

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"; creating s. 400.6093, F.S.;  
 7           authorizing hospices, or providers operating under  
 8           contract with a hospice, to provide palliative care to  
 9           seriously ill patients and their family members;  
 10          providing construction; amending ss. 400.609 and  
 11          400.6095, F.S.; conforming terminology; providing an  
 12          effective date.

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 14   Be It Enacted by the Legislature of the State of Florida:

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 16          Section 1. Section 400.6005, Florida Statutes, is amended  
 17          to read:

18          400.6005 Legislative findings and intent.—The Legislature  
 19          finds that a terminally ill patient ~~individuals and their~~  
 20          ~~families,~~ who is ~~are~~ no longer pursuing curative medical  
 21          treatment and his or her family, ~~should~~ have the opportunity to  
 22          select a support system that allows ~~permits~~ the patient to  
 23          exercise maximum independence and dignity during the final days  
 24          of life. The Legislature also finds that a seriously ill patient  
 25          and his or her family should have the opportunity to select a

26 | support system that provides palliative care and supportive care  
27 | and allows the patient to exercise maximum independence while  
28 | receiving such care. The Legislature finds that hospice care  
29 | provides a cost-effective and less intrusive form of medical  
30 | care while meeting the social, psychological, and spiritual  
31 | needs of terminally ill and seriously ill patients and their  
32 | families. The intent of this part is to provide for the  
33 | development, establishment, and enforcement of basic standards  
34 | to ensure the safe and adequate care of persons receiving  
35 | hospice services.

36 | Section 2. Section 400.601, Florida Statutes, is amended  
37 | to read:

38 | 400.601 Definitions.—As used in this part, the term:

39 | (1) "Agency" means the Agency for Health Care  
40 | Administration.

41 | (2) "Department" means the Department of Elderly Affairs.

42 | (3) "Hospice" means a centrally administered corporation  
43 | or a limited liability company that provides a continuum of  
44 | palliative care and supportive care for a ~~the terminally ill~~  
45 | patient and his or her family.

46 | (4) "Hospice care team" means an interdisciplinary team of  
47 | qualified professionals and volunteers who, in consultation with  
48 | a ~~the~~ patient, the patient's family, and the patient's primary  
49 | or attending physician, collectively assess, coordinate, and  
50 | provide the appropriate palliative care and supportive care to

51 hospice patients and their families.

52 (5) "Hospice program" means a program offered by a hospice  
 53 which provides a continuum of palliative care and supportive  
 54 care for a patient and his or her family.

55 (6)~~(5)~~ "Hospice residential unit" means a homelike living  
 56 facility, other than a facility licensed under other parts of  
 57 this chapter, under chapter 395, or under chapter 429, which  
 58 ~~that~~ is operated by a hospice for the benefit of its patients  
 59 and is considered by a patient who lives there to be his or her  
 60 primary residence.

61 (7)~~(6)~~ "Hospice services" means items and services  
 62 furnished to a patient and family by a hospice, or by others  
 63 under arrangements with such a program, in a place of temporary  
 64 or permanent residence used as the patient's home for the  
 65 purpose of maintaining the patient at home; or, if the patient  
 66 needs short-term institutionalization, the services shall be  
 67 furnished in cooperation with those contracted institutions or  
 68 in the hospice inpatient facility.

69 (8)~~(7)~~ "Palliative care" means services or interventions  
 70 furnished to a patient and his or her family which are not  
 71 curative but are provided for the reduction or abatement of pain  
 72 and human suffering.

73 (9)~~(8)~~ "Patient" means the terminally ill or seriously ill  
 74 individual receiving hospice services from a hospice.

75 (10)~~(9)~~ "Plan of care" means a written assessment by the

76 hospice of each patient's and family's needs and preferences,  
 77 and the services to be provided by the hospice to meet those  
 78 needs.

79 (11) "Seriously ill" or "serious illness" means that the  
 80 patient has a life-threatening medical condition that may  
 81 continue indefinitely and may be managed through palliative  
 82 care.

83 (12)~~(10)~~ "Terminally ill" or "terminal illness" means that  
 84 the patient has a medical prognosis that his or her life  
 85 expectancy is 1 year or less if the illness runs its normal  
 86 course.

87 Section 3. Section 400.609, Florida Statutes, is amended  
 88 to read:

89 400.609 Hospice services.—Each hospice shall provide a  
 90 continuum of hospice services which affords ~~afford~~ the  
 91 terminally ill patient and his or her ~~the~~ family ~~of the patient~~  
 92 a range of service delivery which can be tailored to specific  
 93 needs and preferences of the patient and his or her family at  
 94 any point ~~in time~~ throughout the length of care ~~for the~~  
 95 ~~terminally ill patient~~ and during the bereavement period. These  
 96 services must be available 24 hours a day, 7 days a week, and  
 97 must include:

98 (1) SERVICES.—

99 (a) The hospice care team shall directly provide the  
 100 following core services: nursing services, social work services,

101 | pastoral or counseling services, dietary counseling, and  
102 | bereavement counseling services. Physician services may be  
103 | provided by the hospice directly or through contract. A hospice  
104 | may also use contracted staff if necessary to supplement hospice  
105 | employees in order to meet the needs of patients during periods  
106 | of peak patient loads or under extraordinary circumstances.

