

Health Innovation Subcommittee

Wednesday, January 15, 2014 8:00 AM - 10:00 AM 306 HOB

Will Weatherford Speaker Jason T. Brodeur Chair

Committee Meeting Notice HOUSE OF REPRESENTATIVES

Health Innovation Subcommittee

Start Date and Time:	Wednesday, January 15, 2014 08:00 am
End Date and Time:	Wednesday, January 15, 2014 10:00 am
Location:	306 HOB
Duration:	2.00 hrs

Consideration of the following bill(s):

HB 287 Certificates of Need by Artiles

Presentations by the Department of Health on Florida's Trauma System

Pursuant to rule 7.12, the deadline for amendments to bills on the agenda by non-appointed members is 6:00 p.m., Tuesday, January 14, 2014.

By request of the chair, all committee members are asked to have amendments to bills on the agenda submitted to staff by 6:00 p.m., Tuesday, January 14, 2014.

NOTICE FINALIZED on 01/08/2014 14:54 by Iseminger.Bobbye

Department of Health Presentation on Florida's Trauma System



TRAUMA SYSTEM

- Inclusive, sustainable & integrated
- Provides safe, effective & efficient care to injured people & their families in Florida

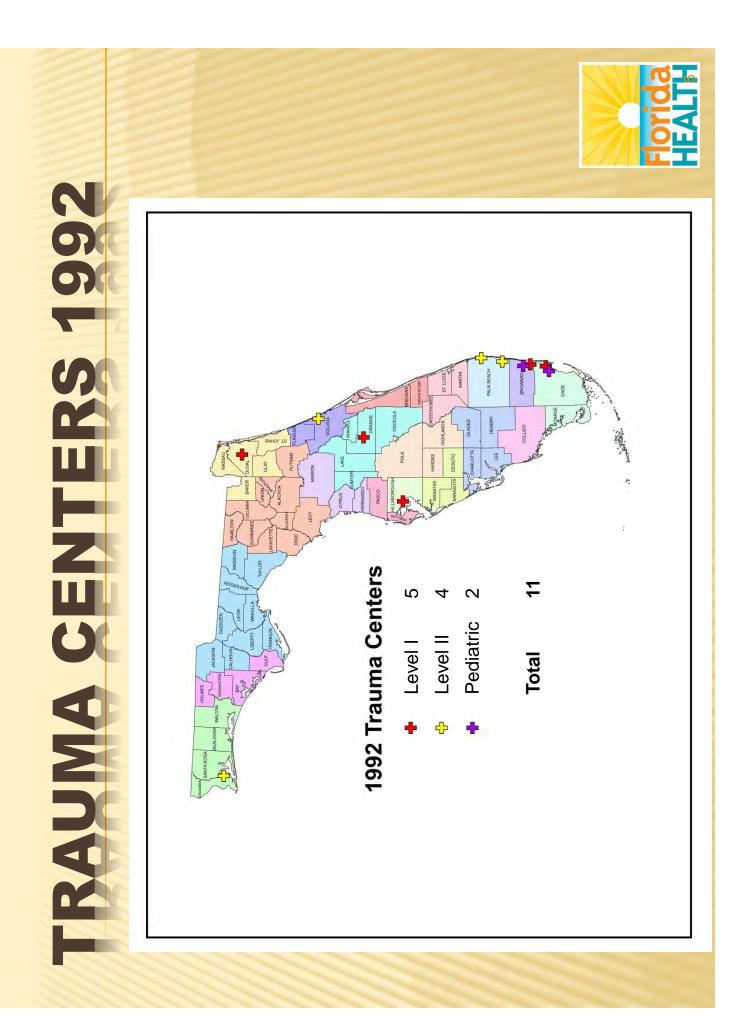
Goal: save lives & restore function

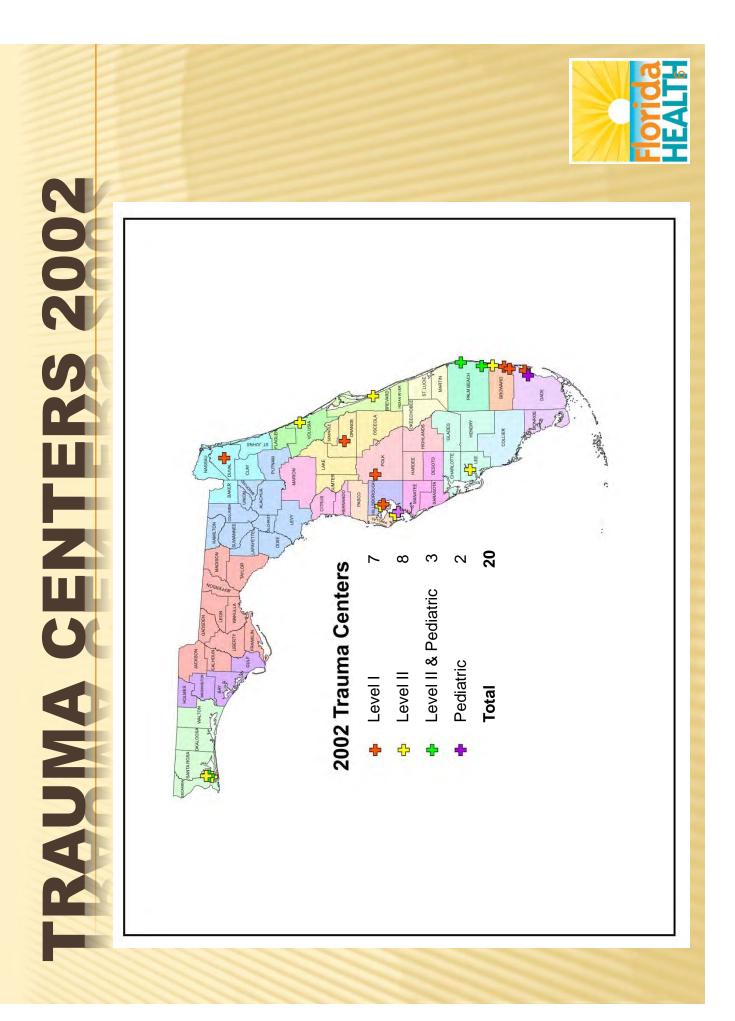


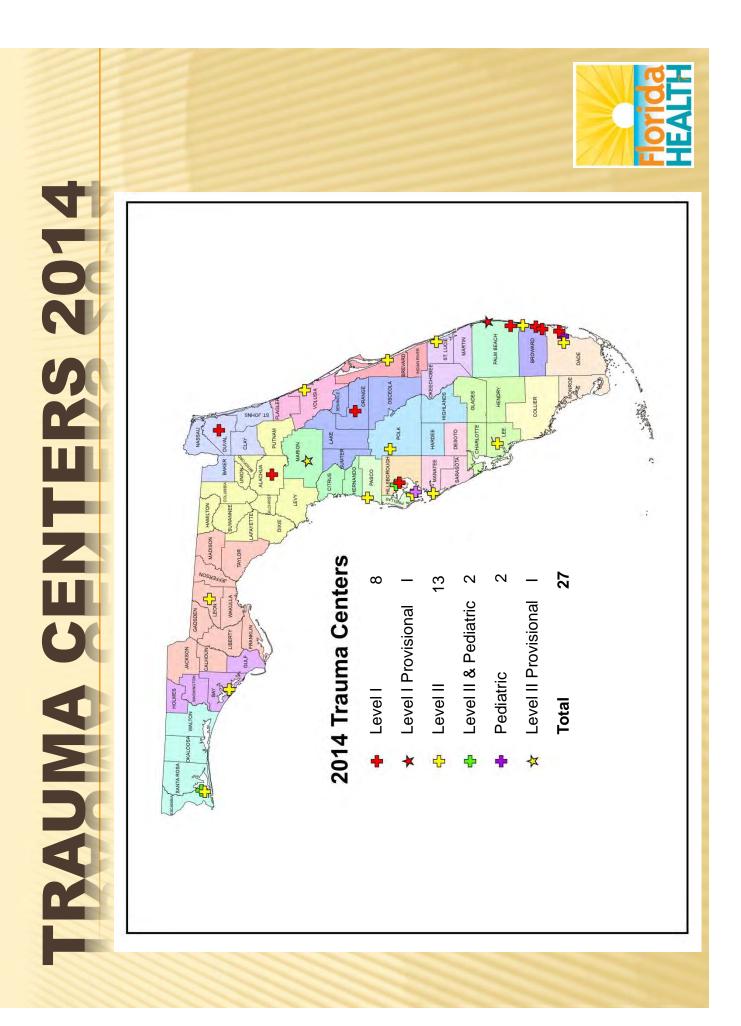


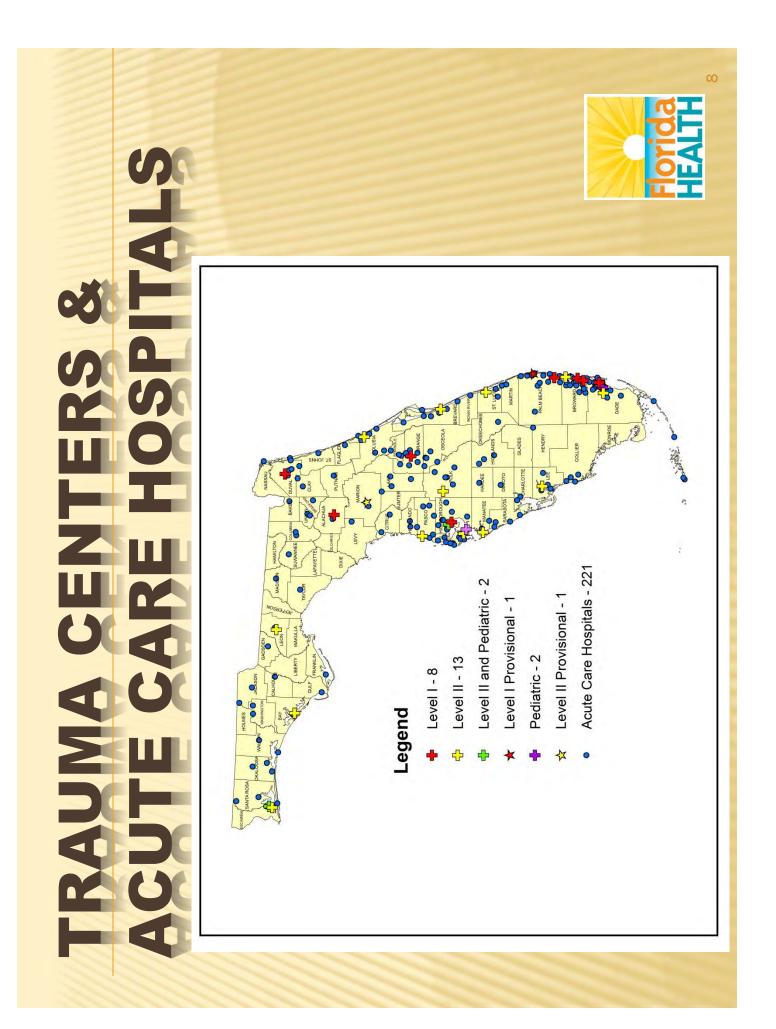
HISTORY

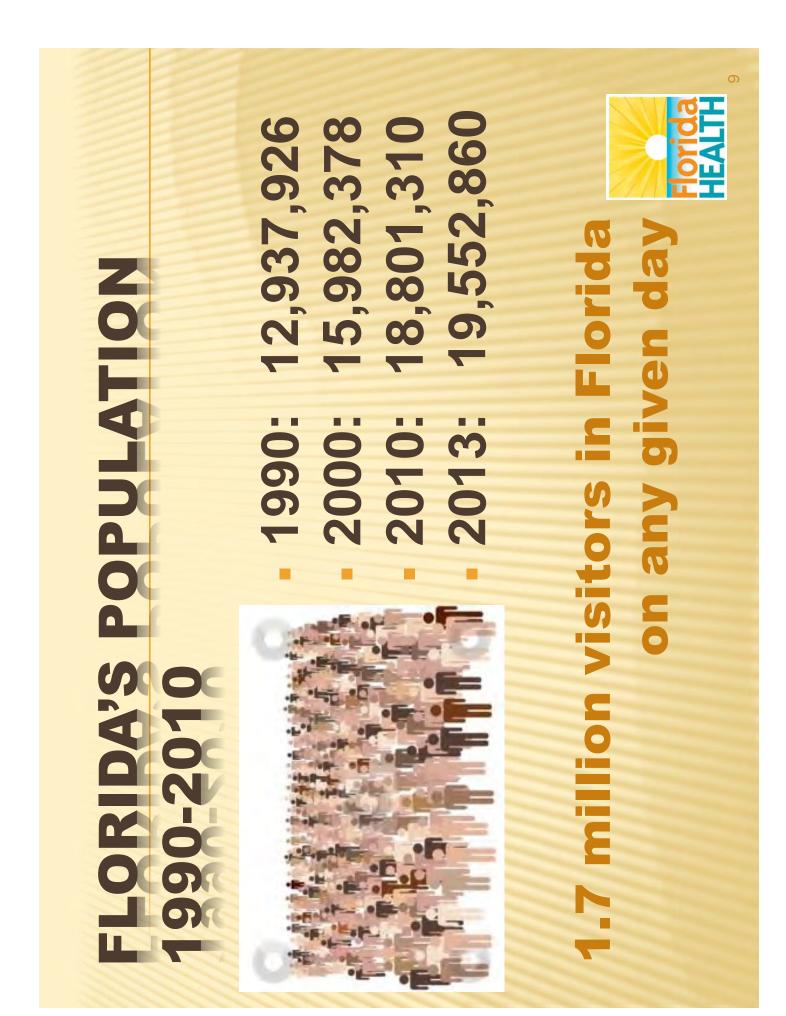
- SB 1762 reforming the trauma system & requiring assessment of trauma system 2004
- Dedicated funding to verified trauma centers from red-light running fines & other traffic penalties 2005
- Trauma center apportionment rule challenged 2011
- Trauma center apportionment rule invalidated on appeal 2012
- on Trauma System Consultation team visit Health American College of Surgeons Committee 2013















