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1	A bill to be entitled
2	An act relating to trauma care center care
3	services; amending s. 381.74, F.S.; requiring
4	hospitals and trauma centers to provide data on
5	moderate-to-severe brain or spinal cord
б	injuries to the Department of Health; amending
7	s. 381.745, F.S.; defining "department" for
8	purposes of the "Charlie Mack Overstreet Brain
9	or Spinal Cord Injuries Act"; amending s.
10	395.40, F.S.; revising legislative findings;
11	revising duties of the Department of Health to
12	implement and plan for a statewide trauma
13	system; amending s. 395.4001, F.S.; revising
14	definitions; amending s. 395.401, F.S.;
15	revising components for local and regional
16	trauma services system plans; correcting
17	references to the term "trauma center";
18	amending s. 395.4015, F.S.; requiring that the
19	boundaries of the trauma regions administered
20	by the Department of Health be coterminous with
21	the boundaries of the regional domestic
22	security task forces established within the
23	Department of Law Enforcement; providing
24	exceptions for certain interlocal agreements
25	for trauma services in a regional system;
26	eliminating requirements for the Department of
27	Health to develop the minimum components for
28	systems plans in defined trauma regions;
29	amending s. 395.402, F.S.; providing additional
30	legislative intent with respect to trauma
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for certain trauma centers; providing that
current trauma service areas shall be used
until the Department of Health completes an
assessment of the trauma system; requiring a
report; providing guidelines for such
assessment; requiring annual review; amending
s. 395.4025, F.S.; revising requirements for
the Department of Health's development of a
state trauma system plan; deleting obsolete
references; correcting references to the term
"trauma center"; revising requirements for the
department's approval and verification of a
facility as a trauma center; granting the
department authority to adopt rules for the
procedures and process for notification,
duration, and explanation of a trauma center's
termination of trauma services; revising the
requirements for notice that a hospital must
give before it terminates or substantially
reduces trauma service; exempting from certain
time limits on applications to operate as
trauma centers certain hospitals in areas
having no trauma center; limiting applications
until the completion of a specified review;
amending s. 395.403, F.S.; correcting
references to the term "trauma center";
revising eligibility requirements for state
funding of trauma centers; providing that
trauma centers may request that their
distributions from the Administrative Trust
Fund be used as intergovernmental transfer

1	funds in the Medicaid program; amending s.
2	395.404, F.S.; revising reporting requirements
3	to the trauma registry data system maintained
4	by the Department of Health; providing that
5	hospitals and trauma centers subject to
6	reporting trauma registry data to the
7	department are required to comply with other
8	duties concerning the moderate-to-severe brain
9	or spinal cord injury registry maintained by
10	the department; correcting references to the
11	term "trauma center"; amending s. 395.405,
12	F.S.; authorizing the Department of Health to
13	adopt and enforce rules necessary to administer
14	part II of ch. 395, F.S.; establishing a task
15	force on distribution of funds; providing for a
16	trauma center matching grant program; amending
17	s. 318.14, F.S.; providing additional civil
18	penalties for certain traffic infractions;
19	providing for disposition of such penalties;
20	amending s. 318.21, F.S.; providing for
21	disposition of mandatory civil penalties;
22	amending s. 322.0261, F.S.; revising provisions
23	relating to driver-improvement courses;
24	amending s. 322.27, F.S.; prescribing points
25	for violation of a traffic-control signal;
26	amending s. 318.18, F.S.; providing penalty for
27	specified violation of traffic control signal
28	devices and for failure to submit to test for
29	impairment or intoxication; providing for
30	distribution of moneys collected; directing the
31	clerk of court to collect a fee for each civil

1	and criminal violation of ch. 316, F.S.;
2	creating s. 322.751, F.S.; directing the
3	Department of Highway Safety and Motor Vehicles
4	to assess specified annual surcharges against a
5	motor vehicle licensee who accumulates eight or
6	more points against his or her license within
7	the previous 36 months; requiring the
8	department to notify a licensee by first-class
9	mail upon receipt of four points against his or
10	her license; directing the department to remit
11	all such penalties to the Administrative Trust
12	Fund in the Department of Health; amending s.
13	316.193, F.S.; directing the department to
14	assess specified annual surcharges against
15	motor vehicle licensees who have a final
16	conviction within the previous 36 months for a
17	DUI offense; directing the department to remit
18	all such penalties to the Administrative Trust
19	Fund in the Department of Health; amending s.
20	794.056, F.S.; providing that funds credited to
21	the Rape Crisis Program Trust Fund shall
22	include both funds collected as an additional
23	court assessment in certain cases and certain
24	funds deposited in the Administrative Trust
25	Fund in the Department of Health; revising a
26	requirement relating to the distribution of
27	moneys from the trust fund pursuant to a rule
28	by the Department of Health; creating s.
29	322.7525, F.S.; requiring the department to
30	notify licensees of the surcharges and the time
31	period in which to pay the surcharges; creating

