#### Bill No. CS/HB 913, 2nd Eng.

Amendment No. \_\_\_ Barcode 742038

CHAMBER ACTION Senate House 1 2 3 4 5 6 7 8 9 10 11 Senator Campbell moved the following amendment to amendment 12 (913362): 13 Senate Amendment (with title amendment) 14 15 On page 79, between lines 14 and 15, 16 17 insert: 18 Section 27. Subsection (4) of section 383.50, Florida 19 Statutes, is amended to read: 20 383.50 Treatment of abandoned newborn infant.--(4) Each hospital of this state subject to s. 395.1041 21 22 shall, and any other hospital may, admit and provide all 23 necessary emergency services and care, as defined in s. 24 395.002(11)(10), to any newborn infant left with the hospital in accordance with this section. The hospital or any of its 25 26 licensed health care professionals shall consider these 27 actions as implied consent for treatment, and a hospital 28 accepting physical custody of a newborn infant has implied 29 consent to perform all necessary emergency services and care.

The hospital or any of its licensed health care professionals

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faith in accordance with this section. Nothing in this subsection limits liability for negligence.

Section 28. Subsection (7) of section 394.4787, Florida Statutes, is amended to read:

394.4787 Definitions; ss. 394.4786, 394.4787, 394.4788, and 394.4789.--As used in this section and ss. 394.4786, 394.4788, and 394.4789:

(7) "Specialty psychiatric hospital" means a hospital licensed by the agency pursuant to s. 395.002(30)(29)as a specialty psychiatric hospital.

Section 29. Present subsections (9), (10), (26), and (30) of section 395.002, Florida Statutes, are amended, present subsections (10) through (33) are renumbered as subsections (11) through (34), respectively, and a new subsection (10) is added to that section, to read:

395.002 Definitions.--As used in this chapter:

- (9) "Emergency medical condition" means:
- (a) A medical condition manifesting itself by acute symptoms of sufficient severity, which may include severe pain, psychiatric disturbances, symptoms of substance abuse, or other acute symptoms, such that the absence of immediate medical attention could reasonably be expected to result in any of the following:
- 1. Serious jeopardy to patient health, including a pregnant woman or fetus.
  - 2. Serious impairment to bodily functions.
  - 3. Serious dysfunction of any bodily organ or part.
  - (b) With respect to a pregnant woman:
- 1. That there is inadequate time to effect safe transfer to another hospital prior to delivery;
  - 2. That a transfer may pose a threat to the health and

safety of the patient or fetus; or

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- That there is evidence of the onset and persistence of uterine contractions or rupture of the membranes.
- (c) With respect to a person exhibiting acute psychiatric disturbance or substance abuse, or taken into custody and delivered to a hospital under a court ex parte order for examination or placed by an authorized party for involuntary examination in accordance with chapter 394 or chapter 397, that the absence of immediate medical attention could reasonably be expected to result in:
  - 1. Serious jeopardy to the health of a patient; or
  - 2. Serious jeopardy to the health of others.
- (10) "Emergency medical services provider" means a provider licensed pursuant to chapter 401.

(11)<del>(10)</del> "Emergency services and care" means medical screening, examination, and evaluation by a physician, or, to the extent permitted by applicable law, by other appropriate personnel under the supervision of a physician, to determine if an emergency medical condition exists and, if it does, the care, treatment, or surgery by a physician necessary to stabilize relieve or eliminate the emergency medical condition, within the service capability of the facility.

(27)<del>(26)</del> "Service capability" means the physical space, equipment, supplies, and services that the hospital provides and the level of care that the medical staff can provide within the training and scope of their professional licenses and hospital privileges all services offered by the facility where identification of services offered is evidenced by the appearance of the service in a patient's medical record or itemized bill.

(31)<del>(30)</del> "Stabilized" means, with respect to an

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29 30 emergency medical condition, that no material deterioration of the condition is likely, within reasonable medical probability, to result from the transfer or discharge of the patient from a hospital.

