

1 A bill to be entitled

2 An act relating to assisted living facilities;
3 amending s. 394.4574, F.S.; providing that Medicaid
4 managed care plans are responsible for enrolled mental
5 health residents; providing that managing entities
6 under contract with the Department of Children and
7 Families are responsible for mental health residents
8 who are not enrolled with a Medicaid managed care
9 plan; deleting a provision to conform to changes made
10 by the act; requiring that the community living
11 support plan be completed and provided to the
12 administrator of a facility within a specified period
13 after the resident's admission; requiring the
14 community living support plan to be updated when there
15 is a significant change to the mental health
16 resident's behavioral health; requiring the case
17 manager assigned to a mental health resident of an
18 assisted living facility that holds a limited mental
19 health license to keep a record of the date and time
20 of face-to-face interactions with the resident and to
21 make the record available to the responsible entity
22 for inspection; requiring that the record be
23 maintained for a specified period; requiring the
24 responsible entity to ensure that there is adequate
25 and consistent monitoring and implementation of
26 community living support plans and cooperative

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CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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27 | agreements and that concerns are reported to the
28 | appropriate regulatory oversight organization under
29 | certain circumstances; amending s. 400.0074, F.S.;
30 | requiring that an administrative assessment conducted
31 | by a local council be comprehensive in nature and
32 | focus on factors affecting the rights, health, safety,
33 | and welfare of nursing home residents; requiring a
34 | local council to conduct an exit consultation with the
35 | facility administrator or administrator designee to
36 | discuss issues and concerns in areas affecting the
37 | rights, health, safety, and welfare of residents and
38 | make recommendations for improvement; amending s.
39 | 400.0078, F.S.; requiring that a resident or a
40 | representative of a resident of a long-term care
41 | facility be informed that retaliatory action cannot be
42 | taken against a resident for presenting grievances or
43 | for exercising any other resident right; amending s.
44 | 429.07, F.S.; requiring that an extended congregate
45 | care license be issued to certain facilities that have
46 | been licensed as assisted living facilities under
47 | certain circumstances and authorizing the issuance of
48 | such license if a specified condition is met;
49 | providing the purpose of an extended congregate care
50 | license; providing that the initial extended
51 | congregate care license of an assisted living facility
52 | is provisional under certain circumstances; requiring

53 a licensee to notify the Agency for Health Care
54 Administration if it accepts a resident who qualifies
55 for extended congregate care services; requiring the
56 agency to inspect the facility for compliance with the
57 requirements of an extended congregate care license;
58 requiring the issuance of an extended congregate care
59 license under certain circumstances; requiring the
60 licensee to immediately suspend extended congregate
61 care services under certain circumstances; requiring a
62 registered nurse representing the agency to visit the
63 facility at least twice a year, rather than quarterly,
64 to monitor residents who are receiving extended
65 congregate care services; authorizing the agency to
66 waive one of the required yearly monitoring visits
67 under certain circumstances; authorizing the agency to
68 deny or revoke a facility's extended congregate care
69 license; requiring a registered nurse representing the
70 agency to visit the facility at least annually, rather
71 than twice a year, to monitor residents who are
72 receiving limited nursing services; providing that
73 such monitoring visits may be conducted in conjunction
74 with other agency inspections; authorizing the agency
75 to waive the required yearly monitoring visit for a
76 facility that is licensed to provide limited nursing
77 services under certain circumstances; amending s.
78 429.075, F.S.; requiring an assisted living facility

79 | that serves one or more mental health residents to
80 | obtain a limited mental health license; amending s.
81 | 429.14, F.S.; revising the circumstances under which
82 | the agency may deny, revoke, or suspend the license of
83 | an assisted living facility and impose an
84 | administrative fine; requiring the agency to deny or
85 | revoke the license of an assisted living facility
86 | under certain circumstances; requiring the agency to
87 | impose an immediate moratorium on the license of an
88 | assisted living facility under certain circumstances;
89 | deleting a provision requiring the agency to provide a
90 | list of facilities with denied, suspended, or revoked
91 | licenses to the Department of Business and
92 | Professional Regulation; exempting a facility from the
93 | 45-day notice requirement if it is required to
94 | relocate some or all of its residents; amending s.
95 | 429.178, F.S.; conforming cross-references; amending
96 | s. 429.19, F.S.; revising the amounts and uses of
97 | administrative fines; requiring the agency to levy a
98 | fine for violations that are corrected before an
99 | inspection if noncompliance occurred within a
100 | specified period of time; deleting factors that the
101 | agency is required to consider in determining
102 | penalties and fines; amending s. 429.256, F.S.;
103 | revising the term "assistance with self-administration
104 | of medication" as it relates to the Assisted Living

105 Facilities Act; amending s. 429.27, F.S.; revising the
106 amount of cash for which a facility may provide
107 safekeeping for a resident; amending s. 429.28, F.S.;
108 providing notice requirements to inform facility
109 residents that the identity of the resident and
110 complainant in any complaint made to the State Long-
111 Term Care Ombudsman Program or a local long-term care
112 ombudsman council is confidential and that retaliatory
113 action cannot be taken against a resident for
114 presenting grievances or for exercising any other
115 resident right; requiring that a facility that
116 terminates an individual's residency after the filing
117 of a complaint be fined if good cause is not shown for
118 the termination; amending s. 429.34, F.S.; requiring
119 certain persons to report elder abuse in assisted
120 living facilities; requiring the agency to regularly
121 inspect every licensed assisted living facility;
122 requiring the agency to conduct more frequent
123 inspections under certain circumstances; requiring the
124 licensee to pay a fee for the cost of additional
125 inspections; requiring the agency to annually adjust
126 the fee; amending s. 429.41, F.S.; providing that
127 certain staffing requirements apply only to residents
128 in continuing care facilities who are receiving the
129 relevant service; amending s. 429.52, F.S.; requiring
130 each newly hired employee of an assisted living

131 facility to attend a preservice orientation provided
 132 by the assisted living facility; requiring the
 133 employee and administrator to sign a statement that
 134 the employee completed the required pre-service
 135 orientation and keep the signed statement in the
 136 employee's personnel record; requiring additional
 137 hours of training for assistance with medication;
 138 conforming a cross-reference; requiring the Office of
 139 Program Policy Analysis and Government Accountability
 140 to study the reliability of facility surveys and
 141 submit to the Governor and the Legislature its
 142 findings and recommendations; requiring the agency to
 143 create content for the agency's website that makes
 144 available to consumers information regarding assisted
 145 living facilities; providing criteria for the content;
 146 providing an appropriation and authorizing positions;
 147 providing an effective date.

