${\bf By}$  Senator Bogdanoff

	25-00968A-12 20121292
1	A bill to be entitled
2	An act relating to nursing home facilities; amending
3	s. 400.021, F.S.; revising definitions of the terms
4	"geriatric outpatient clinic" and "resident care plan"
5	and defining the term "therapeutic spa services";
6	amending s. 400.141, F.S.; revising provisions
7	relating to facilities eligible to share programming
8	and staff; deleting requirements for the submission of
9	certain reports to the Agency for Health Care
10	Administration; creating s. 400.172, F.S.; providing
11	requirements for a nursing home facility operated by a
12	licensee that provides respite care services;
13	providing for rights of persons receiving respite care
14	in nursing home facilities; requiring a prospective
15	respite care recipient to provide certain information
16	to the nursing home facility; amending s. 400.141,
17	F.S.; revising provisions relating to other needed
18	services provided by licensed nursing home facilities,
19	including respite care, adult day, and therapeutic spa
20	services; amending s. 408.0435, F.S.; revising the
21	period of time allotted for approval of the nursing
22	home moratorium on a certificate of need for
23	additional community nursing home beds; amending s.
24	429.905, F.S.; defining the term "day" for purposes of
25	day care services provided to adults who are not
26	residents; amending s. 651.118, F.S.; providing a
27	funding limitation on sheltered nursing home beds used
28	to provide assisted living, rather than extended
29	congregate care services; authorizing certain sharing

# Page 1 of 10

	25-00968A-12 20121292
30	of areas, services, and staff between such sheltered
31	beds and nursing home beds in those facilities;
32	providing an effective date.
33	
34	WHEREAS, the Legislature recognizes that the use of nursing
35	homes has decreased over the past decade because of alternatives
36	that are now available to consumers, and
37	WHEREAS, nursing homes continue to be a valuable resource
38	and should be used to the fullest extent possible to provide
39	traditional nursing care to the most impaired persons as well as
40	providing services to frail or disabled persons who choose to
41	remain in the community or who may need a less skilled level of
42	care, and
43	WHEREAS, regulatory requirements should be flexible enough
44	to allow nursing homes to diversify but continue to include
45	sufficient protections to ensure the best care possible to
46	consumers, NOW, THEREFORE,
47	
48	Be It Enacted by the Legislature of the State of Florida:
49	
50	Section 1. Subsections (8) and (16) of section 400.021,
51	Florida Statutes, are amended, and subsection (19) is added to
52	that section, to read:
53	400.021 DefinitionsWhen used in this part, unless the
54	context otherwise requires, the term:
55	(8) "Geriatric outpatient clinic" means a site for
56	providing outpatient health care to persons 60 years of age or
57	older, which is staffed by a registered nurse <u>,</u> <del>or</del> a physician
58	assistant, or a licensed practical nurse under the direct

# Page 2 of 10

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

SB 1292

25-00968A-12 20121292 59 supervision of a registered nurse, advanced registered nurse 60 practitioner, physician assistant, or physician. 61 (16) "Resident care plan" means a written plan developed, 62 maintained, and reviewed not less than quarterly by a registered nurse, with participation from other facility staff and the 63 resident or his or her designee or legal representative, which 64 includes a comprehensive assessment of the needs of an 65 66 individual resident; the type and frequency of services required to provide the necessary care for the resident to attain or 67 68 maintain the highest practicable physical, mental, and 69 psychosocial well-being; a listing of services provided within 70 or outside the facility to meet those needs; and an explanation of service goals. The resident care plan must be signed by the 71 72 director of nursing or another registered nurse employed by the 73 facility to whom institutional responsibilities have been 74 delegated and by the resident, the resident's designee, or the 75 resident's legal representative. The facility may not use an 76 agency or temporary registered nurse to satisfy the foregoing 77 requirement and must document the institutional responsibilities 78 that have been delegated to the registered nurse. 79 (19) "Therapeutic spa services" means bathing, nail, and 80 hair care services and other similar services related to 81 personal hygiene. 82 Section 2. Paragraph (g) of subsection (1) of section 83 400.141, Florida Statutes, is amended to read: 84 400.141 Administration and management of nursing home 85 facilities.-86 (1) Every licensed facility shall comply with all 87 applicable standards and rules of the agency and shall:

