## Florida Senate - 2003

CS for CS for SB 250

By the Committees on Appropriations; Health, Aging, and Long-Term Care; and Senators Peaden, Jones, Klein, Saunders and Fasano

	309-2343-03
1	A bill to be entitled
2	An act relating to rural hospitals; amending
3	ss. 395.602 and 408.07, F.S.; revising the
4	definition of the term "rural hospital";
5	creating s. 395.6025, F.S.; authorizing
б	exemptions from certificate-of-need review for
7	the construction of a new or replacement
8	facility for a rural hospital; providing
9	conditions for eligibility for the exemption;
10	creating s. 395.6063, F.S.; permitting any
11	statutory rural hospital to contract with the
12	Department of Management Services in order to
13	purchase coverage in the state group health
14	insurance plan for the hospital's employees;
15	requiring a participating hospital to pay a
16	fee; requiring the Department of Management
17	Services to obtain a private letter ruling;
18	expanding the definition of the term "infant
19	delivered" for the purposes of payment of an
20	initial assessment for each infant delivered in
21	a hospital; providing an effective date.
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23	Be It Enacted by the Legislature of the State of Florida:
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25	Section 1. Paragraph (e) of subsection (2) of section
26	395.602, Florida Statutes, is amended to read:
27	395.602 Rural hospitals
28	(2) DEFINITIONSAs used in this part:
29	(e) "Rural hospital" means an acute care hospital
30	licensed under this chapter, having 100 or fewer licensed beds
31	and an emergency room, which is:
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1 1. The sole provider within a county with a population 2 density of no greater than 100 persons per square mile; 3 An acute care hospital, in a county with a 2. population density of no greater than 100 persons per square 4 5 mile, which is at least 30 minutes of travel time, on normally б traveled roads under normal traffic conditions, from any other 7 acute care hospital within the same county; 8 3. A hospital supported by a tax district or 9 subdistrict whose boundaries encompass a population of 100 10 persons or fewer per square mile; 11 4. A hospital in a constitutional charter county with a population of over 1 million persons that has imposed a 12 local option health service tax pursuant to law and in an area 13 that was directly impacted by a catastrophic event on August 14 24, 1992, for which the Governor of Florida declared a state 15 of emergency pursuant to chapter 125, and has 120 beds or less 16 17 that serves an agricultural community with an emergency room utilization of no less than 20,000 visits and a Medicaid 18 19 in-patient utilization rate greater than 15 percent; 20 5. A hospital with a service area that has a 21 population of 100 persons or fewer per square mile. As used in this subparagraph, the term "service area" means the fewest 22 number of zip codes that account for 75 percent of the 23 24 hospital's discharges for the most recent 5-year period, based on information available from the hospital inpatient discharge 25 database in the State Center for Health Statistics at the 26 Agency for Health Care Administration; or 27 28 6. A hospital designated as a Critical Access Hospital 29 by the Department of Health in accordance with federal regulations and state requirements. 30 31

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1 Population densities used in this paragraph must be based upon 2 the most recently completed United States census. A hospital 3 that received funds under s. 409.9116 for a quarter beginning no later than July 1, 2002, is deemed to have been and shall 4 5 continue to be a rural hospital from that date through June б 30, 2012, if the hospital continues to have 100 or fewer 7 licensed beds and an emergency room, or meets the criteria of 8 subparagraph 4. An acute care hospital that has not previously been designated as a rural hospital and that meets the 9 10 criteria of this paragraph shall be granted such designation 11 upon application, including supporting documentation to the Agency for Health Care Administration. 12 Section 2. Subsection (42) of section 408.07, Florida 13 Statutes, is amended to read: 14 408.07 Definitions.--As used in this chapter, with the 15 exception of ss. 408.031-408.045, the term: 16 17 (42) "Rural hospital" means an acute care hospital licensed under chapter 395, having 100 or fewer licensed beds 18 19 and an emergency room, and which is: 20 (a) The sole provider within a county with a 21 population density of no greater than 100 persons per square mile; 22 23 (b) An acute care hospital, in a county with a 24 population density of no greater than 100 persons per square mile, which is at least 30 minutes of travel time, on normally 25 traveled roads under normal traffic conditions, from another 26 acute care hospital within the same county; 27 28 (c) A hospital supported by a tax district or 29 subdistrict whose boundaries encompass a population of 100 30 persons or fewer per square mile; 31 3

1	(d) A hospital with a service area that has a
2	population of 100 persons or fewer per square mile. As used
3	in this paragraph, the term "service area" means the fewest
4	number of zip codes that account for 75 percent of the
5	hospital's discharges for the most recent 5-year period, based
6	on information available from the hospital inpatient discharge
7	database in the State Center for Health Statistics at the
8	Agency for Health Care Administration; or
9	(e) A hospital designated as a Critical Access
10	Hospital by the Department of Health in accordance with
11	federal regulations and state requirements.
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13	Population densities used in this subsection must be based
14	upon the most recently completed United States census. $\underline{A}$
15	hospital that received funds under s. 409.9116 for a quarter
16	beginning no later than July 1, 2002, is deemed to have been
17	and shall continue to be a rural hospital from that date
18	through June 30, 2012, if the hospital continues to have 100
19	or fewer licensed beds and an emergency room, or meets the
20	criteria of s. 395.602(2)(e)4. An acute care hospital that has
21	not previously been designated as a rural hospital and that
22	meets the criteria of this subsection shall be granted such
23	designation upon application, including supporting
24	documentation, to the Agency for Health Care Administration.
25	Section 3. Section 395.6025, Florida Statutes, is
26	created to read:
27	395.6025 Rural hospital replacement facilities
28	Notwithstanding the provisions of s. 408.036, a hospital
29	defined as a statutory rural hospital in accordance with s.
30	395.602, or a not-for-profit operator of rural hospitals, is
31	not required to obtain a certificate of need for the

