider are 1386 shall be deemed preferred claims against all assets owned by the 1387 provider; however, such claims are subordinate to any secured 1388 claim. For purposes of s. 631.271, such contracts are deemed 1389 Class 2 claims. Section 23. Subsections (2) and (3) of section 651.091, 1390 1391 Florida Statutes, are amended, and subsection (4) of that 1392 section is republished, to read: 1393 651.091 Availability, distribution, and posting of reports 1394 and records; requirement of full disclosure.-Every continuing care facility shall: 1395 (2)1396 Display the certificate of authority in a conspicuous (a) place inside the facility. 1397 382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

Page 57 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1398 Post in a prominent position in the facility which is (b) accessible to all residents and the general public a concise 1399 1400 summary of the last examination report issued by the office, 1401 with references to the page numbers of the full report noting 1402 any deficiencies found by the office, and the actions taken by 1403 the provider to rectify such deficiencies, indicating in such 1404 summary where the full report may be inspected in the facility. 1405 (c) Post in a prominent position in the facility, 1406 accessible to all residents and the general public, a notice 1407 containing the contact information for the office and the 1408 Division of Consumer Services of the department and stating that 1409 the division or office may be contacted for the submission of inquiries and complaints with respect to potential violations of 1410 1411 this chapter committed by a provider. Such contact information 1412 must include the division's website and the toll-free consumer 1413 helpline and the office's website and telephone number. 1414 (d) Provide notice to the president or chair of the residents' council within 10 business days after issuance of a 1415 1416 final examination report or the initiation of any legal or 1417 administrative proceeding by the office or the department and include a copy of such document. 1418 (e) (c) Post in a prominent position in the facility which 1419 is accessible to all residents and the general public a summary 1420 of the latest annual statement, indicating in the summary where 1421 1422 the full annual statement may be inspected in the facility. A 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 58 of 62

(2019)

Bill No. CS/CS/HB 1033

Amendment No. 1

1423 listing of any proposed changes in policies, programs, and 1424 services must also be posted.

1425 <u>(f)(d)</u> Distribute a copy of the full annual statement and 1426 a copy of the most recent <u>third-party</u> third party financial 1427 audit filed with the annual report to the president or chair of 1428 the residents' council within 30 days after filing the annual 1429 report with the office, and designate a staff person to provide 1430 explanation thereof.

1431 (g) (e) Deliver the information described in s. 651.085(4) 1432 in writing to the president or chair of the residents' council 1433 and make supporting documentation available upon request Notify 1434 the residents' council of any plans filed with the office to 1435 obtain new financing, additional financing, or refinancing for 1436 the facility and of any applications to the office for any 1437 expansion of the facility.

1438 (h) (f) Deliver to the president or chair of the residents' 1439 council a summary of entrance fees collected and refunds made 1440 during the time period covered in the annual report and the 1441 refund balances due at the end of the report period.

1442 <u>(i) (g)</u> Deliver to the president or chair of the residents' 1443 council a copy of each quarterly statement within 30 days after 1444 the quarterly statement is filed with the office if the facility 1445 is required to file quarterly.

1446 <u>(j)(h)</u> Upon request, deliver to the president or chair of 1447 the residents' council a copy of any newly approved continuing 382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 59 of 62

(2019)

Bill No. CS/CS/HB 1033

Amendment No. 1

1448 care or continuing care at-home contract within 30 days after 1449 approval by the office. 1450 (k) Provide to the president or chair of the residents' 1451 council a copy of any notice filed with the office relating to 1452 any change in ownership within 10 business days after such 1453 filing by the provider. 1454 (1) Make the information available to prospective 1455 residents pursuant to paragraph (3) (d) available to current 1456 residents and provide notice of changes to that information to 1457 the president or chair of the residents' council within 3 1458 business days. 1459 (3) Before entering into a contract to furnish continuing care or continuing care at-home, the provider undertaking to 1460 1461 furnish the care, or the agent of the provider, shall make full 1462 disclosure, and provide copies of the disclosure documents to the prospective resident or his or her legal representative, of 1463 1464 the following information: The contract to furnish continuing care or continuing 1465 (a) 1466 care at-home. 1467 The summary listed in paragraph (2)(b). (b) 1468 (C) All ownership interests and lease agreements, 1469 including information specified in s. 651.022(2)(b)8. 1470 In keeping with the intent of this subsection relating (d) 1471 to disclosure, the provider shall make available for review 1472 master plans approved by the provider's governing board and any 382139 - h1033-line 628.docx Published On: 4/17/2019 5:52:14 PM

Page 60 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1473 plans for expansion or phased development, to the extent that 1474 the availability of such plans does not put at risk real estate, 1475 financing, acquisition, negotiations, or other implementation of 1476 operational plans and thus jeopardize the success of 1477 negotiations, operations, and development.

1478 (e) Copies of the rules and regulations of the facility1479 and an explanation of the responsibilities of the resident.

1480 (f) The policy of the facility with respect to admission 1481 to and discharge from the various levels of health care offered 1482 by the facility.

1483 (g) The amount and location of any reserve funds required 1484 by this chapter, and the name of the person or entity having a 1485 claim to such funds in the event of a bankruptcy, foreclosure, 1486 or rehabilitation proceeding.

1487

(g)(h) A copy of s. 651.071.

1488 (h)(i) A copy of the resident's rights as described in s. 1489 651.083.

1490 Notice of the issuance of a final examination report (i) 1491 or the initiation of any legal or administrative proceeding by 1492 the office or the department, including where the report or 1493 filing may be inspected in the facility, and that, upon request, 1494 an electronic copy or specific website address will be provided from which the document can be downloaded at no cost. 1495 1496 (j) Notice that, if the resident does not exercise the right to rescind a continuing care contract within 7 days after 1497

382139 - h1033-line 628.docx

Published On: 4/17/2019 5:52:14 PM

Page 61 of 62

Bill No. CS/CS/HB 1033 (2019)

Amendment No. 1

1498	executing the contract, the resident's funds held in escrow
1499	pursuant to s. 651.055(2) will be released to the provider.
1500	
1501	
1502	
1503	TITLE AMENDMENT
1504	Remove lines 55-64 and insert:
1505	requiring the office to annually publish on its
1506	website a specified industry report; amending s.
1507	651.0261, F.S.; requiring providers to file quarterly
1508	unaudited financial statements and other specified
1509	information; providing an exception for filing a
1510	certain quarterly statement; revising information that
1511	the office may require providers to file and the
1512	circumstances under which such information must be
1513	filed; revising the commission's rulemaking authority;
1514	amending s. 651.028, F.S.; providing criteria for a
1515	provider or facility to be deemed accredited;
1516	specifying rulemaking requirements and authority of
1517	the commission; amending s.
	382139 - h1033-line 628.docx
	Published On: 4/17/2019 5:52:14 PM

Page 62 of 62