4	17868
---	-------

LEGISLATIVE ACTION

Senate House . Comm: RCS 04/18/2017 The Committee on Children, Families, and Elder Affairs (Grimsley) recommended the following: Senate Amendment (with title amendment) Delete lines 38 - 107 and insert: measures and survey data in 42 C.F.R. part 418 to determine the quality and effectiveness of hospice care for hospices licensed in the state. At a minimum, these outcome measures shall include a requirement that 50 percent of patients who report severe pain on a 0-to-10 scale must report a reduction to 5 or less by the

9 10

1 2 3

4

5

6 7

8

end of the 4th day of care on the hospice program.

417868

(2) <del>For hospices licensed in the state,</del> The department <del>of</del>
Elderly Affairs, in conjunction with the agency for Health Care
Administration, shall:
(a) Make available to the public the national hospice
outcome measures and survey data in a format that is
comprehensible by a layperson and that allows a consumer to
compare such measures of one or more hospices Consider and adopt
national initiatives, such as those developed by the national
hospice and Palliative Care Organization, to set benchmarks for
measuring the quality of hospice care provided in the state.
(b) Develop an annual report that analyzes and evaluates
the information collected under this act and any other data
collection or reporting provisions of law.
Section 2. Section 400.6096, Florida Statutes, is created
to read:
400.6096 Disposal of prescribed controlled substances
following the death of a patient in the home
(1) A hospice physician, nurse, or social worker is
authorized to assist in the disposal of a controlled substance
prescribed to a patient at the time of the patient's death
pursuant to the disposal regulations in 21 C.F.R. s. 1317.
(2) A hospice that assists in the disposal of a prescribed
controlled substance found in the patient's home at the time of
the patient's death must establish a written policy, procedure,
or system for acceptable disposal methods.
(3) A hospice physician, nurse, or social worker, upon the
patient's death and with the permission of a family member or a
caregiver of the patient, may assist in the disposal of an
unused controlled substance prescribed to the patient, pursuant

417868

4.0	
40	to the written policy, procedure, or system established under
41	subsection (2).
42	(4) The prescribed controlled substance disposal procedure
43	must be carried out in the patient's home. Hospice staff and
44	volunteers are not authorized to remove a prescribed controlled
45	substance from the patient's home.
46	Section 3. Section 400.611, Florida Statutes, is amended to
47	read:
48	400.611 Interdisciplinary records of care; confidentiality <u>;</u>
49	release of records
50	(1) <u>A hospice shall maintain</u> an up-to-date,
51	interdisciplinary record of care being given and patient and
52	family status <del>shall be kept</del> . Records shall contain pertinent
53	past and current medical, nursing, social, and other therapeutic
54	information and such other information that is necessary for the
55	safe and adequate care of the patient. Notations regarding all
56	aspects of care for the patient and family shall be made in the
57	record. When services are terminated, the record shall show the
58	date and reason for termination.
59	(2) Patient records shall be retained for a period of <u>6</u> $\frac{5}{2}$
60	years after termination of hospice services, unless otherwise
61	provided by law. In the case of a patient who is a minor, the $\underline{6-}$
62	year <del>5-year</del> period shall begin on the date the patient reaches
63	or would have reached the age of majority.
64	(3) <u>The interdisciplinary record of</u> patient <del>records of</del> care
65	and billing records are confidential.
66	(4) A hospice may not release a patient's interdisciplinary
67	record or any portion thereof, unless the person requesting the
68	information provides to the hospice:

CF.CF.03779

## 417868

69	(a) A patient authorization executed by the patient; or
70	legal guardian has given express written informed consent;
71	(b) In the case of an incapacitated patient, a patient
72	authorization executed prior to the patient's death by the
73	patient's then acting legal guardian, health care surrogate as
74	defined in s. 765.101(21), health care proxy as defined in s.
75	765.101(19), or agent under power of attorney;
76	
77	=========== T I T L E A M E N D M E N T =================================
78	And the title is amended as follows:
79	Delete line 6
80	and insert:
81	measures and survey data by a specified date and to
82	make such measures

Page 4 of 4