By the Committee on Health, Aging, and Long-Term Care; and Senator Saunders

317-1908-03

25

26

2728

2930

A bill to be entitled 1 2 An act relating to indigent health care; 3 amending s. 154.306, F.S.; increasing the cap 4 on the financial responsibility limits of 5 counties for the cost of indigent county residents who receive treatment at 6 7 participating hospitals in other counties; creating s. 154.317, F.S.; establishing 8 9 reimbursement procedures and guidelines for the reimbursement of trauma centers by counties; 10 providing an effective date. 11 12 Be It Enacted by the Legislature of the State of Florida: 13 14 15 Section 1. Subsection (1) of section 154.306, Florida Statutes, is amended to read: 16 17 154.306 Financial responsibility for certified residents who are qualified indigent patients treated at an 18 19 out-of-county participating hospital or regional referral 20 hospital.--Ultimate financial responsibility for treatment received at a participating hospital or a regional referral 21 22 hospital by a qualified indigent patient who is a certified resident of a county in the State of Florida, but is not a 23 resident of the county in which the participating hospital or 24

or regional referral hospitals as provided for in this part, and shall provide or arrange for indigent eligibility determination procedures and resident certification

the county of which the qualified indigent patient is a

determination procedures as provided for in rules developed to

regional referral hospital is located, is the obligation of

resident. Each county shall reimburse participating hospitals

3

4 5

6

7

9

10

11

12

13

14

15

16 17

18

19

20

21

22

23 24

25

26

27 28

30

implement this part. The agency, or any county determining eligibility of a qualified indigent, shall provide to the county of residence, upon request, a copy of any documents, forms, or other information, as determined by rule, which may be used in making an eligibility determination.

(1) A county's financial obligation for each certified resident who qualifies as an indigent patient under this part, and who has received treatment at an out-of-county hospital, shall not exceed 45 days per county fiscal year at a rate of payment equivalent to 100 percent of the per diem reimbursement rate currently in effect for the out-of-county hospital under the medical assistance program for the needy under Title XIX of the Social Security Act, as amended, except that those counties that are at their 10-mill cap on October 1, 1991, shall reimburse hospitals for such services at not less than 80 percent of the hospital Medicaid per diem. However, nothing in this section does not shall preclude a hospital that has a formal signed agreement with a county to treat such county's indigents from negotiating a higher or lower per diem rate with the county. A No county may not shall be required to pay more than the equivalent of \$6\$4 per capita in the county's fiscal year. The agency shall calculate and certify to each county by March 1 of each year, the maximum amount the county may be required to pay by multiplying the most recent official state population estimate for the total population of the county by\$6\$4 per capita. Each county shall certify to the agency within 60 days after the end of the county's fiscal year, or upon reaching the \$6 29 \$4 per capita threshold, should that occur before the end of the fiscal year, the amount of reimbursement it paid to all 31 out-of-county hospitals under this part. The maximum amount a

county may be required to pay to out-of-county hospitals for care provided to qualified indigent residents may be reduced by up to one-half <u>if</u>, provided that the amount not paid has or is being spent for in-county hospital care provided to qualified indigent residents.

Section 2. Section 154.317, Florida Statutes, is created to read:

154.317 County financial responsibility for trauma care.--

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

 Financial responsibility shall be limited to uninsured or underinsured inpatients with primary or secondary diagnoses of DRG 484-487. For purposes of this section, the term, 'underinsured' means insurance coverage for a person who is an inpatient which is inadequate to cover the cost of that patient's care.
- (2) Payment levels may not exceed the statewide average cost per trauma patient in each level of designated trauma center. Initial payment rates, subject to annual updates by the Agency for Health Care Administration are:
 - (a) Level I: \$14,000 per trauma patient;
 - (b) Level II: \$9,000 per trauma patient; and
 - (c) Pediatric: \$6,000 per trauma patient.
- (3) Counties shall be designated as responsible for payment if:
- (a) The county of residence has unspent funds received under this part at the end of the fiscal year in which the hospitalization occurs.

31 the county.

1	(b) The responsible county is currently contributing
2	to the financial support of a regional trauma system through
3	direct funding of trauma care, tax district support for
4	hospitals in the county designated as trauma centers, or under
5	the terms of an intergovernmental agreement with other
6	counties in the trauma region or a written agreement with the
7	nearest trauma center.
8	(c) The responsible county is exempt based on the
9	following criteria:
10	1. The county population in the most recent United
11	States Census totals fewer than 30,000 residents and the
12	proportion of county residents with incomes below the poverty
13	level exceeds 20 percent; or
14	2. The property tax rate, including special districts
15	and municipal service taxes, of the county equals or exceeds
16	10 mills.
17	(d) Residence in the county at the time of the
18	hospitalization is verified by:
19	1. Current active driver's license;
20	2. Mortgage, lease, or rental receipt or letter from a
21	<pre>landlord;</pre>
22	3. Water, electric, or other public utility bill in
23	the name of the patient or a family member at a residential
24	address within the county;
25	4. A state, county, or federal document mailed to the
26	patient at a residential address within the county;
27	5. Vehicle registration in the name of the patient or
28	a family member at a residential address within the county;
29	6. Voter registration; or
30	7. Proof of children enrolled in public schools within

Section 3. This act shall take effect July 1, 2003. STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN COMMITTEE SUBSTITUTE FOR Senate Bill 696 The Committee Substitute provides a definition for the term "underinsured" for the purpose of extending financial responsibility on counties to fund trauma care. An exemption from the trauma care funding requirement is provided for certain rural counties or counties in which the property tax rate equals or exceeds 10 mils.