	CHAMBER ACTION
	<u>Senate</u> <u>House</u>
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2	04/23/2004 04:39 PM .
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11	Senator Peaden moved the following amendment:
12	
13	Senate Amendment (with title amendment)
14	On page 134, between lines 21 and 22,
15	
16	insert:
17	Section 102. <u>Sections 102-114 of this act may be cited</u>
18	as the "Clara Ramsey Care of the Elderly Act."
19	Section 103. <u>Certified Geriatric Specialist</u>
20	Preparation Pilot Program
21	(1) The Agency for Workforce Innovation shall
22	establish a pilot program for delivery of geriatric nursing
23	education to certified nursing assistants who wish to become
24	certified geriatric specialists. The agency shall select two
25	pilot sites in nursing homes that have received the Gold Seal
26	designation under section 400.235, Florida Statutes; have been
27	designated as a teaching nursing home under section 430.80,
28	Florida Statutes; or have not received a class I or class II
29	deficiency within the 30 months preceding application for this
30	program.
31	(2) To be eligible to receive geriatric nursing
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Bill No. CS for CS for SB 2170 Amendment No. Barcode 911996 education, a certified nursing assistant must have been 1 1 employed by a participating nursing home for at least 1 year 2 3 and must have received a high school diploma or its 4 <u>equivalent.</u> 5 (3) The education shall be provided at the worksite and in coordination with the certified nursing assistant's 6 7 work schedule. (4) Faculty shall provide the instruction under an 8 approved nursing program pursuant to section 464.019, Florida 9 10 Statutes. 11 (5) The education must be designed to prepare the certified nursing assistant to meet the requirements for 12 13 certification as a geriatric specialist. The didactic and clinical education must include all portions of the practical 14 15 nursing curriculum pursuant to section 464.019, Florida 16 Statutes, except for pediatric and obstetric/maternal-child education, and must include additional education in the care 17 of ill, injured, or infirm geriatric patients and the 18 19 maintenance of health, the prevention of injury, and the 20 provision of palliative care for geriatric patients. Section 104. Certified Geriatric Specialty Nursing 21 Initiative Steering Committee .--2.2 (1) In order to guide the implementation of the 23 Certified Geriatric Specialist Preparation Pilot Program, 24 25 there is created a Certified Geriatric Specialty Nursing Initiative Steering Committee. The steering committee shall be 26 27 composed of the following members: (a) The chair of the Board of Nursing or his or her 2.8 29 designee; 30 (b) A representative of the Agency for Workforce 31 <u>Innovation, appointed by the Director of Workforce Innovation;</u> 2 9:31 AM 04/23/04 s2170c2c-02bz2

Bill No. CS for CS for SB 2170 Amendment No. Barcode 911996 (c) A representative of Workforce Florida, Inc., 1 appointed by the chair of the Board of Directors of Workforce 2 3 Florida, Inc.; (d) A representative of the Department of Education, 4 5 appointed by the Commissioner of Education; (e) A representative of the Department of Health, б 7 appointed by the Secretary of Health; 8 (f) A representative of the Agency for Health Care Administration, appointed by the Secretary of Health Care 9 10 Administration; 11 (q) The Director of the Florida Center for Nursing; (h) A representative of the Department of Elderly 12 13 Affairs, appointed by the Secretary of Elderly Affairs; and (i) A representative of a Gold Seal nursing home that 14 15 is not one of the pilot program sites, appointed by the Secretary of Health Care Administration. 16 (2) The steering committee shall: 17 (a) Provide consultation and guidance to the Agency 18 19 for Workforce Innovation on matters of policy during the 20 implementation of the pilot program; and (b) Provide oversight to the evaluation of the pilot 21 2.2 program. (3) Members of the steering committee are entitled to 23 reimbursement for per diem and travel expenses under section 24 25 112.061, Florida Statutes. (4) The steering committee shall complete its 26 activities by June 30, 2007, and the authorization for the 27 28 steering committee ends on that date. 29 Section 105. Evaluation of the Certified Geriatric Specialist Preparation Pilot Program. -- The Agency for 30 31 Workforce Innovation, in consultation with the Certified 3 9:31 AM 04/23/04 s2170c2c-02bz2

