1	A bill to be entitled
2	An act relating to hospice care; amending s. 400.6005,
3	F.S.; revising legislative findings and intent;
4	amending s. 400.601, F.S.; redefining the term
5	"hospice"; defining the terms "hospice program" and
6	"seriously ill"; amending s. 400.60501, F.S.;
7	requiring the Department of Elderly Affairs, in
8	conjunction with the Agency for Health Care
9	Administration, to adopt by rule certain outcome
10	measures by a specified date; requiring the
11	department, in conjunction with the agency, to adopt
12	national hospice outcome measures and develop a system
13	for publicly reporting the measures; creating s.
14	400.6093, F.S.; authorizing hospices, or providers
15	operating under contract with a hospice, to provide
16	palliative care to seriously ill persons and their
17	family members; providing construction; amending s.
18	400.6095, F.S.; making technical changes; creating s.
19	400.6096, F.S.; authorizing a hospice to assist in the
20	disposal of certain prescribed controlled substances;
21	requiring a hospice that chooses to assist in the
22	disposals of certain prescribed controlled substances
23	to establish policies, procedures, and systems for the
24	disposals; authorizing a hospice physician, nurse, or
25	social worker to assist in the disposals of certain
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prescribed controlled substances; providing 26 27 requirements for such disposals; providing an 28 effective date. 29 Be It Enacted by the Legislature of the State of Florida: 30 31 32 Section 1. Section 400.6005, Florida Statutes, is amended 33 to read: 400.6005 Legislative findings and intent.-The Legislature 34 35 finds that a terminally ill patient individuals and their 36 families, who is are no longer pursuing curative medical 37 treatment and the patient's family $_{\mathcal{T}}$  should have the opportunity to select a support system that allows permits the patient to 38 exercise maximum independence and dignity during the final days 39 40 of life. The Legislature also finds that a seriously ill person and the person's family should have the opportunity to select a 41 42 support system that provides palliative care and supportive care 43 and allows the person to exercise maximum independence while 44 receiving such care. The Legislature finds that hospice care 45 provides a cost-effective and less intrusive form of medical 46 care while meeting the social, psychological, and spiritual needs of terminally ill patients and their families and 47 seriously ill persons and their families. The intent of this 48 part is to provide for the development, establishment, and 49 50 enforcement of basic standards to ensure the safe and adequate

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51 care of persons receiving hospice services.

52 Section 2. Section 400.601, Florida Statutes, is amended 53 to read:

400.601 Definitions.-As used in this part, the term:

55 (1) "Agency" means the Agency for Health Care 56 Administration.

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(2) "Department" means the Department of Elderly Affairs.
(3) "Hospice" means a centrally administered corporation or a limited liability company that provides a continuum of palliative <u>care</u> and supportive care for <u>a</u> the terminally ill patient and his or her family or a seriously ill person and his

62 or her family.

(4) "Hospice care team" means an interdisciplinary team of
qualified professionals and volunteers who, in consultation with
<u>a</u> the patient, the patient's family, and the patient's primary
or attending physician, collectively assess, coordinate, and
provide the appropriate palliative <u>care</u> and supportive care to
hospice patients and their families.

69 (5) "Hospice program" means a program offered by a hospice 70 which provides a continuum of palliative care and supportive 71 care for a patient and his or her family or a seriously ill 72 person and his or her family.

73 <u>(6) (5)</u> "Hospice residential unit" means a homelike living 74 facility, other than a facility licensed under other parts of 75 this chapter, under chapter 395, or under chapter 429, which

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76 that is operated by a hospice for the benefit of its patients 77 and is considered by a patient who lives there to be his or her 78 primary residence.

79 (7) (6) "Hospice services" means items and services 80 furnished to a patient and family by a hospice, or by others under arrangements with such a program, in a place of temporary 81 82 or permanent residence used as the patient's home for the 83 purpose of maintaining the patient at home; or, if the patient needs short-term institutionalization, the services shall be 84 85 furnished in cooperation with those contracted institutions or in the hospice inpatient facility. 86

87 (8) (7) "Palliative care" means services or interventions
 88 that which are not curative but are provided for the reduction
 89 or abatement of pain and human suffering.

90 <u>(9) (8)</u> "Patient" means the terminally ill individual 91 receiving hospice services.

92 (10)(9) "Plan of care" means a written assessment by the 93 hospice of each patient's and family's needs and preferences, 94 and the services to be provided by the hospice to meet those 95 needs.

