Amendment No. (for drafter's use only)

Senate House 1 2 3 4 5 6 7 8 9 10 11 Representative Garcia offered the following: 12 13 Amendment (with title amendment) On page 1, line 19, through page 3, line 11, 14 remove: all of said lines 15 16 17 and insert: 18 (t)1. For the provision of adult open-heart services in a 19 hospital located within the boundaries of Palm Beach, Polk, 20 Martin, St. Lucie, or Indian River Counties or in a municipality 21 with a population of more than 240,000 if the following 22 conditions are met: the exemption must be based upon objective 23 criteria and address and solve the twin problems of geographic 24 and temporal access. A hospital shall be exempt from the 25 certificate-of-need review for the establishment of an open-26 heart-surgery program when the application for exemption

CHAMBER ACTION

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submitted under this paragraph complies with the following
criteria:

- a. The applicant must certify that it will meet and continuously maintain the minimum licensure requirements adopted by the agency governing adult open-heart programs, including the most current guidelines of the American College of Cardiology and American Heart Association Guidelines for Adult Open Heart Programs.
- b. The applicant must certify that it will maintain sufficient appropriate equipment and health personnel to ensure quality and safety.
- c. The applicant must certify that it will maintain appropriate times of operation and protocols to ensure availability and appropriate referrals in the event of emergencies.
- d. The applicant can demonstrate that it is referring 300 or more patients per year from the hospital, including the emergency room, for cardiac services at a hospital with cardiac services, or that the average wait for transfer for 50 percent or more of the cardiac patients exceeds 4 hours.
- <u>e. The applicant is a general acute care hospital that has</u> been in operation for 3 years or more.
- <u>f. The applicant is performing more than 300 diagnostic</u>

 <u>cardiac catheterization procedures per year, combined inpatient</u>
 and outpatient.
- g. The applicant's payor mix at a minimum reflects the community average for Medicaid, charity care, and self-pay patients or the applicant must certify that it will provide a

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- 55 minimum of 5 percent of Medicaid, charity care, and self-pay to open-heart-surgery patients.
 - h. If the applicant fails to meet the established criteria for open-heart programs or fails to reach 300 surgeries per year by the end of its third year of operation, it must show cause why its exemption should not be revoked.
 - 2. By December 31, 2004, and annually thereafter, the Agency for Health Care Administration shall submit a report to the Legislature providing information concerning the number of requests for exemption received under this paragraph and the number of exemptions granted or denied.

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

On page 1, line(s) 8-9,

69 remove: all of said lines

71 and insert: to the Legislature; providing an effective date.

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