58B-1.001 Definitions.

In addition to the definitions included in Chapter 430, F.S., the following terms shall apply in this rule chapter:

1. Access Point: A service provider or other entity that performs one or more aging resource center functions under an agreement with the aging resource center. The agreement can be in the form of a referral agreement, contract, memorandum of understanding, or any similar document.

2. Aging Resource Center (ARC): An entity approved by the Department of Elder Affairs (DOEA), accessible through multiple entry points, that provides access to economic and long-term care services for all elders and their families, regardless of ability to pay. The eligibility functions are determined by the Comprehensive Assessment and Review for Long-term Care Services (CARES)/DOEA and the Department of Children and Families (DCF) Economic Self – Sufficiency (ESS) programs integrated through collocation of DOEA and DCF staff.
   - Determination of financial and technical eligibility for all public assistance programs, including Medicaid, is the responsibility of DCF/ESS staff.
   - Determination of medical eligibility for Medicaid waiver services and nursing home placement is the responsibility of DOEA/CARES staff.
   - The ARC coordinates the following functions under its contract with DOEA:
     1. Access: Providing elders, their families and caregivers a customer friendly way to gain long-term care information and entry into services and programs.
     2. Information: Responding to an inquiry from a person, or on behalf of a person, regarding public and private resources and available services.
     3. Referral: Obtaining information about a person’s needs; directing people to resources most capable of meeting the need; contacting the resource for the person as needed. (Follow-up is mandatory to determine the outcome of the Referral/Assistance.)
     4. Screening: Performing standard data collection to gather information about an applicant for services and to conduct preliminary evaluation of eligibility for assistance.
     5. Triaging: Sorting applicants for long-term care services and prioritizing access on the basis of need for or likely benefit from long-term care services.
     6. Eligibility Determination: Reviewing and analyzing program specific criteria in order to decide if an individual is qualified to receive publicly funded program services.
     7. Long-Term Care Options: Answering questions and providing unbiased information on available long-term care service options and advising on what factors to consider when selecting a program or provider.
     8. Choice Counseling: Exploring all available alternatives to nursing facility placement and recommending placement and proper support services in the least restrictive, most appropriate setting possible; performed by DOEA CARES staff.
     9. Fiscal Control: Maximizing the use, efficiency and targeting of public resources. Tools include Assessed Priority Consumer List (wait list) management and care plan review.
     10. Quality Assurance: Ensuring that performance is in the client’s best interest and long-term care services are cost-effective, of high quality, and responsive and appropriate to assessed needs.
3. Aging Resource Center client: An individual currently receiving services through any of the programs referred by the ARC, including individuals referred to private providers.

4. Executive Director: An individual who shall be delegated responsibility for the ARC management and implementation of governing body policy; and who shall be accountable to the governing body for the ARC’s performance. The ARC executive director may be the same individual who serves as the area agency on aging executive director.

5. Governing Body: The board of the area agency on aging as described in Section 20.41(7), F.S.

6. Information and Referral Specialist: The staff person(s) responsible for providing:
   - Information to individuals regarding public and private resources;
(b) Referral of individuals to the resources capable of meeting their needs; and
(c) Follow-up on referrals.

(7) Intake, Screening and Triaging Professional: The staff person(s) responsible for carrying out the following duties and responsibilities:
   (a) For Title XIX (Medicaid/MedWaiver) services:
      1. Assisting in the initial preliminary determination of programs and services that may serve the needs of the individual; and
      2. Providing information on eligibility criteria and the application process.
   (b) For other funded services (Older Americans Act, Community Care for the Elderly, Home Care for the Elderly, Alzheimer’s Disease Initiative, and contracted services), determining an applicant’s:
      1. Potential eligibility for non-Medicaid programs;
      2. Prioritized need for long-term care services; and
      3. Priority for a comprehensive assessment.

Specific Authority 430.08, 430.2053(12) FS. Law Implemented 430.2053 FS. History–New 4-16-07.

58B-1.003 Operating Procedures.