- 1990 2,369,431 2000 2,807,597 2010 3,259,602



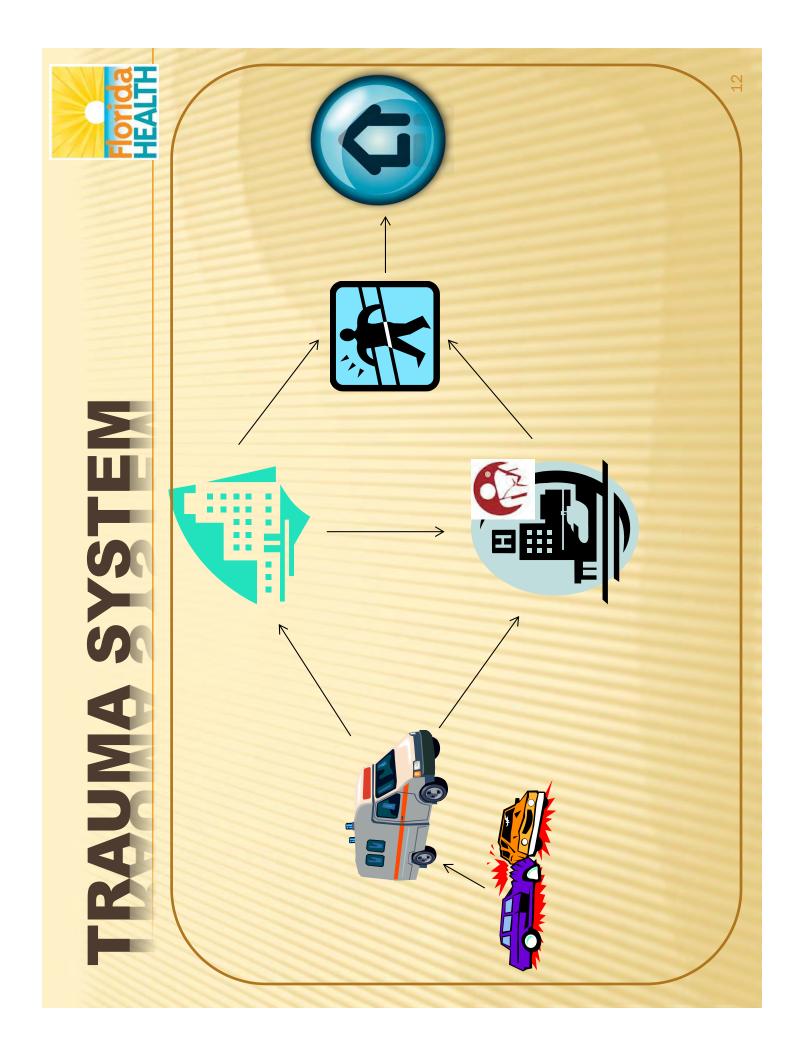
BUREAU OF EMERGENCY MEDICAL OPERATIONS

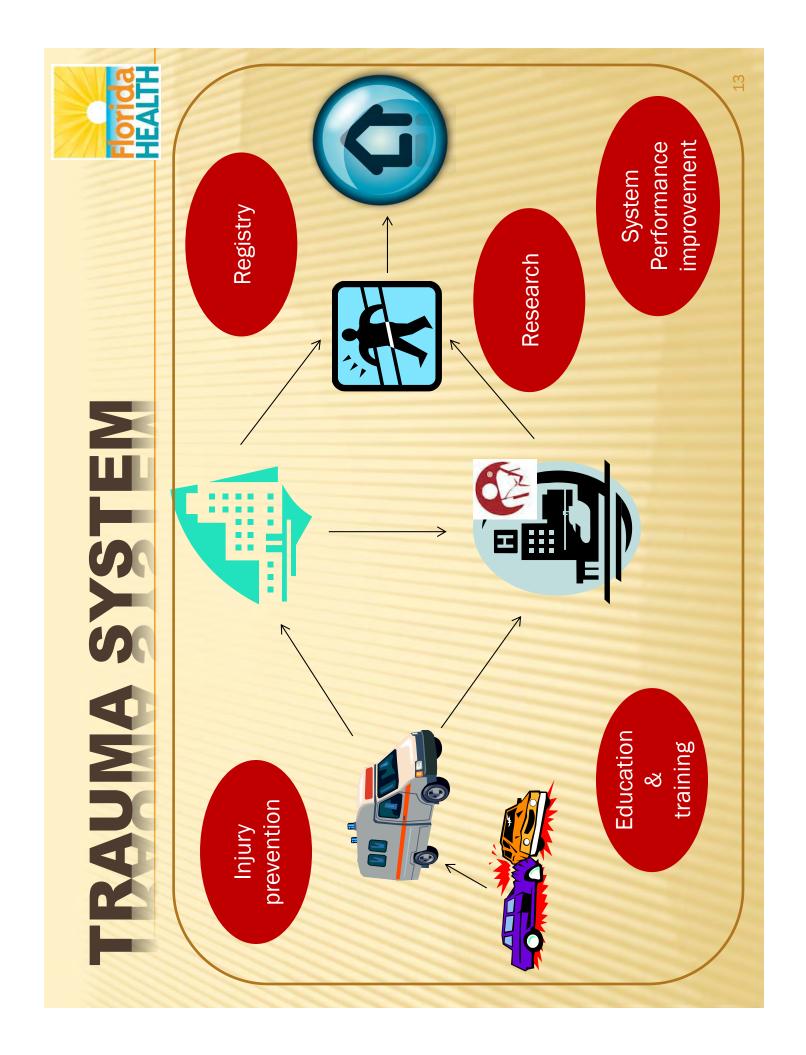
Trauma

Emergency Medical Services Injury Prevention

Brain & Spinal Cord Injury Program







14 Trauma center & system verification COLLEGE OF SURGEONS COMMITTE ON TRAUMA Defines standards for trauma & Population-based analysis AMERICAN resources

TRAUMA 4 J AM 1 COLLE



AMERICAN COLLEGE OF SURGEONS COMMITTEE ON TRAUMA Trauma Systems Evaluation and Planning Committee

Trauma System Consultation Report

State of Florida

Tallahassee, FL February 2-5, 2013







IM PROVEMENTS COMPLETED

Leadership

- Data registry

Highway Traffic Safety Administration Emergency Medical Services/National Reassessment



IMPROVEMENTS **DNGOING**

Strategic planning

Performance improvement

Integration of micro-systems



PORTUNITIES **REFERRED** OPPORTUN

Statutory authority

- Financing



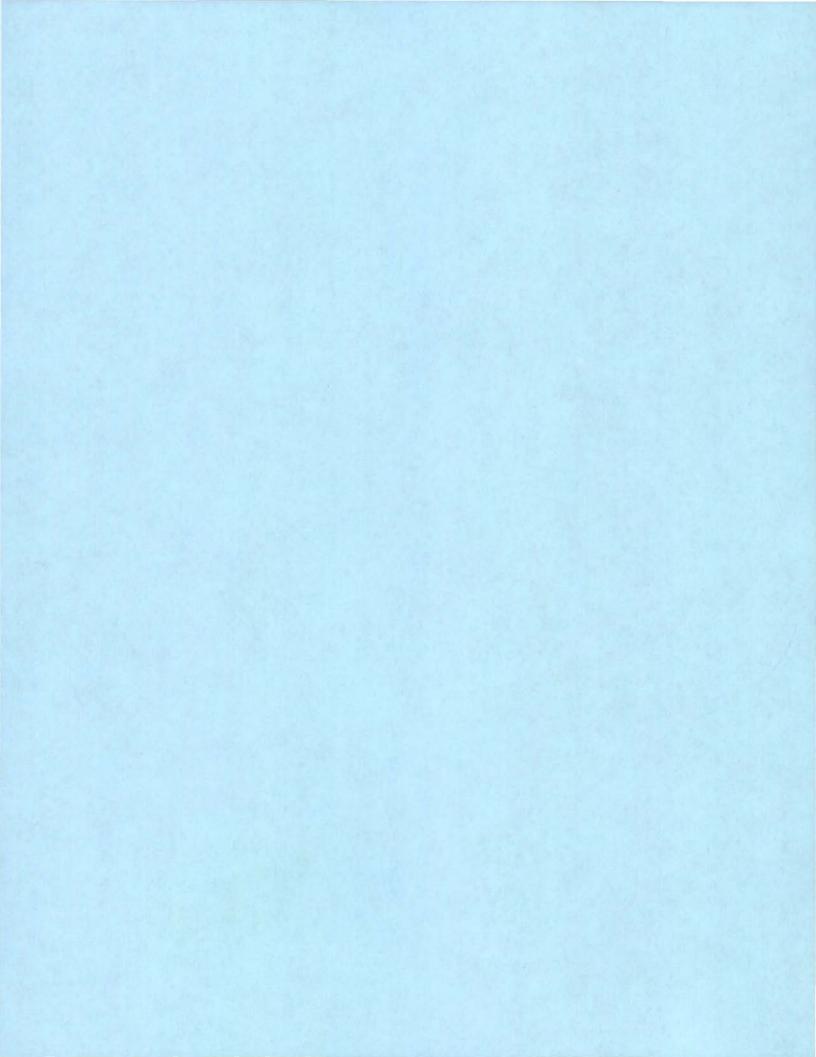


\$ 4.8 million
\$ 6.2 million
\$ 5.3 million
\$ 4.2 million
\$ 12.6 million



HEALTH DOH is inspiring quality through data-Florida has trauma heritage through driven trauma system improvement SUMMARY legislature





Florida Trauma Centers As of December 1, 2013

Level I

Broward Health Medical Center Delray Medical Center Jackson Memorial Hospital/Ryder Trauma Center Memorial Regional Hospital Orlando Regional Medical Center Shands Jacksonville TraumaOne Tampa General Hospital UF Health Shands Hospital

Level II

Baptist Hospital Pensacola Bay Medical Center Bayfront Medical Center Blake Medical Center Broward Health North Halifax Medical Center Holmes Regional Medical Center Kendall Regional Medical Center Lakeland Regional Medical Center Lawnwood Regional Medical Center and Hearth Institute Lee Memorial Hospital Regional Medical Center Bayonet Point Tallahassee Memorial Hospital

Level II and Pediatric

Sacred Heart Hospital St. Joseph's Hospital St. Mary's Medical Center

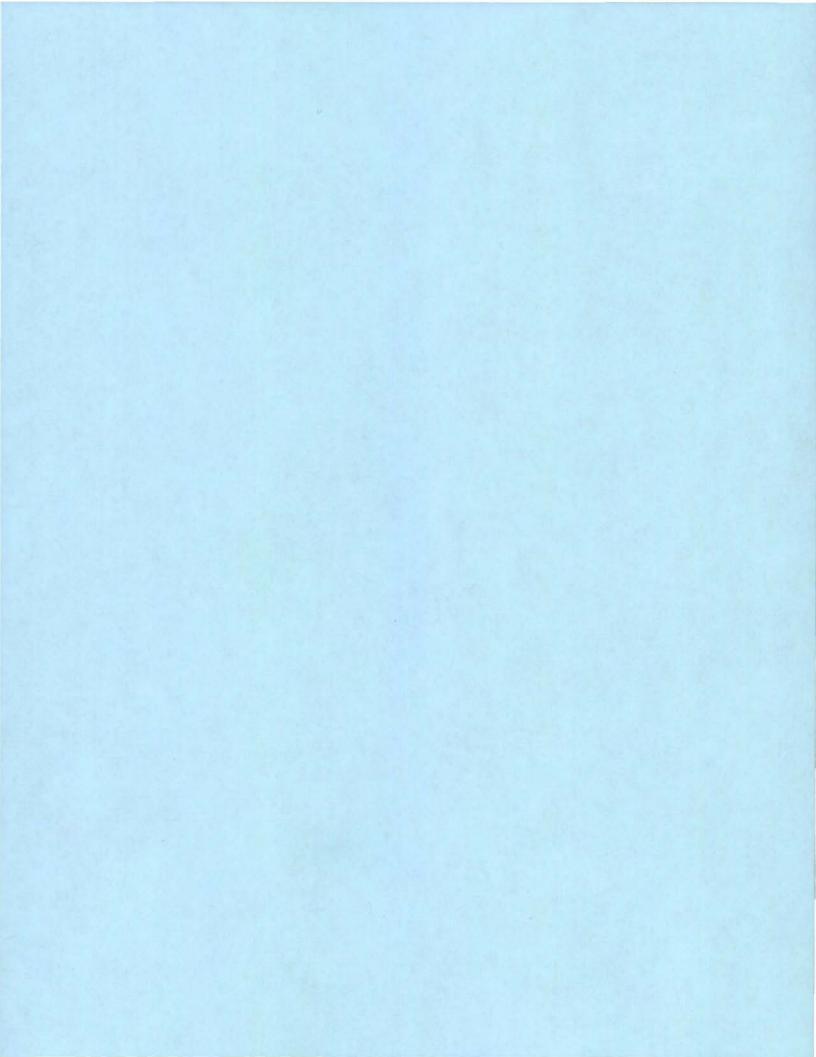
Pediatric

Miami Children's Hospital All Children's Hospital and Bayfront Medical Center are joint Pediatric