Bill No. CS for CS for SB 2170 Amendment No. Barcode 911996 Geriatric Specialty Nursing Initiative Steering Committee, 1 1 shall conduct or contract for an evaluation of the pilot 2 3 program. The agency shall ensure that an evaluation report is submitted to the Governor, the President of the Senate, and 4 5 the Speaker of the House of Representatives by January 1, 2007. The evaluation must address the experience and success б of the certified nursing assistants in the pilot program and 7 must contain recommendations regarding the expansion of the 8 <u>delivery of geriatric nursing education</u> in nursing homes. 9 Section 106. Reports. -- The Agency for Workforce 10 11 Innovation shall submit status reports and recommendations regarding legislation necessary to further the implementation 12 of the pilot program to the Governor, the President of the 13 Senate, and the Speaker of the House of Representatives on 14 January 1, 2005, January 1, 2006, and January 1, 2007. 15 16 Section 107. Section 464.0125, Florida Statutes, is 17 created to read: 464.0125 Certified geriatric specialists; 18 19 certification requirements.--(1) DEFINITIONS; RESPONSIBILITIES.--2.0 (a) As used in this section, the term: 21 1. "Certified geriatric specialist" means a person who 2.2 23 meets the qualifications specified in this section and who is certified by the board to practice as a certified geriatric 24 25 specialist. 26 2. "Geriatric patient" means any patient who is 60 27 years of age or older. 3. "Practice of certified geriatric specialty nursing" 2.8 means the performance of selected acts in facilities licensed 29 under part II or part III of chapter 400, including the 30 31 administration of treatments and medications, in the care of 4 9:31 AM 04/23/04 s2170c2c-02bz2

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1	ill, injured, or infirm geriatric patients and the promotion
2	of wellness, maintenance of health, and prevention of illness
3	of geriatric patients under the direction of a registered
4	nurse, a licensed physician, a licensed osteopathic physician,
5	a licensed podiatric physician, or a licensed dentist. The
б	scope of practice of a certified geriatric specialist includes
7	the practice of practical nursing as defined in s. 464.003 for
8	geriatric patients only, except for any act in which
9	instruction and clinical knowledge of pediatric nursing or
10	obstetric/maternal-child nursing is required. A certified
11	geriatric specialist, while providing nursing services in
12	facilities licensed under part II or part III of chapter 400,
13	may supervise the activities of certified nursing assistants
14	and other unlicensed personnel providing services in such
15	facilities in accordance with rules adopted by the board.
16	(b) The certified geriatric specialist shall be
17	responsible and accountable for making decisions that are
18	based upon the individual's educational preparation and
19	experience in performing certified geriatric specialty
20	nursing.
21	(2) CERTIFICATION
22	(a) Any certified nursing assistant desiring to be
23	certified as a certified geriatric specialist must apply to
24	the department and submit proof that he or she holds a current
25	certificate as a certified nursing assistant under part II of
26	this chapter and has satisfactorily completed the following
27	requirements:
28	1. Is in good mental and physical health, is a
29	recipient of a high school diploma or its equivalent; has
30	completed the requirements for graduation from an approved
31	program for nursing or its equivalent, as determined by the 5
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1	board, for the preparation of licensed practical nurses,
2	except for instruction and clinical knowledge of pediatric
3	nursing or obstetric/maternal-child nursing; and has completed
4	additional education in the care of ill, injured, or infirm
5	geriatric patients, the maintenance of health, the prevention
6	of injury, and the provision of palliative care for geriatric
7	patients. By September 1, 2004, the Board of Nursing shall
8	adopt rules establishing the core competencies for the
9	additional education in geriatric care. Any program that is
10	approved on July 1, 2004, by the board for the preparation of
11	registered nurses or licensed practical nurses may provide
12	education for the preparation of certified geriatric
13	specialists without further board approval.
14	2. Has the ability to communicate in the English
15	language, which may be determined by an examination given by
16	the department.
17	3. Has provided sufficient information, which must be
18	submitted by the department for a statewide criminal records
19	correspondence check through the Department of Law
20	Enforcement.
21	(b) Each applicant who meets the requirements of this
22	subsection is, unless denied pursuant to s. 464.018, entitled
23	to certification as a certified geriatric specialist. The
24	board must certify, and the department must issue a
25	certificate to practice as a certified geriatric specialist
26	to, any certified nursing assistant who meets the
27	qualifications set forth in this section. The board shall
28	establish an application fee not to exceed \$100 and a biennial
29	renewal fee not to exceed \$50. The board may adopt rules to
30	administer this section.
31	(c) A person receiving certification under this
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Bill No. <u>CS for CS for SB 2170</u> Amendment No. Barcode 911996 1 | section shall: 1. Work only within the confines of a facility 2 3 licensed under part II or part III of chapter 400. 2. Care for geriatric patients only. 4 5 3. Comply with the minimum standards of practice for nurses and be subject to disciplinary action for violations of 6 7 <u>s. 464.018.</u> (3) ARTICULATION. -- Any certified geriatric specialist 8 who completes the additional instruction and coursework in an 9 approved nursing program pursuant to s. 464.019 for the 10 11 preparation of practical nursing in the areas of pediatric nursing and obstetric/maternal-child nursing is, unless denied 12 13 pursuant to s. 464.018, entitled to licensure as a licensed practical nurse if the applicant otherwise meets the 14 15 requirements of s. 464.008. 16 (4) TITLES AND ABBREVIATIONS; RESTRICTIONS; PENALTIES.--17 (a) Only persons who hold certificates to practice as 18 19 certified geriatric specialists in this state or who are 20 performing services within the practice of certified geriatric specialty nursing pursuant to the exception set forth in s. 21 2.2 464.022(8) may use the title "Certified Geriatric Specialist" and the abbreviation "C.G.S." 23 24 (b) A person may not practice or advertise as, or 25 assume the title of, certified geriatric specialist or use the abbreviation "C.G.S." or take any other action that would lead 26 27 the public to believe that person is certified as such or is 28 performing services within the practice of certified geriatric 29 specialty nursing pursuant to the exception set forth in s. 30 464.022(8), unless that person is certified to practice as 31 such. 7