Section 30. Subsections (1) and (2) and paragraphs (c) and (d) of subsection (3) of section 395.1041, Florida Statutes, are amended to read:

395.1041 Access to emergency services and care.--

- (1) LEGISLATIVE INTENT. -- The Legislature finds and declares it to be of vital importance that emergency services and care be provided by hospitals and physicians to every person in need of such care. The Legislature finds that persons have been denied emergency services and care by hospitals. It is the intent of the Legislature that the agency vigorously enforce the ability of persons to receive all necessary and appropriate emergency services and care and that the agency act in a thorough and timely manner against hospitals and physicians which deny persons emergency services and care. It is further the intent of the Legislature that hospitals, emergency medical services providers, and other health care providers work together in their local communities to enter into agreements or arrangements to ensure access to emergency services and care. The Legislature further recognizes that appropriate emergency services and care often require followup consultation and treatment in order to effectively care for emergency medical conditions.
- (2) INVENTORY OF HOSPITAL EMERGENCY SERVICES. -- The agency shall establish and maintain an inventory of hospitals with emergency services. The inventory shall list all services within the service capability of the hospital, and 31 such services shall appear on the face of the hospital

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license. Each hospital having emergency services shall notify the agency of its service capability in the manner and form prescribed by the agency. The agency, in cooperation with the Department of Health shall provide use the inventory to assist emergency medical services providers and shall make the inventory available to others to assist in locating appropriate emergency medical care. The inventory shall also be made available to the general public. On or before August 1, 1992, the agency shall request that each hospital identify the services which are within its service capability. On or before November 1, 1992, the agency shall notify each hospital of the service capability to be included in the inventory. The hospital has 15 days from the date of receipt to respond to the notice. By December 1, 1992, the agency shall publish a final inventory. Each hospital shall reaffirm its service capability when its license is renewed and shall notify the agency of the addition of a new service or the termination of a service prior to a change in its service capability.

- (3) EMERGENCY SERVICES; DISCRIMINATION; LIABILITY OF FACILITY OR HEALTH CARE PERSONNEL.--
- (c) A patient that has not been stabilized, whether stabilized or not, may be transferred to another hospital which has the requisite service capability or is not at service capacity, if:
- 1. The patient, or a person who is legally responsible for the patient and acting on the patient's behalf, after being informed of the hospital's obligation under this section and of the risk of transfer, requests that the transfer be effected;
- 2. A physician has signed a certification that, based upon the reasonable risks and benefits to the patient, and

based upon the information available at the time of transfer, the medical benefits reasonably expected from the provision of appropriate medical treatment at another hospital outweigh the increased risks to the individual's medical condition from effecting the transfer; or

3. A physician is not physically present in the emergency services area at the time an individual is transferred and a qualified medical person signs a certification that a physician, in consultation with personnel, has determined that the medical benefits reasonably expected from the provision of appropriate medical treatment at another medical facility outweigh the increased risks to the individual's medical condition from effecting the transfer. The consulting physician must countersign the certification;

provided that this paragraph shall not be construed to require acceptance of a transfer that is not medically necessary.

- (d)1. Every hospital shall ensure the provision of services within the service capability of the hospital, at all times, either directly or indirectly through an arrangement with another hospital, through an arrangement with one or more physicians, or as otherwise made through prior arrangements. A hospital may enter into an agreement with another hospital for purposes of meeting its service capability requirement, and appropriate compensation or other reasonable conditions may be negotiated for these backup services.
- 2. If any arrangement requires the provision of emergency medical transportation, such arrangement must be made in consultation with the applicable <a href="mailto:emergency medical">emergency medical</a> <a href="mailto:service">service</a> provider and may not require the emergency medical

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service provider to provide transportation that is outside the routine service area of that emergency medical service provider or in a manner that impairs the ability of the emergency medical service provider to timely respond to prehospital emergency calls. Emergency medical transportation provided under this subparagraph is considered to be emergency services and care as defined in s. 395.002.