Provisional Trauma Centers

Level I St. Mary's Medical Center

Level II Ocala Regional Medical Center



		ACTIVE TRAUN	MA LITIGATION		
Case No.	Caption	Counsel for Appellant/Petitioner	Counsel for Appellee/Respondent	Counsel for Intervenor	Status
	-				
1st DCA 1D12-2998	Shands Jacksonville Medical Center, Inc., Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and Orange Park Medical Center, Inc.	Seann M. Frazier, Parker, Hudson, Rainer & Dobbs, LLP	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A. Raul Cantero, White & Case, LLP, co- counsel	Response to Joint Motion to Enforce Mandate due January 17, 2014
1st DCA 1D12-3451	Florida Health Sciences Center, Inc., d/b/a Tampa General Hospital, and Bayfront Medical Center, Appellants/Petitioners v. Dept. of Health, Appellee/Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point, and d/b/a Blake Medical Center, Appellees/Intervenors.	Jeffrey Frehn, Radey, Thomas, Yon & Clark, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A. Raul Cantero, White & Case, LLP, co- counsel	Response to Motion to Enforce Mandate due January 17, 2014
1st DCA 1D12-3543	St. Joseph's Hospital, Inc., d/b/a St. Joseph's Hospital, Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point, and d/b/a Blake Medical Center, Appellees/Intervenors.	Karen Putnal and Robert Weiss, Moyle Law Firm, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A. Raul Cantero, White & Case, LLP, co- counsel.	Response to Joint Motion to Enforce Mandate due January 17, 2014

		ACTIVE TRAUN	MA LITIGATION		
Case No.	Caption	Counsel for Appellant/Petitioner	Counsel for Appellee/Respondent	Counsel for Intervenor	Status
1st DCA 1D13-1029	Shands Teaching Hospital, d/b/a Shands at UF, Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and Marion Community Hospital, Inc., d/b/a Ocala Regional Medical Center, Appellee/Intervenor.	Seann M. Frazier, Parker, Hudson, Rainer & Dobbs, LLP	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A. Raul Cantero, White & Case, LLP, co- counsel	Response to Motion to Enforce Mandate due January 17, 2014
DOAH 14-000103 DOH 2011-0110	Shands Jacksonville Medical Center, Inc., Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and Orange Park Med. Ctr., Inc.	Seann M. Frazier, Parker, Hudson, Rainer & Dobbs, LLP	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH
DOAH 14-000104 DOH 2011-0111	St. Joseph's Hospital, Inc., d/b/a St. Joseph's Hospital, Inc., d/b/a St. Joseph's Hospital, Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point, and d/b/a Blake Medical Center, Appellees/Intervenors.	Karen Putnal and Robert Weiss, Moyle Law Firm, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH

		ACTIVE TRAUN	MA LITIGATION		
Case No.	Caption	Counsel for Appellant/Petitioner	Counsel for Appellee/Respondent	Counsel for Intervenor	Status

DOAH	Florida Health Sciences	Jeffrey Frehn, Radey,	Jennifer A. Tschetter,	Steve Ecenia,	Pending at DOAH
14-000105	Center, Inc., d/b/a Tampa	Thomas, Yon & Clark,	General Counsel,	Richard Ellis, and	
	General Hospital,	P.A.	Florida Department of	David Prescott,	
DOH	Appellants/Petitioners		Health	Rutledge, Ecenia &	
2011-0112	v.			Purnell, P.A.	
	Dept. of Health,				
	Appellee/Respondent, and				
	HCA Health Services of				
	Florida, d/b/a Regional				
	Medical Center Bayonet				
	Point, and d/b/a Blake				
	Medical Center,				
	Appellees/Intervenors.				
DOAH	Florida Health Sciences	Jeffrey Frehn, Radey,	Jennifer A. Tschetter,	Steve Ecenia,	Sent to DOAH on
14-000106	Center, Inc., d/b/a Tampa	Thomas, Yon & Clark,	General Counsel,	Richard Ellis, and	January 8, 2014
	General Hospital,	P.A.	Florida Department of	David Prescott,	
DOH Case	Appellants/Petitioners		Health	Rutledge, Ecenia &	
2011-0113	v.			Purnell, P.A.	
	Dept. of Health,				
	Appellee/Respondent,				
	and				
	HCA Health Services of				
	Florida, d/b/a Regional				
	Medical Center Bayonet				
	Point, and d/b/a Blake				
	Medical Center,				
	Appellees/Intervenors.				

		ACTIVE TRAU	MA LITIGATION		
Case No.	Caption	Counsel for	Counsel for	Counsel for	Status
	.5	Appellant/Petitioner	Appellee/Respondent	Intervenor	

DOAH 14-000107 DOH 2011-0114	Bayfront Medical Center, Inc., Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point, and d/b/a Blake Medical Center, Appellees/Intervenors.	Jeffrey Frehn, Radey, Thomas, Yon & Clark, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH
DOAH 14-000108 DOH 2011-0115	Bayfront Medical Center, Inc., Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point, and d/b/a Blake Medical Center, Appellees/Intervenors.	Jeffrey Frehn, Radey, Thomas, Yon & Clark, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH
DOAH 13-004758 DOH 2012-0166	Shands Teaching Hospital, d/b/a Shands at UF, Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and Marion Community Hospital, Inc., d/b/a Ocala Regional Medical Center, Appellee/Intervenor.	Seann M. Frazier, Parker, Hudson, Rainer & Dobbs, LLP	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH

		ACTIVE TRAUN	MA LITIGATION		
Case No.	Caption	Counsel for	Counsel for	Counsel for	Status
		Appellant/Petitioner	Appellee/Respondent	Intervenor	
DOAH 13-002010	Orange Park Medical Center, Inc., Petitioner, v. Department of Health, Respondent.	Steve Ecenia, Richard Ellis, and Davis Prescott, Rutledge, Ecenia & Purnell, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	None.	In abeyance. Status update due to ALJ by May 15, 2014
DOH 2013-0005	Osceola Regional Hospital, Inc., v. Department of Health, Respondent	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	None.	In abeyance
DOAH 14-000110 DOH 2013-0024	St. Joseph's Hospital, Inc., d/b/a St. Joseph's Hospital, v. Department of Health, Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point, Intervenor.	Karen Putnal and Robert Weiss, Moyle Law Firm, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH
DOAH 14-000109 DOH 2013-0025	Florida Health Sciences Center, Inc., d/b/a Tampa General Hospital, Appellant/Petitioner, v. Dept. of Health, Appellee/Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point and d/b/a Blake Medical Center, Appellees/Intervenors.	Jeffrey Frehn, Radey, Thomas, Yon & Clark, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH

		ACTIVE TRAU	MA LITIGATION		
Case No.	Caption	Counsel for Appellant/Petitioner	Counsel for Appellee/Respondent	Counsel for Intervenor	Status

DOAH 14-000112 DOH 2013-0026	Bayfront Medical Center, Inc., Appellant/Petitioner, V. Dept. of Health, Appellee/Respondent, and HCA Health Services of Florida, d/b/a Regional Medical Center Bayonet Point and d/b/a Blake Medical Center, Appellees/Intervenors.	Jeffrey Frehn, Radey, Thomas, Yon & Clark, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Pending at DOAH
DOH 2013-0237	Jackson South Community Hospital, v. Department of Health	Eugene Shy, Valda Clark Christian, and, Christopher C. Kokoruda, Assistant County Attorneys, Miami-Dade County	Caryl S. Kilinski, Chief Legal Counsel, Florida Department of Health		Hearing scheduled for Feb. 13, 2014
DOH 2013-0238	Jackson North Community Hospital, v. Department of Health	Eugene Shy, Valda Clark Christian, and, Christopher C. Kokoruda, Assistant County Attorneys, Miami-Dade County	Caryl S. Kilinski, Chief Legal Counsel, Florida Department of Health		Hearing scheduled for Feb. 13, 2014
DOH 2013-0243	Osceola Regional Hospital, Inc., v. Department of Health, Respondent	Steve Ecenia, Richard Ellis, and David Prescott, Rutledge, Ecenia & Purnell, P.A.	Jennifer A. Tschetter, General Counsel, Florida Department of Health	None.	In abeyance

HB 287

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 287 Certificates of Need SPONSOR(S): Artiles TIED BILLS: IDEN./SIM. BILLS: SB 268

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Health Innovation Subcommittee		Guzzo	Shaw JL
2) Health Care Appropriations Subcommittee		~	02
3) Health & Human Services Committee			

SUMMARY ANALYSIS

A certificate of need (CON) is a written statement issued by the Agency for Health Care Administration (AHCA) evidencing community need for a new, converted, expanded or otherwise significantly modified health care facility, health service, or hospice. Prior to constructing a new nursing home or adding additional beds, the facility must obtain approval from AHCA through the CON review and approval process.

Since 2001, a moratorium on new CONs for nursing homes has prevented AHCA from approving additional community nursing home beds. The moratorium will expire on October 1, 2016, or upon the date that Medicaid managed care is implemented statewide, whichever is earlier. Full implementation of the statewide Medicaid managed care program is statutorily required to be completed by October 1, 2014.

The bill repeals the moratorium effective July 1, 2014. As a result, AHCA will be authorized to approve new community nursing home beds under the regulations of the CON process. Additionally, the bill will allow for increased flexibility in the construction of new nursing homes and the expansion of existing nursing homes.

