

1 A bill to be entitled
2 An act relating to the county public hospital
3 surtax; amending s. 212.055, F.S.; revising
4 provisions that require the counties authorized
5 to levy the surtax to annually appropriate a
6 specified minimum amount for operation,
7 administration, and maintenance of the county
8 public general hospital; providing procedure
9 for disbursement of funds; requiring a
10 governing board, agency, or authority in such
11 counties to adopt and implement a health care
12 plan for indigent health care services;
13 providing for appointment of members of such
14 entity; specifying provisions of the plan;
15 providing for compensation to service
16 providers; providing for annual audit;
17 providing for future review and repeal;
18 providing an effective date.

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20 Be It Enacted by the Legislature of the State of Florida:

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22 Section 1. Paragraph (d) of subsection (5) of section
23 212.055, Florida Statutes, is amended, paragraph (e) is
24 redesignated as paragraph (f), and a new paragraph (e) is
25 added to said subsection, to read:

26 212.055 Discretionary sales surtaxes; legislative
27 intent; authorization and use of proceeds.--It is the
28 legislative intent that any authorization for imposition of a
29 discretionary sales surtax shall be published in the Florida
30 Statutes as a subsection of this section, irrespective of the
31 duration of the levy. Each enactment shall specify the types

1 of counties authorized to levy; the rate or rates which may be
2 imposed; the maximum length of time the surtax may be imposed,
3 if any; the procedure which must be followed to secure voter
4 approval, if required; the purpose for which the proceeds may
5 be expended; and such other requirements as the Legislature
6 may provide. Taxable transactions and administrative
7 procedures shall be as provided in s. 212.054.

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

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

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

1 2. However, in the first year of the plan, a total of
2 \$10 million shall be remitted to such governing board, agency,
3 or authority, to be used solely for the purpose of funding the
4 plan for indigent health care services provided for in
5 paragraph (e), and in the second year of the plan, a total of
6 \$15 million shall be so remitted and used.

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

3 1. The plan shall divide the county into a minimum of
4 four and maximum of six service areas, with no more than one
5 participant hospital per service area. The county public
6 general hospital shall be designated as the provider for one
7 of the service areas. Services shall be provided through
8 participants' primary acute care facilities.

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

1 as compensation for the services rendered following the
2 initial emergency visit. Except for provisions of emergency
3 services, upon determination of eligibility, enrollment shall
4 be deemed to have occurred at the time services were rendered.
5 The provisions for specific reimbursement of emergency
6 services shall be repealed on July 1, 2001, unless otherwise
7 reenacted by the Legislature. The capitation amount or rate
8 shall be determined prior to program implementation by an
9 independent actuarial consultant. In no event shall such
10 reimbursement rates exceed the Medicaid rate. The plan must
11 also provide that any hospitals owned and operated by
12 government entities on or after the effective date of this act
13 must, as a condition of receiving funds under this subsection,
14 afford public access equal to that provided under s. 286.011
15 as to any meeting of the governing board, agency, or authority
16 the subject of which is budgeting resources for the retention
17 of charity care, as that term is defined in the rules of the
18 Agency for Health Care Administration. The plan shall also
19 include innovative health care programs that provide
20 cost-effective alternatives to traditional methods of service
21 and delivery funding.

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

26 4. Eligible residents who participate in the health
27 care plan shall receive coverage for a period of 12 months or
28 the period extending from the time of enrollment to the end of
29 the current fiscal year, per enrollment period, whichever is
30 less.

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1 5. At the end of each fiscal year, the governing
2 board, agency, or authority shall prepare an audit that
3 reviews the budget of the plan, delivery of services, and
4 quality of services, and makes recommendations to increase the
5 plan's efficiency. The audit shall take into account
6 participant hospital satisfaction with the plan and assess the
7 amount of poststabilization patient transfers requested, and
8 accepted or denied, by the county public general hospital.

9 Section 2. The provisions of this act shall be
10 reviewed by the Legislature prior to October 1, 2005, and
11 shall be repealed on that date unless otherwise reenacted by
12 the Legislature.

13 Section 3. This act shall take effect October 1, 2000.
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