By the Committee on Health Regulation; and Senator Gardiner

588-03195-10 20102138c1 1 A bill to be entitled 2 An act relating to health care; repealing s. 3 112.0455(10)(e), F.S., relating to a prohibition 4 against applying the Drug-Free Workplace Act 5 retroactively; repealing s. 383.325, F.S., relating to 6 the requirement of a licensed facility under s. 7 383.305, F.S., to maintain inspection reports; 8 repealing s. 395.1046, F.S., relating to the 9 investigation of complaints regarding hospitals; 10 repealing s. 395.3037, F.S.; deleting definitions 11 relating to obsolete provisions governing primary and 12 comprehensive stroke centers; amending s. 400.0239, 13 F.S.; deleting an obsolete provision; repealing s. 14 400.147(10), F.S., relating to a requirement that a 15 nursing home facility report any notice of a filing of 16 a claim for a violation of a resident's rights or a 17 claim of negligence; repealing s. 400.148, F.S., relating to the Medicaid "Up-or-Out" Quality of Care 18 19 Contract Management Program; repealing s. 400.195, 20 F.S., relating to reporting requirements for the 21 Agency for Health Care Administration; amending s. 22 400.476, F.S.; providing requirements for an 23 alternative administrator of a home health agency; 24 revising the duties of the administrator; revising the 25 requirements for a director of nursing for a specified 26 number of home health agencies; prohibiting a home 27 health agency from using an individual as a home 28 health aide unless the person has completed training 29 and an evaluation program; requiring a home health

#### Page 1 of 18

588-03195-10 20102138c1 30 aide to meet certain standards in order to be 31 competent in performing certain tasks; requiring a 32 home health agency and staff to comply with accepted 33 professional standards; providing certain requirements 34 for a written contract between certain personnel and 35 the agency; requiring a home health agency to provide 36 certain services through its employees; authorizing a home health agency to provide additional services with 37 another organization; providing responsibilities of a 38 39 home health agency when it provides home health aide 40 services through another organization; requiring the 41 home health agency to coordinate personnel who provide 42 home health services; requiring personnel to communicate with the home health agency; amending s. 43 44 400.487, F.S.; requiring a home health agency to 45 provide a copy of the agreement between the agency and 46 a patient which specifies the home health services to 47 be provided; providing the rights that are protected 48 by the home health agency; requiring the home health 49 agency to furnish nursing services by or under the 50 supervision of a registered nurse; requiring the home 51 health agency to provide therapy services through a 52 qualified therapist or therapy assistant; providing 53 the duties and qualifications of a therapist and 54 therapy assistant; requiring supervision by a physical 55 therapist or occupational therapist of a physical 56 therapist assistant or occupational therapist 57 assistant; providing duties of a physical therapist 58 assistant or occupational therapist assistant;

#### Page 2 of 18

	588-03195-10 20102138c1
59	providing for speech therapy services to be provided
60	by a qualified speech pathologist or audiologist;
61	providing for a plan of care; providing that only the
62	staff of a home health agency may administer drugs and
63	treatments as ordered by certain health professionals;
64	providing requirements for verbal orders; providing
65	duties of a registered nurse, licensed practical
66	nurse, home health aide, and certified nursing
67	assistant who work for a home health agency; providing
68	for supervisory visits of services provided by a home
69	health agency; repealing s. 408.802(11), F.S.,
70	relating to the applicability of the Health Care
71	Licensing Procedures Act to private review agents;
72	repealing s. 409.912(15)(e), (f), and (g), F.S.,
73	relating to a requirement for the Agency for Health
74	Care Administration to submit a report to the
75	Legislature regarding the operations of the CARE
76	program; repealing s. 429.12(2), F.S., relating to the
77	sale or transfer of ownership of an assisted living
78	facility; repealing s. 429.23(5), F.S., relating to
79	each assisted living facility's requirement to submit
80	a report to the agency regarding liability claims
81	filed against it; repealing s. 429.911, F.S., relating
82	to grounds for which the agency may take action
83	against the owner of an adult day care center or its
84	operator or employee; providing an effective date.
85	
86	Be It Enacted by the Legislature of the State of Florida:
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# Page 3 of 18