Specifically, the bill amends ss. 408.034 through 408.036, F.S., to:

- Decrease the required sub-district average occupancy rate that AHCA uses in its nursing home bedneed methodology from 94 to 92 percent.
- Authorize an applicant to combine the published bed need of geographically contiguous sub-districts within a district for a proposed community nursing home;
 - If only two sub-districts are aggregated, the nursing home must be located in the sub-district with the greater need;
 - If more than two sub-districts are aggregated, the nursing home must be located in a place that provides reasonable geographic access for residents in each aggregated sub-district.
- Provide expedited review of a CON application for the replacement of a nursing home within a 30-mile radius of the existing nursing home.
- Provide expedited review of a CON application for the replacement of a nursing home within the same district if the proposed project site is outside a 30-mile radius of the replaced nursing home but within the same sub-district or a geographically contiguous sub-district. If the proposed project site is in the geographically contiguous sub-district, the prior six-month occupancy rate for licensed community nursing homes for that sub-district must be at least 85 percent.

The bill does not appear to have a fiscal impact on state or local government.

The bill provides an effective date of July 1, 2014.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Present Situation

Certificates of Need

A certificate of need (CON) is a written statement issued by the Agency for Health Care Administration (AHCA) evidencing community need for a new, converted, expanded, or otherwise significantly modified health care facility, health service, or hospice.¹ Under this regulatory program, AHCA must provide approval through the CON review and approval process prior to a provider establishing a new nursing home or adding nursing home beds.

Florida's CON program has been in operation since 1973, and has undergone several changes over the years. From 1974 through 1986, the specifics of the program were largely dictated by the National Health Planning and Resources Development Act, which established minimum requirements regarding the type of services subject to CON review, review procedures, and review criteria. Each state was required to have a CON program in compliance with those standards as a condition for obtaining federal funds for health programs. The federal health planning legislation was repealed in 1986.

A moratorium on the approval of additional nursing home beds has been in effect since 2001.² In 2006, the Florida Legislature extended the moratorium through July 1, 2011.³ The current moratorium, which was last extended in 2011,⁴ is scheduled to expire on October 1, 2016, or upon the date that Medicaid managed care is implemented statewide, whichever is earlier. Full implementation of the statewide Medicaid managed care program is statutorily required to be completed by October 1, 2014.⁵

Determination of Need

Granting a CON is predicated on a determination of need. The CON formula for determining need for community nursing home beds provides an allocation of projected nursing home beds which will be needed in a specific AHCA CON sub-district within a three-year time horizon. There are 44 sub-districts within AHCA's 11 service districts.⁶ However, bed need projections have not been calculated since the moratorium on additional community nursing home beds went into effect on July 1, 2001.⁷

The formula considers the projected increase in the district population age 65 to 74 and age 75 and over, with the age group 75 and older given six times more weight in projecting the population increase.⁸ The projected total bed need of a district is then allocated to its sub-districts consistent with the current sub-district distribution.⁹ The result for a given sub-district is adjusted to reflect the current sub-district occupancy of licensed beds. A given sub-district is expected to have a minimum occupancy rate of 94 percent.¹⁰ Rules governing CON provide that if current occupancy of licensed

⁷ Agency for Health Care Administration, Bill Analysis, House Bill 287, dated December 20, 2013, on file with Health & Human Services Innovation Subcommittee staff.

⁸ Rule 59C-1.036, F.A.C.

⁹ Id. ¹⁰ Id.

STORAGE NAME: h0287.HIS.DOCX DATE: 1/13/2014

¹ S. 408.032(3), F.S.

² Ch. 2001-45, L.O.F.

³ Ch. 2006-161, L.O.F.

⁴ Ch. 2011-135, L.O.F.

⁵ SS. 409.971 and 409.978, F.S.

⁶ Nursing home sub-districts are set forth in Rule 59C-2.200, F.A.C., and generally consist of 1 to 2 counties. Sub-district 3/2 consists of 7 small rural counties, which is the highest total number of counties in a sub-district. Duval county is divided between several sub-districts of district 4.

nursing home beds is less than 85 percent, the net need in a sub-district is zero regardless of whether the formula indicates otherwise.11

Projects Subject to Review and Exemptions

There are three levels of CON review, including, full, expedited, and exempt.¹²

Projects Subject to Full Review

The addition of beds in community nursing homes or the new construction or establishment of community nursing home projects are subject to full CON review by AHCA.¹³ However, pursuant to s. 408.0435, F.S., a CON for additional community nursing home beds may not be approved by AHCA until the moratorium expires.

Projects Subject to Expedited Review

Pursuant to s. 408.036(2), certain projects are subject to expedited review. These projects include:

- · Replacement of a nursing home within the same district, if the proposed project site is located within a geographic area that contains at least 65 percent of the facility's current residents and is within a 30-mile radius of the replaced nursing home;
- Relocation of a portion of a nursing home's licensed beds to a facility within the same district. if the relocation is within a 30-mile radius of the existing facility and the total number of nursing home beds in the district does not increase; and

Applications for new construction of a community nursing home in a retirement community are subject to expedited review, and are exempt from the moratorium.¹⁴ This provision went into effect on July 1, 2013.¹⁵ and to date, there have been no applications for such projects filed with AHCA.¹⁶

An applicant will be deemed eligible for expedited review for construction of a community nursing home in a retirement community if all of the following criteria are met:

- The residential use area of the retirement community is deed-restricted as housing for older persons;
- The retirement community is located in a county in which 25 percent or more of its population is age 65 and older;
- The retirement community is located in a county that has a rate of no more than 16.1 beds per . 1,000 persons age 65 or older;
- The retirement community has a population of at least 8,000 residents within the county; and
- The number of proposed community nursing home beds in an application does not exceed the projected bed need after applying the rate of 16.1 beds per 1,000 persons age 65 and older.

Exemptions from CON Review

Pursuant to s. 408.036(3), F.S., certain projects are exempt from nursing home CON review. These projects include:

¹¹ Id.

¹² S. 408.036, F.S.

¹³ S. 408.036(1), F.S.

¹⁴ S. 408.036(2), F.S.

¹⁵ Ch. 2013-153, L.O.F.

¹⁶ Agency for Health Care Administration, Bill Analysis, House Bill 287, dated December 20, 2013, on file with Health & Human Services Innovation Subcommittee staff. STORAGE NAME: h0287.HIS.DOCX

- The creation of a single nursing home within a district by combining licensed beds from two or more licensed nursing homes within a district, regardless of sub-district boundaries; if
 - Fifty-percent of the beds in the created nursing home are transferred from the only nursing home in a county and its utilization data demonstrates that it had an occupancy rate of less than 75 percent for the 12-month period ending 90 days before the request for the exemption;
- The addition of nursing home beds, not to exceed 10 total beds, or 10 percent of the number of licensed beds in the facility being expanded, whichever is greater;
- The replacement of a licensed nursing home on the same site, or within three miles of the same site; if
 - The number of licensed beds does not increase;
- The consolidation or combination of licensed nursing homes or transfer beds between licensed nursing homes within the same planning sub-district, by providers that operate multiple nursing homes within that planning sub-district; if
 - There is no increase in the planning sub-district total number of nursing home beds and the site of the relocation is not more than 30 miles from the original location.

Exceptions to the Moratorium

Pursuant to s. 408.0435, F.S., the moratorium does not apply to certain projects. These projects include:

- Adding sheltered nursing home beds¹⁷ in a continuing care retirement community;
- Adding nursing home beds in a county that has no community nursing home beds and the lack of beds is the result of the closure of a nursing home that was licensed on July 1, 2001;¹⁸
- Adding the greater of no more than 10 total beds or 10 percent of the licensed nursing home beds of a facility located in a county having up to 50,000 residents; if
 - The nursing home has not had any class I or class II deficiencies within the 30 months preceding the request for addition; and
 - The prior 12-month average occupancy rate for the nursing home beds at the facility meets or exceeds 94 percent and the facility has never had a class I or class II deficiency; or
 - For a facility that has been licensed for less than 24 months, the prior 6-month average occupancy rate for the nursing home beds at the facility meets or exceeds 94 percent and the facility has never had a class I or class II deficiency;
- Adding the greater of no more than 10 total beds or 10 percent of the number of licensed nursing home beds; if
 - The facility has not had any class I or class II deficiencies within the 30 months preceding the request for addition;
 - The prior 12-month average occupancy rate for the nursing home beds at the facility meets or exceeds 96 percent;
 - The prior 12-month occupancy rate for the nursing home beds in the sub-district is 94 percent or greater; and
 - Any beds authorized for the facility under this exception in a prior request have been licensed and operational for at least 12 months.¹⁹

¹⁷ A "sheltered nursing home bed" is defined by s. 651.118(3), F.S., as Nursing home beds located within a continuing care facility for which a certificate of need is issued pursuant to subsection (2) shall be known as sheltered nursing home beds.

¹⁸ The request to add beds under this exception to the moratorium is subject to the full competitive review process for CONs.

¹⁹ The request to add beds under the exception to the moratorium is subject to the procedures related to an exemption to the CON requirements.

