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LEGISLATIVE ACTION

Senate

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House

Appropriations Subcommittee on Health and Human Services
(Passidomo) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. Section 409.9134, Florida Statutes, is created
to read:

409.9134 Pilot project for the treatment of infants with
neonatal abstinence syndrome.—

(1) For purposes of this section, the term:

(a) "Infant" includes both a newborn and an infant, as



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11 those terms are defined in s. 383.145.

12 (b) "Neonatal abstinence syndrome" means the postnatal
13 opioid withdrawal experienced by an infant who is exposed in
14 utero to opioids or agents used to treat maternal opioid
15 addiction.

16 (c) "Stabilized" means that, within reasonable medical
17 probability, no material deterioration of the infant's condition
18 is likely to result from, or occur during, the transfer of the
19 infant from the hospital to a facility licensed under this
20 section for ongoing treatment as provided in this section.

21 (2) The Agency for Health Care Administration, in
22 consultation with the department, shall establish a pilot
23 project to license one or more facilities in the state to treat
24 infants who suffer from neonatal abstinence syndrome, providing
25 a community-based care option, rather than hospitalization,
26 after an infant has been stabilized. The pilot project shall
27 begin on January 1, 2019, and expire on June 30, 2021.

28 (3) The agency, in consultation with the department, shall
29 adopt by rule minimum licensure standards for facilities
30 licensed to provide care under this section.

31 (a) Licensure standards adopted by the agency must include,
32 at a minimum:

33 1. Requirements for the physical plant and maintenance of
34 facilities;

35 2. Compliance with local building and firesafety codes;

36 3. The number, training, and qualifications of essential
37 personnel employed by and working under contract with the
38 facility;

39 4. Staffing requirements intended to ensure adequate



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40 staffing to protect the safety of infants being treated in the
41 facility;

42 5. Sanitation requirements for the facility;

43 6. Requirements for programs, basic services, and care
44 provided to infants treated by the facility and to their
45 parents;

46 7. Requirements for the maintenance of medical records,
47 data, and other relevant information related to infants treated
48 by the facility; and

49 8. Requirements for application for initial licensure and
50 licensure renewal.

51 (b) The agency may establish by rule an initial licensure
52 fee and a biennial renewal fee, each not to exceed \$3,000.

53 (4) In order to obtain a license and participate in the
54 pilot project, a facility must, at a minimum:

55 (a) Be a private, nonprofit Florida corporation;

56 (b) Have an on-call medical director;

57 (c) Adhere to all applicable standards established by the
58 agency by rule pursuant to subsection (3); and

59 (d) Provide the agency with a plan to:

60 1. Provide 24-hour nursing and nurturing care to infants
61 with neonatal abstinence syndrome;

62 2. Provide for the medical needs of an infant being treated
63 at the facility, including, but not limited to, pharmacotherapy
64 and nutrition management;

65 3. Maintain a transfer agreement with a nearby hospital
66 that is not more than a 30-minute drive from the licensed
67 facility;

68 4. Provide comfortable, residential-type accommodations for



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69 an eligible mother to breastfeed her infant or to reside at the
70 facility while her infant is being treated at that facility, if
71 not contraindicated and if funding is available for residential
72 services for the mother;

73 5. Provide or make available parenting education,
74 breastfeeding education, counseling, and other resources to the
75 parents of infants being treated at the facility, including, if
76 necessary, a referral for addiction treatment services;

77 6. Contract and coordinate with Medicaid managed medical
78 assistance plans as appropriate to ensure that services for both
79 the infant and the parent or the infant's representative are
80 timely and unduplicated;

81 7. Identify, and refer parents to, social service
82 providers, such as Healthy Start or the MomCare network, Healthy
83 Families, Early Steps, and Head Start programs, before
84 discharge, if appropriate; and

85 8. Apply to enroll as a Medicaid provider by no later than
86 30 days after receiving a license.

87 (5) A facility licensed under this section may not accept
88 an infant for treatment if the infant has a serious or life-
89 threatening condition other than neonatal abstinence syndrome.

90 (6) A facility licensed under this section may not treat an
91 infant for longer than 6 months.

92 (7) The facility may require the mother or visitors to
93 vacate the facility at any time if:

94 (a) The facility requests that the mother's breast milk be
95 tested for contaminants and she refuses to allow her breast milk
96 to be tested;

97 (b) The facility requests that the mother be drug tested



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98 and the mother refuses to consent to a drug test;

99 (c) The facility determines that the mother poses a risk to
100 her infant; or

101 (d) The facility determines that the mother or a visitor is
102 threatening, intimidating, or posing a risk to any infant in the
103 facility, any other mother or visitor in the facility, or
104 facility staff.

105
106 If the facility requires the mother or other visitor to vacate
107 its premises, a licensed health care professional who is an
108 employee or contracted staff at the facility may refuse to allow
109 the mother, parent, caregiver, or legal custodian to remove the
110 infant from the facility and may detain the infant at the
111 facility pursuant to s. 39.395, if the provisions of that
112 section are met.

