

Bill No. CS/HB 475, 1st Eng.

Amendment No. Barcode 180018

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

Senate Amendment

On page 35, line 27, through
page 38, line 22, delete those lines

and insert:

(e) The Public Health Trust, created by the county commission, shall adopt and implement a health care plan for indigent health care services for a period of 1 year, beginning July 1, 2001.~~A governing board, agency, or authority shall be chartered by the county commission upon this act becoming law. The governing board, agency, or authority shall adopt and implement a health care plan for indigent health care services. The governing board, agency, or authority shall consist of no more than seven and no fewer than five members appointed by the county commission. The members of the governing board, agency, or authority shall be at least 18 years of age and residents of the county. No member may be employed by or affiliated with a health care provider or the public health trust, agency, or authority~~

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1 ~~responsible for the county public general hospital. The~~
2 ~~following community organizations shall each appoint a~~
3 ~~representative to a nominating committee: the South Florida~~
4 ~~Hospital and Healthcare Association, the Miami-Dade County~~
5 ~~Public Health Trust, the Dade County Medical Association, the~~
6 ~~Miami-Dade County Homeless Trust, and the Mayor of Miami-Dade~~
7 ~~County. This committee shall nominate between 10 and 14~~
8 ~~county citizens for the governing board, agency, or authority.~~
9 ~~The slate shall be presented to the county commission and the~~
10 ~~county commission shall confirm the top five to seven~~
11 ~~nominees, depending on the size of the governing board. Until~~
12 ~~such time as the governing board, agency, or authority is~~
13 ~~created, the funds provided for in subparagraph (d)2. shall be~~
14 ~~placed in a restricted account set aside from other county~~
15 ~~funds and not disbursed by the county for any other purpose.~~

16 1. The plan shall divide the county into a minimum of
17 four and maximum of six service areas, with no more than one
18 participant hospital per service area. The county public
19 general hospital shall be designated as the provider for one
20 of the service areas. Services shall be provided through
21 participants' primary acute care facilities.

22 2. The plan and subsequent amendments to it shall fund
23 a defined range of health care services for both indigent
24 persons and the medically poor, including primary care,
25 preventive care, hospital emergency room care, and hospital
26 care necessary to stabilize the patient. For the purposes of
27 this section, "stabilization" means stabilization as defined
28 in s. 397.311(30). Where consistent with these objectives, the
29 plan may include services rendered by physicians, clinics,
30 community hospitals, and alternative delivery sites, as well
31 as at least one regional referral hospital per service area.

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1 The plan shall provide that agreements negotiated between the
2 Public Health Trust ~~governing board, agency, or authority~~ and
3 providers shall recognize hospitals that render a
4 disproportionate share of indigent care, provide other
5 incentives to promote the delivery of charity care to draw
6 down federal funds where appropriate, and require cost
7 containment, including, but not limited to, case management.
8 From the funds specified in subparagraphs (d)1. and 2. for
9 indigent health care services, service providers shall receive
10 reimbursement at a Medicaid rate to be determined by the
11 Public Health Trust ~~governing board, agency, or authority~~
12 created pursuant to this paragraph for the initial emergency
13 room visit, and a per-member per-month fee or capitation for
14 those members enrolled in their service area, as compensation
15 for the services rendered following the initial emergency
16 visit. Except for provisions of emergency services, upon
17 determination of eligibility, enrollment shall be deemed to
18 have occurred at the time services were rendered. The
19 provisions for specific reimbursement of emergency services
20 shall be repealed on July 1, 2001, unless otherwise reenacted
21 by the Legislature. The capitation amount or rate shall be
22 determined prior to program implementation by an independent
23 actuarial consultant. In no event shall such reimbursement
24 rates exceed the Medicaid rate. The plan must also provide
25 that any hospitals owned and operated by government entities
26 on or after the effective date of this act must, as a
27 condition of receiving funds under this subsection, afford
28 public access equal to that provided under s. 286.011 as to
29 any meeting of the governing board, agency, or authority the
30 subject of which is budgeting resources for the retention of
31 charity care, as that term is defined in the rules of the

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1 Agency for Health Care Administration. The plan shall also
2 include innovative health care programs that provide
3 cost-effective alternatives to traditional methods of service
4 and delivery funding.

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

9 4. Eligible residents who participate in the health
10 care plan shall receive coverage for a period of 12 months or
11 the period extending from the time of enrollment to the end of
12 the current fiscal year, per enrollment period, whichever is
13 less.

14 5. At the end of each fiscal year, the Public Health
15 Trust ~~governing board, agency, or authority~~ shall prepare an
16 audit

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