148
 149 Be It Enacted by the Legislature of the State of Florida:

150
 151 Section 1. Section 394.4574, Florida Statutes, is amended
 152 to read:

153 394.4574 ~~Department~~ Responsibilities for coordination of
 154 services for a mental health resident who resides in an assisted
 155 living facility that holds a limited mental health license.—

156 (1) As used in this section, the term "mental health

157 resident," ~~for purposes of this section,~~ means an individual who
 158 receives social security disability income due to a mental
 159 disorder as determined by the Social Security Administration or
 160 receives supplemental security income due to a mental disorder
 161 as determined by the Social Security Administration and receives
 162 optional state supplementation.

163 (2) Medicaid managed care plans are responsible for
 164 Medicaid enrolled mental health residents, and managing entities
 165 under contract with the department are responsible for mental
 166 health residents who are not enrolled in a Medicaid health plan.
 167 A Medicaid managed care plan or a managing entity shall ~~The~~
 168 ~~department must~~ ensure that:

169 (a) A mental health resident has been assessed by a
 170 psychiatrist, clinical psychologist, clinical social worker, or
 171 psychiatric nurse, or an individual who is supervised by one of
 172 these professionals, and determined to be appropriate to reside
 173 in an assisted living facility. The documentation must be
 174 provided to the administrator of the facility within 30 days
 175 after the mental health resident has been admitted to the
 176 facility. An evaluation completed upon discharge from a state
 177 mental hospital meets the requirements of this subsection
 178 related to appropriateness for placement as a mental health
 179 resident if it was completed within 90 days before ~~prior to~~
 180 admission to the facility.

181 (b) A cooperative agreement, as required in s. 429.075, is
 182 developed by ~~between~~ the mental health care services provider

183 that serves a mental health resident and the administrator of
184 the assisted living facility with a limited mental health
185 license in which the mental health resident is living. ~~Any~~
186 ~~entity that provides Medicaid prepaid health plan services shall~~
187 ~~ensure the appropriate coordination of health care services with~~
188 ~~an assisted living facility in cases where a Medicaid recipient~~
189 ~~is both a member of the entity's prepaid health plan and a~~
190 ~~resident of the assisted living facility. If the entity is at~~
191 ~~risk for Medicaid targeted case management and behavioral health~~
192 ~~services, the entity shall inform the assisted living facility~~
193 ~~of the procedures to follow should an emergent condition arise.~~

194 (c) The community living support plan, as defined in s.
195 429.02, has been prepared by a mental health resident and his or
196 her ~~a~~ mental health case manager ~~of that resident~~ in
197 consultation with the administrator of the facility or the
198 administrator's designee. The plan must be completed and
199 provided to the administrator of the assisted living facility
200 with a limited mental health license in which the mental health
201 resident lives within 30 days after the resident's admission.
202 The support plan and the agreement may be in one document.

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

206 (e) The mental health services provider assigns a case
207 manager to each mental health resident for whom the entity is
208 responsible ~~who lives in an assisted living facility with a~~

209 ~~limited mental health license.~~ The case manager shall coordinate
210 ~~is responsible for coordinating~~ the development ~~of~~ and
211 implementation of the community living support plan defined in
212 s. 429.02. The plan must be updated at least annually, or when
213 there is a significant change in the resident's behavioral
214 health status, such as an inpatient admission or a change in
215 medication, level of service, or residence. Each case manager
216 shall keep a record of the date and time of any face-to-face
217 interaction with the resident and make the record available to
218 the responsible entity for inspection. The record must be
219 retained for at least 2 years after the date of the most recent
220 interaction.

221 (f) Adequate and consistent monitoring and implementation
222 of community living support plans and cooperative agreements are
223 conducted by the resident's case manager.

224 (g) Concerns are reported to the appropriate regulatory
225 oversight organization if a regulated provider fails to deliver
226 appropriate services or otherwise acts in a manner that has the
227 potential to result in harm to the resident.

228 (3) The Secretary of Children and Families ~~Family~~
229 ~~Services~~, in consultation with the Agency for Health Care
230 Administration, shall ~~annually~~ require each district
231 administrator to develop, with community input, a detailed
232 annual plan that demonstrates ~~detailed plans that demonstrate~~
233 how the district will ensure the provision of state-funded
234 mental health and substance abuse treatment services to

235 residents of assisted living facilities that hold a limited
 236 mental health license. This plan ~~These plans~~ must be consistent
 237 with the substance abuse and mental health district plan
 238 developed pursuant to s. 394.75 and must address case management
 239 services; access to consumer-operated drop-in centers; access to
 240 services during evenings, weekends, and holidays; supervision of
 241 the clinical needs of the residents; and access to emergency
 242 psychiatric care.