Effect of Proposed Changes

The bill amends s. 408.034(5), F.S., to revise the nursing home bed-need methodology threshold from 94 percent to 92 percent. Statewide nursing home bed occupancy rates have remained around 88.5 percent since FY 2004-2005.²⁰ According to AHCA, reducing the occupancy rate standard from 94 percent to 92 percent may have a marginal effect on total bed need projection in some sub-districts, but it would have no impact on the increase in Medicaid nursing home patients beyond normal anticipated growth.²¹

The bill creates s. 408.034(6), F.S., to allow applicants to combine need numbers when need is shown for geographically contiguous sub-districts to establish a new community nursing home in one of these sub-districts. If need is aggregated from two sub-districts, the proposed nursing home site must be located in the sub-district with the greater need.

The bill amends s. 408.036(2)(b), F.S., to allow for the replacement of a nursing home if the proposed site is within a 30-mile radius of the replaced nursing home. As a result, providers will be able to move a nursing home from one district to another as long as it is within a 30-mile radius.

The bill amends s. 408.036(2)(c), F.S., to allow for the replacement of a nursing home within the same district, if the proposed project site is outside a 30-mile radius of the replaced nursing home but within the same sub-district or a geographically contiguous sub-district. If the proposed project site is in the geographically contiguous sub-district, the prior 6-month occupancy rate for licensed community nursing homes for that sub-district must be at least 85 percent.

The bill amends s. 408.036(3), F.S., to revise current exemptions to certain CON review projects. Specifically, the bill:

- Repeals an obsolete provision relating to the transfer of beds to establish a new facility. This provision was set to be repealed upon the expiration of the moratorium, which is consistent with the bill's provision to repeal s. 408.0435, F.S;
- Ensures that the provision being repealed in s. 408.0435(5)(b), F.S., is retained in s. 408.036(3)(j), F.S., which requires an average occupancy rate of 94 percent to be able to apply for additional nursing home beds;
- Expands the distance a replacement facility may be from the original site from three miles to five miles;
- Authorizes exemptions for the consolidation or combination of licensed nursing homes, or transfer of beds between licensed nursing homes within the same district, by nursing homes with any shared controlled interest within the district; if
 - o There is no increase in the district's total number of nursing home beds; and
 - The site of the relocation is not more than 30 miles from the original location.

Finally, the bill repeals the moratorium on CONs for new community nursing home beds.

B. SECTION DIRECTORY:

- **Section 1:** Amends s. 408.034, F.S., relating to duties and responsibilities of the Agency for Health Care Administration; rules.
- Section 2: Amends s. 408.036, F.S., relating to projects subject to expedited review; exemptions.
- Section 3: Repeals s. 408.0435, F.S., relating to the moratorium on nursing home certificates of need.

 ²⁰ Agency for Health Care Administration, Bill Analysis, House Bill 287, dated December 20, 2013, on file with Health & Human Services Innovation Subcommittee staff.
 ²¹ Id.

Section 4: Provides an effective date of July 1, 2014.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

- B. FISCAL IMPACT ON LOCAL GOVERNMENTS:
 - 1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

The bill repeals the moratorium that prohibits the Agency for Health Care Administration (AHCA) from issuing certificates of need (CONs) for new community nursing home beds. Repeal of the moratorium will allow AHCA to grant new CONs for the construction of new community nursing homes and the addition of community nursing home beds to existing nursing homes when sufficient need is determined to exist.

D. FISCAL COMMENTS:

None.

III. COMMENTS

- A. CONSTITUTIONAL ISSUES:
 - 1. Applicability of Municipality/County Mandates Provision:

Not applicable. The bill does not appear to affect county or municipal governments.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

AHCA has sufficient rule-making authority to implement the provisions of the bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

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1	A bill to be entitled
2	An act relating to certificates of need; amending s.
3	408.034, F.S.; decreasing the subdistrict average
4	occupancy rate that the Agency for Health Care
5	Administration is required to maintain as a goal of
6	its nursing-home-bed-need methodology; conforming a
7	provision to changes made by the act; authorizing an
8	applicant to aggregate the need of geographically
9	contiguous subdistricts within a district for a
10	proposed community nursing home under certain
11	circumstances; requiring the proposed nursing home
12	site to be located in the subdistrict with the greater
13	need under certain circumstances; amending s. 408.036,
14	F.S.; providing that, under certain circumstances,
15	replacement of a nursing home is a health-care-related
16	project subject to expedited review; conforming a
17	cross-reference; revising the requirements for
18	projects that are exempted from applying for a
19	certificate of need; repealing s. 408.0435, F.S.,
20	relating to the moratorium on the approval of
21	certificates of need for additional community nursing
22	home beds; providing an effective date.
23	
24	Be It Enacted by the Legislature of the State of Florida:
25	
26	Section 1. Subsection (5) of section 408.034, Florida
	Page 1 of 9

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27 Statutes, is amended, present subsection (6) of that section is 28 redesignated as subsection (7), and a new subsection (6) is 29 added to that section, to read: 30 408.034 Duties and responsibilities of agency; rules.-31 (5) The agency shall establish by rule a nursing-home-bed-32 need methodology that has a goal of maintaining a subdistrict 33 average occupancy rate of 92 94 percent and that reduces the 34 community nursing home bed need for the areas of the state where 35 the agency establishes pilot community diversion programs 36 through the Title XIX aging waiver program. 37 (6) If nursing home bed need is determined to exist in 38 geographically contiguous subdistricts within a district, an applicant may aggregate the subdistricts' need for a new 39 40 community nursing home in one of the subdistricts. If need is 41 aggregated from two subdistricts, the proposed nursing home site 42 must be located in the subdistrict with the greater need as 43 published by the agency in the Florida Administrative Register. 44 However, if need is aggregated from more than two subdistricts, 45 the location of the proposed nursing home site must provide 46 reasonable geographic access for residents in the respective 47 subdistricts given the relative bed need in each. 48 Section 2. Subsection (2) and paragraphs (f), (k), (p), 49 and (q) of subsection (3) of section 408.036, Florida Statutes, are amended to read: 50 51 408.036 Projects subject to review; exemptions.-PROJECTS SUBJECT TO EXPEDITED REVIEW.-Unless exempt 52 (2)Page 2 of 9

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pursuant to subsection (3), <u>the following</u> projects <u>are</u> subject to an expedited review shall include, but not be limited to:

(a) A transfer of a certificate of need, except that when an existing hospital is acquired by a purchaser, all certificates of need issued to the hospital which are not yet operational shall be acquired by the purchaser $_{\tau}$ without need for a transfer.

(b) Replacement of a nursing home, if the proposed project
site within the same district, if the proposed project site is
located within a geographic area that contains at least 65
percent of the facility's current residents and is within a 30mile radius of the replaced nursing home.

65 (c) Replacement of a nursing home within the same 66 district, if the proposed project site is outside a 30-mile 67 radius of the replaced nursing home but within the same 68 subdistrict or a geographically contiguous subdistrict. If the 69 proposed project site is in the geographically contiguous 70 subdistrict, the prior 6-month occupancy rate for licensed 71 community nursing homes for that subdistrict must be at least 85 72 percent in accordance with the agency's most recently published 73 inventory.

74 <u>(d) (c)</u> Relocation of a portion of a nursing home's 75 licensed beds to a facility within the same district, if the 76 relocation is within a 30-mile radius of the existing facility 77 and the total number of nursing home beds in the district does 78 not increase.

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79 (e) (d) The new construction of a community nursing home in a retirement community as further provided in this paragraph. 80 Expedited review under this paragraph is available if 81 1. all of the following criteria are met: 82 83 a. The residential use area of the retirement community is 84 deed-restricted as housing for older persons as defined in s. 760.29(4)(b). 85 b. The retirement community is located in a county in 86 87 which 25 percent or more of its population is age 65 and older. 88 c. The retirement community is located in a county that 89 has a rate of no more than 16.1 beds per 1,000 persons age 65 years or older. The rate shall be determined by using the 90 91 current number of licensed and approved community nursing home 92 beds in the county per the agency's most recent published 93 inventory. 94 The retirement community has a population of at least d. 95 8,000 residents within the county, based on a population data 96 source accepted by the agency. e. The number of proposed community nursing home beds in 97 98 an application does not exceed the projected bed need after applying the rate of 16.1 beds per 1,000 persons aged 65 years 99 100 and older projected for the county 3 years into the future using 101 the estimates adopted by the agency reduced by, after 102 subtracting the agency's most recent published inventory of licensed and approved community nursing home beds in the county 103 104 per the agency's most recent published inventory. Page 4 of 9

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105 2. No more than 120 community nursing home beds shall be approved for a qualified retirement community under each request 106 107 for application for expedited review. Subsequent requests for 108 expedited review under this process may shall not be made until 109 2 years after construction of the facility has commenced or 1 year after the beds approved through the initial request are 110 111 licensed, whichever occurs first.

112 3. The total number of community nursing home beds which 113 may be approved for any single deed-restricted community 114 pursuant to this paragraph may shall not exceed 240, regardless 115 of whether the retirement community is located in more than one 116 qualifying county.

Each nursing home facility approved under this 117 4. 118 paragraph must shall be dually certified for participation in 119 the Medicare and Medicaid programs.

