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1 A bill to be entitled
2 An act relating to assisted living facilities;
3 amending s. 394.4574, F.S.; providing that Medicaid
4 managed care plans are responsible for enrolled mental
5 health residents; providing that managing entities
6 under contract with the Department of Children and
7 Families are responsible for mental health residents
8 who are not enrolled with a Medicaid managed care
9 plan; requiring that a community living support plan
10 be completed and provided to the administrator of a
11 facility within a specified period after the
12 resident's admission; restricting the agency from
13 imposing a fine if the facility has requested the
14 community living support plan; requiring that the
15 community living support plan be updated when there is
16 a significant change to the mental health resident's
17 behavioral health; requiring a mental health resident
18 case manager to keep certain records of interactions
19 with the resident and to make the records available
20 for inspection; requiring retention of the records for
21 a specified period; requiring the responsible entity
22 to ensure monitoring and implementation of community
23 living support plans and cooperative agreements;
24 amending s. 400.0074, F.S.; requiring a local
25 ombudsman council to conduct comprehensive onsite
26 administrative assessments; requiring a local council
27 to conduct an exit consultation with the facility
28 administrator or administrator designee; amending s.
29 400.0078, F.S.; requiring that a long-term care

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30 resident or resident representative be informed of
31 resident immunity from retaliatory action for
32 presenting grievances or exercising resident rights;
33 amending s. 409.212, F.S.; increasing the cap on
34 additional supplementation that a person may receive
35 under certain conditions; amending s. 429.02, F.S.;

36 revising the definition of the term "limited nursing
37 services"; amending s. 429.07, F.S.; requiring that an
38 extended congregate care license be issued to certain
39 facilities licensed as assisted living facilities
40 under certain circumstances and authorizing the
41 issuance of such a license if a specified condition is
42 met; providing that the initial extended congregate
43 care license is provisional under certain
44 circumstances; requiring a licensee to notify the
45 agency of acceptance of a resident who qualifies for
46 extended congregate care services; requiring the
47 agency to inspect the facility for compliance with
48 license requirements; requiring the licensee to
49 suspend extended congregate care services under
50 certain circumstances; revising the frequency of
51 monitoring visits to a facility by a registered nurse
52 representing the agency; authorizing the agency to
53 waive a required yearly monitoring visit under certain
54 circumstances; authorizing the agency to deny or
55 revoke a facility's extended congregate care license;
56 authorizing the agency to waive the required yearly
57 monitoring visit for a facility that is licensed to
58 provide limited nursing services under certain

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59 circumstances; amending s. 429.075, F.S.; requiring an
60 assisted living facility that serves mental health
61 residents to obtain a limited mental health license;
62 requiring a limited mental health facility to provide
63 written evidence that certain documentation was sent
64 to the department within a specified period; amending
65 s. 429.14, F.S.; requiring the agency to deny or
66 revoke the license of an assisted living facility
67 under certain circumstances; requiring the agency to
68 impose an immediate moratorium on the license of an
69 assisted living facility under certain circumstances;
70 deleting a requirement that the agency provide a list
71 of facilities with denied, suspended, or revoked
72 licenses to the Department of Business and
73 Professional Regulation; exempting a facility from the
74 45-day notice requirement if it is required to
75 relocate residents; amending s. 429.178, F.S.;

76 conforming cross-references; amending s. 429.19, F.S.;

77 requiring the Agency for Health Care Administration to
78 impose a fine if a facility is not in compliance with
79 certain background screening requirements; amending s.
80 429.256, F.S.; revising the term "assistance with
81 self-administration of medication" as it relates to
82 the Assisted Living Facilities Act; amending s.
83 429.27, F.S.; revising the amount of cash for which a
84 facility may provide safekeeping for a resident;
85 amending s. 429.28, F.S.; providing notice
86 requirements regarding confidentiality of resident
87 identity in a complaint made to the State Long-Term

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88 Care Ombudsman Program or a local long-term care
89 ombudsman council and immunity from retaliatory action
90 for presenting grievances or exercising resident
91 rights; requiring the agency to adopt rules; providing
92 a fine if a facility terminates an individual's
93 residency after the filing of a complaint if good
94 cause is not shown for the termination; amending s.
95 429.34, F.S.; requiring certain persons to report
96 elder abuse in assisted living facilities; requiring
97 the agency to regularly inspect a licensed assisted
98 living facility; requiring the agency to conduct
99 periodic inspections; amending s. 429.41, F.S.;
100 providing that certain staffing requirements apply
101 only to residents in continuing care facilities who
102 are receiving certain services; amending s. 429.52,
103 F.S.; requiring each newly hired employee of an
104 assisted living facility to attend a preservice
105 orientation; requiring the employee and administrator
106 to sign a statement of completion and keep the
107 statement in the employee's personnel record;
108 requiring additional hours of training for assistance
109 with medication; creating s. 429.55, F.S.; directing
110 the agency to create an assisted living facility
111 consumer information website; providing criteria for
112 webpage content; providing content requirements;
113 authorizing the agency to adopt rules; providing an
114 effective date.

115
116 Be It Enacted by the Legislature of the State of Florida:

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117
118 Section 1. Section 394.4574, Florida Statutes, is amended
119 to read:

120 394.4574 ~~Department~~ Responsibilities for coordination of
121 services for a mental health resident who resides in an assisted
122 living facility that holds a limited mental health license.—

123 (1) As used in this section, the term “mental health
124 resident,” ~~for purposes of this section,~~ means an individual who
125 receives social security disability income due to a mental
126 disorder as determined by the Social Security Administration or
127 receives supplemental security income due to a mental disorder
128 as determined by the Social Security Administration and receives
129 optional state supplementation.