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Bill No. CS for CS for SB 2170 Amendment No. Barcode 911996 (c) A violation of this subsection is a misdemeanor of 1 the first degree, punishable as provided in s. 775.082 or s. 2 3 775.083. (5) VIOLATIONS AND PENALTIES. -- Practicing certified 4 5 geriatric specialty nursing, as defined in this section, without holding an active certificate to do so constitutes a б felony of the third degree, punishable as provided in s. 7 <u>775.082, s. 775.083, or s. 775.084.</u> 8 Section 108. Paragraph (b) of subsection (1) of 9 section 381.00315, Florida Statutes, is amended to read: 10 11 381.00315 Public health advisories; public health emergencies .-- The State Health Officer is responsible for 12 13 declaring public health emergencies and issuing public health 14 advisories. 15 (1) As used in this section, the term: 16 (b) "Public health emergency" means any occurrence, or threat thereof, whether natural or man made, which results or 17 may result in substantial injury or harm to the public health 18 19 from infectious disease, chemical agents, nuclear agents, biological toxins, or situations involving mass casualties or 20 21 natural disasters. Prior to declaring a public health emergency, the State Health Officer shall, to the extent 22 23 possible, consult with the Governor and shall notify the Chief 24 of Domestic Security Initiatives as created in s. 943.03. The 25 declaration of a public health emergency shall continue until 26 the State Health Officer finds that the threat or danger has 27 been dealt with to the extent that the emergency conditions no longer exist and he or she terminates the declaration. 28 However, a declaration of a public health emergency may not 29 continue for longer than 60 days unless the Governor concurs 30 31 in the renewal of the declaration. The State Health Officer, 9:31 AM 04/23/04 s2170c2c-02bz2

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upon declaration of a public health emergency, may take 1 2 actions that are necessary to protect the public health. Such 3 actions include, but are not limited to: 1. Directing manufacturers of prescription drugs or 4 5 over-the-counter drugs who are permitted under chapter 499 and wholesalers of prescription drugs located in this state who б are permitted under chapter 499 to give priority to the 7 shipping of specified drugs to pharmacies and health care 8 providers within geographic areas that have been identified by 9 the State Health Officer. The State Health Officer must 10 11 identify the drugs to be shipped. Manufacturers and wholesalers located in the state must respond to the State 12 13 Health Officer's priority shipping directive before shipping 14 the specified drugs. 15 2. Notwithstanding chapters 465 and 499 and rules 16 adopted thereunder, directing pharmacists employed by the

department to compound bulk prescription drugs and provide 17 18 these bulk prescription drugs to physicians and nurses of 19 county health departments or any qualified person authorized by the State Health Officer for administration to persons as 20 21 part of a prophylactic or treatment regimen.