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

246 400.0074 Local ombudsman council onsite administrative
 247 assessments.—

248 (1) In addition to any specific investigation conducted
 249 pursuant to a complaint, the local council shall conduct, at
 250 least annually, an onsite administrative assessment of each
 251 nursing home, assisted living facility, and adult family-care
 252 home within its jurisdiction. This administrative assessment
 253 must be comprehensive in nature and must ~~shall~~ focus on factors
 254 affecting residents' ~~the~~ rights, health, safety, and welfare ~~of~~
 255 ~~the residents~~. Each local council is encouraged to conduct a
 256 similar onsite administrative assessment of each additional
 257 long-term care facility within its jurisdiction.

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

260 (h) The local council shall conduct an exit consultation

261 with the facility administrator or administrator designee to
 262 discuss issues and concerns in areas affecting residents'
 263 rights, health, safety, and welfare and, if needed, make
 264 recommendations for improvement.

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

267 400.0078 Citizen access to State Long-Term Care Ombudsman
 268 Program services.—

269 (2) ~~Every resident or representative of a resident shall~~
 270 ~~receive,~~ Upon admission to a long-term care facility, each
 271 resident or representative of a resident must receive
 272 information regarding the purpose of the State Long-Term Care
 273 Ombudsman Program, the statewide toll-free telephone number for
 274 receiving complaints, information that retaliatory action cannot
 275 be taken against a resident for presenting grievances or for
 276 exercising any other resident right, and other relevant
 277 information regarding how to contact the program. Each resident
 278 or his or her representative ~~Residents or their representatives~~
 279 must be furnished additional copies of this information upon
 280 request.

281 Section 4. Paragraphs (b) and (c) of subsection (3) of
 282 section 429.07, Florida Statutes, are amended to read:

283 429.07 License required; fee.—

284 (3) In addition to the requirements of s. 408.806, each
 285 license granted by the agency must state the type of care for
 286 which the license is granted. Licenses shall be issued for one

287 or more of the following categories of care: standard, extended
288 congregate care, limited nursing services, or limited mental
289 health.

290 (b) An extended congregate care license shall be issued to
291 each facility that has been licensed as an assisted living
292 facility for 2 or more years and that provides services
293 ~~facilities providing~~, directly or through contract, ~~services~~
294 beyond those authorized in paragraph (a), including services
295 performed by persons licensed under part I of chapter 464 and
296 supportive services, as defined by rule, to persons who would
297 otherwise be disqualified from continued residence in a facility
298 licensed under this part. An extended congregate care license
299 may be issued to a facility that has a provisional extended
300 congregate care license and meets the requirements for licensure
301 under subparagraph 2. The primary purpose of extended congregate
302 care services is to allow residents the option of remaining in a
303 familiar setting from which they would otherwise be disqualified
304 for continued residency as they become more impaired. A facility
305 licensed to provide extended congregate care services may also
306 admit an individual who exceeds the admission criteria for a
307 facility with a standard license, if he or she is determined
308 appropriate for admission to the extended congregate care
309 facility.

310 1. In order for extended congregate care services to be
311 provided, the agency must first determine that all requirements
312 established in law and rule are met and must specifically

313 designate, on the facility's license, that such services may be
314 provided and whether the designation applies to all or part of
315 the facility. This ~~Such~~ designation may be made at the time of
316 initial licensure or relicensure, or upon request in writing by
317 a licensee under this part and part II of chapter 408. The
318 notification of approval or the denial of the request shall be
319 made in accordance with part II of chapter 408. Each existing
320 facility that qualifies ~~facilities qualifying~~ to provide
321 extended congregate care services must have maintained a
322 standard license and may not have been subject to administrative
323 sanctions during the previous 2 years, or since initial
324 licensure if the facility has been licensed for less than 2
325 years, for any of the following reasons:

- 326 a. A class I or class II violation;
- 327 b. Three or more repeat or recurring class III violations
328 of identical or similar resident care standards from which a
329 pattern of noncompliance is found by the agency;
- 330 c. Three or more class III violations that were not
331 corrected in accordance with the corrective action plan approved
332 by the agency;
- 333 d. Violation of resident care standards which results in
334 requiring the facility to employ the services of a consultant
335 pharmacist or consultant dietitian;
- 336 e. Denial, suspension, or revocation of a license for
337 another facility licensed under this part in which the applicant
338 for an extended congregate care license has at least 25 percent

339 ownership interest; or

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

342

343 The agency may deny or revoke a facility's extended congregate
344 care license for not meeting the criteria for an extended
345 congregate care license as provided in this subparagraph.

346 2. If an assisted living facility has been licensed for
347 less than 2 years, the initial extended congregate care license
348 must be provisional and may not exceed 6 months. Within the
349 first 3 months after the provisional license is issued, the
350 licensee shall notify the agency, in writing, when it has
351 admitted at least one extended congregate care resident, after
352 which an unannounced inspection shall be made to determine
353 compliance with requirements of an extended congregate care
354 license. Failure to admit an extended congregate care resident
355 within the first 3 months shall render the extended congregate
356 care license void. A licensee with a provisional extended
357 congregate care license that demonstrates compliance with all of
358 the requirements of an extended congregate care license during
359 the inspection shall be issued an extended congregate care
360 license. In addition to sanctions authorized under this part, if
361 violations are found during the inspection and the licensee
362 fails to demonstrate compliance with all assisted living
363 requirements during a followup inspection, the licensee shall
364 immediately suspend extended congregate care services, and the

365 provisional extended congregate care license expires. The agency
 366 may extend the provisional license for not more than 1 month in
 367 order to complete a followup visit.

