

**STORAGE NAME:** h1625a.hhs

**DATE:** April 18, 1997

**HOUSE OF REPRESENTATIVES  
AS REVISED BY THE COMMITTEE ON  
HEALTH AND HUMAN SERVICES APPROPRIATIONS  
BILL ANALYSIS & ECONOMIC IMPACT STATEMENT**

**BILL #:** HB 1625

**RELATING TO:** Transitional Living Facilities/Brain and Spinal Cord Injured Patients

**SPONSOR(S):** Committee on Health Care Standards & Regulatory Reform

**STATUTE(S) AFFECTED:** Creates ss. 400.905, 400.906, 400.907, 400.908, 400.909, 400.910, 400.911, 400.912, 400.913, 400.914, 400.915, 400.916, 400.917, 400.918, 400.919, 400.920, 400.921, 400.922, 400.923, 400.924, 400.925, 400.926, 400.927, 400.928, and 400.929, revises ss. 413.273, 413.395, 413.405, and 413.605, and repeals s. 400.805, F.S.

**COMPANION BILL(S):**

**ORIGINATING COMMITTEE(S)/COMMITTEE(S) OF REFERENCE:**

- (1) HEALTH CARE STANDARDS & REGULATORY REFORM YEAS 6 NAYS 0
- (2) HEALTH AND HUMAN SERVICES APPROPRIATIONS YEAS 11 NAYS 0
- (3)
- (4)
- (5)

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**I. SUMMARY:**

This legislation provides for the revision of the state licensure program for Transitional Living Facilities (TLFs) for brain and spinal cord injured patients, by establishing a new part IX of chapter 400, F.S., and repeals the current law in part VIII of the same chapter. The duties of the Advisory Council on Brain and Spinal Cord Injuries is expanded to include the annual appointment of a five person committee composed of consumers and professionals to conduct on-site visits to TLFs.

Regulatory authority for the protection of residents is strengthened to include right of entry by AHCA staff, definition of appropriate resident and treatment programs to be included in this licensure category, resident rights, administrative remedies, receivership proceedings, and contract agreements with residents. The bill provides for the deposit of all fees and fines in the Health Care Trust Fund administered by AHCA and earmarked for enforcing the program.

In addition, it extends per diem and reimbursement for travel expenses to all activities required of members of councils established under part II, ch. 413, F.S., relating to general vocational rehabilitation programs. It provides that expenses for accommodations necessitated by members' disabilities are to be reimbursed or such accommodations are to be provided by the Division of Vocational Rehabilitation. Provides reimbursement of certain child care expenses for members of the Florida Independent Living Council and the Rehabilitation Advisory Council, and reasonable compensation under certain conditions to certain members of the Florida Independent Living Council. This conforms with current statutory provisions for the Rehabilitation Advisory Council and federal provisions for both programs. The Florida Independent Living Council is authorized to incorporate as a not-for-profit corporation.

Cost of regulation will be fee-supported. There is minimal fiscal impact on the state, none on local government and no fiscal impact on the private sector in general.

II. SUBSTANTIVE ANALYSIS:

A. PRESENT SITUATION:

The Agency for Health Care Administration (AHCA) includes the Division of Health Quality Assurance which has responsibility for licensure and Medicare/Medicaid certification of 34 different types of health care facilities and health care service providers, including nearly 17,000 individual facilities and providers. Generally, the statutes clearly provide AHCA with rule making authority and regulatory and enforcement authority. In some cases, the statutes establish a joint responsibility between AHCA and another executive agency for the regulation of certain programs. For instance, the Department of Elder Affairs has rule making authority for several assisted living programs, while AHCA is responsible for issuance of licenses, inspections and enforcement. Similarly, the Department of Children and Families has rule making authority for several mental health programs, while AHCA, again, is responsible for issuance of licenses, inspections and enforcement.

Transitional Living Facilities (TLFs) are intended to serve persons who have had traumatic injury to the brain or spinal cord. These facilities are currently licensed pursuant to Chapter 400, Part VIII (400.805), F.S., by AHCA in collaboration with the Division of Vocational Rehabilitation (DVR) of the Department of Labor and Employment Security. Section 400.805, F.S., authorizes AHCA to issue licenses to TLFs upon notification by DVR that a facility meets the service requirements. Section 413.49, F.S., authorizes DVR to develop standards governing the delivery of services to residents in licensed TLFs. This treatment is defined as time-limited and directed toward preparing the individual for living in the most independent living situation possible in the community. Services provided include physical therapy, occupational therapy, speech therapy, skills of daily living training, and vocational orientation. Persons in TLFs should not require around the clock medical care. Section 413.605, F.S., provides for the creation of the Advisory Council on Brain and Spinal Cord Injuries. The council is to provide advice and expertise to DVR in the preparation, implementation, and periodic review of the program.