22 3. Notwithstanding s. 456.036, temporarily 23 reactivating the inactive license of the following health care 24 practitioners, when such practitioners are needed to respond 25 to the public health emergency: physicians licensed under 26 chapter 458 or chapter 459; physician assistants licensed 27 under chapter 458 or chapter 459; certified geriatric specialists certified under part I of chapter 464; licensed 28 practical nurses, registered nurses, and advanced registered 29 nurse practitioners licensed under part I of chapter 464; 30 31 respiratory therapists licensed under part V of chapter 468; 9:31 AM 04/23/04 s2170c2c-02bz2

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1 and emergency medical technicians and paramedics certified 2 under part III of chapter 401. Only those health care 3 practitioners specified in this paragraph who possess an unencumbered inactive license and who request that such 4 5 license be reactivated are eligible for reactivation. An inactive license that is reactivated under this paragraph б 7 shall return to inactive status when the public health emergency ends or prior to the end of the public health 8 emergency if the State Health Officer determines that the 9 health care practitioner is no longer needed to provide 10 11 services during the public health emergency. Such licenses may 12 only be reactivated for a period not to exceed 90 days without meeting the requirements of s. 456.036 or chapter 401, as 13 14 applicable. 15 4. Ordering an individual to be examined, tested, vaccinated, treated, or quarantined for communicable diseases 16 17 that have significant morbidity or mortality and present a severe danger to public health. Individuals who are unable or 18

19 unwilling to be examined, tested, vaccinated, or treated for 20 reasons of health, religion, or conscience may be subjected to 21 guarantine.

a. Examination, testing, vaccination, or treatment may
be performed by any qualified person authorized by the State
Health Officer.

b. If the individual poses a danger to the public
health, the State Health Officer may subject the individual to
quarantine. If there is no practical method to quarantine the
individual, the State Health Officer may use any means
necessary to vaccinate or treat the individual.

31 Any order of the State Health Officer given to effectuate this 9:31 AM 04/23/04 s2170c2c-02bz2

Bill No. CS for CS for SB 2170 Amendment No. Barcode 911996 paragraph shall be immediately enforceable by a law 1 1 2 enforcement officer under s. 381.0012. 3 Section 109. Subsection (14) of section 400.021, Florida Statutes, is amended to read: 4 5 400.021 Definitions.--When used in this part, unless the context otherwise requires, the term: б 7 (14) "Nursing service" means such services or acts as may be rendered, directly or indirectly, to and in behalf of a 8 9 person by individuals as defined in ss. s. 464.003 and 10 464.0125. 11 Section 110. Paragraphs (a) and (c) of subsection (3) 12 of section 400.23, Florida Statutes, are amended to read: 13 400.23 Rules; evaluation and deficiencies; licensure status.--14 15 (3)(a) The agency shall adopt rules providing for the 16 minimum staffing requirements for nursing homes. These requirements shall include, for each nursing home facility, a 17 18 minimum certified nursing assistant staffing of 2.3 hours of 19 direct care per resident per day beginning January 1, 2002, increasing to 2.6 hours of direct care per resident per day 20 beginning January 1, 2003, and increasing to 2.9 hours of 21 direct care per resident per day beginning May 1, 2004. 22 23 Beginning January 1, 2002, no facility shall staff below one 24 certified nursing assistant per 20 residents, and a minimum 25 licensed nursing staffing of 1.0 hour of direct resident care 26 per resident per day but never below one licensed nurse per 40 27 residents. For purposes of computing nursing staffing minimums and ratios, certified geriatric specialists shall be 28 considered licensed nursing staff. Nursing assistants employed 29 never below one licensed nurse per 40 residents. Nursing 30 31 assistants employed under s. 400.211(2) may be included in 11 9:31 AM 04/23/04 s2170c2c-02bz2