- 3. A hospital shall not be required to ensure service capability at all times as required in subparagraph 1. if, prior to the receiving of any patient needing such service capability, such hospital has demonstrated to the agency that it lacks the ability to ensure such capability and it has exhausted all reasonable efforts to ensure such capability through backup arrangements. In reviewing a hospital's demonstration of lack of ability to ensure service capability, the agency shall consider factors relevant to the particular case, including the following:
- a. Number and proximity of hospitals with the same service capability.
- Number, type, credentials, and privileges of specialists.
  - c. Frequency of procedures.
  - d. Size of hospital.
- The agency shall publish proposed rules implementing a reasonable exemption procedure by November 1, 1992. Subparagraph 1. shall become effective upon the effective date of said rules or January 31, 1993, whichever is earlier. For a period not to exceed 1 year from the effective date of subparagraph 1., a hospital requesting an exemption shall be deemed to be exempt from offering the service until 31 the agency initially acts to deny or grant the original

request. The agency has 45 days from the date of receipt of the request <u>for exemption</u> to approve or deny the request.

After the first year from the effective date of subparagraph 1.., If the agency fails to initially act within the time period, the hospital is deemed to be exempt from offering the service until the agency initially acts to deny the request.

- 5. The agency shall convene a workgroup consisting of representatives from the Florida Hospital Association, the Florida Statutory Teaching Hospital Council, the Florida Medical Association, the Florida Osteopathic Medical Association, and the Florida College of Emergency Physicians to make recommendations to the Legislature for changes to this paragraph regarding:
- <u>a. Services performed on an infrequent basis that</u>
  would not be considered to be within the service capability of the hospital.
- b. Situations in which hospitals would be deemed exempt from providing services at all times that are within their service capability.

Section 31. Paragraph (c) of subsection (2) of section 395.602, Florida Statutes, is amended to read:

395.602 Rural hospitals.--

- (2) DEFINITIONS. -- As used in this part:
- (c) "Inactive rural hospital bed" means a licensed acute care hospital bed, as defined in s.  $395.002\underline{(15)}\underline{(14)}$ , that is inactive in that it cannot be occupied by acute care inpatients.

Section 32. Paragraph (c) of subsection (1) of section 395.701, Florida Statutes, is amended to read:

30 395.701 Annual assessments on net operating revenues 31 for inpatient and outpatient services to fund public medical

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29 30 assistance; administrative fines for failure to pay assessments when due; exemption. --

- (1) For the purposes of this section, the term:
- "Hospital" means a health care institution as defined in s.  $395.002(14)\frac{(13)}{(13)}$ , but does not include any hospital operated by the agency or the Department of Corrections.

Section 33. Paragraph (b) of subsection (1) of section 400.051, Florida Statutes, is amended to read:

400.051 Homes or institutions exempt from the provisions of this part.--

- (1) The following shall be exempt from the provisions of this part:
- (b) Any hospital, as defined in s.  $395.002(12)\frac{(11)}{(11)}$ , that is licensed under chapter 395.

Section 34. Section 401.23, Florida Statutes, is amended to read:

401.23 Definitions.--As used in this part, the term:

(1) "Advanced life support" means the use of skills and techniques described in the most recent U.S. DOT National Standard Paramedic Curriculum by a paramedic under the supervision of a licensee's medical director as required by rules of the department. The term "advanced life support" also includes other techniques which have been approved and are performed under conditions specified by rules of the department. The term "advanced life support" also includes provision of care by a paramedic under the supervision of a licensee's medical director to one experiencing an emergency medical condition as defined herein. "Advanced life support" means treatment of life-threatening medical emergencies 31 through the use of techniques such as endotracheal intubation,

the administration of drugs or intravenous fluids, telemetry, cardiac monitoring, and cardiac defibrillation by a qualified person, pursuant to rules of the department.

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"Advanced life support service" means any emergency medical transport or nontransport service which uses advanced life support techniques.

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(3) "Air ambulance" means any fixed-wing or rotary-wing aircraft used for, or intended to be used for, air transportation of sick or injured persons requiring or likely to require medical attention during transport.