1	s. 322.753, F.S.; requiring the department to
2	accept installment payments for the surcharges;
3	providing sanctions for a licensee's failure to
4	pay an installment; allowing the department to
5	permit licensees to pay assessed surcharges
6	with credit cards; requiring the department to
7	suspend a driver's license if the licensee does
8	not pay the surcharge or arrange for
9	installment payments within a specified time
10	after the notice of surcharge is sent;
11	repealing s. 395.4035, F.S., relating to the
12	Trauma Services Trust Fund; providing for
13	distribution of collections in the
14	Administrative Trust Fund in the Department of
15	Health; providing an appropriation; providing
16	an effective date.
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18	Be It Enacted by the Legislature of the State of Florida:
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20	Section 1. Subsection (1) of section 381.74, Florida
21	Statutes, is amended to read:
22	381.74 Establishment and maintenance of a central
23	registryThe department shall establish and maintain a
24	central registry of persons who have moderate-to-severe brain
25	or spinal cord injuries.
26	(1) Every public health agency, private health agency,
27	public social agency, private social agency, <u>hospital, trauma</u>
28	center, and attending physician shall report to the department
29	division within 5 days after identification or diagnosis of
30	any person who has a moderate-to-severe brain or spinal cord
31	injury. The consent of such person shall not be required.

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First Engrossed (ntc)
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Section 2. Present subsections (2) through (10) of 1 2 section 381.745, Florida Statutes, are redesignated as 3 subsections (3) through (11), respectively, and a new subsection (2) is added to that section, to read: 4 5 381.745 Definitions; ss. 381.739-381.79.--As used in ss. 381.739-381.79, the term: б 7 (2) "Department" means the Department of Health. 8 Section 3. Subsection (5) of section 395.40, Florida 9 Statutes, is amended to read: 395.40 Legislative findings and intent.--10 (5) In addition, the agencies listed in subsection (4) 11 should undertake to: 12 13 (a) Establish a coordinated methodology for 14 monitoring, evaluating, and enforcing the requirements of the state's inclusive trauma system which recognizes the interests 15 of each agency. 16 (b) Develop appropriate roles for trauma agencies, to 17 18 assist in furthering the operation of trauma systems at the regional level. This should include issues of system 19 evaluation as well as managed care. 20 (c) Develop and submit appropriate requests for 21 22 waivers of federal requirements which will facilitate the 23 delivery of trauma care. (d) Develop criteria that will become the future basis 24 for mandatory consultation between acute care hospitals and 25 trauma centers on the care of trauma victims and the mandatory 26 transfer of appropriate trauma victims to trauma centers. 27 28 (e) Develop a coordinated approach to the care of the 29 trauma victim. This shall include the movement of the trauma victim through the system of care and the identification of 30 31

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medical responsibility for each phase of care for 1 2 out-of-hospital and in-hospital trauma care. 3 (f) Require the medical director of an emergency 4 medical services provider to have medical accountability for a trauma victim during interfacility transfer. 5 Section 4. Section 395.4001, Florida Statutes, is б 7 amended to read: 8 395.4001 Definitions.--As used in this part, the term: 9 (1) "Agency" means the Agency for Health Care Administration. 10 (2) "Charity care" or "uncompensated trauma charity 11 care" means that portion of hospital charges reported to the 12 13 agency for which there is no compensation, other than 14 restricted or unrestricted revenues provided to a hospital by local governments or tax districts regardless of method of 15 payment, for care provided to a patient whose family income 16 for the 12 months preceding the determination is less than or 17 18 equal to 200 150 percent of the federal poverty level, unless the amount of hospital charges due from the patient exceeds 25 19 percent of the annual family income. However, in no case shall 20 the hospital charges for a patient whose family income exceeds 21 22 four times the federal poverty level for a family of four be considered charity. 23 24 (3) "Department" means the Department of Health. "Interfacility trauma transfer" means the transfer 25 (4) of a trauma victim between two facilities licensed under this 26 chapter, pursuant to this part. 27 28 (5) "Level I trauma center" means a trauma center 29 that: 30 (a) Has formal research and education programs for the 31 enhancement of trauma care; and is verified determined by the