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computing the staffing ratio for certified nursing assistants 1 2 only if they provide nursing assistance services to residents 3 on a full-time basis. Each nursing home must document compliance with staffing standards as required under this 4 5 paragraph and post daily the names of staff on duty for the benefit of facility residents and the public. The agency shall б recognize the use of licensed nurses for compliance with 7 minimum staffing requirements for certified nursing 8 assistants, provided that the facility otherwise meets the 9 minimum staffing requirements for licensed nurses and that the 10 11 licensed nurses so recognized are performing the duties of a certified nursing assistant. Unless otherwise approved by the 12 13 agency, licensed nurses counted towards the minimum staffing requirements for certified nursing assistants must exclusively 14 15 perform the duties of a certified nursing assistant for the 16 entire shift and shall not also be counted towards the minimum staffing requirements for licensed nurses. If the agency 17 18 approved a facility's request to use a licensed nurse to 19 perform both licensed nursing and certified nursing assistant 20 duties, the facility must allocate the amount of staff time 21 specifically spent on certified nursing assistant duties for the purpose of documenting compliance with minimum staffing 22 23 requirements for certified and licensed nursing staff. In no 24 event may the hours of a licensed nurse with dual job 25 responsibilities be counted twice. 26 (c) Licensed practical nurses licensed under chapter 27 464 who are providing nursing services in nursing home facilities under this part may supervise the activities of 28 other licensed practical nurses, certified geriatric 29 specialists, certified nursing assistants, and other 30 31 unlicensed personnel providing services in such facilities in 9:31 AM 04/23/04 s2170c2c-02bz2

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accordance with rules adopted by the Board of Nursing. 1 | 2 Section 111. Paragraph (b) of subsection (2) of 3 section 409.908, Florida Statutes, is amended to read: 4 409.908 Reimbursement of Medicaid providers.--Subject 5 to specific appropriations, the agency shall reimburse Medicaid providers, in accordance with state and federal law, б 7 according to methodologies set forth in the rules of the agency and in policy manuals and handbooks incorporated by 8 reference therein. These methodologies may include fee 9 schedules, reimbursement methods based on cost reporting, 10 11 negotiated fees, competitive bidding pursuant to s. 287.057, 12 and other mechanisms the agency considers efficient and 13 effective for purchasing services or goods on behalf of 14 recipients. If a provider is reimbursed based on cost 15 reporting and submits a cost report late and that cost report 16 would have been used to set a lower reimbursement rate for a 17 rate semester, then the provider's rate for that semester 18 shall be retroactively calculated using the new cost report, 19 and full payment at the recalculated rate shall be affected retroactively. Medicare-granted extensions for filing cost 20 reports, if applicable, shall also apply to Medicaid cost 21 reports. Payment for Medicaid compensable services made on 22 23 behalf of Medicaid eligible persons is subject to the 24 availability of moneys and any limitations or directions 25 provided for in the General Appropriations Act or chapter 216. 26 Further, nothing in this section shall be construed to prevent 27 or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or 28 making any other adjustments necessary to comply with the 29 availability of moneys and any limitations or directions 30 31 provided for in the General Appropriations Act, provided the 13 9:31 AM 04/23/04 s2170c2c-02bz2

(2)

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1 | adjustment is consistent with legislative intent.

2

3 (b) Subject to any limitations or directions provided for in the General Appropriations Act, the agency shall 4 5 establish and implement a Florida Title XIX Long-Term Care Reimbursement Plan (Medicaid) for nursing home care in order б 7 to provide care and services in conformance with the applicable state and federal laws, rules, regulations, and 8 quality and safety standards and to ensure that individuals 9 eligible for medical assistance have reasonable geographic 10 11 access to such care.

1. Changes of ownership or of licensed operator do not 12 13 qualify for increases in reimbursement rates associated with the change of ownership or of licensed operator. The agency 14 15 shall amend the Title XIX Long Term Care Reimbursement Plan to 16 provide that the initial nursing home reimbursement rates, for the operating, patient care, and MAR components, associated 17 18 with related and unrelated party changes of ownership or 19 licensed operator filed on or after September 1, 2001, are 20 equivalent to the previous owner's reimbursement rate.