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

384 a. Held an extended congregate care license for at least
 385 24 months; ~~been licensed for at least 24 months to provide~~
 386 ~~extended congregate care services, if, during the inspection,~~
 387 ~~the registered nurse determines that extended congregate care~~
 388 ~~services are being provided appropriately, and if the facility~~
 389 ~~has~~

390 b. No class I or class II violations and no uncorrected

391 class III violations; and-

392 c. No ombudsman council complaints that resulted in a
393 citation for licensure ~~The agency must first consult with the~~
394 ~~long-term care ombudsman council for the area in which the~~
395 ~~facility is located to determine if any complaints have been~~
396 ~~made and substantiated about the quality of services or care.~~
397 ~~The agency may not waive one of the required yearly monitoring~~
398 ~~visits if complaints have been made and substantiated.~~

399 4.3. A facility that is licensed to provide extended
400 congregate care services must:

401 a. Demonstrate the capability to meet unanticipated
402 resident service needs.

403 b. Offer a physical environment that promotes a homelike
404 setting, provides for resident privacy, promotes resident
405 independence, and allows sufficient congregate space as defined
406 by rule.

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

410 d. Adopt and follow policies and procedures that maximize
411 resident independence, dignity, choice, and decisionmaking to
412 permit residents to age in place, so that moves due to changes
413 in functional status are minimized or avoided.

414 e. Allow residents or, if applicable, a resident's
415 representative, designee, surrogate, guardian, or attorney in
416 fact to make a variety of personal choices, participate in

417 developing service plans, and share responsibility in
418 decisionmaking.

419 f. Implement the concept of managed risk.

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

422 h. In addition to the training mandated in s. 429.52,
423 provide specialized training as defined by rule for facility
424 staff.

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

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

443 ~~care facility.~~

444 6. Before the admission of an individual to a facility
445 licensed to provide extended congregate care services, the
446 individual must undergo a medical examination as provided in s.
447 429.26(4) and the facility must develop a preliminary service
448 plan for the individual.

449 7. If ~~When~~ a facility can no longer provide or arrange for
450 services in accordance with the resident's service plan and
451 needs and the facility's policy, the facility must ~~shall~~ make
452 arrangements for relocating the person in accordance with s.
453 429.28(1)(k).

454 ~~8. Failure to provide extended congregate care services~~
455 ~~may result in denial of extended congregate care license~~
456 ~~renewal.~~

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

460 1. In order for limited nursing services to be provided in
461 a facility licensed under this part, the agency must first
462 determine that all requirements established in law and rule are
463 met and must specifically designate, on the facility's license,
464 that such services may be provided. This ~~Such~~ designation may be
465 made at the time of initial licensure or licensure renewal
466 ~~relicensure~~, or upon request in writing by a licensee under this
467 part and part II of chapter 408. Notification of approval or
468 denial of such request shall be made in accordance with part II

469 of chapter 408. An existing facility that qualifies ~~facilities~~
470 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
471 maintained a standard license and may not have been subject to
472 administrative sanctions that affect the health, safety, and
473 welfare of residents for the previous 2 years or since initial
474 licensure if the facility has been licensed for less than 2
475 years.

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

492 a. Had a limited nursing services license for at least 24
493 months;

494 b. No class I or class II violations and no uncorrected

495 class III violations; and

496 c. No ombudsman council complaints that resulted in a
497 citation for licensure.

498 3. A person who receives limited nursing services under
499 this part must meet the admission criteria established by the
500 agency for assisted living facilities. When a resident no longer
501 meets the admission criteria for a facility licensed under this
502 part, arrangements for relocating the person shall be made in
503 accordance with s. 429.28(1)(k), unless the facility is licensed
504 to provide extended congregate care services.

505 Section 5. Section 429.075, Florida Statutes, is amended
506 to read:

507 429.075 Limited mental health license.—An assisted living
508 facility that serves one ~~three~~ or more mental health residents
509 must obtain a limited mental health license.

510 (1) To obtain a limited mental health license, a facility
511 must hold a standard license as an assisted living facility,
512 must not have any current uncorrected ~~deficiencies or~~
513 violations, and must ensure that, within 6 months after
514 receiving a limited mental health license, the facility
515 administrator and the staff of the facility who are in direct
516 contact with mental health residents must complete training of
517 no less than 6 hours related to their duties. This ~~Such~~
518 designation may be made at the time of initial licensure or
519 relicensure or upon request in writing by a licensee under this
520 part and part II of chapter 408. Notification of approval or

521 denial of such request shall be made in accordance with this
522 part, part II of chapter 408, and applicable rules. This
523 training must ~~will~~ be provided by or approved by the Department
524 of Children and Families ~~Family Services~~.

525 (2) A facility that is ~~Facilities~~ licensed to provide
526 services to mental health residents must ~~shall~~ provide
527 appropriate supervision and staffing to provide for the health,
528 safety, and welfare of such residents.

529 (3) A facility that has a limited mental health license
530 must:

531 (a) Have a copy of each mental health resident's community
532 living support plan and the cooperative agreement with the
533 mental health care services provider. The support plan and the
534 agreement may be combined.

535 (b) Have documentation ~~that is~~ provided by the Department
536 of Children and Families ~~Family Services~~ that each mental health
537 resident has been assessed and determined to be able to live in
538 the community in an assisted living facility that has ~~with~~ a
539 limited mental health license.

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

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

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

552 Section 6. Section 429.14, Florida Statutes, is amended to
 553 read:

554 429.14 Administrative penalties.—

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

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

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

569 (c) Misappropriation or conversion of the property of a
 570 resident of the facility.

571 (d) Failure to follow the criteria and procedures provided
 572 under part I of chapter 394 relating to the transportation,

573 voluntary admission, and involuntary examination of a facility
 574 resident.

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

577 1. One or more cited class I violations ~~deficiencies~~.

578 2. Three or more cited class II violations ~~deficiencies~~.

579 3. Five or more cited class III violations ~~deficiencies~~
 580 that have been cited on a single survey and have not been
 581 corrected within the times specified.

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

584 (g) Violation of a moratorium.

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

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

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

598 (k) Any act constituting a ground upon which application

599 for a license may be denied.