(1) SERVICE DELIVERY and ACCESSIBILITY. At a minimum, information shall be provided to all persons accessing the ARC by telephone, the Internet, or in person.
   (a) The ARC shall, at a minimum, maintain regular business hours from 8:00 a.m. to 5:00 p.m., Monday through Friday, excluding state and national holidays.
   (b) A staff member shall be assigned to answer the published, main telephone number of the ARC during regular business hours.
   (c) The ARC shall ensure there is a system in place for answering and responding to calls received outside of the regular business hours.
      1. The system shall, at a minimum, identify the agency, hours of operation, and give callers the option to leave a message.
      2. The system shall instruct callers to dial “911” in the event of an emergency.
      3. Messages shall be responded to the next business day.
   (d) The ARC shall maintain an adequate number of access points to ensure that consumers who reside in all counties in the planning and service area have access to ARC services.

(2) EXECUTIVE STAFF REQUIREMENTS: At a minimum, executive staffing requirements shall consist of:
   (a) An executive director who shall be a full-time employee having designated authority over the staff and all activities of the ARC; and
   (b) A fiscal officer.

(3) PROFESSIONAL STAFF REQUIREMENTS: Professional staff shall be available to perform the tasks required of the ARC. Additional professional staff shall be required to adequately meet the needs of elders residing within the area served by the center if the minimum staffing standards cannot adequately meet those needs. At a minimum, the ARC shall employ the following professional staff:
   (a) One Information and Referral Specialist; and
   (b) One Intake, Screening and Triaging Professional.

The minimum professional staff requirement does not preclude an individual from performing the functions of both positions, provided the individual meets the minimum qualifications for each position as outlined in subsection (4) of this rule.

(4) MINIMUM EDUCATION and EXPERIENCE REQUIREMENTS: The ARC executive staff and professional staff shall meet minimum standards for education and experience and shall demonstrate competency in job knowledge pertinent to their areas of responsibility. The following are the criteria for ARC executive staff and professional staff:
   (a) The executive director shall meet the following minimum standards:
      1. Have a Bachelor’s Degree from an accredited college or university in public administration, education, social work, or a related academic area with a minimum of five years of professional or administrative supervisory experience in social, economic, health, or rehabilitative services. A Master’s degree can substitute for one year of required work experience.
      2. Work experience as indicated above may be substituted for the required college education on a year for year basis.
      3. Five years experience in project management or community organization and planning related to elderly services is preferred.
(b) The fiscal officer shall meet the following minimum standards:
1. Have the appropriate educational and accounting experience as indicated below:
   a. A current CPA certification; or
   b. A Bachelor’s Degree in accounting with two years of cost accounting experience in a non-profit setting; or
   c. Have at least four years experience with Medicaid fiscal regulations and four years with state accounting procedures. The four years experience for each category may occur simultaneously.
2. Demonstrate a working knowledge of cost principles and internal control procedures for grants and contracts with the federal government for non-profit organizations (OMB circulars A-87, A-110, A-122, and A-133).
(c) The Information and Referral Specialist shall meet the following minimum standards:
1. Have a Bachelor’s Degree from an accredited college or university in a human services related field; or
2. Have an Associate of Arts Degree from an accredited entity in a human services related field and a minimum of two years experience in information and referral services, case management, call center services, social services, or related work experience; or
3. Have a high school diploma or GED and four years experience in information and referral services, case management, call center services, social services, or related work experience.
(d) The Intake, Screening and Triaging Professional shall meet the following minimum standards:
1. Have a Bachelor’s Degree from an accredited college or university in a human services related field; or
2. Have an Associate of Arts Degree from an accredited entity in a human services related field and a minimum of two years experience as a caseworker, case manager, intake specialist, or related work experience with the long-term care client population; or
3. Have a high school diploma or GED and four years experience as a caseworker, case manager, intake specialist, or related work experience with the long-term care client population.
(5) RECORDS: The ARC shall maintain books, records, and documents (including electronic storage media) in accordance with generally accepted accounting principles and sound business practices that sufficiently and properly reflect all revenues and expenditures of funds provided by the department. This documentation shall be made available upon request for monitoring and auditing purposes.
   (a) All financial documents shall be filed, retained, and made available in the manner described in the contract with the department for a period of at least five (5) years after termination of the contract. If an audit has been initiated and audit findings have not been resolved at the end of the five (5) years, the records shall be retained at least until resolution of the audit findings.
   (b) The ARC shall be audited annually by an independent accounting firm and shall submit the final report of the audit to the Department within nine months after the end of the ARC’s fiscal year.
(6) INFORMATION TECHNOLOGY STANDARDS: The ARC shall meet the minimum standards for information technology provided below.
   (a) The ARC shall have sufficient computer hardware and software resources to provide:
      1. Connectivity to DOEA applications via a private network such as the Florida Suncom network or a subscription Virtual Private Network (VPN). The department shall verify the security of all connections to its information systems.
      2. A computing environment sufficient to operate the department’s application programs. These applications require the current versions of the Microsoft or Netscape branded browsers that support the execution of Java Script, meet the version 4.0 Hypertext Markup Language (HTML 4.0) standards, and the version 1.0 Cascading Style Sheets (CSS 1.0) standard.
   (b) The ARC shall have information technology measures in place that meet security requirements for computer viruses, Denial of Service (DOS) attacks, and malware; and compliance with the Federal Health Insurance Portability and Accountability Act of 1996 (HIPAA).
   (c) The ARC shall maintain operational security including, but not limited to, current security patches that ensure stability of the network.
   (d) The ARC shall utilize information technology that ensures compatibility and connectivity with the department.
   (e) The ARC shall employ staff with technical expertise needed to support and maintain a computerized information system in accordance with the ARC’s contract with the department.
   (f) The ARC shall include information technology protocols in its disaster/emergency and continuity of operations plans to ensure data backup and continuity during a disaster or emergency.