130 (2) Medicaid managed care plans are responsible for
131 Medicaid-enrolled mental health residents, and managing entities
132 under contract with the department are responsible for mental
133 health residents who are not enrolled in a Medicaid health plan.
134 A Medicaid managed care plan or a managing entity shall ~~The~~
135 ~~department must~~ ensure that:

136 (a) A mental health resident has been assessed by a
137 psychiatrist, clinical psychologist, clinical social worker, or
138 psychiatric nurse, or an individual who is supervised by one of
139 these professionals, and determined to be appropriate to reside
140 in an assisted living facility. The documentation must be
141 provided to the administrator of the facility within 30 days
142 after the mental health resident has been admitted to the
143 facility. An evaluation completed upon discharge from a state
144 mental hospital meets the requirements of this subsection
145 related to appropriateness for placement as a mental health

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146 resident if it was completed within 90 days before ~~prior to~~
147 admission to the facility.

148 (b) A cooperative agreement, as required in s. 429.075, is
149 developed by ~~between~~ the mental health care services provider
150 that serves a mental health resident and the administrator of
151 the assisted living facility with a limited mental health
152 license in which the mental health resident is living. ~~Any~~
153 ~~entity that provides Medicaid prepaid health plan services shall~~
154 ~~ensure the appropriate coordination of health care services with~~
155 ~~an assisted living facility in cases where a Medicaid recipient~~
156 ~~is both a member of the entity's prepaid health plan and a~~
157 ~~resident of the assisted living facility. If the entity is at~~
158 ~~risk for Medicaid targeted case management and behavioral health~~
159 ~~services, the entity shall inform the assisted living facility~~
160 ~~of the procedures to follow should an emergent condition arise.~~

161 (c) The community living support plan, as defined in s.
162 429.02, has been prepared by a mental health resident and his or
163 her a mental health case manager ~~of that resident~~ in
164 consultation with the administrator of the facility or the
165 administrator's designee. The plan must be completed and
166 provided to the administrator of the assisted living facility
167 with a limited mental health license in which the mental health
168 resident lives upon the resident's admission. The support plan
169 and the agreement may be in one document. The agency may not
170 cite an assisted living facility for not possessing a resident's
171 community living support plan if the facility can document that
172 it has requested the plan for that resident.

173 (d) The assisted living facility with a limited mental
174 health license is provided with documentation that the

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175 individual meets the definition of a mental health resident.

176 (e) The mental health services provider assigns a case
177 manager to each mental health resident for whom the entity is
178 responsible ~~who lives in an assisted living facility with a~~
179 ~~limited mental health license~~. The case manager shall coordinate
180 ~~is responsible for coordinating~~ the development ~~of~~ and
181 implementation of the community living support plan defined in
182 s. 429.02. The plan must be updated at least annually, or when
183 there is a significant change in the resident's behavioral
184 health status. Each case manager shall keep a record of the date
185 and time of any face-to-face interaction with the resident and
186 make the record available to the responsible entity for
187 inspection. The record must be retained for at least 2 years
188 after the date of the most recent interaction.

189 (f) Adequate and consistent monitoring and enforcement of
190 community living support plans and cooperative agreements are
191 conducted by the resident's case manager.

192 (g) Concerns are reported to the appropriate regulatory
193 oversight organization if a regulated provider fails to deliver
194 appropriate services or otherwise acts in a manner that has the
195 potential to result in harm to the resident.

196 (3) The Secretary of Children and Families, in consultation
197 with the Agency for Health Care Administration, shall ~~annually~~
198 require each district administrator to develop, with community
199 input, a detailed annual plan that demonstrates ~~detailed plans~~
200 ~~that demonstrate~~ how the district will ensure the provision of
201 state-funded mental health and substance abuse treatment
202 services to residents of assisted living facilities that hold a
203 limited mental health license. This plan ~~These plans~~ must be

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204 consistent with the substance abuse and mental health district
205 plan developed pursuant to s. 394.75 and must address case
206 management services; access to consumer-operated drop-in
207 centers; access to services during evenings, weekends, and
208 holidays; supervision of the clinical needs of the residents;
209 and access to emergency psychiatric care.

210 Section 2. Subsection (1) of section 400.0074, Florida
211 Statutes, is amended, and paragraph (h) is added to subsection
212 (2) of that section, to read:

213 400.0074 Local ombudsman council onsite administrative
214 assessments.—

215 (1) In addition to any specific investigation conducted
216 pursuant to a complaint, the local council shall conduct, at
217 least annually, an onsite administrative assessment of each
218 nursing home, assisted living facility, and adult family-care
219 home within its jurisdiction. This administrative assessment
220 must be comprehensive in nature and must ~~shall~~ focus on factors
221 affecting residents' ~~the~~ rights, health, safety, and welfare ~~of~~
222 ~~the residents~~. Each local council is encouraged to conduct a
223 similar onsite administrative assessment of each additional
224 long-term care facility within its jurisdiction.

225 (2) An onsite administrative assessment conducted by a
226 local council shall be subject to the following conditions:

227 (h) Upon completion of an administrative assessment, the
228 local council shall conduct an exit consultation with the
229 facility administrator or administrator's designee to discuss
230 issues and concerns in areas affecting residents' rights,
231 health, safety, and welfare and, if needed, make recommendations
232 for improvement.

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233 Section 3. Subsection (2) of section 400.0078, Florida
234 Statutes, is amended to read:

235 400.0078 Citizen access to State Long-Term Care Ombudsman
236 Program services.—

237 (2) ~~Every resident or representative of a resident shall~~
238 ~~receive,~~ Upon admission to a long-term care facility, each
239 resident or representative of a resident must receive
240 information regarding the purpose of the State Long-Term Care
241 Ombudsman Program, the statewide toll-free telephone number for
242 receiving complaints, information that retaliatory action cannot
243 be taken against a resident for presenting grievances or for
244 exercising any other resident right, and other relevant
245 information regarding how to contact the program. Each resident
246 or his or her representative ~~Residents or their representatives~~
247 must be furnished additional copies of this information upon
248 request.