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

605 (3) The agency may deny or revoke a license of an ~~to any~~
 606 applicant or controlling interest as defined in part II of
 607 chapter 408 which has or had a 25 percent ~~25-percent~~ or greater
 608 financial or ownership interest in any other facility that is
 609 licensed under this part, or in any entity licensed by this
 610 state or another state to provide health or residential care, if
 611 that ~~which~~ facility or entity during the 5 years prior to the
 612 application for a license closed due to financial inability to
 613 operate; had a receiver appointed or a license denied,
 614 suspended, or revoked; was subject to a moratorium; or had an
 615 injunctive proceeding initiated against it.

616 (4) The agency shall deny or revoke the license of an
 617 assisted living facility if:

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

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

624 (c) The facility is cited for two or more class I

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

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

641 (6) As provided under s. 408.814, the agency shall impose
642 an immediate moratorium on an assisted living facility that
643 fails to provide the agency with access to the facility or
644 prohibits the agency from conducting a regulatory inspection.
645 The licensee may not restrict agency staff from accessing and
646 copying records or from conducting confidential interviews with
647 facility staff or any individual who receives services from the
648 facility ~~provide to the Division of Hotels and Restaurants of~~
649 ~~the Department of Business and Professional Regulation, on a~~
650 ~~monthly basis, a list of those assisted living facilities that~~

651 ~~have had their licenses denied, suspended, or revoked or that~~
 652 ~~are involved in an appellate proceeding pursuant to s. 120.60~~
 653 ~~related to the denial, suspension, or revocation of a license.~~

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

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

662 Section 7. Paragraphs (a) and (b) of subsection (2) of
 663 section 429.178, Florida Statutes, are amended to read:

664 429.178 Special care for persons with Alzheimer's disease
 665 or other related disorders.—

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

674 (b) A direct caregiver who is employed by a facility that
 675 provides special care for residents who have ~~with~~ Alzheimer's
 676 disease or other related disorders, ~~and who~~ provides direct care

677 to such residents, must complete the required initial training
 678 and 4 additional hours of training developed or approved by the
 679 department. The training must ~~shall~~ be completed within 9 months
 680 after beginning employment and satisfy ~~shall satisfy~~ the core
 681 training requirements of s. 429.52(3)(g) ~~429.52(2)(g)~~.

682 Section 8. Section 429.19, Florida Statutes, is amended to
 683 read:

684 429.19 Violations; imposition of administrative fines;
 685 grounds.—

686 (1) In addition to the requirements of part II of chapter
 687 408, the agency shall impose an administrative fine in the
 688 manner provided in chapter 120 for the violation of any
 689 provision of this part, part II of chapter 408, and applicable
 690 rules by an assisted living facility, for the actions of any
 691 person subject to level 2 background screening under s. 408.809,
 692 for the actions of any facility employee, or for an intentional
 693 or negligent act seriously affecting the health, safety, or
 694 welfare of a resident of the facility.

695 (2) Each violation of this part and adopted rules must
 696 ~~shall~~ be classified according to the nature of the violation and
 697 the gravity of its probable effect on facility residents. The
 698 agency shall indicate the classification on the written notice
 699 of the violation as follows:

700 (a) Class "I" violations are defined in s. 408.813. The
 701 agency shall impose an administrative fine of \$7,500 for each a
 702 cited class I violation in a facility that is licensed for fewer

703 than 100 beds at the time of the violation ~~in an amount not less~~
704 ~~than \$5,000 and not exceeding \$10,000 for each violation.~~ The
705 agency shall impose an administrative fine of \$11,250 for each
706 cited class I violation in a facility that is licensed for 100
707 or more beds at the time of the violation. If the agency has
708 knowledge of a class I violation which occurred within 12 months
709 before an inspection, a fine must be levied for that violation,
710 regardless of whether the noncompliance is corrected before the
711 inspection.

712 (b) Class "II" violations are defined in s. 408.813. The
713 agency shall impose an administrative fine of \$3,000 for each a
714 cited class II violation in a facility that is licensed for
715 fewer than 100 beds at the time of the violation ~~in an amount~~
716 ~~not less than \$1,000 and not exceeding \$5,000 for each~~
717 violation. The agency shall impose an administrative fine of
718 \$4,500 for each cited class II violation in a facility that is
719 licensed for 100 or more beds at the time of the violation.

720 (c) Class "III" violations are defined in s. 408.813. The
721 agency shall impose an administrative fine of \$500 for each a
722 cited class III violation in a facility that is licensed for 6
723 or fewer beds at the time of the violation ~~in an amount not less~~
724 ~~than \$500 and not exceeding \$1,000 for each violation.~~ The
725 agency shall impose an administrative fine of \$750 for each
726 cited class III violation in a facility that is licensed for 7
727 to 24 beds at the time of the violation. The agency shall impose
728 an administrative fine of \$1,000 for each cited class III

729 violation in a facility that is licensed for 25 to 99 beds at
 730 the time of the violation. The agency shall impose an
 731 administrative fine of \$1,125 for each cited class III violation
 732 in a facility that is licensed for 100 or more beds at the time
 733 of the violation.

734 (d) Class "IV" violations are defined in s. 408.813. The
 735 agency shall impose an administrative fine of \$100 for each a
 736 cited class IV violation in a facility that is licensed for 6 or
 737 fewer beds at the time of the violation ~~in an amount not less~~
 738 ~~than \$100 and not exceeding \$200 for each violation.~~ The agency
 739 shall impose an administrative fine of \$150 for each cited class
 740 IV violation in a facility that is licensed for 7 to 24 beds at
 741 the time of the violation. The agency shall impose an
 742 administrative fine of \$200 for each cited class IV violation in
 743 a facility that is licensed for 25 to 99 beds at the time of the
 744 violation. The agency shall impose an administrative fine of
 745 \$225 for each cited class IV violation in a facility that is
 746 licensed for 100 or more beds at the time of the violation.

