

Bill No. HB 509, 1st Eng.

Amendment No.     

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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11 Senator Saunders moved the following amendment:

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13 **Senate Amendment (with title amendment)**

14 On page 9, between lines 13 and 14,

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16 insert:

17 Section 6. Paragraph (d) of subsection (5) of section  
18 212.055, Florida Statutes, is amended, paragraph (e) is  
19 redesignated as paragraph (f), and a new paragraph (e) is  
20 added to said subsection, to read:

21 212.055 Discretionary sales surtaxes; legislative  
22 intent; authorization and use of proceeds.--It is the  
23 legislative intent that any authorization for imposition of a  
24 discretionary sales surtax shall be published in the Florida  
25 Statutes as a subsection of this section, irrespective of the  
26 duration of the levy. Each enactment shall specify the types  
27 of counties authorized to levy; the rate or rates which may be  
28 imposed; the maximum length of time the surtax may be imposed,  
29 if any; the procedure which must be followed to secure voter  
30 approval, if required; the purpose for which the proceeds may  
31 be expended; and such other requirements as the Legislature

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1 may provide. Taxable transactions and administrative  
2 procedures shall be as provided in s. 212.054.

3           (5) COUNTY PUBLIC HOSPITAL SURTAX.--Any county as  
4 defined in s. 125.011(1) may levy the surtax authorized in  
5 this subsection pursuant to an ordinance either approved by  
6 extraordinary vote of the county commission or conditioned to  
7 take effect only upon approval by a majority vote of the  
8 electors of the county voting in a referendum. In a county as  
9 defined in s. 125.011(1), for the purposes of this subsection,  
10 "county public general hospital" means a general hospital as  
11 defined in s. 395.002 which is owned, operated, maintained, or  
12 governed by the county or its agency, authority, or public  
13 health trust.

14           (d) Except as provided in subparagraphs 1. and 2., the  
15 county must ~~shall~~ continue to contribute each year an amount  
16 equal to at least 80 percent of that percentage of the total  
17 county budget appropriated for the operation, administration,  
18 and maintenance of the county public general hospital from the  
19 county's general revenues in the fiscal year of the county  
20 ending September 30, 1991:

21           1. Twenty-five percent of such amount must be remitted  
22 to a governing board, agency, or authority that is wholly  
23 independent from the public health trust, agency, or authority  
24 responsible for the county public general hospital, to be used  
25 solely for the purpose of funding the plan for indigent health  
26 care services provided for in paragraph (e);

27           2. However, in the first year of the plan, a total of  
28 \$10 million shall be remitted to such governing board, agency,  
29 or authority, to be used solely for the purpose of funding the  
30 plan for indigent health care services provided for in  
31 paragraph (e), and in the second year of the plan, a total of

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1 \$15 million shall be so remitted and used.

2 (e) A governing board, agency, or authority shall be  
3 chartered by the county commission upon this act becoming law.  
4 The governing board, agency, or authority shall adopt and  
5 implement a health care plan for indigent health care  
6 services. The governing board, agency, or authority shall  
7 consist of no more than seven and no fewer than five members  
8 appointed by the county commission. The members of the  
9 governing board, agency, or authority shall be at least 18  
10 years of age and residents of the county. No member may be  
11 employed by or affiliated with a health care provider or the  
12 public health trust, agency, or authority responsible for the  
13 county public general hospital. The following community  
14 organizations shall each appoint a representative to a  
15 nominating committee: the South Florida Hospital and  
16 Healthcare Association, the Miami-Dade County Public Health  
17 Trust, the Dade County Medical Association, the Miami-Dade  
18 County Homeless Trust, and the Mayor of Miami-Dade County.  
19 This committee shall nominate between 10 and 14 county  
20 citizens for the governing board, agency, or authority. The  
21 slate shall be presented to the county commission and the  
22 county commission shall confirm the top five to seven  
23 nominees, depending on the size of the governing board. Until  
24 such time as the governing board, agency, or authority is  
25 created, the funds provided for in subparagraph (d)2. shall be  
26 placed in a restricted account set aside from other county  
27 funds and not disbursed by the county for any other purpose.