249 Section 4. Paragraph (c) of subsection (4) of section
250 409.212, Florida Statutes, is amended to read:

251 409.212 Optional supplementation.—

252 (4) In addition to the amount of optional supplementation
253 provided by the state, a person may receive additional
254 supplementation from third parties to contribute to his or her
255 cost of care. Additional supplementation may be provided under
256 the following conditions:

257 (c) The additional supplementation shall not exceed four
258 ~~two~~ times the provider rate recognized under the optional state
259 supplementation program.

260 Section 5. Subsection (13) of section 429.02, Florida
261 Statutes, is amended to read:

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262 429.02 Definitions.—When used in this part, the term:

263 (13) "Limited nursing services" means acts that may be
264 performed by a person licensed under ~~pursuant to~~ part I of
265 chapter 464 ~~by persons licensed thereunder while carrying out~~
266 ~~their professional duties but limited to those acts which the~~
267 ~~department specifies by rule. Acts which may be specified by~~
268 ~~rule as allowable~~ Limited nursing services shall be for persons
269 who meet the admission criteria established by the department
270 for assisted living facilities and shall not be complex enough
271 to require 24-hour nursing supervision and may include such
272 services as the application and care of routine dressings, and
273 care of casts, braces, and splints.

274 Section 6. Paragraphs (b) and (c) of subsection (3) of
275 section 429.07, Florida Statutes, are amended to read:

276 429.07 License required; fee.—

277 (3) In addition to the requirements of s. 408.806, each
278 license granted by the agency must state the type of care for
279 which the license is granted. Licenses shall be issued for one
280 or more of the following categories of care: standard, extended
281 congregate care, limited nursing services, or limited mental
282 health.

283 (b) An extended congregate care license shall be issued to
284 each facility that has been licensed as an assisted living
285 facility for 2 or more years and that provides services
286 ~~facilities providing~~, directly or through contract, ~~services~~
287 beyond those authorized in paragraph (a), including services
288 performed by persons licensed under part I of chapter 464 and
289 supportive services, as defined by rule, to persons who would
290 otherwise be disqualified from continued residence in a facility

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291 licensed under this part. An extended congregate care license
292 may be issued to a facility that has a provisional extended
293 congregate care license and meets the requirements for licensure
294 under subparagraph 2. The primary purpose of extended congregate
295 care services is to allow residents the option of remaining in a
296 familiar setting from which they would otherwise be disqualified
297 for continued residency as they become more impaired. A facility
298 licensed to provide extended congregate care services may also
299 admit an individual who exceeds the admission criteria for a
300 facility with a standard license if the individual is determined
301 appropriate for admission to the extended congregate care
302 facility.

303 1. In order for extended congregate care services to be
304 provided, the agency must first determine that all requirements
305 established in law and rule are met and must specifically
306 designate, on the facility's license, that such services may be
307 provided and whether the designation applies to all or part of
308 the facility. This ~~Such~~ designation may be made at the time of
309 initial licensure or licensure renewal ~~relicensure~~, or upon
310 request in writing by a licensee under this part and part II of
311 chapter 408. The notification of approval or the denial of the
312 request shall be made in accordance with part II of chapter 408.
313 Each existing facility that qualifies ~~facilities qualifying~~ to
314 provide extended congregate care services must have maintained a
315 standard license and may not have been subject to administrative
316 sanctions during the previous 2 years, or since initial
317 licensure if the facility has been licensed for less than 2
318 years, for any of the following reasons:

319 a. A class I or class II violation;

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320 b. Three or more repeat or recurring class III violations
321 of identical or similar resident care standards from which a
322 pattern of noncompliance is found by the agency;

323 c. Three or more class III violations that were not
324 corrected in accordance with the corrective action plan approved
325 by the agency;

326 d. Violation of resident care standards which results in
327 requiring the facility to employ the services of a consultant
328 pharmacist or consultant dietitian;

329 e. Denial, suspension, or revocation of a license for
330 another facility licensed under this part in which the applicant
331 for an extended congregate care license has at least 25 percent
332 ownership interest; or

333 f. Imposition of a moratorium pursuant to this part or part
334 II of chapter 408 or initiation of injunctive proceedings.

335
336 The agency may deny or revoke a facility's extended congregate
337 care license if it fails to meet the criteria for an extended
338 congregate care license as provided in this subparagraph.

339 2. If an assisted living facility has been licensed for
340 less than 2 years, the initial extended congregate care license
341 must be provisional and may not exceed 6 months. The licensee
342 shall notify the agency, in writing, when it admits at least one
343 extended congregate care resident, after which an unannounced
344 inspection shall be made to determine compliance with
345 requirements of an extended congregate care license. A licensee
346 that has a provisional extended congregate care license which
347 demonstrates compliance with all of the requirements of an
348 extended congregate care license during the inspection shall be

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349 issued an extended congregate care license. In addition to
350 sanctions authorized under this part, if violations are found
351 during the inspection and the licensee fails to demonstrate
352 compliance with all assisted living requirements during a
353 followup inspection, the licensee shall immediately suspend
354 extended congregate care services, and the provisional extended
355 congregate care license expires. The agency may extend the
356 provisional license for not more than 1 month in order to
357 complete a followup visit.