747 (e) Any fine imposed for a class I violation or a class II
 748 violation must be doubled if a facility was previously cited for
 749 one or more class I or class II violations during the agency's
 750 last licensure inspection or any inspection or complaint
 751 investigation since the last licensure inspection.

752 (f) Notwithstanding ss. 408.813 (2) (c) and 408.832, if a
 753 facility is cited for 10 or more class III violations during an
 754 inspection or survey, the agency shall impose a fine for each

755 violation.

756 (g) Regardless of the class of violation cited, instead of
 757 the fine amounts listed in paragraphs (a)-(d), the agency shall
 758 impose an administrative fine of \$500 if a facility is found not
 759 to be in compliance with the background screening requirements
 760 as provided in s. 408.809.

761 ~~(3) For purposes of this section, in determining if a~~
 762 ~~penalty is to be imposed and in fixing the amount of the fine,~~
 763 ~~the agency shall consider the following factors:~~

764 ~~(a) The gravity of the violation, including the~~
 765 ~~probability that death or serious physical or emotional harm to~~
 766 ~~a resident will result or has resulted, the severity of the~~
 767 ~~action or potential harm, and the extent to which the provisions~~
 768 ~~of the applicable laws or rules were violated.~~

769 ~~(b) Actions taken by the owner or administrator to correct~~
 770 ~~violations.~~

771 ~~(c) Any previous violations.~~

772 ~~(d) The financial benefit to the facility of committing or~~
 773 ~~continuing the violation.~~

774 ~~(e) The licensed capacity of the facility.~~

775 (3)(4) Each day of continuing violation after the date
 776 established by the agency ~~fixed~~ for correction ~~termination~~ of
 777 the violation, as ordered by the agency, constitutes an
 778 additional, separate, and distinct violation.

779 (4)(5) An ~~Any~~ action taken to correct a violation shall be
 780 documented in writing by the owner or administrator of the

781 facility and verified through followup visits by agency
 782 personnel. The agency may impose a fine and, in the case of an
 783 owner-operated facility, revoke or deny a facility's license
 784 when a facility administrator fraudulently misrepresents action
 785 taken to correct a violation.

786 (5)~~(6)~~ A ~~Any~~ facility whose owner fails to apply for a
 787 change-of-ownership license in accordance with part II of
 788 chapter 408 and operates the facility under the new ownership is
 789 subject to a fine of \$5,000.

790 (6)~~(7)~~ In addition to any administrative fines imposed,
 791 the agency may assess a survey fee, equal to the lesser of one
 792 half of the facility's biennial license and bed fee or \$500, to
 793 cover the cost of conducting initial complaint investigations
 794 that result in the finding of a violation that was the subject
 795 of the complaint or monitoring visits conducted under s.
 796 429.28(3)(c) to verify the correction of the violations.

797 (7)~~(8)~~ During an inspection, the agency shall make a
 798 reasonable attempt to discuss each violation with the owner or
 799 administrator of the facility, prior to written notification.

800 (8)~~(9)~~ The agency shall develop and disseminate an annual
 801 list of all facilities sanctioned or fined for violations of
 802 state standards, the number and class of violations involved,
 803 the penalties imposed, and the current status of cases. The list
 804 shall be disseminated, at no charge, to the Department of
 805 Elderly Affairs, the Department of Health, the Department of
 806 Children and Families ~~Family Services~~, the Agency for Persons

807 with Disabilities, the area agencies on aging, the Florida
808 Statewide Advocacy Council, and the state and local ombudsman
809 councils. The Department of Children and Families ~~Family~~
810 ~~Services~~ shall disseminate the list to service providers under
811 contract to the department who are responsible for referring
812 persons to a facility for residency. The agency may charge a fee
813 commensurate with the cost of printing and postage to other
814 interested parties requesting a copy of this list. This
815 information may be provided electronically or through the
816 agency's website ~~Internet site~~.

817 Section 9. Subsection (3) and paragraph (c) of subsection
818 (4) of section 429.256, Florida Statutes, are amended to read:

819 429.256 Assistance with self-administration of
820 medication.—

821 (3) Assistance with self-administration of medication
822 includes:

823 (a) Taking the medication, in its previously dispensed,
824 properly labeled container, including an insulin syringe that is
825 prefilled with the proper dosage by a pharmacist and an insulin
826 pen that is prefilled by the manufacturer, from where it is
827 stored, and bringing it to the resident.

828 (b) In the presence of the resident, reading the label,
829 opening the container, removing a prescribed amount of
830 medication from the container, and closing the container.

831 (c) Placing an oral dosage in the resident's hand or
832 placing the dosage in another container and helping the resident

833 by lifting the container to his or her mouth.

834 (d) Applying topical medications.

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

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

838 (g) Assisting with the use of a nebulizer, including
839 removing the cap of a nebulizer, opening the unit dose of
840 nebulizer solution, and pouring the prescribed premeasured dose
841 of medication into the dispensing cup of the nebulizer.

842 (h) Using a glucometer to perform blood-glucose level
843 checks.

844 (i) Assisting with putting on and taking off antiembolism
845 stockings.

846 (j) Assisting with applying and removing an oxygen cannula
847 but not with titrating the prescribed oxygen settings.

848 (k) Assisting with the use of a continuous positive airway
849 pressure device but not with titrating the prescribed setting of
850 the device.

851 (l) Assisting with measuring vital signs.

852 (m) Assisting with colostomy bags.

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

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

856 Section 10. Subsection (3) of section 429.27, Florida
857 Statutes, is amended to read:

858 429.27 Property and personal affairs of residents.—

859 (3) A facility, upon mutual consent with the resident,
 860 shall provide for the safekeeping in the facility of personal
 861 effects not in excess of \$500 and funds of the resident not in
 862 excess of \$500 ~~\$200~~ cash, and shall keep complete and accurate
 863 records of all such funds and personal effects received. If a
 864 resident is absent from a facility for 24 hours or more, the
 865 facility may provide for the safekeeping of the resident's
 866 personal effects in excess of \$500.