#### Page 3 of 10

116

25-00968A-12 88 (q) If the facility has a standard license or is a Gold 89 Seal facility, exceeds the minimum required hours of licensed nursing and certified nursing assistant direct care per resident 90 91 per day, and is part of a continuing care facility licensed under chapter 651 or a retirement community that offers other 92 93 services pursuant to part III of this chapter or part I or part 94 III of chapter 429 on a single campus, be allowed to share 95 programming and staff. At the time of inspection and in the 96 semiannual report required pursuant to paragraph (o), a 97 continuing care facility or retirement community that uses this option must demonstrate through staffing records that minimum 98 99 staffing requirements for the facility were met. Licensed nurses 100 and certified nursing assistants who work in the nursing home 101 facility may be used to provide services elsewhere on campus if 102 the facility exceeds the minimum number of direct care hours 103 required per resident per day and the total number of residents 104 receiving direct care services from a licensed nurse or a 105 certified nursing assistant does not cause the facility to violate the staffing ratios required under s. 400.23(3)(a). 106 107 Compliance with the minimum staffing ratios must shall be based on the total number of residents receiving direct care services, 108 109 regardless of where they reside on campus. If the facility receives a conditional license, it may not share staff until the 110 conditional license status ends. This paragraph does not 111 112 restrict the agency's authority under federal or state law to 113 require additional staff if a facility is cited for deficiencies in care which are caused by an insufficient number of certified 114 115 nursing assistants or licensed nurses. The agency may adopt

#### 20121292

Page 4 of 10

rules for the documentation necessary to determine compliance

	25-00968A-12 20121292
117	with this provision.
118	Section 3. Section 400.172, Florida Statutes, is created to
119	read:
120	400.172 Respite care provided in nursing home facilities
121	(1) For each person admitted for respite care as authorized
122	under s. 400.141(1)(f), a nursing home facility operated by a
123	licensee must:
124	(a) Have a written abbreviated plan of care that, at a
125	minimum, includes nutritional requirements, medication orders,
126	physician orders, nursing assessments, and dietary preferences.
127	The nursing or physician assessments may take the place of all
128	other assessments required for full-time residents.
129	(b) Have a contract that, at a minimum, specifies the
130	services to be provided to a resident receiving respite care,
131	including charges for services, activities, equipment, emergency
132	medical services, and the administration of medications. If
133	multiple admissions for a single person for respite care are
134	anticipated, the original contract is valid for 1 year after the
135	date the contract is executed.
136	(c) Ensure that each resident is released to his or her
137	caregiver or an individual designated in writing by the
138	caregiver.
139	(2) A person admitted under the respite care program shall:
140	(a) Be exempt from department rules relating to the
141	discharge planning process.
142	(b) Be covered by the residents' rights specified in s.
143	400.022(1)(a)-(o) and (r)-(t). Funds or property of the resident
144	are not be considered trust funds subject to the requirements of
145	s. 400.022(1)(h) until the resident has been in the facility for

# Page 5 of 10

	25-00968A-12 20121292
146	more than 14 consecutive days.
147	(c) Be allowed to use his or her personal medications
148	during the respite stay if permitted by facility policy. The
149	facility must obtain a physician's order for the medications.
150	The caregiver may provide information regarding the medications
151	as part of the nursing assessment and that information must
152	agree with the physician's order. Medications shall be released
153	with the resident upon discharge in accordance with current
154	physician's orders.
155	(d) Be entitled to reside in the facility for a total of 60
156	days within a contract year or for a total of 60 days within a
157	calendar year if the contract is for less than 12 months.
158	However, each single stay may not exceed 14 days. If a stay
159	exceeds 14 consecutive days, the facility must comply with all
160	assessment and care planning requirements applicable to nursing
161	home residents.
162	(e) Reside in a licensed nursing home bed.
163	(3) A prospective respite care resident must provide
164	medical information from a physician, physician assistant, or
165	nurse practitioner and any other information provided by the
166	primary caregiver required by the facility before or when the
167	person is admitted to receive respite care. The medical
168	information must include a physician's order for respite care
169	and proof of a physical examination by a licensed physician,
170	physician assistant, or nurse practitioner. The physician's
171	order and physical examination may be used to provide
172	intermittent respite care for up to 12 months after the date the
173	order is written.
174	(4) The facility shall assume the duties of the primary