Specific Authority 430.08, 430.2053(12) FS. Law Implemented 430.2053 FS. History–New 4-16-07.
Monitoring and Sanctioning of Access Points.

This rule applies only to access points that have a direct monetary funding agreement with the ARC.

(1) MONITORING:

(a) Monitoring Elements: As part of the monitoring process, the ARC shall ensure that, at a minimum, the areas referenced in subparagraphs 1. through 7. of this subsection are reviewed. Access points shall have this information available for the ARC’s review.

1. An appropriate grievance process is in place for a subcontracted entity, if the entity is eligible to file a grievance;
2. Professional staff has the minimum educational and experience requirements required in Rule 58B-1.003, F.A.C.
3. Functional screening and financial eligibility are timely and accurate;
4. Eligibility determinations and enrollment procedures are timely and accurate;
5. Information and referral services and long-term care options counseling provide accurate information that meet the individual’s needs;
6. Processes for receiving and acting on complaints and resolving client grievances and other persons who use ARC services are appropriate and effective; and
7. Training and technical assistance needs are identified.

(b) Monitoring Procedures. The ARC shall adhere to the following:

1. At a minimum, the ARC shall perform an annual on-site administrative, programmatic, quality assurance, and, if applicable, fiscal monitoring of access points to ensure compliance with ARC agreements.
2. The ARC executive director shall submit a written report by certified mail to the access point no later than 21 calendar days from the last date of the on-site monitoring visit. The report shall outline the monitoring findings, that a corrective action plan shall be submitted to the ARC within 21 calendar days from the date of the report, if deficiencies are identified, and other sanctions the ARC determines is warranted, if applicable. The report shall indicate that the access point has the right to request an informal review and/or file a grievance pursuant to its agreement with the ARC.
3. The access point’s failure to submit a corrective action plan within the 21 calendar day time frame shall result in sanction(s) pursuant to subparagraphs (2)(a)2. through 12. of this rule.
4. The ARC shall determine if the corrective action plan is acceptable and shall notify the access point if further action is required within 21 calendar days from receiving the report.

(2) SANCTIONING: ARC access points that do not meet requirements of the ARC agreements shall be subject to sanctioning.

