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	LEGISLATIVE ACTION	
Senate	•	House
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Floor: WD/2R		
05/02/2017 05:31 PM		

Senator Bean moved the following:

## Senate Amendment (with title amendment)

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Before line 54

4 insert:

> Section 1. Present subsection (9) of section 395.1055, Florida Statutes, is redesignated as subsection (10), and a new subsection (9) is added to that section, to read:

395.1055 Rules and enforcement.

(9) The agency shall establish a technical advisory panel to develop procedures and standards for measuring outcomes of pediatric cardiac catheterization programs and pediatric open12

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heart surgery programs. (a) The panel must be composed of 3 at-large members, including 1 cardiologist who is board certified in caring for adults with congenital heart disease and 2 board-certified pediatric cardiologists, neither of whom may be employed by any of the hospitals specified in subparagraphs 1.-10. or their affiliates, each of whom is appointed by the Secretary of Health Care Administration, and 10 members, each of whom is a pediatric cardiologist or a pediatric cardiovascular surgeon, each appointed by the chief executive officer of one of the following hospitals: 1. Johns Hopkins All Children's Hospital in St. Petersburg. 2. Arnold Palmer Hospital for Children in Orlando. 3. Joe DiMaggio Children's Hospital in Hollywood. 4. Nicklaus Children's Hospital in Miami. 5. St. Joseph's Children's Hospital in Tampa. 6. University of Florida Health Shands Hospital in Gainesville. 7. University of Miami Holtz Children's Hospital in Miami. 8. Wolfson Children's Hospital in Jacksonville. 9. Florida Hospital for Children in Orlando.

- 10. Nemours Children's Hospital in Orlando.
- (b) Based on the recommendations of the panel, the agency shall develop and adopt rules for pediatric cardiac catheterization programs and pediatric open-heart surgery programs which include at least the following:
- 1. A risk adjustment procedure that accounts for the variations in severity and case mix found in hospitals in this state;



- 2. Outcome standards specifying expected levels of performance in pediatric cardiac programs. Such standards may include, but are not limited to, in-hospital mortality, infection rates, nonfatal myocardial infarctions, length of postoperative bleeds, and returns to surgery; and
- 3. Specific steps to be taken by the agency and licensed facilities that do not meet the outcome standards within a specified time, including time required for detailed case reviews and development and implementation of corrective action plans.

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======== T I T L E A M E N D M E N T ==========

And the title is amended as follows:

Delete line 2

55 and insert:

> An act relating to health care practitioners and programs; amending s. 395.1055, F.S.; requiring the Agency for Health Care Administration to establish a technical advisory panel to develop procedures and standards for measuring outcomes of pediatric cardiac catheterization programs and pediatric open-heart surgery programs; providing for the membership of the technical advisory panel; requiring the agency to develop and adopt rules for pediatric cardiac catheterization programs and pediatric open-heart surgery programs based on recommendations of the technical advisory panel;