# Page 6 of 10

	25-00968A-12 20121292
175	caregiver. To ensure continuity of care and services, the
176	resident may retain his or her personal physician and shall have
177	access to medically necessary services such as physical therapy,
178	occupational therapy, or speech therapy, as needed. The facility
179	shall arrange for transportation of the resident to these
180	services, if necessary.
181	Section 4. Paragraph (f) of subsection (1) of section
182	400.141, Florida Statutes, is amended to read:
183	400.141 Administration and management of nursing home
184	facilities
185	(1) Every licensed facility shall comply with all
186	applicable standards and rules of the agency and shall:
187	(f) Be allowed and encouraged by the agency to provide
188	other needed services under certain conditions. If the facility
189	has a standard licensure status, <del>and has had no class I or class</del>
190	II deficiencies during the past 2 years or has been awarded a
191	Gold Seal under the program established in s. 400.235, it may be
192	encouraged by the agency to provide services, including, but not
193	limited to, respite, therapeutic spa, and adult day services to
194	nonresidents, which enable individuals to move in and out of the
195	facility. A facility is not subject to any additional licensure
196	requirements for providing these services. Respite care may be
197	offered to persons in need of short-term or temporary nursing
198	home services. Respite care must be provided in accordance with
199	this part <del>and rules adopted by the agency. However, the agency</del>
200	shall, by rule, adopt modified requirements for resident
201	assessment, resident care plans, resident contracts, physician
202	orders, and other provisions, as appropriate, for short-term or
203	temporary nursing home services. Providers of adult day services

# Page 7 of 10

25-00968A-12 20121292 204 must comply with the requirements of s. 429.905(2). The agency 205 shall allow for shared programming and staff in a facility which 206 meets minimum standards and offers services pursuant to this 207 paragraph, but, if the facility is cited for deficiencies in 208 patient care, may require additional staff and programs 209 appropriate to the needs of service recipients. A person who 210 receives respite care may not be counted as a resident of the 211 facility for purposes of the facility's licensed capacity unless that person receives 24-hour respite care. A person receiving 212 213 either respite care for 24 hours or longer or adult day services must be included when calculating minimum staffing for the 214 215 facility. Any costs and revenues generated by a nursing home 216 facility from nonresidential programs or services shall be 217 excluded from the calculations of Medicaid per diems for nursing 218 home institutional care reimbursement. 219 Section 5. Subsection (1) of section 408.0435, Florida 220 Statutes, is amended to read: 221 408.0435 Moratorium on nursing home certificates of need.-222 (1) Notwithstanding the establishment of need as provided 223 for in this chapter, a certificate of need for additional 224 community nursing home beds may not be approved by the agency

225 until Medicaid managed care is implemented statewide pursuant to 226 ss. 409.961-409.985 or October 1, 2016, whichever is <u>later</u> 227 earlier.

228 Section 6. Subsection (2) of section 429.905, Florida 229 Statutes, is amended to read:

230 429.905 Exemptions; monitoring of adult day care center 231 programs colocated with assisted living facilities or licensed 232 nursing home facilities.—

#### Page 8 of 10

25-00968A-1	2
2J UUJUUA I	

20121292

233 (2) A licensed assisted living facility, a licensed 234 hospital, or a licensed nursing home facility may provide 235 services during the day which include, but are not limited to, 236 social, health, therapeutic, recreational, nutritional, and 237 respite services, to adults who are not residents. Such a 238 facility need not be licensed as an adult day care center; 239 however, the agency must monitor the facility during the regular 240 inspection and at least biennially to ensure adequate space and sufficient staff. If an assisted living facility, a hospital, or 241 242 a nursing home holds itself out to the public as an adult day care center, it must be licensed as such and meet all standards 243 244 prescribed by statute and rule. For the purpose of this 245 subsection, the term "day" means any portion of a 24-hour day.

246Section 7. Subsection (8) of section 651.118, Florida247Statutes, is amended to read:

248 651.118 Agency for Health Care Administration; certificates
249 of need; sheltered beds; community beds.-

250 (8) A provider may petition the Agency for Health Care 251 Administration to use a designated number of sheltered nursing 252 home beds to provide assisted living extended congregate care as 253 defined in s. 429.02 if the beds are in a distinct area of the 254 nursing home which can be adapted to meet the requirements for 255 an assisted living facility as defined in s. 429.02 extended 256 congregate care. The provider may subsequently use such beds as 257 sheltered beds after notifying the agency of the intended 258 change. Any sheltered beds used to provide assisted living 259 extended congregate care pursuant to this subsection may not 260 qualify for funding under the Medicaid waiver. Any sheltered 261 beds used to provide assisted living extended congregate care

#### Page 9 of 10

	25-00968A-12 20121292
262	pursuant to this subsection may share common areas, services,
263	and staff with beds designated for nursing home care, provided
264	that all of the beds are under common ownership. For the
265	purposes of this subsection, fire and life safety codes
266	applicable to nursing home facilities shall apply.
267	Section 8. This act shall take effect July 1, 2012.