	588-03195-10 20102138c1
88	Section 1. Paragraph (e) of subsection (10) of section
89	112.0455, Florida Statutes, is repealed.
90	Section 2. Section 383.325, Florida Statutes, is repealed.
91	Section 3. Section 395.1046, Florida Statutes, is repealed.
92	Section 4. Section 395.3037, Florida Statutes, is repealed.
93	Section 5. Paragraph (g) of subsection (2) of section
94	400.0239, Florida Statutes, is amended to read:
95	400.0239 Quality of Long-Term Care Facility Improvement
96	Trust Fund
97	(2) Expenditures from the trust fund shall be allowable for
98	direct support of the following:
99	(g) Other initiatives authorized by the Centers for
100	Medicare and Medicaid Services for the use of federal civil
101	monetary penalties, including projects recommended through the
102	Medicaid "Up-or-Out" Quality of Care Contract Management Program
103	pursuant to s. 400.148.
104	Section 6. Subsection (10) of section 400.147, Florida
105	Statutes, is repealed.
106	Section 7. Section 400.148, Florida Statutes, is repealed.
107	Section 8. Section 400.195, Florida Statutes, is repealed.
108	Section 9. Section 400.476, Florida Statutes, is amended to
109	read:
110	400.476 Staffing requirements; notifications; limitations
111	on staffing services
112	(1) ADMINISTRATOR
113	(a) An administrator may manage only one home health
114	agency, except that an administrator may manage up to five home
115	health agencies if all five home health agencies have identical
116	controlling interests as defined in s. 408.803 and are located

# Page 4 of 18

588-03195-10 20102138c1 117 within one agency geographic service area or within an 118 immediately contiguous county. If the home health agency is 119 licensed under this chapter and is part of a retirement 120 community that provides multiple levels of care, an employee of 121 the retirement community may administer the home health agency and up to a maximum of four entities licensed under this chapter 122 123 or chapter 429 which all have identical controlling interests as 124 defined in s. 408.803. An administrator shall designate, in 125 writing, for each licensed entity, a qualified alternate 126 administrator to serve during the administrator's absence. An 127 alternate administrator must meet the requirements in this 128 paragraph and s. 400.462(1). (b) An administrator of a home health agency who is a 129

130 licensed physician, physician assistant, or registered nurse 131 licensed to practice in this state may also be the director of 132 nursing for a home health agency. An administrator may serve as 133 a director of nursing for up to the number of entities 134 authorized in subsection (2) only if there are 10 or fewer full-135 time equivalent employees and contracted personnel in each home 136 health agency.

137 (c) The administrator shall organize and direct the 138 agency's ongoing functions, maintain an ongoing liaison with the board members and the staff, employ qualified personnel and 139 140 ensure adequate staff education and evaluations, ensure the 141 accuracy of public informational materials and activities, 142 implement an effective budgeting and accounting system, and 143 ensure that the home health agency operates in compliance with 144 this part and part II of chapter 408 and rules adopted for these 145 laws.

#### Page 5 of 18

	588-03195-10 20102138c1
146	(d) The administrator shall clearly set forth in writing
147	the organizational chart, services furnished, administrative
148	control, and lines of authority for the delegation of
149	responsibilities for patient care. These responsibilities must
150	be readily identifiable. Administrative and supervisory
151	functions may not be delegated to another agency or
152	organization, and the primary home health agency shall monitor
153	and control all services that are not furnished directly,
154	including services provided through contracts.
155	(2) DIRECTOR OF NURSING
156	(a) A director of nursing may be the director of nursing
157	for:
158	1. Up to two licensed home health agencies if the agencies
159	have identical controlling interests as defined in s. 408.803
160	and are located within one agency geographic service area or
161	within an immediately contiguous county; or
162	2. Up to five licensed home health agencies if:
163	a. All of the home health agencies have identical
164	controlling interests as defined in s. 408.803;
165	b. All of the home health agencies are located within one
166	agency geographic service area or within an immediately
167	contiguous county; <del>and</del>
168	c. Each home health agency has a registered nurse who meets
169	the qualifications of a director of nursing and who has a
170	written delegation from the director of nursing to serve as the
171	director of nursing for that home health agency when the
172	director of nursing is not present; and.
173	d. This person, or similarly qualified alternate, is
174	available at all times during operating hours and participates