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department to be in substantial compliance with Level I trauma 1 2 center and pediatric trauma referral center standards; and has been approved by the department to operate as a Level I trauma 3 4 <u>center</u>. 5 (b) Serves as a resource facility to Level II trauma centers, pediatric trauma referral centers, and general б 7 hospitals through shared outreach, education, and quality 8 improvement activities. 9 (c) Participates in an inclusive system of trauma care, including providing leadership, system evaluation, and 10 quality improvement activities. 11 (6) "Level II trauma center" means a trauma center 12 13 that: 14 (a) Is verified determined by the department to be in substantial compliance with Level II trauma center standards 15 and has been approved by the department to operate as a Level 16 17 II trauma center. 18 (b) Serves as a resource facility to general hospitals 19 through shared outreach, education, and quality improvement activities. 20 21 (c) Participates in an inclusive system of trauma 22 care. 23 (7) "Pediatric trauma referral center" means a 24 hospital that is verified determined by the department to be in substantial compliance with pediatric trauma referral 25 center standards as established by rule of the department and 26 has been approved by the department to operate as a pediatric 27 28 trauma center. 29 (8) "Provisional trauma center" means a hospital that has been verified by the department to be in substantial 30 compliance with the requirements in s. 395.4025 and has been 31

approved by the department to operate as a provisional Level I 1 2 trauma center, Level II trauma center, or pediatric trauma 3 center. 4 (8) "State approved trauma center" means a hospital 5 that has successfully completed the selection process pursuant б to s. 395.4025 and has been approved by the department to 7 operate as a trauma center in the state. 8 (9) "State sponsored trauma center" means a trauma 9 center or pediatric trauma referral center that receives state funding for trauma care services under s. 395.403. 10 (9)(10) "Trauma agency" means a department-approved 11 agency established and operated by one or more counties, or a 12 13 department-approved entity with which one or more counties 14 contract, for the purpose of administering an inclusive 15 regional trauma system. (10)(11) "Trauma alert victim" means a person who has 16 incurred a single or multisystem injury due to blunt or 17 18 penetrating means or burns, who requires immediate medical 19 intervention or treatment, and who meets one or more of the adult or pediatric scorecard criteria established by the 20 department by rule. 21 22 (11) (12) "Trauma center" means <u>a</u> any hospital that has 23 been verified determined by the department to be in 24 substantial compliance with the requirements in s. 395.4025 and has been approved by the department to operate as a Level 25 I trauma center, Level II trauma center, or pediatric trauma 26 center verification standards as either state approved or 27 28 provisional state approved. 29 (12)(13) "Trauma scorecard" means a statewide 30 methodology adopted by the department by rule under which a 31 person who has incurred a traumatic injury is graded as to the

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severity of his or her injuries or illness and which 1 2 methodology is used as the basis for making destination 3 decisions. 4 (13)(14) "Trauma transport protocol" means a document which describes the policies, processes, and procedures 5 governing the dispatch of vehicles, the triage, prehospital б 7 transport, and interfacility trauma transfer of trauma 8 victims. 9 (14)(15) "Trauma victim" means any person who has incurred a single or multisystem injury due to blunt or 10 penetrating means or burns and who requires immediate medical 11 intervention or treatment. 12 13 Section 5. Section 395.401, Florida Statutes, is 14 amended to read: 395.401 Trauma services system plans; verification of 15 trauma centers and pediatric trauma referral centers; 16 17 procedures; renewal.--18 (1)(a) The local and regional trauma agencies shall 19 plan, implement, and evaluate trauma services systems, in accordance with this section and ss. 395.4015, 395.404, and 20 395.4045, which consist of organized patterns of readiness and 21 22 response services based on public and private agreements and 23 operational procedures. The department shall establish, by 24 rule, processes and procedures for establishing a trauma agency and obtaining its approval from the department. 25 (b) The local and regional trauma agencies shall 26 develop and submit to the department plans for local and 27 28 regional trauma services systems. The plans must include, at a 29 minimum, the following components: 30 1. The organizational structure of the trauma system. 31