There are presently six facilities licensed in this category. There were seven facilities until recently, when a six bed facility in Palm Harbor changed its classification. These are relatively small facilities ranging in capacity from six to sixteen beds with the one exception being an eighty-one bed facility. Facilities are located in Orlando, Wauchula, Tampa, Lutz, Miami, and Clearwater. The combined bed total of the 6 facilities is 141 beds. The concept of a TLF originated with the DVR as a program to assist clients in successful reentry to community living and gainful employment. TLFs primarily service DVR clients.

The DVR funds the care and services of clients through contracts with the TLFs, funded through the Florida Brain and Spinal Cord Injury Trust Fund. Revenues for the Florida Brain and Spinal Cord Injury Program are derived from civil penalties received by county courts from traffic violations, including speeding and driving under the influence. Expenditures for FY 95/96 for TLF services were approximately \$2,000,000 for approximately 92 clients (This does not include clients referred from and services paid by other sources).

Contracted daily rates vary from \$260.00 to \$415.00, depending upon the nature of the client injuries and services provided. TLFs may also admit and serve other individuals funded by private payment or third-party payment, which is typically substantially greater than the DVR contracted rates, with a \$385.00 to \$648.00 per day range reported for one facility. Generally, the costs of services for brain-injured individuals is significantly higher than for spinal-cord injured individuals, because rehabilitation is more complex and of longer duration.

A legislative "sunset review" of Chapter 400, F.S., was conducted in 1993. The revisions made at that time included the removal of Transitional Living Facility licensure from the Nursing Home part of the statute to a separate part (Chapter 400, Part VIII) which specifically addressed Intermediate, Special Services, and Transitional Living Facilities. One of the intentions in segregating statutory requirements for TLFs from nursing homes was to eliminate requirements for medical staff and treatment that were not applicable to TLF programs, which are more focused on rehabilitation and adjustment to community living.

Although the separation of TLF requirements from nursing home requirements accomplished the objective of eliminating inappropriate program requirements, according to AHCA staff, the establishment of a separate part for TLFs inadvertently resulted in the loss of other important regulatory authority. Prior statutory authorization for entry and inspection of facilities by agency staff, and for development of rules other than those relating to physical plant and fiscal management was not transferred to the newly created Part VIII. Neither section 400.805, F.S., nor section 413.614, F.S., provide sufficient basis for development of criteria necessary to monitor the care provided in the facilities. Concern has arisen that there may be instances of this licensure category being misinterpreted or misused by provider organizations to deliver services that are not consistent with the time limitation or with the intended client populations. Restoration of adequate on-site monitoring authority by both AHCA and DVR is critical.

Although there have been no instances of refusal by a TLF to allow AHCA inspection staff to conduct complaint investigations, the lack of clear statutory authority for routine inspections and complaint investigations could pose problems in enforcement of adequate standards of care and services.

Section 400.805, F.S., does not specify the trust fund for deposit of licensure fees and administrative fines. Trust fund authorization was not transferred to s. 400.805, F.S., in the 1993 sunset statutory revision. However, revenue continues to be deposited in the Agency's Health Care Trust Fund, which is a general trust fund that handles licensure fees and administrative fines for all of AHCA's licensure programs, with few exceptions.

Section 400.805(7), F.S., currently provides for a civil or administrative fine not to exceed \$5,000 for a violation of any provision of this section (400.805, F.S.), or rules adopted by AHCA or DVR. A violation of s. 400.805(6), F.S., or rules adopted under this subsection relating to licensure of a TLF is a misdemeanor of the first degree, punishable as provided in s. 775.082 or 775.083, F.S. Each day of a continuing violation is a separate offense.

In addition to brain and spinal cord injuries, Chapter 413, F.S., contains provisions relating to several vocational rehabilitation programs. Part I of Chapter 413, F.S.,

relates to the Blind Services Program. Part II of the chapter relates to general vocational rehabilitation programs.

The provisions of s. 413.24, F.S., direct the Division of Vocational Rehabilitation of the Department of Labor and Employment Security to adopt such methods of administration not in conflict with the laws of this state as are found by the Federal Government to be necessary for the proper and efficient administration of such agreements or plans for vocational rehabilitation and to comply with such conditions as may be necessary to secure the full benefits of federal statutes pertaining to vocational rehabilitation.