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"Air ambulance service" means any publicly or privately owned service, licensed in accordance with the provisions of this part, which operates air ambulances to transport persons requiring or likely to require medical attention during transport.

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"Ambulance" or "emergency medical services vehicle" means any privately or publicly owned land or water vehicle that is designed, constructed, reconstructed, maintained, equipped, or operated for, and is used for, or intended to be used for, land or water transportation of sick or injured persons requiring or likely to require medical attention during transport.

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(6) "Ambulance driver" means any person who meets the requirements of s. 401.281.

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(7) "Basic life support" means the use of skills and techniques described in the most recent U.S. DOT National Standard EMT-Basic Curriculum by an emergency medical

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technician or paramedic under the supervision of a licensee's medical director as required by rules of the department. The

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term "basic life support" also includes other techniques which

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specified by rules of the department. The term "basic life support" also includes provision of care by a paramedic or emergency medical technician under the supervision of a licensee's medical director to one experiencing an emergency medical condition as defined herein. "Basic life support" means treatment of medical emergencies by a qualified person through the use of techniques such as patient assessment, cardiopulmonary resuscitation (CPR), splinting, obstetrical assistance, bandaging, administration of oxygen, application of medical antishock trousers, administration of a subcutaneous injection using a premeasured autoinjector of epinephrine to a person suffering an anaphylactic reaction, and other techniques described in the Emergency Medical Technician Basic Training Course Curriculum of the United States Department of Transportation. The term "basic life support" also includes other techniques which have been approved and are performed under conditions specified by rules of the department.

- (8) "Basic life support service" means any emergency medical service which uses only basic life support techniques.
- (9) "Certification" means any authorization issued pursuant to this part to a person to act as an emergency medical technician or a paramedic.
  - (10) "Department" means the Department of Health.
  - (11) "Emergency medical condition" means:
- (a) A medical condition manifesting itself by acute symptoms of sufficient severity, which may include severe pain, psychiatric disturbances, symptoms of substance abuse, or other acute symptoms, such that the absence of immediate medical attention could reasonably be expected to result in any of the following:

1 1. Serious jeopardy to patient health, including a 2 pregnant woman or fetus. 3 2. Serious impairment to bodily functions. 4 3. Serious dysfunction of any bodily organ or part. 5 (b) With respect to a pregnant woman, that there is 6 evidence of the onset and persistence of uterine contractions 7 or rupture of the membranes. 8 (c) With respect to a person exhibiting acute psychiatric disturbance or substance abuse, that the absence 9 10 of immediate medical attention could reasonably be expected to 11 result in: 12 1. Serious jeopardy to the health of a patient; or 13 2. Serious jeopardy to the health of others. 14 (12)(11) "Emergency medical technician" means a person 15 who is certified by the department to perform basic life 16 support pursuant to this part. 17 (13)<del>(12)</del> "Interfacility transfer" means the transportation by ambulance of a patient between two 18 facilities licensed under chapter 393, chapter 395, or chapter 19 20 400, pursuant to this part. 21 (14)<del>(13)</del> "Licensee" means any basic life support service, advanced life support service, or air ambulance 22 service licensed pursuant to this part. 23 (15)(14) "Medical direction" means direct supervision 24 by a physician through two-way voice communication or, when 25 26 such voice communication is unavailable, through established 27 standing orders, pursuant to rules of the department. 28 (16)<del>(15)</del> "Medical director" means a physician who is

employed or contracted by a licensee and who provides medical

supervision, including appropriate quality assurance but not

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operations and training pursuant to this part.

(17)<del>(16)</del> "Mutual aid agreement" means a written agreement between two or more entities whereby the signing parties agree to lend aid to one another under conditions specified in the agreement and as sanctioned by the governing body of each affected county.

(18)<del>(17)</del> "Paramedic" means a person who is certified by the department to perform basic and advanced life support pursuant to this part.

(19)<del>(18)</del> "Permit" means any authorization issued pursuant to this part for a vehicle to be operated as a basic life support or advanced life support transport vehicle or an advanced life support nontransport vehicle providing basic or advanced life support.

