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A bill to be entitled

An act relating to certificate of need; amending s. 408.043, F.S.; providing criteria for review of a certificate-of-need application for establishment of an adult open heart surgery program in a county in which none of the hospitals has an existing or approved adult open heart surgery program; requiring an agreement that a certain percent of Medicaid and charity patients be served; requiring a specified number of operations; amending s. 15 of ch. 2000-318, Laws of Florida; providing for additional appointments to the workgroup; amending the scope of responsibility for the workgroup; providing new dates for final report to the Governor and Legislature and termination of the certificate-of-need workgroup; providing effective dates.

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

Section 1. Subsection (5) is added to section 408.043, Florida Statutes, to read:

408.043 Special provisions.--

- (5) OPEN HEART SURGERY.
- (a) When an application is made for a certificate of need to establish an adult open heart surgery program in a county in which none of the hospitals has an existing or approved adult open heart surgery program, need for one program shall be evaluated under special circumstances to promote reasonable access to such a program within the

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CODING: Words stricken are deletions; words underlined are additions.

county. The criteria on which the certificate of need is reviewed in such circumstances shall favor approval in those counties that can generate at least 1,200 annual hospital discharges with a principal diagnosis of ischemic heart disease. County-specific need identified under these circumstances shall exist independently of and in addition to any district need identified under the standard numeric need formula.

- (b) An applicant for an adult open heart surgery program who meets the special circumstances in paragraph (a) shall, as a condition for approval, agree that the percentage of admissions to its program which are Medicaid patients shall be at least as great as the average percentage of Medicaid patients admitted to open heart surgery programs in the applicant's district; and shall also agree that the percentage of admissions to its program which are charity patients shall be at least as great as the average percentage of charity patients admitted to open heart surgery programs in the applicant's district.
- (c) An applicant approved for an adult open heart surgery program consistent with this subsection shall perform a 12-month total of at least 250 open heart surgery operations during the third year that such procedures are being performed. Failure to meet this requirement is subject to agency action to terminate a hospital's authorization to provide any open heart surgery operations.

Section 2. Effective July 1, 2001, section 15 of chapter 2000-318, Laws of Florida, is amended to read:

Section 15.

2.

- (1)(a) There is created a certificate-of-need workgroup staffed by the Agency for Health Care Administration.
- (b) Workgroup participants shall be responsible for only the expenses that they generate individually through workgroup participation. The agency shall be responsible for expenses incidental to the production of any required data or reports.
- (2) The workgroup shall consist of $\underline{32}$ $\underline{30}$ members, 10 appointed by the Governor, $\underline{11}$ $\underline{10}$ appointed by the President of the Senate, and $\underline{11}$ $\underline{10}$ appointed by the Speaker of the House of Representatives. The workgroup chairperson shall be selected by majority vote of a quorum present. Sixteen members shall constitute a quorum. The membership shall include, but not be limited to, representatives from health care provider organizations, health care facilities, individual health care practitioners, local health councils, and consumer organizations, and persons with health care market expertise as a private-sector consultant.
 - (3) Appointment to the workgroup shall be as follows:
- (a) The Governor shall appoint one representative each from the hospital industry; nursing home industry; hospice industry; local health councils; a consumer organization; and three health care market consultants, one of whom is a recognized expert on hospital markets, one of whom is a recognized expert on nursing home or long-term-care markets, and one of whom is a recognized expert on hospice markets; one representative from the Medicaid program; and one representative from a health care facility that provides a tertiary service.

(b) The President of the Senate shall appoint a representative of a for-profit hospital, a representative of a not-for-profit hospital, a representative of a public hospital, two representatives of the nursing home industry, two representatives of the hospice industry, a representative of a consumer organization, a representative from the Department of Elderly Affairs involved with the implementation of a long-term-care community diversion program, and a health care market consultant with expertise in health care economics, and a member of the Senate.

- appoint a representative from the Florida Hospital
 Association, a representative of the Association of Community
 Hospitals and Health Systems of Florida, a representative of
 the Florida League of Health Systems, a representative of the
 Florida Health Care Association, a representative of the
 Florida Association of Homes for the Aging, three
 representatives of Florida Hospices and Palliative Care, one
 representative of local health councils, and one
 representative of a consumer organization, and a member of the
 House.
- or elimination of the certificate of need program, which shall include recommendations for required legislative action and agency rule making. Such plan shall be implemented not sooner than the effective date of any rules necessary for its implementation. In developing the plan, the workgroup shall seek input from all classes of health care consumers, health care providers and health care facilities subject to certificate of need review. All agencies, including, but not limited to, the Agency for Health Care Administration and the

Department of Elder Affairs, shall provide assistance to the workgroup, upon request. The workgroup shall study issues pertaining to the certificate-of-need program, including the impact of trends in health care delivery and financing. The workgroup shall study issues relating to implementation of the certificate-of-need program. (5) The workgroup shall meet at least annually, at the request of the chairperson. The workgroup shall submit an interim report by December 31, 2001, and a final report to the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 7, by December 31,2002. The workgroup is abolished effective May 3, 2002 July 1, 2003. Section 3. This act shall take effect upon becoming a law.