### **FLORIDA INDEPENDENT LIVING COUNCIL**

The provisions of s. 705(a) of Title VII of the Rehabilitation Act of 1973 (the Act), as amended in 1992, require a state to establish a Statewide Independent Living Council (SILC) to be eligible to receive federal financial assistance under the chapter. A state is prohibited from establishing a SILC as an entity within a state agency. Subsection 413.395(1), F.S., provides for the creation of the Florida Independent Living Council (FILC) to assist the Division of Vocational Rehabilitation and the Division of Blind Services of the Department of Labor and Employment Security, as well as other entities, in the expansion and development of statewide independent living policies, programs, and concepts and to recommend improvements for such programs and services. To ensure consistency with provisions of the Act, as amended, Florida law requires that the FILC function independently of the Division. The FILC is assigned to the Division of Vocational Rehabilitation for administrative purposes only.

Section 705(f) of the Act provides that a SILC may reimburse its members for reasonable and necessary expenses of attending SILC meetings and performing SILC duties (including child care and personal assistance services). The Act further provides that the SILC may pay compensation to a member, if such member is not employed or must forfeit wages from other employment, for each day the member is engaged in performing SILC duties. Section 413.273, F.S., provides for per diem and travel expenses for required attendance at meetings of SILC's established under part II of ch. 413, F.S. The provisions of s. 413.273, F.S., also permit reimbursement of reasonable expenses for personal care attendants and interpreters needed by members during required attendance at such council meetings. Finally, the provisions of s. 413.273, F.S., prohibit compensating a member for performance of his or her duties as a SILC member except as otherwise provided for in Part II of ch. 413, F.S.

### **FLORIDA REHABILITATION ADVISORY COUNCIL**

The provisions of s. 105(a)(1) of Title I of the Rehabilitation Act of 1973 as amended in 1992, require a state to establish a State Rehabilitation Advisory Council (SRAC) in order to be eligible to receive financial assistance under the title. Section 413.405, F.S., provides for the creation of the Rehabilitation Advisory Council (RAC) to assist the Division of Vocational Rehabilitation in the planning and development of statewide rehabilitation programs and services, to recommend improvements to such programs and services, and to perform a number of services outlined in the section.

The provisions of s. 105(g) of Title I of the Act permit a SRAC to use funds appropriated under the Title to reimburse members of a SRAC for reasonable and necessary expense of attending SRAC meetings and performing SRAC duties. This includes expenses for

child care and personal assistance services. A SRAC is also permitted to pay compensation to a member of the SRAC, if such member is not employed or must forfeit wages from other employment, for each day the member is engaged in performing the duties of the SRAC.

Subsection 413.405(11), requires the RAC to reimburse its members for reasonable and necessary expenses of attending RAC meetings and performing RAC duties, including child care and personal assistance services in accordance with the provisions of s. 112.061, F.S. The RAC is permitted to pay reasonable compensation to a member of RAC if the member is not employed or must forfeit wages from other employment for each day the member is engaged in performing the duties of the RAC.

**B. EFFECT OF PROPOSED CHANGES:**

The proposed bill will reestablish regulatory authority apparently unintentionally deleted during the 1993 sunset review and reenactment of the TLF licensure statute. The bill will also strengthen the joint relationship of AHCA and DVR in monitoring the provision of quality care and services by facilities to individuals with brain and spinal cord injuries. Due to the extent of substantive revision to the current statute regulating TLFs (Part VIII of chapter 400, F.S.), it is repealed and replaced with a new Part IX of chapter 400, F.S. The changes include:

Establishing a peer review approach to monitoring the care and services of TLFs by a DVR five member committee, to supplement abbreviated monitoring visits by AHCA.

Revises duties of the existing Brain and Spinal Cord Injury Council to include a committee that monitors and reviews TLFs, and whose findings may be adopted and enforced by AHCA. Defines the qualifications of the five member committee.

Reestablishes right of entry and inspection for AHCA and state and local fire marshals.

Clarifies that TLFs are time-limited programs providing services to victims of traumatic injuries that insure progress toward re-integration of individuals into independent community living.

Provides that TLFs may be separately licensed as programs for spinal cord injuries, brain injuries, or both.