867 Section 11. Subsections (2), (5), and (6) of section
 868 429.28, Florida Statutes, are amended to read:

869 429.28 Resident bill of rights.—

870 (2) The administrator of a facility shall ensure that a
 871 written notice of the rights, obligations, and prohibitions set
 872 forth in this part is posted in a prominent place in each
 873 facility and read or explained to residents who cannot read. The
 874 ~~This~~ notice must ~~shall~~ include the name, address, and telephone
 875 numbers of the local ombudsman council, the ~~and~~ central abuse
 876 hotline, and, if when ~~when~~ applicable, Disability Rights Florida ~~the~~
 877 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
 878 ~~Florida local advocacy council~~, where complaints may be lodged.
 879 The notice must state that a complaint made to the Office of
 880 State Long-Term Care Ombudsman or a local long-term care
 881 ombudsman council, the names and identities of the residents
 882 involved in the complaint, and the identity of complainants are
 883 kept confidential pursuant to s. 400.0077 and that retaliatory
 884 action cannot be taken against a resident for presenting

885 grievances or for exercising any other resident right. The
 886 facility must ensure a resident's access to a telephone to call
 887 the local ombudsman council, central abuse hotline, and
 888 Disability Rights Florida Advocacy Center for Persons with
 889 Disabilities, Inc., and the Florida local advocacy council.

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

- 893 (a) Exercises any right set forth in this section.
- 894 (b) Appears as a witness in any hearing, inside or outside
 895 the facility.
- 896 (c) Files a civil action alleging a violation of the
 897 provisions of this part or notifies a state attorney or the
 898 Attorney General of a possible violation of such provisions.

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

905 Section 12. Section 429.34, Florida Statutes, is amended
 906 to read:

907 429.34 Right of entry and inspection.—

908 (1) In addition to the requirements of s. 408.811, any
 909 duly designated officer or employee of the department, the
 910 Department of Children and Families ~~Family Services~~, the

911 Medicaid Fraud Control Unit of the Office of the Attorney
912 General, the state or local fire marshal, or a member of the
913 state or local long-term care ombudsman council has ~~shall have~~
914 the right to enter unannounced upon and into the premises of any
915 facility licensed pursuant to this part in order to determine
916 the state of compliance with ~~the provisions of~~ this part, part
917 II of chapter 408, and applicable rules. Data collected by the
918 state or local long-term care ombudsman councils or the state or
919 local advocacy councils may be used by the agency in
920 investigations involving violations of regulatory standards. A
921 person specified in this section who knows or has reasonable
922 cause to suspect that a vulnerable adult has been or is being
923 abused, neglected, or exploited shall immediately report such
924 knowledge or suspicion to the central abuse hotline pursuant to
925 chapter 415.

926 (2) The agency shall inspect each licensed assisted living
927 facility at least once every 24 months to determine compliance
928 with this chapter and related rules. If an assisted living
929 facility is cited for one or more class I violations or two or
930 more class II violations arising from separate surveys within a
931 60-day period or due to unrelated circumstances during the same
932 survey, the agency must conduct an additional licensure
933 inspection within 6 months. In addition to any fines imposed on
934 the facility under s. 429.19, the licensee shall pay a fee for
935 the cost of the additional inspection equivalent to the standard
936 assisted living facility license and per-bed fees, without

937 exception for beds designated for recipients of optional state
938 supplementation. The agency shall adjust the fee in accordance
939 with s. 408.805.

940 Section 13. Subsection (2) of section 429.41, Florida
941 Statutes, is amended to read:

942 429.41 Rules establishing standards.—

943 (2) In adopting any rules pursuant to this part, the
944 department, in conjunction with the agency, shall make distinct
945 standards for facilities based upon facility size; the types of
946 care provided; the physical and mental capabilities and needs of
947 residents; the type, frequency, and amount of services and care
948 offered; and the staffing characteristics of the facility. Rules
949 developed pursuant to this section may ~~shall~~ not restrict the
950 use of shared staffing and shared programming in facilities that
951 are part of retirement communities that provide multiple levels
952 of care and otherwise meet the requirements of law and rule. If
953 a continuing care facility licensed under chapter 651 or a
954 retirement community offering multiple levels of care licenses a
955 building or part of a building designated for independent living
956 for assisted living, staffing requirements established in rule
957 apply only to residents who receive personal, limited nursing,
958 or extended congregate care services under this part. Such
959 facilities shall retain a log listing the names and unit number
960 for residents receiving these services. The log must be
961 available to surveyors upon request. Except for uniform
962 firesafety standards, the department shall adopt by rule

963 separate and distinct standards for facilities with 16 or fewer
 964 beds and for facilities with 17 or more beds. The standards for
 965 facilities with 16 or fewer beds must ~~shall~~ be appropriate for a
 966 noninstitutional residential environment; it ~~however,~~ ~~provided~~
 967 ~~that~~ the structure may not be ~~is no~~ more than two stories in
 968 height and all persons who cannot exit the facility unassisted
 969 in an emergency must reside on the first floor. The department,
 970 in conjunction with the agency, may make other distinctions
 971 among types of facilities as necessary to enforce the provisions
 972 of this part. Where appropriate, the agency shall offer
 973 alternate solutions for complying with established standards,
 974 based on distinctions made by the department and the agency
 975 relative to the physical characteristics of facilities and the
 976 types of care offered ~~therein~~.