21 2. The agency shall amend the long-term care reimbursement plan and cost reporting system to create direct 22 23 care and indirect care subcomponents of the patient care 24 component of the per diem rate. These two subcomponents 25 together shall equal the patient care component of the per 26 diem rate. Separate cost-based ceilings shall be calculated 27 for each patient care subcomponent. The direct care subcomponent of the per diem rate shall be limited by the 28 cost-based class ceiling, and the indirect care subcomponent 29 shall be limited by the lower of the cost-based class ceiling, 30 31 | by the target rate class ceiling, or by the individual 9:31 AM 04/23/04 s2170c2c-02bz2

1	provider target. The agency shall adjust the patient care
2	component effective January 1, 2002. The cost to adjust the
3	direct care subcomponent shall be net of the total funds
4	previously allocated for the case mix add-on. The agency shall
5	make the required changes to the nursing home cost reporting
6	forms to implement this requirement effective January 1, 2002.
7	3. The direct care subcomponent shall include salaries
8	and benefits of direct care staff providing nursing services
9	including registered nurses, licensed practical nurses,
10	certified geriatric specialists certified under part I of
11	chapter 464, and certified nursing assistants who deliver care
12	directly to residents in the nursing home facility. This
13	excludes nursing administration, MDS, and care plan
14	coordinators, staff development, and staffing coordinator.
15	4. All other patient care costs shall be included in
16	the indirect care cost subcomponent of the patient care per
17	diem rate. There shall be no costs directly or indirectly
18	allocated to the direct care subcomponent from a home office
19	or management company.
20	5. On July 1 of each year, the agency shall report to
21	the Legislature direct and indirect care costs, including
22	average direct and indirect care costs per resident per
23	facility and direct care and indirect care salaries and
24	benefits per category of staff member per facility.
25	6. In order to offset the cost of general and
26	professional liability insurance, the agency shall amend the
27	plan to allow for interim rate adjustments to reflect
28	increases in the cost of general or professional liability
29	insurance for nursing homes. This provision shall be
30	implemented to the extent existing appropriations are
31	available. 15
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1 2 It is the intent of the Legislature that the reimbursement 3 plan achieve the goal of providing access to health care for nursing home residents who require large amounts of care while 4 5 encouraging diversion services as an alternative to nursing home care for residents who can be served within the б 7 community. The agency shall base the establishment of any 8 maximum rate of payment, whether overall or component, on the 9 available moneys as provided for in the General Appropriations 10 Act. The agency may base the maximum rate of payment on the 11 results of scientifically valid analysis and conclusions 12 derived from objective statistical data pertinent to the particular maximum rate of payment. 13 Section 112. Subsection (1) and paragraph (a) of 14 15 subsection (2) of section 1009.65, Florida Statutes, are 16 amended to read: 1009.65 Medical Education Reimbursement and Loan 17 Repayment Program. --18 19 (1) To encourage qualified medical professionals to practice in underserved locations where there are shortages of 20 21 such personnel, there is established the Medical Education Reimbursement and Loan Repayment Program. The function of the 22 23 program is to make payments that offset loans and educational 24 expenses incurred by students for studies leading to a medical 25 or nursing degree, medical or nursing licensure, or advanced 26 registered nurse practitioner certification or physician 27 assistant licensure. The following licensed or certified health care professionals are eligible to participate in this 28 program: medical doctors with primary care specialties, 29 doctors of osteopathic medicine with primary care specialties, 30 31 | physician's assistants, <u>certified geriatric specialists</u> 9:31 AM 04/23/04 s2170c2c-02bz2