Requires background screening for all owners and managing employees of TLFs. Establishes requirements for licensed personnel functions. Requires the owner/administrator to insure that residents are appropriate for admission. A prohibition is established against a physician or nurse who is employed or under contract with a TLF for providing an initial examination from having a financial interest in the facility. Monthly nursing assessments of residents are provided for. Facilities are prohibited from retaining a resident who requires medical care beyond that which the facility is licensed to provide. Prohibits paying of rebates for referring clients to receive services in a licensed facility. This section also authorizes AHCA, in consultation with DVR, to adopt rules which assess administrative penalties for prohibited referral practices.

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Requires counties and municipalities to confirm that a TLF is properly licensed with AHCA prior to issuing an occupational license.

Establishes receivership proceedings for facilities that are unlicensed or unable to operate safely.

Requires contracts with individual residents specifying services, accommodations, rates, rights, and obligations.

Establishes a Resident Bill of Rights, patterned after the nursing home and assisted living facility statutes, including the right of civil action for violation of rights.

Increases the annual licensure fee from \$2,000 per facility plus \$39.25 per bed, to \$3,000 per facility plus \$50 per bed, to fund the additional expenses of the Advisory Council on Brain and Spinal Cord Injuries.

Provides for a \$5,000 maximum administrative fine per violation based on the scope and severity of four classes of violations. In addition, it provides for a \$10,000 maximum administrative fine for facilities that cease operation without providing proper notice to residents and AHCA.

Provides for the deposit of all fees and fines collected under this part into the Health Care Trust Fund administered by AHCA. Provisions are made for up to 50% of these funds to be used for expenses of receivership actions, and the balance to be used to offset costs of licensure programs administered by both AHCA and the Advisory Council on Brain and Spinal Cord Injuries.

In addition, s. 413.273, F.S., relating to reimbursement for members of the various councils is expanded to cover all activities required by a council rather than just attendance at a meeting. This makes Florida law more consistent with federal provisions which permit reimbursement of reasonable and necessary expenses of attending council meetings and performing council duties.

The Florida Independent Living Council (FILC), which must not, pursuant to federal law, be established as an entity within another state agency, is permitted to elect to be incorporated as a Florida not-for-profit corporation. If the FILC elects to incorporate, the Division of Vocational Rehabilitation is directed to incorporate the FILC. The FILC's appointed members will constitute the board of directors of the corporation.

The FILC is specifically authorized to reimburse members for child care expenses incurred as a result of activities required by the FILC.

The FILC is specifically authorized to pay reasonable compensation to a member of the FILC if such member is not employed or must forfeit wages from other employment for each day the member is engaged in performing the duties of the FILC.

Reimbursement provisions relating to the Rehabilitation Advisory Council (RAC) are amended to cross-reference the general provisions in s. 413.273, F.S. The RAC is specifically authorized to reimburse members for child care expenses incurred as a result of activities required by the RAC. Language requiring the RAC to reimburse

members for reasonable and necessary expenses of attending meetings and performing RAC duties is stricken.

C. APPLICATION OF PRINCIPLES:

1. Less Government:

a. Does the bill create, increase or reduce, either directly or indirectly:

(1) any authority to make rules or adjudicate disputes?

Yes. It clarifies that AHCA, in conjunction with DVR, has authority to make rules pertaining to enforcement of the laws relating to TLFs. This bill does not create new government full time employees nor create dependence on government for a commodity or service other than regulatory and licensing functions. The bill authorizes development of administrative rules necessary to define standards for administration, facilities, and services of TLFs, and requires review of facilities by an advisory five member committee of an existing council.

(2) any new responsibilities, obligations or work for other governmental or private organizations or individuals?

No.

(3) any entitlement to a government service or benefit?

No.

b. If an agency or program is eliminated or reduced:

(1) what responsibilities, costs and powers are passed on to another program, agency, level of government, or private entity?

None. This bill does not eliminate, reduce or transfer any agency or program.

(2) what is the cost of such responsibility at the new level/agency?

Not Applicable.

(3) how is the new agency accountable to the people governed?

Not Applicable.

2. Lower Taxes:

a. Does the bill increase anyone's taxes?

No.

b. Does the bill require or authorize an increase in any fees?

Yes. It authorizes a fee increase on the six TLFs located around the state. Any TLF's that begin operation after the effective date of the bill would be subject to the increased fee. The total annual increase in fee income to AHCA (\$7,516 ) will be used to enhance enforcement of the law and rules relating to TLFs.

c. Does the bill reduce total taxes, both rates and revenues?

