

Bill No. CS for CS for SB 400

Amendment No. ____ Barcode 685940

	<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,		
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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 the provisions of ss.
 27 154.301-154.316, state-approved trauma centers shall be
 28 responsible for determining eligibility and residency of
 29 patients with primary or secondary diagnoses of DRG 483-487.

30 (a) Financial eligibility shall be determined in
 31 accordance with s. 154.308, and the methodology defined in

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1 rules adopted by the Agency for Health Care Administration.

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

5 1. Current active driver's license;

6 2. Mortgage, lease, or rental receipt or letter from
7 the landlord;

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

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

13 5. Voter registration; or

14 6. Proof of children enrolled in public schools within
15 the county.

16 (2) The Agency for Health Care Administration shall
17 make final eligibility determinations for any cases that are
18 disputed by the counties.

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20 (Redesignate subsequent sections.)

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

24 And the title is amended as follows:

25 On page 3, line 2, after the semicolon,

26

27 insert:

28 amending s. 154.306, F.S.; revising
29 requirements for county responsibility for
30 certain indigent patients to include patients
31 treated at state-approved trauma centers;

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1 creating s. 154.317, F.S.; requiring
2 state-approved trauma centers to be responsible
3 for determining eligibility and residency of
4 certain patients for purposes of establishing
5 reimbursement by counties; authorizing the
6 Agency for Health Care Administration to adopt
7 rules for financial eligibility for certain
8 trauma care; requiring the Agency for Health
9 Care Administration to make final eligibility
10 determinations for disputed cases involving
11 reimbursement for trauma care of indigent
12 patients by counties;

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