107 |       (b) Each hospice must also provide or arrange for such  
108 | additional services as are needed to meet the palliative and  
109 | support needs of the patient and his or her family. These  
110 | services may include, but are not limited to, physical therapy,  
111 | occupational therapy, speech therapy, massage therapy, home  
112 | health aide services, infusion therapy, provision of medical  
113 | supplies and durable medical equipment, day care, homemaker and  
114 | chore services, and funeral services.

115 |       (2) HOSPICE HOME CARE.—Hospice care and services provided  
116 | in a private home shall be the primary form of care. The goal of  
117 | hospice home care shall be to provide adequate training and  
118 | support to encourage self-sufficiency and allow patients and  
119 | families to maintain the patient comfortably at home for as long  
120 | as possible. The services of the hospice home care program shall  
121 | be of the highest quality and shall be provided by the hospice  
122 | care team.

123 |       (3) HOSPICE RESIDENTIAL CARE.—Hospice care and services,  
124 | to the extent practicable and compatible with the needs and  
125 | preferences of the patient, may be provided by the hospice care

126 | team to a patient living in an assisted living facility, adult  
127 | family-care home, nursing home, hospice residential unit or  
128 | facility, or other nondomestic place of permanent or temporary  
129 | residence. A resident or patient living in an assisted living  
130 | facility, adult family-care home, nursing home, or other  
131 | facility subject to state licensing who has been admitted to a  
132 | hospice program shall be considered a hospice patient, and the  
133 | hospice program shall be responsible for coordinating and  
134 | ensuring the delivery of hospice care and services to such  
135 | person pursuant to the standards and requirements of this part  
136 | and rules adopted under this part.

137 |       (4) HOSPICE INPATIENT CARE.—The inpatient component of  
138 | care is a short-term adjunct to hospice home care and hospice  
139 | residential care and shall be used only for pain control,  
140 | symptom management, or respite care. The total number of  
141 | inpatient days for all hospice patients in any 12-month period  
142 | may not exceed 20 percent of the total number of hospice days  
143 | for all the hospice patients of the licensed hospice. Hospice  
144 | inpatient care shall be under the direct administration of the  
145 | hospice, whether the inpatient facility is a freestanding  
146 | hospice facility or part of a facility licensed pursuant to  
147 | chapter 395 or part II of this chapter. The facility or rooms  
148 | within a facility used for the hospice inpatient component of  
149 | care shall be arranged, administered, and managed in such a  
150 | manner as to provide privacy, dignity, comfort, warmth, and

151 safety for the ~~terminally ill~~ patient and his or her ~~the~~ family.  
152 Every possible accommodation must be made to create as homelike  
153 an atmosphere as practicable. To facilitate overnight family  
154 visitation within the facility, rooms must be limited to no more  
155 than double occupancy; and, whenever possible, both occupants  
156 must be hospice patients. There must be a continuum of care and  
157 a continuity of caregivers between the hospice home program and  
158 the inpatient aspect of care to the extent practicable and  
159 compatible with the preferences of the patient and his or her  
160 family. Fees charged for hospice inpatient care, whether  
161 provided directly by the hospice or through contract, must be  
162 made available upon request to the Agency for Health Care  
163 Administration. The hours for daily operation and the location  
164 of the place where the services are provided must be determined,  
165 to the extent practicable, by the accessibility of such services  
166 to the patients and families served by the hospice.

167 (5) BEREAVEMENT COUNSELING.—The hospice bereavement  
168 program must be a comprehensive program, under professional  
169 supervision, that provides a continuum of formal and informal  
170 supportive services to the family for a minimum of 1 year after  
171 the patient's death. This subsection does not constitute an  
172 additional exemption from chapter 490 or chapter 491.

173 Section 4. Section 400.6093, Florida Statutes, is created  
174 to read:

175 400.6093 Community palliative care services.—A hospice may

176 provide palliative care to a seriously ill patient and his or  
 177 her family. Such palliative care may be provided to manage the  
 178 side effects of treatment for a progressive disease or a medical  
 179 or surgical condition. Such care may also be provided directly  
 180 by the hospice or by other providers under contract with the  
 181 hospice. This section does not preclude the provision of  
 182 palliative care to seriously ill patients by any other health  
 183 care provider or health care facility that is otherwise  
 184 authorized to provide such care. This section does not mandate  
 185 or prescribe additional Medicaid coverage.

186 Section 5. Subsections (1) and (2) of section 400.6095,  
 187 Florida Statutes, are amended to read:

188 400.6095 Patient admission; assessment; plan of care;  
 189 discharge; death.—

190 (1) Each hospice shall make its services available to all  
 191 terminally ill and seriously ill patients ~~persons~~ and their  
 192 families without regard to age, gender, national origin, sexual  
 193 orientation, disability, diagnosis, cost of therapy, ability to  
 194 pay, or life circumstances. A hospice may ~~shall~~ not impose any  
 195 value or belief system on its patients or their families and  
 196 shall respect the values and belief systems of its patients and  
 197 their families.

198 (2) Admission of a patient to a hospice program shall be  
 199 made upon a diagnosis and prognosis of terminal illness or  
 200 serious illness by a physician licensed pursuant to chapter 458

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201 | or chapter 459 and must ~~shall~~ be dependent on the expressed  
202 | request and informed consent of the patient.

203 |       Section 6. This act shall take effect July 1, 2018.