No.

d. Does the bill reduce total fees, both rates and revenues?

No.

e. Does the bill authorize any fee or tax increase by any local government?

No.

3. Personal Responsibility:

a. Does the bill reduce or eliminate an entitlement to government services or subsidy?

No. This bill does not reduce or eliminate an entitlement to government services or subsidies.

b. Do the beneficiaries of the legislation directly pay any portion of the cost of implementation and operation?

Service providers pay a fee to cover the costs of regulation.

4. Individual Freedom:

- a. Does the bill increase the allowable options of individuals or private organizations/associations to conduct their own affairs?

No.

- b. Does the bill prohibit, or create new government interference with, any presently lawful activity?

The bill clarifies that the Agency for Health Care Administration has the right to directly access facilities and generally tightens regulatory standards and enforcement authority.

5. Family Empowerment:

- a. If the bill purports to provide services to families or children:

- (1) Who evaluates the family's needs?

Not Applicable.

- (2) Who makes the decisions?

Not Applicable.

- (3) Are private alternatives permitted?

Not Applicable.

- (4) Are families required to participate in a program?

No.

- (5) Are families penalized for not participating in a program?

No.

- b. Does the bill directly affect the legal rights and obligations between family members?

No.

- c. If the bill creates or changes a program providing services to families or children, in which of the following does the bill vest control of the program, either through direct participation or appointment authority:

- (1) parents and guardians?

Not Applicable.

- (2) service providers?

Not Applicable.

- (3) government employees/agencies?

Not Applicable.

**D. SECTION-BY-SECTION ANALYSIS:**

Section 1. Creates part IX of ch. 400, F.S., entitled "Transitional Living Facilities."

Section 2. Creates s. 400.905, F.S., relating to the licensure of TLFs for brain and spinal cord injured persons.

Section 3. Creates s. 400.906, F.S., providing for definitions for use in Part IX, relating to licensure and enforcement of TLFs.

Section 4. Creates s. 400.907, F.S., providing for license requirements, fees, and penalties.

Section 5. Creates s. 400.908, F.S., providing for sale or transfer of ownership of a TLF.

Section 6. Creates s. 400.909, F.S., providing for denial, revocation, or suspension of a license, and imposition of an administrative fine.

Section 7. Creates s. 400.910, F.S., providing for imposition of a moratorium on admissions under certain circumstances.

Section 8. Creates s. 400.911, F.S., providing for requirements for initial licensure.

Section 9. Creates s. 400.912, F.S., providing requirements for expiration, renewal and conditional licenses.

Section 10. Creates s. 400.913, F.S., providing for reports of abuse in TLFs.

Section 11. Creates s. 400.914, F.S., providing for disposition of fees and administrative fines.

- Section 12. Creates s. 400.915, F.S., providing for four classes of violations and the potential penalties for each class.
- Section 13. Creates s. 400.916, F.S., prohibiting rebates and providing for administrative penalties to be developed by AHCA, in consultation with the Division of Vocational Rehabilitation of the Department of Labor and Employment Security.
- Section 14. Creates s. 400.917, F.S., prohibiting solicitation of certain type contributions and providing guidelines for solicitation.
- Section 15. Creates s. 400.918, F.S., providing circumstances in which AHCA may institute injunctive proceedings in a court of competent jurisdiction against a TLF.
- Section 16. Creates s. 400.919, F.S., providing circumstances in which AHCA may institute receivership proceedings against a TLF.
- Section 17. Creates s. 400.920, F.S., establishing requirements for contracts between TLF residents and TLF establishments.
- Section 18. Creates s. 400.921, F.S., establishing requirements for personnel used in a TLF facility.
- Section 19. Creates s. 400.922, F.S., establishing requirements for admission to a TLF facility. Prohibits physicians or nurse practitioners employed (or contracted with) by a facility to make initial examinations for admission purposes from having a financial interest in such facility.
- Section 20. Creates s. 400.923, F.S., providing guidelines for property and personal affairs of residents in TLFs.
- Section 21. Creates s. 400.924, F.S., establishing requirements of a resident bill of rights.
- Section 22. Creates s. 400.925, F.S., establishing requirements for civil actions to enforce a resident's rights.
- Section 23. Creates s. 400.926, F.S., providing AHCA or the Fire Marshall the right of entry and inspection of any TLF facility.
- Section 24. Creates s. 400.927, F.S., providing procedures for closing or discontinuation of operation of a facility. Provides for a penalty if proper procedures are not followed.
- Section 25. Creates s. 400.928, F.S., providing for establishing rules related to standards for maintenance, management plans, employee qualifications, and inspections of facilities.
- Section 26. Creates s. 400.929, F.S., providing for maintenance of records and posting a copy of the latest inspection report.