# Page 6 of 18

588-03195-10

175 in all activities relevant to the professional services 176 furnished, including, but not limited to, the oversight of 177 nursing services, home health aides, and certified nursing 178 assistants, and assignment of personnel. 179 180 If a home health agency licensed under this chapter is part of a 181 retirement community that provides multiple levels of care, an 182 employee of the retirement community may serve as the director of nursing of the home health agency and up to a maximum of four 183 184 entities, other than home health agencies, licensed under this 185 chapter or chapter 429 which all have identical controlling 186 interests as defined in s. 408.803. 187 (b) A home health agency that provides skilled nursing care 188 may not operate for more than 30 calendar days without a 189 director of nursing. A home health agency that provides skilled 190 nursing care and the director of nursing of a home health agency 191 must notify the agency within 10 business days after termination 192 of the services of the director of nursing for the home health agency. A home health agency that provides skilled nursing care 193 194 must notify the agency of the identity and qualifications of the new director of nursing within 10 days after the new director is 195 196 hired. If a home health agency that provides skilled nursing care operates for more than 30 calendar days without a director 197 198 of nursing, the home health agency commits a class II 199 deficiency. In addition to the fine for a class II deficiency, 200 the agency may issue a moratorium in accordance with s. 408.814 201 or revoke the license. The agency shall fine a home health 202 agency that fails to notify the agency as required in this

203 paragraph \$1,000 for the first violation and \$2,000 for a repeat

#### Page 7 of 18

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

CS for SB 2138

20102138c1

	588-03195-10 20102138c1
204	violation. The agency may not take administrative action against
205	a home health agency if the director of nursing fails to notify
206	the department upon termination of services as the director of
207	nursing for the home health agency.
208	(c) A home health agency that is not Medicare or Medicaid
209	certified and does not provide skilled care or provides only
210	physical, occupational, or speech therapy is not required to
211	have a director of nursing and is exempt from paragraph (b).
212	(3) TRAINING.—A home health agency shall ensure that each
213	certified nursing assistant employed by or under contract with
214	the home health agency and each home health aide employed by or
215	under contract with the home health agency is adequately trained
216	to perform the tasks of a home health aide in the home setting.
217	(a) The home health agency may not use as a home health
218	aide on a full-time, temporary, per diem, or other basis, any
219	individual to provide services unless the individual has
220	completed a training and competency evaluation program, or a
221	competency evaluation program, as permitted in s. 400.497, which
222	meets the minimum standards established by the agency in state
223	<u>rules.</u>
224	(b) A home health aide is not competent in any task for
225	which he or she is evaluated as "unsatisfactory." The aide must
226	perform any such task only under direct supervision by a
227	licensed nurse until he or she receives training in the task and
228	satisfactorily passes a subsequent evaluation in performing the
229	task. A home health aide has not successfully passed a
230	competency evaluation if the aide does not have a passing score
231	on the test as specified by agency rule.
232	(4) STAFFINGStaffing services may be provided anywhere

# Page 8 of 18

	588-03195-10 20102138c1
233	within the state.
234	(5) PERSONNEL.—
235	(a) The home health agency and its staff must comply with
236	accepted professional standards and principles that apply to
237	professionals, including, but not limited to, the state practice
238	acts and the home health agency's policies and procedures.
239	(b) If personnel under hourly or per-visit contracts are
240	used by the home health agency, there must be a written contract
241	between those personnel and the agency which specifies the
242	following requirements:
243	1. Acceptance for care only of patients by the primary home
244	health agency.
245	2. The services to be furnished.
246	3. The necessity to conform to all applicable agency
247	policies, including personnel qualifications.
248	4. The responsibility for participating in developing plans
249	of care.
250	5. The manner in which services are controlled,
251	coordinated, and evaluated by the primary home health agency.
252	6. The procedures for submitting clinical and progress
253	notes, scheduling of visits, and periodic patient evaluation.
254	7. The procedures for payment for services furnished under
255	the contract.
256	(c) A home health agency shall directly provide at least
257	one of the types of services through home health agency
258	employees, but may provide additional services under
259	arrangements with another agency or organization. Services
260	furnished under such arrangements must have a written contract
261	conforming to the requirements specified in paragraph (b).

