



CHARLIE CRIST  
GOVERNOR

HOLLY BENSON  
SECRETARY

July 30, 2009

Dear Administrator/CEO:

During the 2009 Florida legislative session, new laws were enacted that affect many health care providers in this state. The primary legislation affecting providers is Senate Bill 1986 (SB 1986). Most provisions of SB 1986 were effective July 1, 2009. To access the full text of these new laws, please visit: [http://laws.flrules.org/files/Ch\\_2009-223.pdf](http://laws.flrules.org/files/Ch_2009-223.pdf).

Changes were made as follows under Chapter 408, Part II: Health Care Licensing for all provider types regulated by the Agency, with the following being of specific interest:

- Applications will be returned if submitted more than 120 days prior to expiration or the requested effective date.
- Additional offenses have been added as disqualifying for persons who require background screening and apply to persons hired after October 1, 2009. A person who serves as a controlling interest or is an employee on September 30, 2009 will not have to be rescreened if they have previously met the background screening requirements. However, if they have one of the new disqualifying offenses on their record, they must apply for an exemption from the appropriate board prior to September 30, 2009.
- Any information required to be reported to the Agency must be submitted within 21 calendar days after the report period or effective date of the information, whichever is earlier. This includes, but is not limited to, any change of information contained in the most recent application for licensure and required insurance or bonds.
- Providers must notify the resident and their representatives, if any, where to report Medicaid fraud prior to any services being rendered. The Agency shall provide a written description of Medicaid fraud and the toll-free number to call.
- Additional grounds are authorized for denial of applications if the applicant or a controlling interest has been convicted, plead guilty or no contest for a felony under chapter 409, chapter 817, chapter 893, 21 U.S.C. ss. 801-970, or 780 42 U.S.C. ss. 1395-1396, or has been terminated for cause from the Federal Medicare or Medicaid programs.
- A safety liaison must be designated as the primary contact for emergency operations, and licensees providing residential or inpatient services must utilize an online database approved by the Agency to report information to the Agency regarding the provider's emergency status, planning, or operations. This system is the Emergency Status System, available at <http://ess.myflorida.com>.



The bill does the following regarding emergency management planning:

- Providers that are required to have an emergency operations plan must designate a safety liaison to serve as the primary contact for emergency operations. (This includes adult family care homes, ambulatory surgical centers, assisted living facilities, crisis stabilization units, end stage renal disease facilities, hospice freestanding inpatient facilities and residential units, hospitals, intermediate care facilities for the developmentally disabled, nursing homes, residential treatment centers for children and adolescents, residential treatment facilities, short-term residential treatment facilities, and transitional living facilities.)

Licensees providing residential or inpatient services (excludes ambulatory surgical centers) must utilize the Agency's Emergency Status System (ESS) online database to report information to the Agency regarding the provider's emergency status, planning, or operations.

Allows a provider to temporarily exceed its licensed capacity to act as a receiving provider in accordance with an approved emergency operations plan for up to 15 days (or longer if justified and approved by the Agency). Appropriate care must be provided to all clients while in an overcapacity status.

- Gives the Agency the ability to issue an inactive license to a provider in an area in which a state of emergency was declared if the provider suffered damage during the state of emergency, is currently licensed, does not have a provisional license, and will be temporarily unable to provide services but is reasonably expected to resume services within 12 months. An inactive license may be issued for up to 12 months and may be renewed for an additional 12 months if progress is being made toward reopening.

As indicated above, with the implementation of SB 1986, effective July 1, 2009, providers are now required to enroll in the Emergency Status System (ESS) maintained by the Agency. If you have not enrolled in ESS, please do so now as part of your emergency preparedness. If you have previously enrolled, please take time now to verify your information. You may enroll and update your information online at the ESS link: <http://ess.myflorida.com/>. If you are enrolling in ESS for the first time, select the "First Time Users" link to complete a user agreement.

**ESS User Enrollment** - Each provider may enroll up to two people as Provider ESS Users. Additionally, persons affiliated with the provider, such as a corporate representative, may enroll as Affiliate ESS Users. Once approved by the provider, the Affiliate may enter information for the provider into ESS. If you have questions regarding enrollment, contact the appropriate licensure unit at the Agency for Health Care Administration.

**Long Term Care Unit**

(850) 488-5861 for Nursing Homes, Intermediate Care Facilities for the Developmentally Disabled, Transitional Living Facilities and Homes for Special Services

(850) 487-2515 for Assisted Living Facilities and Adult Family Care Homes

Should you have questions about this information or any other Agency activities, please contact the appropriate section for assistance.

Sincerely,

A handwritten signature in blue ink that reads "Bernard E. Hudson". The signature is written in a cursive style with a large initial "B".

Bernard E. Hudson, Manager  
Long Term Care Unit

cc: Adult Family Care Homes