358 3.2. A facility that is licensed to provide extended
359 congregate care services shall maintain a written progress
360 report on each person who receives services which describes the
361 type, amount, duration, scope, and outcome of services that are
362 rendered and the general status of the resident's health. A
363 registered nurse, or appropriate designee, representing the
364 agency shall visit the facility at least twice a year ~~quarterly~~
365 to monitor residents who are receiving extended congregate care
366 services and to determine if the facility is in compliance with
367 this part, part II of chapter 408, and relevant rules. One of
368 the visits may be in conjunction with the regular survey. The
369 monitoring visits may be provided through contractual
370 arrangements with appropriate community agencies. A registered
371 nurse shall serve as part of the team that inspects the
372 facility. The agency may waive one of the required yearly
373 monitoring visits for a facility that has:

374 a. Held an extended congregate care license for at least 24
375 months; ~~been licensed for at least 24 months to provide extended~~
376 ~~congregate care services, if, during the inspection, the~~
377 ~~registered nurse determines that extended congregate care~~

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378 ~~services are being provided appropriately, and if the facility~~
379 ~~has~~

380 b. No class I or class II violations and no uncorrected
381 class III violations; and-

382 c. No ombudsman council complaints that resulted in a
383 citation for licensure ~~The agency must first consult with the~~
384 ~~long-term care ombudsman council for the area in which the~~
385 ~~facility is located to determine if any complaints have been~~
386 ~~made and substantiated about the quality of services or care.~~
387 ~~The agency may not waive one of the required yearly monitoring~~
388 ~~visits if complaints have been made and substantiated.~~

389 4.3. A facility that is licensed to provide extended
390 congregate care services must:

391 a. Demonstrate the capability to meet unanticipated
392 resident service needs.

393 b. Offer a physical environment that promotes a homelike
394 setting, provides for resident privacy, promotes resident
395 independence, and allows sufficient congregate space as defined
396 by rule.

397 c. Have sufficient staff available, taking into account the
398 physical plant and firesafety features of the building, to
399 assist with the evacuation of residents in an emergency.

400 d. Adopt and follow policies and procedures that maximize
401 resident independence, dignity, choice, and decisionmaking to
402 permit residents to age in place, so that moves due to changes
403 in functional status are minimized or avoided.

404 e. Allow residents or, if applicable, a resident's
405 representative, designee, surrogate, guardian, or attorney in
406 fact to make a variety of personal choices, participate in

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407 developing service plans, and share responsibility in
408 decisionmaking.

409 f. Implement the concept of managed risk.

410 g. Provide, directly or through contract, the services of a
411 person licensed under part I of chapter 464.

412 h. In addition to the training mandated in s. 429.52,
413 provide specialized training as defined by rule for facility
414 staff.

415 5.4. A facility that is licensed to provide extended
416 congregate care services is exempt from the criteria for
417 continued residency set forth in rules adopted under s. 429.41.
418 A licensed facility must adopt its own requirements within
419 guidelines for continued residency set forth by rule. However,
420 the facility may not serve residents who require 24-hour nursing
421 supervision. A licensed facility that provides extended
422 congregate care services must also provide each resident with a
423 written copy of facility policies governing admission and
424 retention.

425 ~~5. The primary purpose of extended congregate care services~~
426 ~~is to allow residents, as they become more impaired, the option~~
427 ~~of remaining in a familiar setting from which they would~~
428 ~~otherwise be disqualified for continued residency. A facility~~
429 ~~licensed to provide extended congregate care services may also~~
430 ~~admit an individual who exceeds the admission criteria for a~~
431 ~~facility with a standard license, if the individual is~~
432 ~~determined appropriate for admission to the extended congregate~~
433 ~~care facility.~~

434 6. Before the admission of an individual to a facility
435 licensed to provide extended congregate care services, the

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436 individual must undergo a medical examination as provided in s.
437 429.26(4) and the facility must develop a preliminary service
438 plan for the individual.

439 7. ~~If~~ When a facility can no longer provide or arrange for
440 services in accordance with the resident's service plan and
441 needs and the facility's policy, the facility must ~~shall~~ make
442 arrangements for relocating the person in accordance with s.
443 429.28(1)(k).

444 ~~8. Failure to provide extended congregate care services may~~
445 ~~result in denial of extended congregate care license renewal.~~

446 (c) A limited nursing services license shall be issued to a
447 facility that provides services beyond those authorized in
448 paragraph (a) and as specified in this paragraph.

449 1. In order for limited nursing services to be provided in
450 a facility licensed under this part, the agency must first
451 determine that all requirements established in law and rule are
452 met and must specifically designate, on the facility's license,
453 that such services may be provided. This ~~Such~~ designation may be
454 made at the time of initial licensure or licensure renewal
455 ~~relicensure~~, or upon request in writing by a licensee under this
456 part and part II of chapter 408. Notification of approval or
457 denial of such request shall be made in accordance with part II
458 of chapter 408. An existing facility that qualifies ~~facilities~~
459 ~~qualifying~~ to provide limited nursing services must ~~shall~~ have
460 maintained a standard license and may not have been subject to
461 administrative sanctions that affect the health, safety, and
462 welfare of residents for the previous 2 years or since initial
463 licensure if the facility has been licensed for less than 2
464 years.

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465 2. A facility ~~Facilities~~ that is ~~are~~ licensed to provide
466 limited nursing services shall maintain a written progress
467 report on each person who receives such nursing services. The~~r~~,
468 ~~which~~ report must describe ~~describes~~ the type, amount, duration,
469 scope, and outcome of services that are rendered and the general
470 status of the resident's health. A registered nurse representing
471 the agency shall visit the facility ~~such facilities~~ at least
472 annually ~~twice a year~~ to monitor residents who are receiving
473 limited nursing services and to determine if the facility is in
474 compliance with applicable provisions of this part, part II of
475 chapter 408, and related rules. The monitoring visits may be
476 provided through contractual arrangements with appropriate
477 community agencies. A registered nurse shall also serve as part
478 of the team that inspects such facility. Visits may be in
479 conjunction with other agency inspections. The agency may waive
480 the required yearly monitoring visit for a facility that has:

481 a. Had a limited nursing services license for at least 24
482 months;

483 b. No class I or class II violations and no uncorrected
484 class III violations; and

485 c. No ombudsman council complaints that resulted in a
486 citation for licensure.