5. Each nursing home facility approved under this paragraph must shall be at least 1 mile, as measured over publicly owned roadways, from an existing approved and licensed 123 community nursing home, measured over publicly owned roadways.

124 6. Section 408.0435 does not apply to this paragraph. 125 6.7. A retirement community requesting expedited review 126 under this paragraph shall submit a written request to the 127 agency for an expedited review. The request must shall include 128 the number of beds to be added and provide evidence of 129 compliance with the criteria specified in subparagraph 1. 130 7.8. After verifying that the retirement community meets Page 5 of 9

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131 the criteria for expedited review specified in subparagraph 1., 132 the agency shall publicly notice in the Florida Administrative 133 Register that a request for an expedited review has been 134 submitted by a qualifying retirement community and that the 135 qualifying retirement community intends to make land available 136 for the construction and operation of a community nursing home. 137 The agency's notice must shall identify where potential 138 applicants can obtain information describing the sales price of, 139 or terms of the land lease for, the property on which the 140 project will be located and the requirements established by the 141 retirement community. The agency notice must shall also specify 142 the deadline for submission of the any certificate-of-need 143 application, which may shall not be earlier than the 91st day or 144 and not be later than the 125th day after the date the notice 145 appears in the Florida Administrative Register.

146 <u>8.9</u>. The qualified retirement community shall make land 147 available to applicants it deems to have met its requirements 148 for the construction and operation of a community nursing home 149 but <u>may will</u> sell or lease the land only to the applicant that 150 is issued a certificate of need by the agency under the 151 provisions of this paragraph.

a. A certificate of need application submitted <u>under</u>
pursuant to this paragraph <u>must</u> shall identify the intended site
for the project within the retirement community and the
anticipated costs for the project based on that site. The
application <u>must</u> shall also include written evidence that the

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157 retirement community has determined that <u>both</u> the provider 158 submitting the application and the project <u>satisfy proposed by</u> 159 that provider satisfies its requirements for the project. 160 b. <u>If</u> the retirement <u>community determines</u> community's 161 determination that more than one provider satisfies its 162 requirements for the project, it may notify <u>does not preclude</u> 163 the retirement <u>community from notifying</u> the agency of the

164 provider it prefers.

165 <u>9.10.</u> The agency shall review each submitted application 166 submitted shall be reviewed by the agency. If multiple 167 applications are submitted for <u>a</u> the project as published 168 pursuant to subparagraph <u>7.</u> 8., then the <u>agency shall review the</u> 169 competing applications shall be reviewed by the agency.

The agency shall develop rules to implement the provisions for expedited review process, including time schedule, application content that which may be reduced from the full requirements of s. 408.037(1), and application processing.

175 (3) EXEMPTIONS.-Upon request, the following projects are
176 subject to exemption from the provisions of subsection (1):

177 (f) For the creation of a single nursing home within a 178 district by combining licensed beds from two or more licensed 179 nursing homes within such district, regardless of subdistrict 180 boundaries, if 50 percent of the beds in the created nursing 181 home are transferred from the only nursing home in a county and 182 its utilization data demonstrate that it had an occupancy rate 180 Page 7 of 9

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183 of less than 75 percent for the 12-month period ending 90 days 184 before the request for the exemption. This paragraph is repealed 185 upon the expiration of the moratorium established in s. 186 408.0435(1).

187 (j) (k) For the addition of nursing home beds licensed 188 under chapter 400 in a number not exceeding 10 total beds or 10 189 percent of the number of beds licensed in the facility being 190 expanded, whichever is greater; or, for the addition of nursing 191 home beds licensed under chapter 400 at a facility that has been 192 designated as a Gold Seal nursing home under s. 400.235 in a 193 number not exceeding 20 total beds or 10 percent of the number 194 of licensed beds in the facility being expanded, whichever is 195 greater.

In addition to any other documentation required by the
 agency, a request for exemption submitted under this paragraph
 must certify that:

a. Certify that The facility has not had any class I or
 class II deficiencies within the 30 months preceding the request
 for addition.

b. Certify that The prior 12-month average occupancy rate
for the nursing home beds at the facility meets or exceeds <u>94</u> 96
percent.

c. Certify that Any beds authorized for the facility under this paragraph before the date of the current request for an exemption have been licensed and operational for at least 12 months.

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209 2. The timeframes and monitoring process specified in s. 210 408.040(2)(a)-(c) apply to any exemption issued under this 211 paragraph. 212 3. The agency shall count beds authorized under this 213 paragraph as approved beds in the published inventory of nursing 214 home beds until the beds are licensed. 215 (o) (p) For replacement of a licensed nursing home on the 216 same site, or within 5 $\frac{3}{2}$ miles of the same site, if the number 217 of licensed beds does not increase. 218 (p) (q) For consolidation or combination of licensed 219 nursing homes or transfer of beds between licensed nursing homes 220 within the same planning district subdistrict, by providers that 221 operate multiple nursing homes with any shared controlled 222 interest within that planning district subdistrict, if there is 223 no increase in the planning district subdistrict total number of 224 nursing home beds and the site of the relocation is not more 225 than 30 miles from the original location. 226 Section 3. Section 408.0435, Florida Statutes, is 227 repealed. 228 Section 4. This act shall take effect July 1, 2014.

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COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. HB 287 (2014)

Amendment No.

COMMITTEE/SUBCOMMITTEE	ACTION
ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Health Innovation Subcommittee

3 Representative Artiles offered the following:

4

1

Amendment (with title amendment)

Remove everything after the enacting clause and insert:
Section 1. Subsection (5) of section 408.034, Florida
Statutes, is amended, present subsection (6) of that section is
redesignated as subsection (8), and a new subsection (6) and
subsection (7) are added to that section, to read:

11

408.034 Duties and responsibilities of agency; rules.-

(5) The agency shall establish by rule a nursing-home-bedneed methodology that has a goal of maintaining a subdistrict average occupancy rate of <u>92</u> 94 percent and that reduces the community nursing home bed need for the areas of the state where the agency establishes pilot community diversion programs through the Title XIX aging waiver program.

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18	(6) If nursing home bed need is determined to exist in
19	geographically contiguous subdistricts within a district, an
20	applicant may aggregate the subdistricts' need for a new
21	community nursing home in one of the subdistricts. If need is
22	aggregated from two subdistricts, the proposed nursing home site
23	must be located in the subdistrict with the greater need as
24	published by the agency in the Florida Administrative Register.
25	However, if need is aggregated from more than two subdistricts,
26	the location of the proposed nursing home site must provide
27	reasonable geographic access for residents in the respective
28	subdistricts given the relative bed need in each.
29	(7) If nursing home bed need is determined to exist in a
30	subdistrict, an additional positive application factor may be
31	recognized in the application review process for an applicant
32	who agrees to voluntarily relinquish licensed nursing home beds
33	in one or more subdistricts where there is no calculated need.
34	The applicant must demonstrate that it operates, controls, or
35	has an agreement with another licensed community nursing home to
36	ensure that beds are voluntarily relinquished if the application
37	
100000	is approved and the applicant is licensed.
38	is approved and the applicant is licensed. Section 2. Subsection (2) and paragraphs (f), (k), (p),
38 39	

- 40 are amended to read:
- 41

408.036 Projects subject to review; exemptions.-

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Bill No. HB 287 (2014)

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(2) PROJECTS SUBJECT TO EXPEDITED REVIEW.-Unless exempt 42 pursuant to subsection (3), the following projects are subject 43 to an expedited review shall include, but not be limited to: 44 (a) A Transfer of a certificate of need, except that when 45 an existing hospital is acquired by a purchaser, all 46 47 certificates of need issued to the hospital which are not yet operational shall be acquired by the purchaser τ without need for 48 a transfer. 49 (b) Replacement of a nursing home within the same 50 51 district, if the proposed project site is located within a geographic area that contains at least 65 percent of the 52 53 facility's current residents and is within a 30-mile radius of 54 the replaced nursing home. If the proposed project site is outside the subdistrict where the replaced nursing home is 55 56 located, the prior 6-month occupancy rate for licensed community 57 nursing homes in the proposed subdistrict must be at least 85 percent in accordance with the agency's most recently published 58 59 inventory. (c) Replacement of a nursing home within the same 60 district, if the proposed project site is outside a 30-mile 61 radius of the replaced nursing home but within the same 62 subdistrict or a geographically contiguous subdistrict. If the 63 proposed project site is in the geographically contiguous 64 subdistrict, the prior 6-month occupancy rate for licensed 65 66 community nursing homes for that subdistrict must be at least 85

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67 percent in accordance with the agency's most recently published
68 inventory.

69 (d) (c) Relocation of a portion of a nursing home's 1 licensed beds to another a facility or to establish a new facility within the same district or within a geographically contiguous district, if the relocation is within a 30-mile radius of the existing facility and the total number of nursing home beds in the state district does not increase.

75 (e) (d) The New construction of a community nursing home in
 76 a retirement community as further provided in this paragraph.