# Page 9 of 18

	588-03195-10 20102138c1
262	(d) If home health aide services are provided by an
263	individual who is not employed directly by the home health
264	agency, the services of the home health aide must be provided
265	under arrangements as stated in paragraphs (b) and (c). If the
266	home health agency chooses to provide home health aide services
267	under arrangements with another organization, the
268	responsibilities of the home health agency include, but are not
269	limited to:
270	1. Ensuring the overall quality of the care provided by the
271	aide;
272	2. Supervising the aide's services as described in s.
273	400.487; and
274	3. Ensuring that each home health aide providing services
275	under arrangements with another organization has met the
276	training requirements or competency evaluation requirements of
277	<u>s. 400.497.</u>
278	(e) The home health agency shall coordinate the efforts of
279	all personnel furnishing services, and the personnel shall
280	maintain communication with the home health agency to ensure
281	that personnel efforts support the objectives outlined in the
282	plan of care. The clinical record or minutes of case conferences
283	shall ensure that effective interchange, reporting, and
284	coordination of patient care occurs.
285	Section 10. Section 400.487, Florida Statutes, is amended
286	to read:
287	400.487 Home health service agreements; physician's,
288	physician assistant's, and advanced registered nurse
289	<pre>practitioner's treatment orders; patient assessment;</pre>
290	establishment and review of plan of care; provision of services;

# Page 10 of 18

588-03195-10

20102138c1

291 orders not to resuscitate.-

292 (1) Services provided by a home health agency must be 293 covered by an agreement between the home health agency and the patient or the patient's legal representative specifying the 294 295 home health services to be provided, the rates or charges for 296 services paid with private funds, and the sources of payment, 297 which may include Medicare, Medicaid, private insurance, 298 personal funds, or a combination thereof. The home health agency 299 shall provide a copy of the agreement to the patient or the 300 patient's legal representative. A home health agency providing 301 skilled care must make an assessment of the patient's needs 302 within 48 hours after the start of services.

303 (2) When required by the provisions of chapter 464; part I, 304 part III, or part V of chapter 468; or chapter 486, the 305 attending physician, physician assistant, or advanced registered 306 nurse practitioner, acting within his or her respective scope of 307 practice, shall establish treatment orders for a patient who is 308 to receive skilled care. The treatment orders must be signed by the physician, physician assistant, or advanced registered nurse 309 310 practitioner before a claim for payment for the skilled services 311 is submitted by the home health agency. If the claim is submitted to a managed care organization, the treatment orders 312 313 must be signed within the time allowed under the provider agreement. The treatment orders shall be reviewed, as frequently 314 315 as the patient's illness requires, by the physician, physician 316 assistant, or advanced registered nurse practitioner in 317 consultation with the home health agency.

318 (3) A home health agency shall arrange for supervisory319 visits by a registered nurse to the home of a patient receiving

#### Page 11 of 18

	588-03195-10 20102138c1
320	home health aide services as specified in subsection (9) $\frac{1}{10}$
321	accordance with the patient's direction, approval, and agreement
322	to pay the charge for the visits.
323	(4) The home health agency shall protect and promote the
324	rights of each individual under its care, including each of the
325	following rights:
326	(a) Notice of rightsThe home health agency shall provide
327	the patient with a written notice of the patient's rights in
328	advance of furnishing care to the patient or during the initial
329	evaluation visit before the initiation of treatment. The home
330	health agency must maintain documentation showing that it has
331	complied with the requirements of this section.
332	(b) Exercise of rights and respect for property and
333	person
334	1. The patient has the right to exercise his or her rights
335	as a patient of the home health agency.
336	2. The patient has the right to have his or her property
337	treated with respect.
338	3. The patient has the right to voice grievances regarding
339	treatment or care that is or fails to be furnished, or regarding
340	the lack of respect for property by anyone who is furnishing
341	services on behalf of the home health agency, and not be
342	subjected to discrimination or reprisal for doing so.
343	4. The home health agency must investigate complaints made
344	by a patient or the patient's family or guardian regarding
345	treatment or care that is or fails to be furnished, or regarding
346	the lack of respect for the patient's property by anyone
347	furnishing services on behalf of the home health agency. The
348	home health agency shall document the existence of the complaint