487 3. A person who receives limited nursing services under
488 this part must meet the admission criteria established by the
489 agency for assisted living facilities. When a resident no longer
490 meets the admission criteria for a facility licensed under this
491 part, arrangements for relocating the person shall be made in
492 accordance with s. 429.28(1)(k), unless the facility is licensed
493 to provide extended congregate care services.

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494 Section 7. Section 429.075, Florida Statutes, is amended to
495 read:

496 429.075 Limited mental health license.—An assisted living
497 facility that serves one ~~three~~ or more mental health residents
498 must obtain a limited mental health license.

499 (1) To obtain a limited mental health license, a facility
500 must hold a standard license as an assisted living facility,
501 must not have any current uncorrected ~~deficiencies or~~
502 violations, and must ensure that, within 6 months after
503 receiving a limited mental health license, the facility
504 administrator and the staff of the facility who are in direct
505 contact with mental health residents must complete training of
506 no less than 6 hours related to their duties. This ~~Such~~
507 designation may be made at the time of initial licensure or
508 licensure renewal ~~relicensure~~ or upon request in writing by a
509 licensee under this part and part II of chapter 408.
510 Notification of approval or denial of such request shall be made
511 in accordance with this part, part II of chapter 408, and
512 applicable rules. This training must ~~will~~ be provided by or
513 approved by the Department of Children and Families.

514 (2) A facility that is ~~Facilities~~ licensed to provide
515 services to mental health residents must ~~shall~~ provide
516 appropriate supervision and staffing to provide for the health,
517 safety, and welfare of such residents.

518 (3) A facility that has a limited mental health license
519 must:

520 (a) Have a copy of each mental health resident's community
521 living support plan and the cooperative agreement with the
522 mental health care services provider or provide written evidence

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523 that a request for the community living support plan and the
524 cooperative agreement was sent to the Medicaid managed care plan
525 or managing entity under contract with the Department of
526 Children and Families within 72 hours after admission. The
527 support plan and the agreement may be combined.

528 (b) Have documentation ~~that is~~ provided by the Department
529 of Children and Families that each mental health resident has
530 been assessed and determined to be able to live in the community
531 in an assisted living facility that has ~~with~~ a limited mental
532 health license or provide written evidence that a request for
533 documentation was sent to the department within 72 hours after
534 admission.

535 (c) Make the community living support plan available for
536 inspection by the resident, the resident's legal guardian or,
537 ~~the resident's~~ health care surrogate, and other individuals who
538 have a lawful basis for reviewing this document.

539 (d) Assist the mental health resident in carrying out the
540 activities identified in the resident's ~~individual's~~ community
541 living support plan.

542 (4) A facility that has ~~with~~ a limited mental health
543 license may enter into a cooperative agreement with a private
544 mental health provider. For purposes of the limited mental
545 health license, the private mental health provider may act as
546 the case manager.

547 Section 8. Section 429.14, Florida Statutes, is amended to
548 read:

549 429.14 Administrative penalties.—

550 (1) In addition to the requirements of part II of chapter
551 408, the agency may deny, revoke, and suspend any license issued

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552 under this part and impose an administrative fine in the manner
553 provided in chapter 120 against a licensee for a violation of
554 ~~any provision of this part, part II of chapter 408, or~~
555 applicable rules, or for any of the following actions by a
556 licensee, ~~for the actions of any person subject to level 2~~
557 background screening under s. 408.809, or ~~for the actions of any~~
558 facility staff ~~employee~~:

559 (a) An intentional or negligent act seriously affecting the
560 health, safety, or welfare of a resident of the facility.

561 (b) A ~~The~~ determination by the agency that the owner lacks
562 the financial ability to provide continuing adequate care to
563 residents.

564 (c) Misappropriation or conversion of the property of a
565 resident of the facility.

566 (d) Failure to follow the criteria and procedures provided
567 under part I of chapter 394 relating to the transportation,
568 voluntary admission, and involuntary examination of a facility
569 resident.

570 (e) A citation for ~~of~~ any of the following violations
571 ~~deficiencies~~ as specified in s. 429.19:

- 572 1. One or more cited class I violations ~~deficiencies~~.
573 2. Three or more cited class II violations ~~deficiencies~~.
574 3. Five or more cited class III violations ~~deficiencies~~
575 that have been cited on a single survey and have not been
576 corrected within the times specified.

577 (f) Failure to comply with the background screening
578 standards of this part, s. 408.809(1), or chapter 435.

579 (g) Violation of a moratorium.

580 (h) Failure of the license applicant, the licensee during

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581 licensure renewal ~~relicensure~~, or a licensee that holds a
582 provisional license to meet the minimum license requirements of
583 this part, or related rules, at the time of license application
584 or renewal.

585 (i) An intentional or negligent life-threatening act in
586 violation of the uniform firesafety standards for assisted
587 living facilities or other firesafety standards which ~~that~~
588 threatens the health, safety, or welfare of a resident of a
589 facility, as communicated to the agency by the local authority
590 having jurisdiction or the State Fire Marshal.

591 (j) Knowingly operating any unlicensed facility or
592 providing without a license any service that must be licensed
593 under this chapter or chapter 400.

594 (k) Any act constituting a ground upon which application
595 for a license may be denied.

596 (2) Upon notification by the local authority having
597 jurisdiction or by the State Fire Marshal, the agency may deny
598 or revoke the license of an assisted living facility that fails
599 to correct cited fire code violations that affect or threaten
600 the health, safety, or welfare of a resident of a facility.