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1 construction of a new hospital located in a county with a population of at least 15,000 but no more than 18,000 and a 2 3 density of less than 30 persons per square mile, or a replacement facility, provided that the replacement, or new, 4 5 facility is located within 10 miles of the site of the б currently licensed rural hospital and within the current 7 primary service area. As used in this section, the term 8 'service area" means the fewest number of zip codes that account for 75 percent of the hospital's discharges for the 9 most recent 5-year period, based on information available from 10 11 the hospital inpatient discharge database in the State Center for Health Statistics at the Agency for Health Care 12 13 Administration. Section 4. Section 395.6063, Florida Statutes, is 14 created to read: 15 395.6063 Rural hospital employee health insurance.--16 (1) Effective July 1, 2003, any statutory rural 17 18 hospital may contract with the Department of Management 19 Services in order to purchase coverage in the state group health insurance plan for the hospital's employees and 20 qualified family members at the same premium cost as that for 21 retirees and surviving spouses. The hospital shall collect 22 payroll deductions or other remuneration from qualified 23 24 employees as may be required for the employee contribution in accordance with the department's regulations. The hospital 25 shall also make the employer contributions required and pay an 26 27 annual administrative fee of not less than \$2.61 per enrollee 28 per month. (2) The provisions of ss.624.436-624.446 do not apply 29 30 to the State Group Insurance Program for purposes of this 31 section.

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1	(3) The Department of Management Services shall
2	request a private letter ruling from the Internal Revenue
3	Service determining whether the inclusion of employees of
4	rural hospitals in the state group insurance program, in
5	accordance with this section, jeopardizes the qualified tax
6	status of the state group insurance program. The department
7	shall request this determination no later than July 31, 2003.
8	Implementation of this section is contingent upon receipt of a
9	favorable ruling by the Internal Revenue Service.
10	Section 5. Paragraph (a) of subsection (4) of section
11	766.314, Florida Statutes, is amended to read:
12	766.314 Assessments; plan of operation
13	(4) The following persons and entities shall pay into
14	the association an initial assessment in accordance with the
15	plan of operation:
16	(a) On or before October 1, 1988, each hospital
17	licensed under chapter 395 shall pay an initial assessment of
18	\$50 per infant delivered in the hospital during the prior
19	calendar year, as reported to the Agency for Health Care
20	Administration; provided, however, that a hospital owned or
21	operated by the state or a county, special taxing district, or
22	other political subdivision of the state shall not be required
23	to pay the initial assessment or any assessment required by
24	subsection (5). The term "infant delivered" includes live
25	births and not stillbirths, but the term does not include
26	infants delivered by employees or agents of the Board of
27	Regents <u>,</u> or those born in a teaching hospital as defined in s.
28	408.07, or those born in a teaching hospital as defined in s.
29	395.806 that have been deemed by the association as being
30	exempt from assessments since fiscal year 1997 to fiscal year
31	2001. The initial assessment and any assessment imposed
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1 pursuant to subsection (5) may not include any infant born to 2 a charity patient (as defined by rule of the Agency for Health 3 Care Administration) or born to a patient for whom the 4 hospital receives Medicaid reimbursement, if the sum of the 5 annual charges for charity patients plus the annual Medicaid б contractuals of the hospital exceeds 10 percent of the total 7 annual gross operating revenues of the hospital. The hospital is responsible for documenting, to the satisfaction of the 8 9 association, the exclusion of any birth from the computation 10 of the assessment. Upon demonstration of financial need by a hospital, the association may provide for installment payments 11 12 of assessments. Section 6. This act shall take effect July 1, 2003. 13 14 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN 15 COMMITTEE SUBSTITUTE FOR CS for Senate Bill 250 16 17 The Committee Substitute expands the definition of the term "infant delivered" for the purposes of payment of an initial assessment for each infant delivered in a hospital to exclude infants born in a teaching hospital that have been deemed by the association as being exempt from assessments since fiscal year 1997 to 2001. 18 19 20 21 Provides that statutory rural hospitals, or a not-for-profit operator of rural hospitals, are not required to obtain a certificate-of-need for construction of a new hospital located in a county with a population of at least 15,000, but no more than 18,000, and a density of less than 30 persons per square mile, or a replacement facility, provided that the replacement or new facility is located within 10 miles and within the current primary service area. 22 23 24 25 Provides that 1) statutory rural hospitals may contract with the Department of Management Services in order to purchase coverage in the State Group Insurance plan for their employees; 2) provides that the provisions of ss.624.436 -624.446 related to multiple employer welfare arrangement do not apply to the State Group Insurance Program; and 3) requires the Department of Management Services to request a private letter ruling from the Internal Revenue Service to determine if the inclusion of employees of rural hospitals jeopardizes the qualified tax status of the State Group Insurance Program. 26 27 2.8 29 30 31

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