

Bill No. CS for SB 2750

Amendment No. ____ Barcode 300582

CHAMBER ACTION

Senate

House

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Senator Diaz de la Portilla moved the following **substitute for amendment to amendment** (041478):

Senate Amendment (with title amendment)

On page 71, line 19, through page 73, line 24 delete those lines

and insert:

Section 117. Section 154.306, Florida Statutes, is amended to read:

154.306 Financial responsibility for certified residents who are qualified indigent patients treated at an out-of-county participating hospital or regional referral hospital.--Ultimate financial responsibility for treatment received at a participating hospital or a regional referral hospital or a state-approved trama center by a qualified indigent patient who is a certified resident of a county in the State of Florida, but is not a resident of the county in which the participating hospital or regional referral hospital or a state-approved trama center is located, is the obligation of the county of which the qualified indigent patient is a

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1 resident. Each county shall reimburse participating hospitals
2 or regional referral hospitals or a state-approved trauma
3 center as provided for in this part, and shall provide or
4 arrange for indigent eligibility determination procedures and
5 resident certification determination procedures as provided
6 for in rules developed to implement this part. The agency, or
7 any county determining eligibility of a qualified indigent,
8 shall provide to the county of residence, upon request, a copy
9 of any documents, forms, or other information, as determined
10 by rule, which may be used in making an eligibility
11 determination.

12 (1) A county's financial obligation for each certified
13 resident who qualifies as an indigent patient under this part,
14 and who has received treatment at an out-of-county hospital,
15 shall not exceed 45 days per county fiscal year at a rate of
16 payment equivalent to 100 percent of the per diem
17 reimbursement rate currently in effect for the out-of-county
18 hospital under the medical assistance program for the needy
19 under Title XIX of the Social Security Act, as amended, except
20 that those counties that are at their 10-mill cap on October
21 1, 1991, shall reimburse hospitals for such services at not
22 less than 80 percent of the hospital Medicaid per diem.

23 However, nothing in this section shall preclude a hospital
24 that has a formal signed agreement with a county to treat such
25 county's indigents from negotiating a higher or lower per diem
26 rate with the county. No county shall be required to pay more
27 than the equivalent of \$4 per capita in the county's fiscal
28 year. The agency shall calculate and certify to each county
29 by March 1 of each year, the maximum amount the county may be
30 required to pay by multiplying the most recent official state
31 population estimate for the total population of the county by

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1 \$4 per capita. Each county shall certify to the agency within
2 60 days after the end of the county's fiscal year, or upon
3 reaching the \$4 per capita threshold, should that occur before
4 the end of the fiscal year, the amount of reimbursement it
5 paid to all out-of-county hospitals under this part. The
6 maximum amount a county may be required to pay to
7 out-of-county hospitals for care provided to qualified
8 indigent residents may be reduced by up to one-half, provided
9 that the amount not paid has or is being spent for in-county
10 hospital care provided to qualified indigent residents.

11 (2) No county shall be required to pay for any
12 elective or nonemergency admissions or services at an
13 out-of-county hospital for a qualified indigent who is a
14 certified resident of the county if the county provides
15 funding for such services and the services are available at a
16 local hospital in the county where the indigent resides; or
17 the out-of-county hospital has not obtained prior written
18 authorization and approval for such hospital admission or
19 service, provided that the resident county has established a
20 procedure to authorize and approve such admissions.

21 (3) For the purpose of computing the maximum amount
22 that a county having a population of 100,000 or less may be
23 required to pay, the agency must reduce the official state
24 population estimates by the number of inmates and patients
25 residing in the county in institutions operated by the Federal
26 Government, the Department of Corrections, the Department of
27 Health, or the Department of Children and Family Services, and
28 by the number of active-duty military personnel residing in
29 the county, all of whom shall not be considered residents of
30 the county. However, a county is entitled to receive the
31 benefit of such a reduction in estimated population figures

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1 only if the county accepts as valid and true, and does not
2 require any reverification of, the documentation of financial
3 eligibility and county residency which is provided to it by
4 the participating hospital or regional referral hospital. The
5 participating hospital or regional referral hospital must
6 provide documentation that is complete and in the form
7 required by s. 154.3105.

8 (4) The county where the indigent resides shall, in
9 all instances, be liable for the cost of treatment provided to
10 a qualified indigent patient at an out-of-county hospital for
11 any emergency medical condition which will deteriorate from
12 failure to provide such treatment if such condition is
13 determined and documented by the attending physician to be of
14 an emergency nature; provided that the patient has been
15 certified to be a resident of such county pursuant to s.
16 154.309.

17 (5) No county shall be liable for payment for
18 treatment of a qualified indigent who is a certified resident
19 and has received services at an out-of-county participating
20 hospital or regional referral hospital, until such time as
21 that hospital has documented to the agency and the agency has
22 determined that it has met its charity care obligation based
23 on the most recent audited actual experience.

24 Section 118. Section 154.317, Florida Statutes, is
25 created to read:

26 154.317 County financial responsibility for trauma
27 care.--

28 (1) Notwithstanding the provisions of ss.
29 154.301-154.316, state-approved trauma centers shall be
30 responsible for determining eligibility and residency of
31 patients with primary or secondary diagnoses of DRG 483-487.

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1 (a) Financial eliqibility shall be determined in
2 accordance with s. 154.308, and the methodology defined in
3 rules adopted by the Agency for Health Care Administration.

4 (b) Residence in the county at the time of the
5 hospitalization shall be verified with at least one of the
6 following forms of documentation:

7 1. Current active driver's license;

8 2. Mortgage, lease, or rental receipt or letter from
9 the landlord;

10 3. Water, electric, or other public utility bill in
11 the name of the patient or family member to a residential
12 address within the county;

13 4. A state, county, or federal document mailed to the
14 patient to a residential address within the county;

15 5. Voter registration; or

16 6. Proof of children enrolled in public schools within
17 the county.

18 (2) The Agency for Health Care Administration shall
19 make final eliqibility determinations for any cases that are
20 disputed by the counties.

21 (3) A county is responsible for payment if the county
22 is currently contributing to the financial support of a
23 regional trauma system through direct funding of trauma care,
24 through tax district support for hospitals in the county
25 designated as trauma centers, or under the terms of an
26 intergovernmental agreement with other counties in a trauma
27 region or a written agreement with the nearest trauma center.

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29 (Redesignate subsequent sections.)

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1 ===== T I T L E A M E N D M E N T =====

2 And the title is amended as follows:

3 On page 79, lines 12-17, delete those lines

4

5 and insert:

6 at certain facilities; amending s. 154.306,
7 F.S.; revising requirements for county
8 responsibility for certain indigent patients to
9 include patients treated at state-approved
10 trauma centers; creating s. 154.317, F.S.;
11 requiring state-approved trauma centers to be
12 responsible for determining eligibility and
13 residency of certain patients for purposes of
14 establishing reimbursement by counties;
15 authorizing the Agency for Health Care
16 Administration to adopt rules for financial
17 eligibility for certain trauma care; requiring
18 the Agency for Health Care Administration to
19 make final eligibility determinations for
20 disputed cases involving reimbursement for
21 trauma care of indigent patients by counties;
22 repealing s.

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