601 (3) The agency may deny or revoke a license of an ~~to any~~
602 applicant or controlling interest as defined in part II of
603 chapter 408 which has or had a 25 percent ~~25 percent~~ or greater
604 financial or ownership interest in any other facility that is
605 licensed under this part, or in any entity licensed by this
606 state or another state to provide health or residential care, if
607 that ~~which~~ facility or entity during the 5 years before ~~prior to~~
608 the application for a license closed due to financial inability
609 to operate; had a receiver appointed or a license denied,

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610 suspended, or revoked; was subject to a moratorium; or had an
611 injunctive proceeding initiated against it.

612 (4) The agency shall deny or revoke the license of an
613 assisted living facility if any of the following apply:

614 (a) There are two moratoria, issued pursuant to this part
615 or part II of chapter 408, within a 2-year period which are
616 imposed by final order.

617 (b) The facility is cited for two or more class I
618 violations arising from unrelated circumstances during the same
619 survey or investigation.

620 (c) The facility is cited for two or more class I
621 violations arising from separate surveys or investigations
622 within a 2-year period ~~that has two or more class I violations~~
623 ~~that are similar or identical to violations identified by the~~
624 ~~agency during a survey, inspection, monitoring visit, or~~
625 ~~complaint investigation occurring within the previous 2 years.~~

626 (5) An action taken by the agency to suspend, deny, or
627 revoke a facility's license under this part or part II of
628 chapter 408, in which the agency claims that the facility owner
629 or an employee of the facility has threatened the health,
630 safety, or welfare of a resident of the facility, shall be heard
631 by the Division of Administrative Hearings of the Department of
632 Management Services within 120 days after receipt of the
633 facility's request for a hearing, unless that time limitation is
634 waived by both parties. The administrative law judge shall ~~must~~
635 render a decision within 30 days after receipt of a proposed
636 recommended order.

637 (6) As provided under s. 408.814, the agency shall impose
638 an immediate moratorium on an assisted living facility that

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639 fails to provide the agency access to the facility or prohibits
640 the agency from conducting a regulatory inspection. The licensee
641 may not restrict agency staff in accessing and copying records,
642 at the agency's expense, or in conducting confidential
643 interviews with facility staff or any individual who receives
644 services from the facility ~~provide to the Division of Hotels and~~
645 ~~Restaurants of the Department of Business and Professional~~
646 ~~Regulation, on a monthly basis, a list of those assisted living~~
647 ~~facilities that have had their licenses denied, suspended, or~~
648 ~~revoked or that are involved in an appellate proceeding pursuant~~
649 ~~to s. 120.60 related to the denial, suspension, or revocation of~~
650 ~~a license.~~

651 (7) Agency notification of a license suspension or
652 revocation, or denial of a license renewal, shall be posted and
653 visible to the public at the facility.

654 (8) If a facility is required to relocate some or all of
655 its residents due to agency action, that facility is exempt from
656 the 45 days' notice requirement imposed under s. 429.28(1)(k).
657 This subsection does not exempt the facility from any deadline
658 for corrective action set by the agency.

659 Section 9. Paragraphs (a) and (b) of subsection (2) of
660 section 429.178, Florida Statutes, are amended to read:

661 429.178 Special care for persons with Alzheimer's disease
662 or other related disorders.—

663 (2) (a) An individual who is employed by a facility that
664 provides special care for residents who have ~~with~~ Alzheimer's
665 disease or other related disorders, and who has regular contact
666 with such residents, must complete up to 4 hours of initial
667 dementia-specific training developed or approved by the

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668 department. The training must ~~shall~~ be completed within 3 months
669 after beginning employment and ~~shall~~ satisfy the core training
670 requirements of s. 429.52(3)(g) ~~s. 429.52(2)(g)~~.

671 (b) A direct caregiver who is employed by a facility that
672 provides special care for residents who have ~~with~~ Alzheimer's
673 disease or other related disorders, and who provides direct care
674 to such residents, must complete the required initial training
675 and 4 additional hours of training developed or approved by the
676 department. The training must ~~shall~~ be completed within 9 months
677 after beginning employment and ~~shall~~ satisfy the core training
678 requirements of s. 429.52(3)(g) ~~s. 429.52(2)(g)~~.

679 Section 10. Paragraph (e) is added to subsection (2) of
680 section 429.19, Florida Statutes, to read:

681 429.19 Violations; imposition of administrative fines;
682 grounds.—

683 (2) Each violation of this part and adopted rules shall be
684 classified according to the nature of the violation and the
685 gravity of its probable effect on facility residents. The agency
686 shall indicate the classification on the written notice of the
687 violation as follows:

688 (e) Regardless of the class of violation cited, instead of
689 the fine amounts listed in paragraphs (a)-(d), the agency shall
690 impose an administrative fine of \$500 if a facility is found not
691 to be in compliance with the background screening requirements
692 as provided in s. 408.809.

693 Section 11. Subsection (3) and paragraph (c) of subsection
694 (4) of section 429.256, Florida Statutes, are amended to read:

695 429.256 Assistance with self-administration of medication.—

696 (3) Assistance with self-administration of medication

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697 includes:

698 (a) Taking the medication, in its previously dispensed,
699 properly labeled container, including an insulin syringe that is
700 prefilled with the proper dosage by a pharmacist and an insulin
701 pen that is prefilled by the manufacturer, from where it is
702 stored, and bringing it to the resident.

703 (b) In the presence of the resident, reading the label,
704 opening the container, removing a prescribed amount of
705 medication from the container, and closing the container.

706 (c) Placing an oral dosage in the resident's hand or
707 placing the dosage in another container and helping the resident
708 by lifting the container to his or her mouth.

709 (d) Applying topical medications.

710 (e) Returning the medication container to proper storage.

711 (f) Keeping a record of when a resident receives assistance
712 with self-administration under this section.