# Page 12 of 18

1	588-03195-10 20102138c1
349	and its resolution.
350	5. The patient and his or her immediate family or
351	representative must be informed of the right to report
352	complaints via the statewide toll-free telephone number to the
353	agency as required in s. 408.810.
354	(c) Right to be informed and to participate in planning
355	care and treatment
356	1. The patient has the right to be informed, in advance,
357	about the care to be furnished and of any changes in the care to
358	be furnished. The home health agency shall advise the patient in
359	advance of which disciplines will furnish care and the frequency
360	of visits proposed to be furnished. The home health agency must
361	advise the patient in advance of any change in the plan of care
362	before the change is made.
363	2. The patient has the right to participate in the planning
364	of the care. The home health agency must advise the patient in
365	advance of the right to participate in planning the care or
366	treatment and in planning changes in the care or treatment. Each
367	patient has the right to be informed of and to participate in
368	the planning of his or her care. Each patient must be provided,
369	upon request, a copy of the plan of care established and
370	maintained for that patient by the home health agency.
371	(5) When nursing services are ordered, the home health
372	agency to which a patient has been admitted for care must
373	provide the initial admission visit, all service evaluation

374 visits, and the discharge visit by a direct employee. Services 375 provided by others under contractual arrangements to a home 376 health agency must be monitored and managed by the admitting 377 home health agency. The admitting home health agency is fully

#### Page 13 of 18

	588-03195-10 20102138c1
378	responsible for ensuring that all care provided through its
379	employees or contract staff is delivered in accordance with this
380	part and applicable rules.
381	(6) The skilled care services provided by a home health
382	agency, directly or under contract, must be supervised and
383	coordinated in accordance with the plan of care. <u>The home health</u>
384	agency shall furnish skilled nursing services by or under the
385	supervision of a registered nurse and in accordance with the
386	plan of care. Any therapy services offered directly or under
387	arrangement by the home health agency must be provided by a
388	qualified therapist or by a qualified therapy assistant under
389	the supervision of a qualified therapist and in accordance with
390	the plan of care.
391	(a) Duties and qualifications.—A qualified therapist shall
392	assist the physician in evaluating the level of function, help
393	develop or revise the plan of care, prepare clinical and
394	progress notes, advise and consult with the family and other
395	agency personnel, and participate in in-service programs. The
396	therapist or therapy assistant must meet the qualifications in
397	the state practice acts and related applicable rules.
398	(b) Physical therapy assistants and occupational therapy
399	assistants.—Services provided by a physical therapy assistant or
400	occupational therapy assistant must be under the supervision of
401	a qualified physical therapist or occupational therapist as
402	required in chapter 486 and part III of chapter 468,
403	respectively, and related applicable rules. A physical therapy
404	assistant or occupational therapy assistant shall perform
405	services planned, delegated, and supervised by the therapist,
406	assist in preparing clinical notes and progress reports,

# Page 14 of 18

	588-03195-10 20102138c1
407	participate in educating the patient and his or her family, and
408	participate in in-service programs.
409	(c) Speech therapy services.—Speech therapy services shall
410	be furnished only by or under supervision of a qualified speech
411	pathologist or audiologist as required in part I of chapter 468
412	and related applicable rules.
413	(d) Care follows a written plan of careThe plan of care
414	shall be reviewed by the physician or health professional who
415	provided the treatment orders pursuant to subsection (2) and
416	home health agency personnel as often as the severity of the
417	patient's condition requires, but at least once every 60 days or
418	more when there is a patient-elected transfer, a significant
419	change in condition, or a discharge and return to the same home
420	health agency during the 60-day episode. Professional staff of a
421	home health agency shall promptly alert the physician or other
422	health professional who provided the treatment orders of any
423	change that suggests a need to alter the plan of care.
424	(e) Administration of drugs and treatment.—Only
425	professional staff of a home health agency may administer drugs
426	and treatments as ordered by the physician or health
427	professional pursuant to subsection (2), with the exception of
428	influenza and pneumococcal polysaccharide vaccines, which may be
429	administered according to the policy of the home health agency
430	developed in consultation with a physician and after an
431	assessment for contraindications. Verbal orders shall be in
432	writing and signed and dated with the date of receipt by the
433	registered nurse or qualified therapist who is responsible for
434	furnishing or supervising the ordered service. A verbal order
435	may be accepted only by personnel who are authorized to do so by