(20)<del>(19)</del> "Physician" means a practitioner who is licensed under the provisions of chapter 458 or chapter 459. For the purpose of providing "medical direction" as defined in subsection (14) for the treatment of patients immediately prior to or during transportation to a United States Department of Veterans Affairs medical facility, "physician" also means a practitioner employed by the United States Department of Veterans Affairs.

(21)<del>(20)</del> "Registered nurse" means a practitioner who is licensed to practice professional nursing pursuant to part I of chapter 464.

(22)<del>(21)</del> "Secretary" means the Secretary of Health.

(23)<del>(22)</del> "Service location" means any permanent location in or from which a licensee solicits, accepts, or conducts business under this part.

Section 35. Subsection (8) of section 409.905, Florida 31 | Statutes, is amended to read:

and atory Medicaid services.—The agency may make payments for the following services, which are required of the state by Title XIX of the Social Security Act, furnished by Medicaid providers to recipients who are determined to be eligible on the dates on which the services were provided. Any service under this section shall be provided only when medically necessary and in accordance with state and federal law. Mandatory services rendered by providers in mobile units to Medicaid recipients may be restricted by the agency. Nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, number of services, or any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216.

(8) NURSING FACILITY SERVICES.—The agency shall pay for 24-hour—a-day nursing and rehabilitative services for a recipient in a nursing facility licensed under part II of chapter 400 or in a rural hospital, as defined in s. 395.602, or in a Medicare certified skilled nursing facility operated by a hospital, as defined by s. 395.002(12)(11), that is licensed under part I of chapter 395, and in accordance with provisions set forth in s. 409.908(2)(a), which services are ordered by and provided under the direction of a licensed physician. However, if a nursing facility has been destroyed or otherwise made uninhabitable by natural disaster or other emergency and another nursing facility is not available, the agency must pay for similar services temporarily in a hospital licensed under part I of chapter 395 provided federal funding is approved and available.

Section 36. Paragraph (1) of subsection (1) of section

468.505, Florida Statutes, is amended to read:

468.505 Exemptions; exceptions.--

(1) Nothing in this part may be construed as prohibiting or restricting the practice, services, or activities of:

(1) A person employed by a nursing facility exempt from licensing under s. 395.002(14)(13), or a person exempt from licensing under s. 464.022.

Section 37. Paragraph (b) of subsection (2) of section 812.014, Florida Statutes, is amended to read:

812.014 Theft.--

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(b)1. If the property stolen is valued at \$20,000 or more, but less than \$100,000;

- 2. The property stolen is cargo valued at less than \$50,000 that has entered the stream of interstate or intrastate commerce from the shipper's loading platform to the consignee's receiving dock; or
- 3. The property stolen is emergency medical equipment, valued at \$300 or more, that is taken from a facility licensed under chapter 395 or from an aircraft or vehicle permitted under chapter 401,

the offender commits grand theft in the second degree, punishable as a felony of the second degree, as provided in s. 775.082, s. 775.083, or s. 775.084. Emergency medical equipment means mechanical or electronic apparatus used to provide emergency services and care as defined in s. 395.002(11)(10)or to treat medical emergencies.

31 | (Redesignate subsequent sections.)

======= T I T L E A M E N D M E N T ========= 1 2 And the title is amended as follows: 3 On page 85, line 26, 4 5 insert: amending s. 395.002, F.S.; revising definitions 6 7 relating to emergency services and care provided by hospitals and related facilities; 8 amending s. 395.1041, F.S.; revising provisions 9 relating to hospital service capability and 10 access to emergency services and care; 11 12 directing the Agency for Health Care 13 Administration to convene a workgroup to report 14 to the Legislature regarding hospital service 15 capability requirements; amending ss. 383.50, 16 394.4787, 395.602, 395.701, 400.051, 409.905, 468.505, and 812.014, F.S.; conforming 17 cross-references; amending s. 401.23, F.S.; 18 19 redefining the terms "advanced life support" 20 and "basic life support"; defining the term "emergency medical conditions"; 21 22 23 24 25 26 27 28 29 30 31