713 (g) Assisting with the use of a nebulizer, including
714 removing the cap of a nebulizer, opening the unit dose of
715 nebulizer solution, and pouring the prescribed premeasured dose
716 of medication into the dispensing cup of the nebulizer.

717 (h) Using a glucometer to perform blood-glucose level
718 checks.

719 (i) Assisting with putting on and taking off antiembolism
720 stockings.

721 (j) Assisting with applying and removing an oxygen cannula,
722 but not with titrating the prescribed oxygen settings.

723 (k) Assisting with the use of a continuous positive airway
724 pressure (CPAP) device, but not with titrating the prescribed
725 setting of the device.

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726 (l) Assisting with measuring vital signs.

727 (m) Assisting with colostomy bags.

728 (4) Assistance with self-administration does not include:

729 ~~(c) Administration of medications through intermittent~~
730 ~~positive pressure breathing machines or a nebulizer.~~

731 Section 12. Subsection (3) of section 429.27, Florida
732 Statutes, is amended to read:

733 429.27 Property and personal affairs of residents.—

734 (3) A facility, upon mutual consent with the resident,
735 shall provide for the safekeeping in the facility of personal
736 effects not in excess of \$500 and funds of the resident not in
737 excess of \$500 ~~\$200~~ cash, and shall keep complete and accurate
738 records of all such funds and personal effects received. If a
739 resident is absent from a facility for 24 hours or more, the
740 facility may provide for the safekeeping of the resident's
741 personal effects in excess of \$500.

742 Section 13. Subsections (2), (5), and (6) and paragraph (a)
743 of subsection (3) of section 429.28, Florida Statutes, are
744 amended to read:

745 429.28 Resident bill of rights.—

746 (2) The administrator of a facility shall ensure that a
747 written notice of the rights, obligations, and prohibitions set
748 forth in this part is posted in a prominent place in each
749 facility and read or explained to residents who cannot read. The
750 ~~This~~ notice must ~~shall~~ include the name, address, and telephone
751 numbers of the local ombudsman council, the ~~and~~ central abuse
752 hotline, and, if ~~when~~ applicable, Disability Rights Florida ~~the~~
753 ~~Advocacy Center for Persons with Disabilities, Inc., and the~~
754 ~~Florida local advocacy council~~, where complaints may be lodged.

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755 The notice must state that a complaint made to the Office of
756 State Long-Term Care Ombudsman or a local long-term care
757 ombudsman council, the names and identities of the residents
758 involved in the complaint, and the identity of complainants are
759 kept confidential pursuant to s. 400.0077 and that retaliatory
760 action cannot be taken against a resident for presenting
761 grievances or for exercising any other resident right. The
762 facility must ensure a resident's access to a telephone to call
763 the local ombudsman council, central abuse hotline, and
764 Disability Rights Florida Advocacy Center for Persons with
765 Disabilities, Inc., and the Florida local advocacy council.

766 (3) (a) The agency shall conduct a survey to determine
767 general compliance with facility standards and compliance with
768 residents' rights as a prerequisite to initial licensure or
769 licensure renewal. The agency shall adopt rules in consultation
770 with the department for uniform standards and criteria that will
771 be used to determine compliance with facility standards and
772 residents' rights.

773 (5) A ~~No~~ facility or employee of a facility may not serve
774 notice upon a resident to leave the premises or take any other
775 retaliatory action against any person who:

776 (a) Exercises any right set forth in this section.

777 (b) Appears as a witness in any hearing, inside or outside
778 the facility.

779 (c) Files a civil action alleging a violation of the
780 provisions of this part or notifies a state attorney or the
781 Attorney General of a possible violation of such provisions.

782 (6) A ~~Any~~ facility that ~~which~~ terminates the residency of
783 an individual who participated in activities specified in

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784 subsection (5) must ~~shall~~ show good cause in a court of
785 competent jurisdiction. If good cause is not shown, the agency
786 shall impose a fine of \$2,500 in addition to any other penalty
787 assessed against the facility.

788 Section 14. Section 429.34, Florida Statutes, is amended to
789 read:

790 429.34 Right of entry and inspection.-

791 (1) In addition to the requirements of s. 408.811, any duly
792 designated officer or employee of the department, the Department
793 of Children and Families, the Medicaid Fraud Control Unit of the
794 Office of the Attorney General, the state or local fire marshal,
795 or a member of the state or local long-term care ombudsman
796 council has ~~shall have~~ the right to enter unannounced upon and
797 into the premises of any facility licensed pursuant to this part
798 in order to determine the state of compliance with ~~the~~
799 ~~provisions of~~ this part, part II of chapter 408, and applicable
800 rules. Data collected by the state or local long-term care
801 ombudsman councils or the state or local advocacy councils may
802 be used by the agency in investigations involving violations of
803 regulatory standards. A person specified in this section who
804 knows or has reasonable cause to suspect that a vulnerable adult
805 has been or is being abused, neglected, or exploited shall
806 immediately report such knowledge or suspicion to the central
807 abuse hotline pursuant to chapter 415.

808 (2) The agency shall inspect each licensed assisted living
809 facility at least once every 24 months to determine compliance
810 with this chapter and related rules. If an assisted living
811 facility is cited for one or more class I violations or two or
812 more class II violations arising from separate surveys within a

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813 60-day period or due to unrelated circumstances during the same
814 survey, the agency must conduct an additional licensure
815 inspection within 6 months.