# Page 15 of 18

	588-03195-10 20102138c1
436	applicable state laws, rules, and internal policies of the home
437	health agency.
438	(7) A registered nurse shall conduct the initial evaluation
439	visit, regularly reevaluate the patient's nursing needs,
440	initiate the plan of care and necessary revisions, furnish those
441	services requiring substantial and specialized nursing skill,
442	initiate appropriate preventive and rehabilitative nursing
443	procedures, prepare clinical and progress notes, coordinate
444	services, inform the physician and other personnel of changes in
445	the patient's condition and needs, counsel the patient and his
446	or her family in meeting nursing and related needs, participate
447	in in-service programs, and supervise and teach other nursing
448	personnel.
449	(8) A licensed practical nurse shall furnish services in
450	accordance with agency policies, prepare clinical and progress
451	notes, assist the physician and registered nurse in performing
452	specialized procedures, prepare equipment and materials for
453	treatments observing aseptic technique as required, and assist
454	the patient in learning appropriate self-care techniques.
455	(9) A home health aide and certified nursing assistant
456	shall provide services that are ordered by the physician in the
457	plan of care and that the aide or assistant is permitted to
458	perform under state law. The duties of a home health aide or
459	certified nursing assistant include the provision of hands-on
460	personal care, performance of simple procedures as an extension
461	of therapy or nursing services, assistance in ambulation or
462	exercises, and assistance in administering medications that are
463	ordinarily self-administered and are specified in agency rules.
464	Any services by a home health aide which are offered by a home

# Page 16 of 18

	588-03195-10 20102138c1
465	health agency must be provided by a qualified home health aide
466	or certified nursing assistant.
467	(a) Assignment and dutiesA home health aide or certified
468	nursing assistant shall be assigned to a specific patient by a
469	registered nurse. Written patient care instructions for the home
470	health aide and certified nursing assistant must be prepared by
471	the registered nurse or other appropriate professional who is
472	responsible for the supervision of the home health aide and
473	certified nursing assistant as stated in this section.
474	(b) SupervisionIf a patient receives skilled nursing
475	care, the registered nurse shall perform the supervisory visit.
476	If the patient is not receiving skilled nursing care but is
477	receiving physical therapy, occupational therapy, or speech-
478	language pathology services, the appropriate therapist may
479	provide the supervision. A registered nurse or other
480	professional must make an onsite visit to the patient's home at
481	least once every 2 weeks. The visit is not required while the
482	aide is providing care.
483	(c) Supervising visitsIf home health aide services are
484	provided to a patient who is not receiving skilled nursing care,
485	physical or occupational therapy, or speech-language pathology
486	services, a registered nurse must make a supervisory visit to
487	the patient's home at least once every 60 days, unless the home
488	health agency providing the home health aide services is not
489	Medicare or Medicaid certified and does not provide skilled
490	care, either directly or through contracts. The registered nurse
491	shall ensure that the aide is properly caring for the patient
492	and each supervisory visit must occur while the home health aide
493	is providing patient care. In addition to the requirements in

#### Page 17 of 18

	588-03195-10 20102138c1
494	this subsection, a home health agency shall arrange for
495	additional supervisory visits by a registered nurse to the home
496	of a patient receiving home health aide services in accordance
497	with the patient's direction, approval, and agreement to pay the
498	charge for the visits.
499	(10) (7) Home health agency personnel may withhold or
500	withdraw cardiopulmonary resuscitation if presented with an
501	order not to resuscitate executed pursuant to s. 401.45. The
502	agency shall adopt rules providing for the implementation of
503	such orders. Home health personnel and agencies shall not be
504	subject to criminal prosecution or civil liability, nor be
505	considered to have engaged in negligent or unprofessional
506	conduct, for withholding or withdrawing cardiopulmonary
507	resuscitation pursuant to such an order and rules adopted by the
508	agency.
509	Section 11. Subsection (11) of section 408.802, Florida
510	Statutes, is repealed.
511	Section 12. Paragraphs (e), (f), and (g) of subsection (15)
512	of section 409.912, Florida Statutes, are repealed.
513	Section 13. Subsection (2) of section 429.12, Florida
514	Statutes, is repealed.
515	Section 14. Subsection (5) of section 429.23, Florida
516	Statutes, is repealed.
517	Section 15. Section 429.911(2)(b), Florida Statutes, is
518	repealed.
519	Section 16. This act shall take effect July 1, 2010.

# Page 18 of 18