1	certified under part I of chapter 464, licensed practical
2	nurses and registered nurses, and advanced registered nurse
3	practitioners with primary care specialties such as certified
4	nurse midwives. Primary care medical specialties for
5	physicians include obstetrics, gynecology, general and family
б	practice, internal medicine, pediatrics, and other specialties
7	which may be identified by the Department of Health.
8	(2) From the funds available, the Department of Health
9	shall make payments to selected medical professionals as
10	follows:
11	(a) Up to \$4,000 per year for <u>certified geriatric</u>
12	specialists certified under part I of chapter 464, licensed
13	practical nurses, and registered nurses, up to \$10,000 per
14	year for advanced registered nurse practitioners and
15	physician's assistants, and up to \$20,000 per year for
16	physicians. Penalties for noncompliance shall be the same as
17	those in the National Health Services Corps Loan Repayment
18	Program. Educational expenses include costs for tuition,
19	matriculation, registration, books, laboratory and other fees,
20	other educational costs, and reasonable living expenses as
21	determined by the Department of Health.
22	Section 113. Subsection (2) of section 1009.66,
23	Florida Statutes, is amended to read:
24	1009.66 Nursing Student Loan Forgiveness Program
25	(2) To be eligible, a candidate must have graduated
26	from an accredited or approved nursing program and have
27	received a Florida license as a licensed practical nurse <u>, a</u>
28	certified geriatric specialist certified under part I of
29	chapter 464, or a registered nurse or a Florida certificate as
30	an advanced registered nurse practitioner.
31	Section 114. The sum of \$157,017 is appropriated from
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   Amendment No. Barcode 911996
   the General Revenue Fund to the Agency for Workforce
1
   Innovation to support the work of the Certified Geriatric
2
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   Specialty Nursing Initiative Steering Committee, to administer
   the pilot sites, to contract for an evaluation, and to the
4
5
   extent that funds are available, and if necessary, to provide
   nursing faculty, substitute certified nursing assistants for
б
7
   those who are in clinical education, and technical support to
   the pilot sites during the 2004-2005 fiscal year.
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10
    (Redesignate subsequent sections.)
11
12
13
   And the title is amended as follows:
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15
          On page 10, line 28, following the semicolon
16
17
   insert:
18
          providing a short title; requiring the Agency
19
          for Workforce Innovation to establish a pilot
20
          program for delivery of certified geriatric
21
          specialty nursing education; specifying
2.2
          eligibility requirements for certified nursing
          assistants to obtain certified geriatric
23
24
          specialty nursing education; specifying
          requirements for the education of certified
25
26
          nursing assistants to prepare for certification
27
          as a certified geriatric specialist; creating a
28
          Certified Geriatric Specialty Nursing
29
          Initiative Steering Committee; providing for
          the composition of and manner of appointment to
30
31
          the Certified Geriatric Specialty Nursing
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1	Initiative Steering Committee; providing
2	responsibilities of the steering committee;
3	providing for reimbursement for per diem and
4	travel expenses; requiring the Agency for
5	Workforce Innovation to conduct or contract for
б	an evaluation of the pilot program for delivery
7	of certified geriatric specialty nursing
8	education; requiring the evaluation to include
9	recommendations regarding the expansion of the
10	delivery of certified geriatric specialty
11	nursing education in nursing homes; requiring
12	the Agency for Workforce Innovation to report
13	to the Governor and Legislature regarding the
14	status and evaluation of the pilot program;
15	creating s. 464.0125, F.S.; providing
16	definitions; providing requirements for persons
17	to become certified geriatric specialists;
18	specifying fees; providing for articulation of
19	geriatric specialty nursing coursework and
20	practical nursing coursework; providing
21	practice standards and grounds for which
22	certified geriatric specialists may be subject
23	to discipline by the Board of Nursing; creating
24	restrictions on the use of professional nursing
25	titles; prohibiting the use of certain
26	professional titles; providing penalties;
27	authorizing approved nursing programs to
28	provide education for the preparation of
29	certified geriatric specialists without further
30	board approval; authorizing certified geriatric
31	specialists to supervise the activities of 19
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	Amendment No Barcoue 911990
1	others in nursing home facilities according to
2	rules by the Board of Nursing; revising
3	terminology relating to nursing to conform to
4	the certification of geriatric specialists;
5	amending s. 381.00315, F.S.; revising
6	requirements for the reactivation of the
7	licenses of specified health care practitioners
8	in the event of a public health emergency to
9	include certified geriatric specialists;
10	amending s. 400.021, F.S.; including services
11	provided by a certified geriatric specialist
12	within the definition of nursing service;
13	amending s. 400.23, F.S.; specifying that
14	certified geriatric specialists shall be
15	considered licensed nursing staff; authorizing
16	licensed practical nurses to supervise the
17	activities of certified geriatric specialists
18	in nursing home facilities according to rules
19	adopted by the Board of Nursing; amending s.
20	409.908, F.S.; revising the methodology for
21	reimbursement of Medicaid program providers to
22	include services of certified geriatric
23	specialists; amending s. 1009.65, F.S.;
24	revising eligibility for the Medical Education
25	Reimbursement and Loan Repayment Program to
26	include certified geriatric specialists;
27	amending s. 1009.66, F.S.; revising eligibility
28	requirements for the Nursing Student Loan
29	Forgiveness Program to include certified
30	geriatric specialists; providing an
31	appropriation;
	20 21 JM 04/22/04