816 Section 15. Subsection (2) of section 429.41, Florida
817 Statutes, is amended to read:

818 429.41 Rules establishing standards.—

819 (2) In adopting any rules pursuant to this part, the
820 department, in conjunction with the agency, shall make distinct
821 standards for facilities based upon facility size; the types of
822 care provided; the physical and mental capabilities and needs of
823 residents; the type, frequency, and amount of services and care
824 offered; and the staffing characteristics of the facility. Rules
825 developed pursuant to this section may ~~shall~~ not restrict the
826 use of shared staffing and shared programming in facilities that
827 are part of retirement communities that provide multiple levels
828 of care and otherwise meet the requirements of law and rule. If
829 a continuing care facility licensed under chapter 651 or a
830 retirement community offering multiple levels of care obtains a
831 license pursuant to this chapter for a building or part of a
832 building designated for independent living, staffing
833 requirements established in rule apply only to residents who
834 receive personal services, limited nursing services, or extended
835 congregate care services under this part. Such facilities shall
836 retain a log listing the names and unit number for residents
837 receiving these services. The log must be available to surveyors
838 upon request. Except for uniform firesafety standards, the
839 department shall adopt by rule separate and distinct standards
840 for facilities with 16 or fewer beds and for facilities with 17
841 or more beds. The standards for facilities with 16 or fewer beds

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842 must ~~shall~~ be appropriate for a noninstitutional residential
843 environment; however, ~~provided that~~ the structure may not be is
844 ~~ne~~ more than two stories in height and all persons who cannot
845 exit the facility unassisted in an emergency must reside on the
846 first floor. The department, in conjunction with the agency, may
847 make other distinctions among types of facilities as necessary
848 to enforce the provisions of this part. Where appropriate, the
849 agency shall offer alternate solutions for complying with
850 established standards, based on distinctions made by the
851 department and the agency relative to the physical
852 characteristics of facilities and the types of care offered
853 ~~therein~~.

854 Section 16. Present subsections (1) through (11) of section
855 429.52, Florida Statutes, are redesignated as subsections (2)
856 through (12), respectively, a new subsection (1) is added to
857 that section, and present subsections (5) and (9) of that
858 section are amended, to read:

859 429.52 Staff training and educational programs; core
860 educational requirement.—

861 (1) Effective October 1, 2015, each new assisted living
862 facility employee who has not previously completed core training
863 must attend a preservice orientation provided by the facility
864 before interacting with residents. The preservice orientation
865 must be at least 2 hours in duration and cover topics that help
866 the employee provide responsible care and respond to the needs
867 of facility residents. Upon completion, the employee and the
868 administrator of the facility must sign a statement that the
869 employee completed the required preservice orientation. The
870 facility must keep the signed statement in the employee's

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871 personnel record.

872 (6)~~(5)~~ Staff involved with the management of medications
873 and assisting with the self-administration of medications under
874 s. 429.256 must complete a minimum of 6 ~~4~~ additional hours of
875 training provided by a registered nurse, licensed pharmacist, or
876 department staff. The department shall establish by rule the
877 minimum requirements of this additional training.

878 (10)~~(9)~~ The training required by this section other than
879 the preservice orientation must ~~shall~~ be conducted by persons
880 registered with the department as having the requisite
881 experience and credentials to conduct the training. A person
882 seeking to register as a trainer must provide the department
883 with proof of completion of the minimum core training education
884 requirements, successful passage of the competency test
885 established under this section, and proof of compliance with the
886 continuing education requirement in subsection (5)~~(4)~~.

887 Section 17. Section 429.55, Florida Statutes, is created to
888 read:

889 429.55 Consumer information website.—The Legislature finds
890 that consumers need additional information on the quality of
891 care and service in assisted living facilities in order to
892 select the best facility for themselves or their loved ones.
893 Therefore, the Agency for Health Care Administration shall
894 create a content link that is easily accessible and prominently
895 displayed on the home page of the agency's website to provide
896 consumer information on assisted living facilities. The website
897 must be searchable by facility name, license type, city, or zip
898 code. By November 1, 2015, the agency shall include all content
899 in its possession on the website and add content when received

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900 from facilities. At a minimum, the content must include:

901 (1) Information on each licensed assisted living facility,
902 including, but not limited to:

903 (a) The name and address of the facility.

904 (b) The name of the owner or operator of the facility.

905 (c) The number and type of licensed beds in the facility.

906 (d) The types of licenses held by the facility.

907 (e) The facility's license expiration date and status.

908 (f) The total number of clients that the facility is
909 licensed to serve and the most recently available occupancy
910 levels.

911 (g) The number of private and semiprivate rooms offered.

912 (h) The bed-hold policy.

913 (i) The religious affiliation, if any, of the assisted
914 living facility.

915 (j) The languages spoken by the staff.

916 (k) Availability of nurses.

917 (l) Forms of payment accepted, including, but not limited
918 to, Medicaid, Medicaid long-term managed care, private
919 insurance, health maintenance organization, United States
920 Department of Veterans Affairs, CHAMPUS program, or workers'
921 compensation coverage.

922 (m) Indication if the licensee is operating under
923 bankruptcy protection.

924 (n) Recreational and other programs available.

925 (o) Special care units or programs offered.

926 (p) Whether the facility is a part of a retirement
927 community that offers other services pursuant to this part or
928 part III of this chapter, part II or part III of chapter 400, or

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929 chapter 651.

930 (q) Links to the State Long-Term Care Ombudsman Program
931 website and the program's statewide toll-free telephone number.

932 (r) Links to the websites of the providers.

933 (s) Other relevant information that the agency currently
934 collects.

935 (2) Survey and violation information for the facility,
936 including a list of the facility's violations committed during
937 the previous 60 months, which on July 1, 2015, may include
938 violations committed on or after July 1, 2010. The list shall be
939 updated monthly and include for each violation:

940 (a) A summary of the violation, including all licensure,
941 revisit, and complaint survey information, presented in a manner
942 understandable by the general public.

943 (b) Any sanctions imposed by final order.

944 (c) The date the corrective action was confirmed by the
945 agency.

946 (3) Links to inspection reports that the agency has on
947 file.

948 (4) The agency may adopt rules to administer this section.

949 Section 18. This act shall take effect July 1, 2015.