By Senator Gibson

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A bill to be entitled

An act relating to nursing home accountability; amending s. 400.141, F.S.; requiring licensed nursing home facilities to comply with certain rules adopted by the Agency for Health Care Administration; requiring the agency to adopt rules establishing a medical loss ratio for the disposition of Medicaid revenue in excess of expenses for nursing home facilities; providing the method of calculating the medical loss ratio; requiring nursing home facilities to pay any excess Medicaid revenue to the agency by a specified date under certain circumstances; providing for the collection of such payments; requiring the agency to use refunds of excess Medicaid revenue to fund certain initiatives; requiring nursing home facilities to limit their use of excess Medicaid revenue for management salaries and limit rates paid for contracted staffing and services; prohibiting nursing home facilities from using more than a specified percentage of Medicaid funding on executive and managerial salaries; prohibiting nursing home facilities from contracting with certain management companies for staffing or services at a rate exceeding a specified percentage; providing an exception; requiring each nursing home facility to post certain maximum rates charged at the facility on its Internet website and update the rates annually; requiring each nursing home facility to post a list of its owners on its Internet website and submit such list to the

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agency, to be posted on the agency's website; requiring nursing home facilities to update the list within a specified timeframe; requiring each nursing home facility to post summaries of certain contracts and agreements on its Internet website within a specified timeframe; requiring the agency to adopt rules; amending s. 408.061, F.S.; specifying that a nursing home's or its home office's actual financial experience is its audited actual experience for purposes of financial reporting; providing an effective date.

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

Section 1. Paragraphs (x), (y), and (z) are added to subsection (1) of section 400.141, Florida Statutes, to read:

400.141 Administration and management of nursing home facilities.—

- (1) Every licensed facility shall comply with all applicable standards and rules of the agency and shall:
- (x) Comply with rules adopted by the agency which establish a medical loss ratio for the disposition of revenue in excess of expenses for nursing home facilities.
- 1. The agency shall adopt rules requiring that a minimum of 75 percent of the total Medicaid revenue of a nursing home facility be spent on costs related to patient care, 55 percent of which must be spent on direct care, as defined by agency rule. Patient care costs are calculated by combining direct care and indirect care costs pursuant to agency rule.

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2. If a nursing home facility fails to spend at least 75 percent of its total Medicaid revenue on patient care costs as defined by agency rule, the nursing home facility must pay such excess revenue to the agency by January 1 of the following fiscal year. The agency shall collect such payments by any method it deems necessary, including, but not limited to, deductions or offsets from payments made under the Medicaid program. Refunds of excess Medicaid revenue collected by the agency shall be used to fund initiatives that improve the quality of care or quality of life for residents of nursing home facilities. Such initiatives may include, but need not be limited to, surveillance and inspection activities; activities designed to improve the quality, performance, and compliance of poorly performing nursing home facilities; training and education for facility staff; and activities to encourage resident and consumer involvement in initiatives to improve the quality of care or quality of life for residents of nursing home facilities.

- (y) Limit the use of excess Medicaid revenue for management salaries and limit rates paid for contracted staffing or services so as not to exceed the current market rates for such staffing and services.
- 1. A nursing home facility may not use more than 15 percent of its total expenses funded through the Medicaid program for executive or managerial salaries.
- 2. A nursing home facility may not contract for staffing or services with any management company that has an ownership interest in the facility at a rate exceeding 10 percent of that for the facility's in-house staffing or service costs, unless an

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emergency has been declared as determined by the agency or as defined by agency rule.

The agency shall adopt rules to implement this paragraph.

- (z) Post on its Internet website, and update annually, the maximum rates to be charged for the use of facilities and the provision of services, including the rates for services paid through public and private payor sources.
- 1. A nursing home facility shall post on its Internet website a list of all facility owners and submit such list to the agency for posting on the agency's Internet website. Such list must be updated within 30 days after any change is made to the list.
- 2. A nursing home facility shall also post on its Internet website a summary of any contract or agreement entered into by the facility for the provision of goods or services in which the facility has an ownership interest in the contracted company and pays for such goods or services using any portion of Medicaid funds. Such summaries must be posted within 30 days after such contract or agreement is executed.

The agency shall adopt rules to implement this paragraph.

Section 2. Subsections (5) and (6) of section 408.061, Florida Statutes, are amended to read:

- 408.061 Data collection; uniform systems of financial reporting; information relating to physician charges; confidential information; immunity.—
- (5) Within 120 days after the end of its fiscal year, each nursing home as defined in s. 408.07 shall file with the agency,

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on forms adopted by the agency and based on the uniform system of financial reporting, its actual financial experience for that fiscal year, including expenditures, revenues, and statistical measures. Such data may be based on internal financial reports that are certified to be complete and accurate by the chief financial officer of the nursing home. A nursing home's actual financial experience shall be its audited actual experience.

This audited actual experience must include the fiscal year-end balance sheet, income statement, statement of cash flow, and statement of retained earnings and must be submitted to the agency in addition to the information filed in the uniform system of financial reporting. The financial statements must tie to the information submitted in the uniform system of financial reporting, and a crosswalk must be submitted along with the financial statements.

(6) Within 120 days after the end of its fiscal year, the home office of each nursing home as defined in s. 408.07 shall file with the agency, on forms adopted by the agency and based on the uniform system of financial reporting, its actual financial experience for that fiscal year, including expenditures, revenues, and statistical measures. Such data may be based on internal financial reports that are certified to be complete and accurate by the chief financial officer of the nursing home. The actual financial experience of the home office of a nursing home shall be its audited actual experience. This audited actual experience must include the fiscal year-end balance sheet, income statement, statement of cash flow, and statement of retained earnings and must be submitted to the agency in addition to the information filed in the uniform

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146 system of financial reporting. The financial statements must tie

147 to the information submitted in the uniform system of financial

148 reporting, and a crosswalk must be submitted along with the

149 audited financial statements.

Section 3. This act shall take effect October 1, 2022.