

Bill No. CS for CS for SB 400

Amendment No. ____ Barcode 511996

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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11	Senator Saunders moved the following amendment:		
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13	Senate Amendment (with title amendment)		
14	On page 73, after line 31,		
15			
16	insert:		
17	Section 34. Section 154.306, Florida Statutes, is		
18	amended to read:		
19	154.306 Financial responsibility for certified		
20	residents who are qualified indigent patients treated at an		
21	out-of-county participating hospital or regional referral		
22	hospital.--Ultimate financial responsibility for treatment		
23	received at a participating hospital or a regional referral		
24	hospital <u>or a state-approved trama center</u> by a qualified		
25	indigent patient who is a certified resident of a county in		
26	the State of Florida, but is not a resident of the county in		
27	which the participating hospital or regional referral hospital		
28	<u>or a state-approved trama center</u> is located, is the obligation		
29	of the county of which the qualified indigent patient is a		
30	resident. Each county shall reimburse participating hospitals		
31	or regional referral hospitals <u>or a state-approved trauma</u>		

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

10 (1) A county's financial obligation for each certified
11 resident who qualifies as an indigent patient under this part,
12 and who has received treatment at an out-of-county hospital,
13 shall not exceed 45 days per county fiscal year at a rate of
14 payment equivalent to 100 percent of the per diem
15 reimbursement rate currently in effect for the out-of-county
16 hospital under the medical assistance program for the needy
17 under Title XIX of the Social Security Act, as amended, except
18 that those counties that are at their 10-mill cap on October
19 1, 1991, shall reimburse hospitals for such services at not
20 less than 80 percent of the hospital Medicaid per diem.
21 However, nothing in this section shall preclude a hospital
22 that has a formal signed agreement with a county to treat such
23 county's indigents from negotiating a higher or lower per diem
24 rate with the county. No county shall be required to pay more
25 than the equivalent of \$4 per capita in the county's fiscal
26 year. The agency shall calculate and certify to each county
27 by March 1 of each year, the maximum amount the county may be
28 required to pay by multiplying the most recent official state
29 population estimate for the total population of the county by
30 \$4 per capita. Each county shall certify to the agency within
31 60 days after the end of the county's fiscal year, or upon

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

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

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

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1 eligibility and county residency which is provided to it by
 2 the participating hospital or regional referral hospital. The
 3 participating hospital or regional referral hospital must
 4 provide documentation that is complete and in the form
 5 required by s. 154.3105.

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

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

22 Section 35. Section 154.317, Florida Statutes, is
 23 created to read:

24 154.317 County financial responsibility for trauma
 25 care.--

26 (1) Notwithstanding ss. 154.301-154.316, each county
 27 shall participate in supporting a regionalized system of
 28 trauma care which provides reimbursement to hospitals that are
 29 trauma centers, approved in accordance with s. 395.4025.

30 Financial responsibility shall be limited to uninsured or
 31 underinsured inpatients with primary or secondary diagnoses of

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1 DRG 484-487. For purposes of this section, the term,
2 "underinsured" means insurance coverage for a person who is an
3 inpatient which is inadequate to cover the cost of that
4 patient's care.

5 (2) Payment levels may not exceed the statewide
6 average cost per trauma patient in each level of designated
7 trauma center. Initial payment rates, subject to annual
8 updates by the Agency for Health Care Administration are:

9 (a) Level I: \$14,000 per trauma patient;

10 (b) Level II: \$9,000 per trauma patient; and

11 (c) Pediatric: \$6,000 per trauma patient.

12 (3) Counties shall be designated as responsible for
13 payment if:

14 (a) The county of residence has unspent funds received
15 under this part at the end of the fiscal year in which the
16 hospitalization occurs.

17 (b) The responsible county is exempt based on the
18 following criteria:

19 1. The county population in the most recent United
20 States Census totals fewer than 30,000 residents and the
21 proportion of county residents with incomes below the poverty
22 level exceeds 20 percent;

23 2. The property tax rate, including special districts
24 and municipal service taxes, of the county equals or exceeds
25 10 mills; or

26 3. The responsible county is currently contributing to
27 the financial support of a regional trauma system through
28 direct funding of trauma care, tax district support for
29 hospitals in the county designated as trauma centers, or under
30 the terms of an intergovernmental agreement with other
31 counties in the trauma region or a written agreement with the

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1 nearest trauma center.

2 (c) Residence in the county at the time of the
3 hospitalization is verified by:

4 1. Current active driver's license;

5 2. Mortgage, lease, or rental receipt or letter from a
6 landlord;

7 3. Water, electric, or other public utility bill in
8 the name of the patient or a family member at a residential
9 address within the county;

10 4. A state, county, or federal document mailed to the
11 patient at a residential address within the county;

12 5. Vehicle registration in the name of the patient or
13 a family member at a residential address within the county;

14 6. Voter registration; or

15 7. Proof of children enrolled in public schools within
16 the county.

17 (4) Each county shall pay the amount specified in this
18 section, as determined by the Agency for Health Care
19 Administration, into the Medicaid Grants and Donations Trust
20 Fund. These funds shall be used in special Medicaid payments
21 to enhance the public funds available for federal matching
22 purposes. The total special Medicaid payments funded by these
23 county payments shall be paid to state-approved trauma centers
24 and shall be distributed in accordance with the General
25 Appropriations Act or other legislation related to
26 appropriations.

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28 (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 3, line 2, after the semicolon,

4

5 insert:

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

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