96 <u>(11) "Seriously ill" means that the person has a</u> 97 <u>persistent medical condition that materially and adversely</u> 98 <u>affects the person's quality of life; that is burdensome in its</u> 99 <u>symptoms, pain, or caregiver stress; and that may be managed</u> 100 through palliative care.

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(12) (10) "Terminally ill" means that the patient has a 101 102 medical prognosis that his or her life expectancy is 1 year or 103 less if the illness runs its normal course. Section 3. Section 400.60501, Florida Statutes, is amended 104 105 to read: 106 400.60501 Outcome measures; adoption of federal quality 107 measures; public reporting national initiatives; annual report.-No later than December 31, 2019 2007, the department 108 (1)of Elderly Affairs, in conjunction with the agency for Health 109 110 Care Administration, shall adopt develop outcome measures to determine the quality and effectiveness of hospice care for 111 112 hospices licensed in the state. At a minimum, these outcome 113 measures shall include a requirement that 50 percent of patients 114 who report severe pain on a 0-to-10 scale must report a 115 reduction to 5 or less by the end of the 4th day of care on the 116 hospice program. 117 (2) For hospices licensed in the state, the department of 118 Elderly Affairs, in conjunction with the agency for Health Care 119 Administration, shall: Consider and Adopt national initiatives, such as those 120 (a) 121 developed by the national hospice outcome measures found in 42 122 C.F.R. part 418 and Palliative Care Organization, to set benchmarks for measuring the quality of hospice care provided in 123 124 the state. 125 Develop a system for publicly reporting these national (b) Page 5 of 8

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126	hospice outcome measures identified as useful consumer
127	information.
128	<u>(c)</u> Develop an annual report that analyzes and
129	evaluates the information collected under this act and any other
130	data collection or reporting provisions of law.
131	Section 4. Section 400.6093, Florida Statutes, is created
132	to read:
133	400.6093 Community palliative care services
134	Notwithstanding any other provision of law, a hospice may
135	provide palliative care to a seriously ill person and his or her
136	family members. Such care may be provided directly by the
137	hospice or by other providers under contract with the hospice.
138	This section does not preclude the provision of palliative care
139	to seriously ill persons by any other health care provider or
140	health care facility that is otherwise authorized to provide
141	such care. This section does not mandate or prescribe additional
142	Medicaid coverage.
143	Section 5. Subsections (1) and (2) of section 400.6095,
144	Florida Statutes, are amended to read:
145	400.6095 Patient admission; assessment; plan of care;
146	discharge; death
147	(1) Each hospice shall make its services available to all
148	patients terminally ill persons and their families without
149	regard to age, gender, national origin, sexual orientation,
150	disability, diagnosis, cost of therapy, ability to pay, or life

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circumstances. A hospice may shall not impose any value or 151 152 belief system on its patients or their families and shall 153 respect the values and belief systems of its patients and their 154 families. 155 (2)Admission of a patient with a terminal illness to a 156 hospice program shall be made upon a diagnosis and prognosis of 157 terminal illness by a physician licensed pursuant to chapter 458 158 or chapter 459 and must shall be dependent on the expressed 159 request and informed consent of the patient. 160 Section 6. Section 400.6096, Florida Statutes, is created to read: 161 162 400.6096 Disposal of prescribed controlled substances following the death of a patient in the home.-163 164 (1) A hospice that assists in the disposal of a prescribed 165 controlled substance in the patient's home under this section 166 must establish clearly defined policies, procedures, and systems 167 for acceptable disposal methods. 168 (2) A hospice physician, nurse, or social worker, upon the 169 patient's death and with the permission of a family member or a 170 caregiver of the patient, is authorized to assist in the 171 disposal in the patient's home of an unused controlled substance 172 prescribed to the decedent pursuant to the procedures 173 established under subsection (1). 174 Established disposal procedures must be carried out in (3) the patient's home. Hospice staff and volunteers are not 175

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176	authorized to remove a prescribed controlled substance from the
177	patient's home.
178	(4) Disposal of a prescribed controlled substance in the
179	patient's home is optional for a hospice. The authorization
180	provided in subsection (2) does not require a hospice to
181	establish policies, procedures, or systems for acceptable
182	disposal methods of a prescribed controlled substance in the
183	patient's home.
184	Section 7. This act shall take effect July 1, 2017.

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