113 (8) The agency shall require each licensed facility to meet
114 and maintain the representations made in the facility's plan
115 submitted for licensure pursuant to paragraph (4) (d) or
116 substantially similar provisions that do not degrade the
117 facility's ability to provide the same level of service. The
118 agency shall require level 2 background screening pursuant to
119 chapter 435 and s. 408.809 for facility personnel as required in
120 s. 408.809(1) (e).

121 (9) Facilities licensed under this section are subject to
122 part II of chapter 408.

123 (10) Facilities licensed under this section are not
124 required to obtain a certificate of need.

125 (11) (a) The Department of Health shall contract with a
126 state university to study the risks, benefits, cost



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127 differentials, and the transition of infants to the social
128 service providers identified in paragraph (4) (d) for the
129 treatment of infants with neonatal abstinence syndrome in
130 hospital settings and facilities licensed under the pilot
131 project. By June 30, 2020, the Department of Health shall report
132 to the President of the Senate and the Speaker of the House of
133 Representatives the study results and recommendations for the
134 continuation or expansion of the pilot project.

135 (b) The contract must also require the establishment of
136 baseline data for longitudinal studies on the neurodevelopmental
137 outcomes of infants with neonatal abstinence syndrome, and may
138 require the evaluation of outcomes and length of stay in
139 facilities for nonpharmacologic and pharmacologic treatment of
140 neonatal abstinence syndrome.

141 (c) Facilities licensed under this section, licensed
142 hospitals providing services for infants born with neonatal
143 abstinence syndrome, and Medicaid managed medical assistance
144 plans shall provide relevant financial and medical data
145 consistent with the Health Insurance Portability and
146 Accountability Act of 1996 (HIPAA) and related regulations to
147 the contracted university for research and studies authorized
148 pursuant to this subsection.

149 Section 2. Upon this act becoming law, the Agency for
150 Health Care Administration shall begin the process of adopting
151 rules pursuant to s. 409.9134, Florida Statutes, and shall begin
152 the process of applying for any Medicaid waivers, or other
153 similar permissions, necessary to ensure that facilities
154 licensed pursuant to s. 409.9134, Florida Statutes, are able to
155 enroll as providers in the Medicaid program.



156 Section 3. For the 2018-2019 fiscal year, the sum of
157 \$200,000 is appropriated from the Health Care Trust Fund to the
158 Agency for Health Care Administration for the purpose of
159 implementing s. 409.9134, Florida Statutes.

160 Section 4. For the 2018-2019 fiscal year, the sum of
161 \$140,000 in nonrecurring funds is appropriated from the Maternal
162 and Child Health Block Grant Trust Fund to the Department of
163 Health for the purpose of contracting with a state university to
164 conduct the study required pursuant to s. 409.9134(11), Florida
165 Statutes.

166 Section 5. For the 2019-2020 fiscal year, the sum of
167 \$70,000 in nonrecurring funds is appropriated from the Maternal
168 and Child Health Block Grant Trust Fund to the Department of
169 Health for the purpose of completing the study required pursuant
170 to s. 409.9134(11), Florida Statutes.

171 Section 6. This act shall take effect upon becoming a law.

172

173 ===== T I T L E A M E N D M E N T =====

174 And the title is amended as follows:

175 Delete everything before the enacting clause
176 and insert:

177 A bill to be entitled
178 An act relating to a neonatal abstinence syndrome
179 pilot project; creating s. 409.9134, F.S.; defining
180 terms; requiring the Agency for Health Care
181 Administration, in consultation with the Department of
182 Children and Families, to establish a pilot project to
183 license one or more facilities to treat infants who
184 suffer from neonatal abstinence syndrome in certain



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185 circumstances; providing a start and end date for the
186 pilot project; requiring the agency, in consultation
187 with the department, to adopt by rule minimum
188 licensure standards for facilities providing care
189 under this section; requiring certain criteria to be
190 included in licensure standards; authorizing the
191 agency to establish by rule an initial licensure fee
192 and a biennial renewal fee; establishing minimum
193 requirements for a facility to obtain and maintain
194 licensure and to participate in the pilot project;
195 prohibiting a facility licensed under this section
196 from accepting certain infants for treatment or from
197 treating an infant for longer than 6 months;
198 specifying when a facility may require a mother or
199 visitor to vacate its premises; allowing certain
200 health care professionals to prevent the removal of an
201 infant from the facility under certain conditions;
202 requiring background screening of certain facility
203 personnel; subjecting facilities licensed under this
204 section to specified licensing requirements; providing
205 that facilities licensed under this section are not
206 required to obtain a certificate of need; requiring
207 the Department of Health to contract with a state
208 university to study certain components of the pilot
209 project and establish certain baseline data for
210 studies on the neurodevelopmental outcomes of infants
211 with neonatal abstinence syndrome; requiring the
212 Department of Health to report results of the study to
213 the Legislature by a certain date; requiring



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214 facilities licensed under this section, hospitals
215 meeting certain criteria, and Medicaid managed medical
216 assistance plans to provide to the contracted
217 university relevant financial and medical data meeting
218 certain standards, under certain conditions; requiring
219 the agency to begin rulemaking and apply for certain
220 Medicaid waivers after the act becomes a law;
221 providing specific appropriations; providing an
222 effective date.