977 Section 14. Subsections (1) through (11) of section
 978 429.52, Florida Statutes, are renumbered as subsections (2)
 979 through (12), respectively, a new subsection (1) is added to
 980 that section, and present subsections (5) and (9) of that
 981 section are amended, to read:

982 429.52 Staff training and educational programs; core
 983 educational requirement.—

984 (1) Effective October 1, 2014, each new assisted living
 985 facility employee who has not previously completed core training
 986 must attend a preservice orientation provided by the facility
 987 before interacting with residents. The preservice orientation
 988 must be at least 2 hours in duration and cover topics that help

989 the employee provide responsible care and respond to the needs
 990 of facility residents. Upon completion, the employee and the
 991 administrator of the facility must sign a statement that the
 992 employee completed the required pre-service orientation. The
 993 facility must keep the signed statement in the employee's
 994 personnel record.

995 (6)~~(5)~~ Staff involved with the management of medications
 996 and assisting with the self-administration of medications under
 997 s. 429.256 must complete a minimum of 6 4 additional hours of
 998 training provided by a registered nurse, licensed pharmacist, or
 999 department staff. The department shall establish by rule the
 1000 minimum requirements of this additional training.

1001 (10)~~(9)~~ The training required by this section other than
 1002 the preservice orientation must ~~shall~~ be conducted by persons
 1003 registered with the department as having the requisite
 1004 experience and credentials to conduct the training. A person
 1005 seeking to register as a trainer must provide the department
 1006 with proof of completion of the minimum core training education
 1007 requirements, successful passage of the competency test
 1008 established under this section, and proof of compliance with the
 1009 continuing education requirement in subsection (5) ~~(4)~~.

1010 Section 15. The Legislature finds that consistent
 1011 regulation of assisted living facilities benefits residents and
 1012 operators of such facilities. To determine whether surveys are
 1013 consistent between surveys and surveyors, the Office of Program
 1014 Policy Analysis and Government Accountability shall conduct a

1015 study of intersurveyor reliability for assisted living
 1016 facilities. By November 1, 2014, the Office of Program Policy
 1017 Analysis and Government Accountability shall submit a report of
 1018 its findings to the Governor, the President of the Senate, and
 1019 the Speaker of the House of Representatives and make any
 1020 recommendations for improving intersurveyor reliability.

1021 Section 16. The Legislature finds that consumers need
 1022 additional information on the quality of care and service in
 1023 assisted living facilities in order to select the best facility
 1024 for themselves or their loved ones. Therefore, by November 1,
 1025 2014, the Agency for Health Care Administration shall create
 1026 content that is easily accessible through the front page of the
 1027 agency's Internet website either directly or indirectly through
 1028 links to one or more other established websites of the agency's
 1029 choosing. The website must be searchable by facility name, city,
 1030 or zip code. At a minimum, the content must include:

1031 (1) Information on each licensed assisted living facility,
 1032 including, but not limited to:

- 1033 (a) The name and address of the facility.
- 1034 (b) The number and type of licensed beds in the facility.
- 1035 (c) The types of licenses held by the facility.
- 1036 (d) The facility's license expiration date and status.
- 1037 (e) Proprietary or nonproprietary status of the licensee.
- 1038 (f) Any affiliation with a company or other organization
 1039 owning or managing more than one assisted living facility in
 1040 this state.

- 1041 (g) The total number of clients that the facility is
- 1042 licensed to serve and the most recently available occupancy
- 1043 levels.
- 1044 (h) The number of private and semiprivate rooms offered.
- 1045 (i) The bed-hold policy.
- 1046 (j) The religious affiliation, if any, of the assisted
- 1047 living facility.
- 1048 (k) The languages spoken by the staff.
- 1049 (l) Availability of nurses.
- 1050 (m) Forms of payment accepted, including, but not limited
- 1051 to, Medicaid, Medicaid long-term managed care, private
- 1052 insurance, health maintenance organization, United States
- 1053 Department of Veterans Affairs, CHAMPUS program, or workers'
- 1054 compensation coverage.
- 1055 (n) Indication if the licensee is operating under
- 1056 bankruptcy protection.
- 1057 (o) Recreational and other programs available.
- 1058 (p) Special care units or programs offered.
- 1059 (q) Whether the facility provides mental health services,
- 1060 as defined in s. 394.67, Florida Statutes, to residents with
- 1061 mental illness and the number of mental health residents.
- 1062 (r) Whether the facility is a part of a retirement
- 1063 community that offers other services pursuant to part II or part
- 1064 III of chapter 400, part I or part III of chapter 429, or
- 1065 chapter 651, Florida Statutes.
- 1066 (s) Links to the State Long-Term Care Ombudsman Program

1067 website and the program's statewide toll-free telephone number.

1068 (t) Links to the Internet websites of the providers or
 1069 their affiliates.

1070 (u) Other relevant information that the agency currently
 1071 collects.

1072 (2) Survey and violation information for the facility,
 1073 including a list of the facility's violations committed during
 1074 the previous 60 months, which on July 1, 2014, may include
 1075 violations committed on or after July 1, 2009. The list shall be
 1076 updated monthly and include for each violation:

1077 (a) A summary of the violation, including all licensure,
 1078 revisit, and complaint survey information, presented in a manner
 1079 understandable by the general public.

1080 (b) Any sanctions imposed by final order.

1081 (c) The date the corrective action was confirmed by the
 1082 agency.

1083 (3) Links to inspection reports that the agency has on
 1084 file.

1085 Section 17. For fiscal year 2014-2015, the sums of
 1086 \$151,322 in recurring funds and \$7,986 in nonrecurring funds
 1087 from the Health Care Trust Fund are appropriated to the Agency
 1088 for Health Care Administration, and two full-time equivalent
 1089 positions with associated salary rate are authorized, for the
 1090 purpose of carrying out the regulatory activities provided in
 1091 this act.

1092 Section 18. This act shall take effect July 1, 2014.