Section 27. Amends s. 413.605, F.S., relating to the advisory council on brain and spinal cord injuries to provide duties of council and to authorize appointment of a five member committee to assist in facility inspections and other tasks.

Section 28. Amends s. 413.273(1), F.S., to extend per diem and travel expenses to all activities required of members of councils established under Part II of Chapter 413, F.S., relating to vocational rehabilitation; requires reimbursement of reasonable expenses for accommodations such as personal care attendants and interpreters needed by members because of their disabilities during all activities required by the councils or requires the Division of Vocational Rehabilitation to provide the accommodations.

Section 29. Amends s. 413.395(1), F.S., to permit the Florida Independent Living Council (FILC) to incorporate as a Florida not-for-profit corporation. Creates s. 413.395(13), to permit the FILC to reimburse members for certain child care expenses and to compensate members under certain conditions.

Section 30. Amends s. 413.405(11), F.S., to strike existing language relating to expense reimbursement and cross-reference expense reimbursement provisions in s. 413.273, F.S.; permits the Rehabilitation Advisory Council (RAC) to reimburse members for certain child care expenses.

Section 31. Repeals s. 400.805, F.S., relating to administration of transitional living facilities (TLFs).

Section 32. Provides an effective date of October 1, 1997.

### III. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT:

#### A. FISCAL IMPACT ON STATE AGENCIES/STATE FUNDS:

1. Non-recurring Effects:

See Fiscal Comments.

2. Recurring Effects:

See Fiscal Comments.

3. Long Run Effects Other Than Normal Growth:

None.

4. Total Revenues and Expenditures:

See Fiscal Comments.

**B. FISCAL IMPACT ON LOCAL GOVERNMENTS AS A WHOLE:**

1. Non-recurring Effects:

None.

2. Recurring Effects:

None.

3. Long Run Effects Other Than Normal Growth:

None.

**C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:**

1. Direct Private Sector Costs:

There will be a \$7,516 impact in total on the six TLFs located around the state. In addition, new facilities that begin operations after the effective date of this act would be subject to the increased fees.

2. Direct Private Sector Benefits:

None.

3. Effects on Competition, Private Enterprise and Employment Markets:

None.

**D. FISCAL COMMENTS:**

The Agency for Health Care Administration (AHCA) provided the following fiscal information:

**Revenues** - Total license fee revenue at the current rate is \$17,534. The proposed increase would generate \$7,516, for total annual fee revenues of \$25,050.

Few, if any, fines are currently collected. Similarly, AHCA does not project increased collections if the bill is passed. The TLFs are given an opportunity to correct the cited problems and the fine is waived. In most instances, the fines will be waived.

**Expenditures** - AHCA states that it will not take any additional FTEs to enforce the provisions of this bill. AHCA already licenses these facilities. However, the newly created five member committee proposed by the Division of Vocational Rehabilitation will cost approximately \$15,000 per year for travel expenses related to facility monitoring.

The bill calls for placing all license fees and fines collected in the Health Care Trust Fund.

According to the Department of Labor and Employment Security, there is no fiscal impact from the changes made to ss. 413.273, 413.395, and 413.405, F.S.

IV. CONSEQUENCES OF ARTICLE VII, SECTION 18 OF THE FLORIDA CONSTITUTION:

A. APPLICABILITY OF THE MANDATES PROVISION:

This bill does not require counties or municipalities to spend funds or to take an action requiring the expenditure of funds.

B. REDUCTION OF REVENUE RAISING AUTHORITY:

This bill does not reduce the authority that municipalities or counties have to raise revenues in the aggregate.

C. REDUCTION OF STATE TAX SHARED WITH COUNTIES AND MUNICIPALITIES:

This bill does not reduce the percentage of a state tax shared with counties or municipalities.

V. COMMENTS:

None.

VI. AMENDMENTS OR COMMITTEE SUBSTITUTE CHANGES:

None.

VII. SIGNATURES:

COMMITTEE ON HEALTH CARE STANDARDS & REGULATORY REFORM:

Prepared by:

Legislative Research Director:

Robert W. Coggins

Robert W. Coggins

AS REVISED BY THE COMMITTEE ON HEALTH AND HUMAN SERVICES

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