Senate	House

LEGISLATIVE ACTION

Floor: 4/AD/2R 05/01/2014 02:25 PM

Senator Grimsley moved the following:

## Senate Amendment (with title amendment)

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Between lines 2694 and 2695

insert: 4 5

Section 48. Present paragraphs (k) through (o) of subsection (1) of section 395.401, Florida Statutes, are redesignated as paragraphs (1) through (p), respectively, and a new paragraph (k) is added to that subsection, to read:

395.401 Trauma services system plans; approval of trauma centers and pediatric trauma centers; procedures; renewal.-

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(k) A hospital operating a trauma center may not charge a trauma activation fee greater than \$15,000. This paragraph expires on July 1, 2015.

Section 49. Subsections (2) and (4) of section 395.402, Florida Statutes, are amended, and subsection (5) is added to that section, to read:

395.402 Trauma service areas; number and location of trauma centers.-

- (2) Trauma service areas as defined in this section are to be utilized until the Department of Health completes an assessment of the trauma system and reports its finding to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the substantive legislative committees. The report shall be submitted by February 1, 2005. The department shall review the existing trauma system and determine whether it is effective in providing trauma care uniformly throughout the state. The assessment shall:
- (a) Consider aligning trauma service areas within the trauma region boundaries as established in July 2004.
- (a) (b) Review the number and level of trauma centers needed for each trauma service area to provide a statewide integrated trauma system.
- (b) (c) Establish criteria for determining the number and level of trauma centers needed to serve the population in a defined trauma service area or region.
- (c) (d) Consider including criteria within trauma center approval standards based upon the number of trauma victims served within a service area.
  - (e) Review the Regional Domestic Security Task Force

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structure and determine whether integrating the trauma system planning with interagency regional emergency and disaster planning efforts is feasible and identify any duplication of efforts between the two entities.

- (d) (f) Make recommendations regarding a continued revenue source which shall include a local participation requirement.
- (e) (g) Make recommendations regarding a formula for the distribution of funds identified for trauma centers which shall address incentives for new centers where needed and the need to maintain effective trauma care in areas served by existing centers, with consideration for the volume of trauma patients served, and the amount of charity care provided.
- (4) Annually thereafter, the department shall review the assignment of the 67 counties to trauma service areas, in addition to the requirements of subsections (2) paragraphs  $\frac{(2)}{(b)}$  and subsection (3). County assignments are made for the purpose of developing a system of trauma centers. Revisions made by the department shall consider take into consideration the recommendations made as part of the regional trauma system plans approved by the department and the recommendations made as part of the state trauma system plan. If In cases where a trauma service area is located within the boundaries of more than one trauma region, the trauma service area's needs, response capability, and system requirements shall be considered by each trauma region served by that trauma service area in its regional system plan. Until the department completes the February 2005 assessment, the assignment of counties shall remain as established in this section.
  - (a) The following trauma service areas are hereby



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- 71 1. Trauma service area 1 shall consist of Escambia, Okaloosa, Santa Rosa, and Walton Counties. 72
  - 2. Trauma service area 2 shall consist of Bay, Gulf, Holmes, and Washington Counties.
  - 3. Trauma service area 3 shall consist of Calhoun, Franklin, Gadsden, Jackson, Jefferson, Leon, Liberty, Madison, Taylor, and Wakulla Counties.
  - 4. Trauma service area 4 shall consist of Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, and Union Counties.
  - 5. Trauma service area 5 shall consist of Baker, Clay, Duval, Nassau, and St. Johns Counties.
  - 6. Trauma service area 6 shall consist of Citrus, Hernando, and Marion Counties.
  - 7. Trauma service area 7 shall consist of Flagler and Volusia Counties.
  - 8. Trauma service area 8 shall consist of Lake, Orange, Osceola, Seminole, and Sumter Counties.
  - 9. Trauma service area 9 shall consist of Pasco and Pinellas Counties.
- 10. Trauma service area 10 shall consist of Hillsborough 91 92 County.
- 93 11. Trauma service area 11 shall consist of Hardee, 94 Highlands, and Polk Counties.
- 95 12. Trauma service area 12 shall consist of Brevard and 96 Indian River Counties.
- 97 13. Trauma service area 13 shall consist of DeSoto, 98 Manatee, and Sarasota Counties.