1. Expedited review under this paragraph is available ifall of the following criteria are met:

a. The residential use area of the retirement community is
deed-restricted as housing for older persons as defined in s.
760.29(4)(b).

b. The retirement community is located in a county in
which 25 percent or more of its population is age 65 and older.

c. The retirement community is located in a county that has a rate of no more than 16.1 beds per 1,000 persons age 65 years or older. The rate shall be determined by using the current number of licensed and approved community nursing home beds in the county per the agency's most recent published inventory.

d. The retirement community has a population of at least
8,000 residents within the county, based on a population data
source accepted by the agency.

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93 e. The number of proposed community nursing home beds in 94 an application does not exceed the projected bed need after applying the rate of 16.1 beds per 1,000 persons aged 65 years 95 96 and older projected for the county 3 years into the future using 97 the estimates adopted by the agency reduced by, after 98 subtracting the agency's most recently published inventory of licensed and approved community nursing home beds in the county 99 per the agency's most recent published inventory. 100

101 2. No more than 120 community nursing home beds shall be 102 approved for a qualified retirement community under each request 103 for application for expedited review. Subsequent requests for 104 expedited review under this process <u>may shall</u> not be made until 105 2 years after construction of the facility has commenced or 1 106 year after the beds approved through the initial request are 107 licensed, whichever occurs first.

108 3. The total number of community nursing home beds which 109 may be approved for any single deed-restricted community 110 pursuant to this paragraph <u>may shall</u> not exceed 240, regardless 111 of whether the retirement community is located in more than one 112 qualifying county.

113 4. Each nursing home facility approved under this 114 paragraph <u>must shall</u> be dually certified for participation in 115 the Medicare and Medicaid programs.

116 5. Each nursing home facility approved under this 117 paragraph <u>must shall</u> be at least 1 mile, as measured over

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118 publicly owned roadways, from an existing approved and licensed 119 community nursing home, measured over publicly owned roadways. 6. Section 408.0435 does not apply to this paragraph. 120 6.7. A retirement community requesting expedited review 121 122 under this paragraph shall submit a written request to the 123 agency for an expedited review. The request must shall include 124 the number of beds to be added and provide evidence of 125 compliance with the criteria specified in subparagraph 1.

126 7.8. After verifying that the retirement community meets the criteria for expedited review specified in subparagraph 1., 127 the agency shall publicly notice in the Florida Administrative 128 129 Register that a request for an expedited review has been 130 submitted by a qualifying retirement community and that the qualifying retirement community intends to make land available 131 for the construction and operation of a community nursing home. 132 The agency's notice must shall identify where potential 133 applicants can obtain information describing the sales price of, 134 135 or terms of the land lease for, the property on which the 136 project will be located and the requirements established by the 137 retirement community. The agency notice must shall also specify the deadline for submission of the any certificate-of-need 138 application, which may shall not be earlier than the 91st day or 139 140 and not be later than the 125th day after the date the notice 141 appears in the Florida Administrative Register.

142

8.9. The qualified retirement community shall make land 143 available to applicants it deems to have met its requirements

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144 for the construction and operation of a community nursing home 145 but <u>may will</u> sell or lease the land only to the applicant that 146 is issued a certificate of need by the agency under the 147 provisions of this paragraph.

148 a. A certificate-of-need certificate of need application 149 submitted under pursuant to this paragraph must shall identify 150 the intended site for the project within the retirement 151 community and the anticipated costs for the project based on that site. The application must shall also include written 152 evidence that the retirement community has determined that both 153 the provider submitting the application and the project satisfy 154 proposed by that provider satisfies its requirements for the 155 156 project.

b. <u>If</u> the retirement <u>community determines</u> community's
determination that more than one provider satisfies its
requirements for the project, it may notify does not preclude
the retirement community from notifying the agency of the
provider it prefers.

<u>9.10.</u> The agency shall review each submitted application
submitted shall be reviewed by the agency. If multiple
applications are submitted for <u>a</u> the project as published
pursuant to subparagraph <u>7. 8., then</u> the <u>agency shall review the</u>
competing applications shall be reviewed by the agency.

167

168 The agency shall develop rules to implement the provisions for 169 expedited review process, including time schedule, application

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170 content that which may be reduced from the full requirements of 171 s. 408.037(1), and application processing.

172 (3) EXEMPTIONS.-Upon request, the following projects are
173 subject to exemption from the provisions of subsection (1):

(f) For the addition of nursing home beds licensed under 174 chapter 400 in a number not exceeding 30 total beds or 25 175 percent of the number of beds licensed in the facility being 176 177 replaced under paragraph (2)(b), paragraph (2)(c), or paragraph (p), whichever is less For the creation of a single nursing home 178 179 within a district by combining licensed beds from two or more licensed nursing homes within such district, regardless of 180 subdistrict boundaries, if 50 percent of the beds in the created 181 nursing home are transferred from the only nursing home in a 182 county and its utilization data demonstrate that it had an 183 occupancy rate of less than 75 percent for the 12-month period 184 185 ending 90 days before the request for the exemption. This paragraph is repealed upon the expiration of the moratorium 186 established in s. 408.0435(1). 187

188 (k) For the addition of nursing home beds licensed under 189 chapter 400 in a number not exceeding 10 total beds or 10 190 percent of the number of beds licensed in the facility being 191 expanded, whichever is greater; or, for the addition of nursing 192 home beds licensed under chapter 400 at a facility that has been 193 designated as a Gold Seal nursing home under s. 400.235 in a 194 number not exceeding 20 total beds or 10 percent of the number

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195 of licensed beds in the facility being expanded, whichever is 196 greater.

197 1. In addition to any other documentation required by the
 agency, a request for exemption submitted under this paragraph
 must certify that:

a. Certify that The facility has not had any class I or
class II deficiencies within the 30 months preceding the request
for addition.

b. Certify that The prior 12-month average occupancy rate
for the nursing home beds at the facility meets or exceeds <u>94</u> 96
percent.

206 c. Certify that Any beds authorized for the facility under 207 this paragraph before the date of the current request for an 208 exemption have been licensed and operational for at least 12 209 months.

210 2. The timeframes and monitoring process specified in s.
211 408.040(2)(a)-(c) apply to any exemption issued under this
212 paragraph.

3. The agency shall count beds authorized under this
paragraph as approved beds in the published inventory of nursing
home beds until the beds are licensed.

(p) For replacement of a licensed nursing home on the same site, or within 5 3 miles of the same site if within the same subdistrict, if the number of licensed beds does not increase except as allowed by paragraph (f).

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Amendment No.

(q) For consolidation or combination of licensed nursing 220 221 homes or transfer of beds between licensed nursing homes within the same planning district subdistrict, by providers that 222 operate multiple nursing homes with any shared controlled 223 224 interest within that planning district subdistrict, if there is 225 no increase in the planning district subdistrict total number of nursing home beds and the site of the relocation is not more 226 227 than 30 miles from the original location. Section 3. Section 408.0435, Florida Statutes, is 228 229 repealed. Section 4. Section 408.0436, Florida Statutes, is created 230 231 to read: 232 408.0436 Limitation on nursing home certificates of need.-233 Notwithstanding the establishment of need as provided in this 234 chapter, the agency may not approve a certificate-of-need application for new community nursing home beds following the 235 batching cycle in which the cumulative number of new community 236 nursing home beds approved from July 1, 2014, to June 30, 2019, 237 equals or exceeds 5,000. As used in this section, the term 238 239 "batching cycle" means the grouping for comparative review of certificate-of-need applications submitted for beds, services, 240 or programs having a like certificate-of-need need methodology 241 242 or licensing category in the same planning horizon and the same 243 applicable district or subdistrict. This section is repealed on July 1, 2019. 244 245 Section 5. This act shall take effect July 1, 2014.

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COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. HB 287 (2014)

Amendment No.

246	
247	
248	
249	
250	TITLE AMENDMENT
251	Remove everything before the enacting clause and insert:
252	
253	A bill to be entitled
254	An act relating to certificates of need; amending s. 408.034,
255	F.S.; decreasing the subdistrict average occupancy rate that the
256	Agency for Health Care Administration is required to maintain as
257	a goal of its nursing-home-bed-need methodology; conforming a
258	provision to changes made by the act; authorizing an applicant
259	to aggregate the need of geographically contiguous subdistricts
260	within a district for a proposed community nursing home under
261	certain circumstances; requiring the proposed nursing home site
262	to be located in the subdistrict with the greater need under
263	certain circumstances; recognizing an additional positive
264	application factor for an applicant who voluntarily relinquishes
265	certain nursing home beds; requiring the applicant to
266	demonstrate that it meets certain requirements; amending s.
267	408.036, F.S.; providing that, under certain circumstances,
268	replacement of a nursing home and relocation of a portion of a
269	nursing home's licensed beds to another facility, or to
270	establish a new facility, is a health-care-related project
271	subject to expedited review; conforming a cross-reference;
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COMMITTEE/SUBCOMMITTEE AMENDMENT

Amendment No.

Bill No. HB 287 (2014)

272 revising the requirements for projects that are exempted from 273 applying for a certificate of need; repealing s. 408.0435, F.S., relating to the moratorium on the approval of certificates of 274 need for additional community nursing home beds; creating s. 275 408.0436, F.S.; prohibiting the agency from approving a 276 277 certificate-of-need application for new community nursing home beds under certain circumstances; defining the term "batching 278 279 cycle"; providing a repeal; providing an effective date.

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