(a) Sanctions may include the following, depending upon the severity of the violation:

1. Development, submission, and implementation of an acceptable corrective action plan to address identified areas of concern, agreement breaches, and noncompliance issues;
2. Submission of additional and/or more detailed financial and/or performance reports;
3. Designation as a high-risk access point, requiring additional monitoring visits;
4. Repayment of disallowed costs;
5. Amendments to the current ARC agreement;
6. Restrictions on ability to draw down programmatic and administrative funding;
7. Imposition of required technical assistance;
8. Limitation or prohibition of direct service provision;
9. Limitation or prohibition of use of specific service providers;
10. Financial penalties not to exceed $5,000 per agreement violation;
11. Suspension of the entity’s ability to function as an access point; and
12. Termination of the entity’s ability to function as an access point.

(b) Sanctioning procedures: The ARC shall follow the procedures below to sanction access points:

1. The ARC executive director shall submit a written notification by certified mail to the access point.
2. The notification shall outline the sanction(s) to be implemented and the reason(s) the ARC is levying the sanctions against the access point.
3. The notification shall include language that the access point has the right to request an informal review and/or file a grievance pursuant to its agreement with the ARC and the method by which to do so.

Specific Authority 430.08, 430.2053(12) FS. Law Implemented 430.2053 FS. History–New 4-16-07.
58B-1.007 Oversight Standards for the Aging Resource Center Governing Body.
Pursuant to its contract with the ARC, the department shall monitor the performance and oversight activities of the ARC governing body to ensure the appropriateness and quality of care received by clients. The governing body shall be accountable for oversight standards for the ARC including, but not limited to:

1. Compliance with legal and contractual requirements, established department policies, and effective management principles;
2. Ensuring that services are provided in the most cost effective and cost saving manner in order to provide services to the greatest number of eligible individuals to help them remain in the community and avoid unnecessary institutional care;
3. Reviewing the implementation of policies, governing body directives, and overall organizational accountability;
4. Reviewing human resource management;
5. Ensuring the ARC has a system for recruiting, hiring, evaluating, and terminating employees;
6. Ensuring the ARC has written protocols for the development of cooperative relationships with community service agencies, and documented existence of cooperative relationships to ensure the intent of the ARC concept and mission are met;
7. Ensuring compliance with program guidelines;
8. Ensuring information management and data integrity, including accurate and reliable collection of client specific data;
9. Completing a written annual performance evaluation of the executive director;
10. Ensuring that the ARC develops an annual operational plan to be submitted to the department. The plan shall demonstrate that the ARC is achieving the goals as set forth by contract, statute, and rules;
11. Ensuring that the ARC develops and incorporates disaster/emergency and continuity of operations plans in cooperation with those established by the area agency on aging for the planning and service area; and
12. Overseeing the appropriateness of the ARC financial operations.

Specific Authority 430.08, 430.2053(12) FS. Law Implemented 430.2053 FS. History–New 4-16-07.

58B-1.009 Outcome Measures and Quality Assurance Standards.

1. OUTCOME MEASURES: The ARC governing body shall ensure that ARCs perform the following minimum outcome measures:
   (a) Adhere to the annual Legislative mandate for the percentage of individuals, age 60 and older, determined to be eligible for nursing home placement that are placed in home and community based services; and
   (b) Demonstrate that the average monthly savings for clients receiving home and community based services is less than the Medicaid cost for nursing home care for comparable client groups.

2. QUALITY ASSURANCE STANDARDS: The ARC shall adhere to the following quality assurance standards to provide assurance that clients are receiving services that meet their needs and access points are adhering to the terms of the ARC agreements. This activity shall include the following elements:
   (a) Ensuring access points adhere to the ARC agreements regarding the provision of client services in the most effective and cost saving manner. This shall be determined through regular monitoring, feedback and client satisfaction surveys.
   (b) Ensuring that clients receive care and services that meet their needs while living in the community in order to avoid nursing home placement. This shall be accomplished through periodic clinical review of client care plans, client progress towards goals, and client satisfaction surveys.
   (c) Ensuring that an annual program improvement plan is developed and submitted to the department.

Specific Authority 430.08, 430.2053(12) FS. Law Implemented 430.2053 FS. History–New 4-16-07.