28 1. The plan shall divide the county into a minimum of  
29 four and maximum of six service areas, with no more than one  
30 participant hospital per service area. The county public  
31 general hospital shall be designated as the provider for one

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1 of the service areas. Services shall be provided through  
2 participants' primary acute care facilities.

3 2. The plan and subsequent amendments to it shall fund  
4 a defined range of health care services for both indigent  
5 persons and the medically poor, including primary care,  
6 preventive care, hospital emergency room care, and hospital  
7 care necessary to stabilize the patient. For the purposes of  
8 this section, "stabilization" means stabilization as defined  
9 in s. 397.311(30). Where consistent with these objectives, the  
10 plan may include services rendered by physicians, clinics,  
11 community hospitals, and alternative delivery sites, as well  
12 as at least one regional referral hospital per service area.  
13 The plan shall provide that agreements negotiated between the  
14 governing board, agency, or authority and providers shall  
15 recognize hospitals that render a disproportionate share of  
16 indigent care, provide other incentives to promote the  
17 delivery of charity care to draw down federal funds where  
18 appropriate, and require cost containment, including, but not  
19 limited to, case management. From the funds specified in  
20 subparagraphs (d)1. and 2. for indigent health care services,  
21 service providers shall receive reimbursement at a Medicaid  
22 rate to be determined by the governing board, agency, or  
23 authority created pursuant to this paragraph for the initial  
24 emergency room visit, and a per-member per-month fee or  
25 capitation for those members enrolled in their service area,  
26 as compensation for the services rendered following the  
27 initial emergency visit. Except for provisions of emergency  
28 services, upon determination of eligibility, enrollment shall  
29 be deemed to have occurred at the time services were rendered.  
30 The provisions for specific reimbursement of emergency  
31 services shall be repealed on July 1, 2001, unless otherwise

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1 reenacted by the Legislature. The capitation amount or rate  
2 shall be determined prior to program implementation by an  
3 independent actuarial consultant. In no event shall such  
4 reimbursement rates exceed the Medicaid rate. The plan must  
5 also provide that any hospitals owned and operated by  
6 government entities on or after the effective date of this act  
7 must, as a condition of receiving funds under this subsection,  
8 afford public access equal to that provided under s. 286.011  
9 as to any meeting of the governing board, agency, or authority  
10 the subject of which is budgeting resources for the retention  
11 of charity care, as that term is defined in the rules of the  
12 Agency for Health Care Administration. The plan shall also  
13 include innovative health care programs that provide  
14 cost-effective alternatives to traditional methods of service  
15 and delivery funding.

16 3. The plan's benefits shall be made available to all  
17 county residents currently eligible to receive health care  
18 services as indigents or medically poor as defined in  
19 paragraph (4)(d).

20 4. Eligible residents who participate in the health  
21 care plan shall receive coverage for a period of 12 months or  
22 the period extending from the time of enrollment to the end of  
23 the current fiscal year, per enrollment period, whichever is  
24 less.

25 5. At the end of each fiscal year, the governing  
26 board, agency, or authority shall prepare an audit that  
27 reviews the budget of the plan, delivery of services, and  
28 quality of services, and makes recommendations to increase the  
29 plan's efficiency. The audit shall take into account  
30 participant hospital satisfaction with the plan and assess the  
31 amount of poststabilization patient transfers requested, and

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1 accepted or denied, by the county public general hospital.

2 Section 7. The provisions of this act shall be  
3 reviewed by the Legislature prior to October 1, 2005, and  
4 shall be repealed on that date unless otherwise reenacted by  
5 the Legislature.

6 Section 8. This act shall take effect October 1, 2000.

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8 (Redesignate subsequent sections.)

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

12 And the title is amended as follows:

13 On page 1, line 21, after the second semicolon,

14

15 insert:

16 amending s. 212.055, F.S.; revising provisions  
17 that require the counties authorized to levy  
18 the surtax to annually appropriate a specified  
19 minimum amount for operation, administration,  
20 and maintenance of the county public general  
21 hospital; providing procedure for disbursement  
22 of funds; requiring a governing board, agency,  
23 or authority in such counties to adopt and  
24 implement a health care plan for indigent  
25 health care services; providing for appointment  
26 of members of such entity; specifying  
27 provisions of the plan; providing for annual  
28 audit; providing for compensation to service  
29 providers; providing for future review and  
30 repeal;

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