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- 99 14. Trauma service area 14 shall consist of Martin, 100 Okeechobee, and St. Lucie Counties.
  - 15. Trauma service area 15 shall consist of Charlotte, Glades, Hendry, and Lee Counties.
  - 16. Trauma service area 16 shall consist of Palm Beach County.
    - 17. Trauma service area 17 shall consist of Collier County.
    - 18. Trauma service area 18 shall consist of Broward County.
  - 19. Trauma service area 19 shall consist of Miami-Dade and Monroe Counties.
  - (b) Each trauma service area should have at least one Level I or Level II trauma center. The department shall allocate, by rule, the number of trauma centers needed for each trauma service area.
  - (c) There may shall be no more than a total of 44 trauma centers in the state.
  - (5) By October 1, 2014, the department shall convene the Florida Trauma System Plan Advisory Committee in order to review the Trauma System Consultation Report issued by the American College of Surgeons Committee on Trauma dated February 2-5, 2013. Based on this review, the advisory council shall submit recommendations, including recommended statutory changes, to the President of the Senate and the Speaker of the House of Representatives by February 1, 2015. The advisory council may make recommendations to the State Surgeon General regarding the continuing development of the state trauma system. The advisory council shall consist of the following nine representatives of an inclusive trauma system appointed by the State Surgeon

General:



128 (a) A trauma patient, or a family member of a trauma 129 patient, who has sustained and recovered from severe injuries; 130 (b) A member of the Florida Committee on Trauma; 131 (c) A member of the Association of Florida Trauma 132 Coordinators; (d) A chief executive officer of a nontrauma acute care 133 134 hospital who is a member of the Florida Hospital Association; 135 (e) A member of the Florida Emergency Medical Services 136 Advisory Council; 137 (f) A member of the Florida Injury Prevention Advisory 138 Council; 139 (g) A member of the Brain and Spinal Cord Injury Program Advisory Council; 140 141 (h) A member of the Florida Chamber of Commerce; and (i) A member of the Florida Health Insurance Advisory 142 143 Board. Section 50. Subsection (7) of section 395.4025, Florida 144 Statutes, is amended, and subsections (15) and (16) are added to 145 146 that section, to read: 147 395.4025 Trauma centers; selection; quality assurance; 148 records.-(7) A Any hospital that has submitted an application for 149 150 selection as a trauma center may wishes to protest an adverse a 151 decision made by the department based on the department's 152 preliminary, provisional, or in-depth review of its application, 153 applications or on the recommendations of the site visit review 154 team pursuant to this section, and shall proceed as provided 155 under in chapter 120. Hearings held under this subsection shall 156 be conducted in the same manner as provided in ss. 120.569 and



120.57. Cases filed under chapter 120 may combine all disputes between parties.

(15) Notwithstanding any other law, a hospital designated as a provisional or verified as a Level I, Level II, or pediatric trauma center after the enactment of chapter 2004-259, Laws of Florida, whose approval has not been revoked may continue to operate at the same trauma center level until the approval period in subsection (6) expires if the hospital continues to meet the other requirements of part II of this chapter related to trauma center standards and patient outcomes. A hospital that meets the requirements of this section is eligible for renewal of its 7-year approval period pursuant to subsection (6).

(16) Except as otherwise provided in this act, the department may not verify, designate, or provisionally approve any hospital to operate as a trauma center through the procedures established in subsections (1)-(14), unless the hospital is designated as a provisional Level I trauma center and is seeking to be verified as a Level I trauma center as of July 1, 2014. This subsection expires on the earlier of July 1, 2015, or upon the entry of a final order affirming the validity of a proposed rule of the department allocating the number of trauma centers needed for each trauma service area as provided in s. 395.402(4).

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Delete line 292 185

And the title is amended as follows:

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and insert:

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home health agencies; amending s. 395.401, F.S.; limiting trauma service fees to a certain amount; providing for future expiration; conforming a crossreference; amending s. 395.402, F.S.; revising provisions relating to the contents of the Department of Health trauma system assessment; requiring the Department of Health to convene the Florida Trauma System Plan Advisory Committee by a specified date; requiring the advisory council to review the Trauma System Consultation Report and make recommendations to the Legislature by a specified date; authorizing the advisory council to make recommendations to the State Surgeon General; designating the membership of the advisory council; amending s. 395.4025, F.S.; specifying that only applicants for trauma centers may protest an adverse decision made by the department; authorizing certain provisional and verified trauma centers to continue operating and to apply for renewal; restricting the department from verifying, designating, or provisionally approving certain hospitals as trauma centers; providing for future expiration; providing effective dates.