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2. Prehospital care management guidelines for triage 1 2 and transportation of trauma cases. 3 3. Flow patterns of trauma cases and transportation 4 system design and resources, including air transportation 5 services, provision for interfacility trauma transfer, and the prehospital transportation of trauma victims. The trauma б 7 agency shall plan for the development of a system of 8 transportation of trauma alert victims to trauma centers where 9 the distance or time to a trauma center or transportation resources diminish access by trauma alert victims. 10 4. The number and location of needed state approved 11 trauma centers based on local needs, population, and location 12 13 and distribution of resources. 14 5. Data collection regarding system operation and patient outcome. 15 6. Periodic performance evaluation of the trauma 16 17 system and its components. 18 7. The use of air transport services within the jurisdiction of the local trauma agency. 19 8. Public information and education about the trauma 20 system. 21 22 9. Emergency medical services communication system 23 usage and dispatching. The coordination and integration between the 24 10. verified trauma center care facility and other acute care 25 hospitals the nonverified health care facilities. 26 11. Medical control and accountability. 27 28 12. Quality control and system evaluation. 29 (C) The department shall receive plans for the implementation of inclusive trauma systems from trauma 30 31 agencies. The department may approve or not approve trauma

agency plans based on the conformance of the plan with this 1 section and ss. 395.4015, 395.404, and 395.4045 and the rules 2 and definitions adopted by the department pursuant to those 3 sections. The department shall approve or disapprove the 4 plans within 120 days after the date the plans are submitted 5 б to the department. The department shall, by rule, provide an 7 application process for establishing a trauma agency. The 8 application must, at a minimum, provide requirements for the 9 trauma agency plan submitted for review, a process for reviewing the application for a state approved trauma agency, 10 a process for reviewing the trauma transport protocols for the 11 trauma agency, and a process for reviewing the staffing 12 13 requirements for the agency. The department shall, by rule, 14 establish minimum requirements for a trauma agency to conduct an annual performance evaluation and submit the results to the 15 department. 16

17 (d) A trauma agency shall not operate unless the
18 department has approved the local or regional trauma services
19 system plan of the agency.

(e) The department may grant an exception to a portion of the rules adopted pursuant to this section or s. 395.4015 if the local or regional trauma agency proves that, as defined in the rules, compliance with that requirement would not be in the best interest of the persons served within the affected local or regional trauma area.

(f) A local or regional trauma agency may implement a trauma care system only if the system meets the minimum standards set forth in the rules for implementation established by the department and if the plan has been submitted to, and approved by, the department. At least 60 days before the local or regional trauma agency submits the

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plan for the trauma care system to the department, the local 1 2 or regional trauma agency shall hold a public hearing and give adequate notice of the public hearing to all hospitals and 3 other interested parties in the area to be included in the 4 proposed system. 5 6 (g) Local or regional trauma agencies may enter into 7 contracts for the purpose of implementing the local or 8 regional plan. If local or regional agencies contract with hospitals for trauma services, such agencies must contract 9 only with hospitals which are verified trauma centers. 10 (h) Local or regional trauma agencies providing 11 service for more than one county shall, as part of their 12 13 formation, establish interlocal agreements between or among 14 the several counties in the regional system. (i) This section does not restrict the authority of a 15 health care facility to provide service for which it has 16 received a license pursuant to this chapter. 17 18 (j) Any hospital which is verified as a trauma center 19 shall accept all trauma victims that are appropriate for the facility regardless of race, sex, creed, or ability to pay. 20 (k) It is unlawful for any hospital or other facility 21 22 to hold itself out as a trauma center unless it has been so 23 verified. 24 (1) A county, upon the recommendations of the local or regional trauma agency, may adopt ordinances governing the 25 transport of a patient who is receiving care in the field from 26 prehospital emergency medical personnel when the patient meets 27 28 specific criteria for trauma, burn, or pediatric centers 29 adopted by the local or regional trauma agency. These ordinances must be consistent with s. 395.4045, ordinances 30 31 adopted under s. 401.25(6), and the local or regional trauma

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system plan and, to the furthest possible extent, must ensure 1 2 that individual patients receive appropriate medical care while protecting the interests of the community at large by 3 making maximum use of available emergency medical care 4 5 resources. 6 (m) The local or regional trauma agency shall, 7 consistent with the regional trauma system plan, coordinate 8 and otherwise facilitate arrangements necessary to develop a 9 trauma services system. (n) After the submission of the initial trauma system 10 plan, each trauma agency shall, every 5th year, submit to the 11 department for approval an updated plan that identifies the 12 13 changes, if any, to be made in the regional trauma system. 14 (o) This section does not preclude a local or regional trauma agency from adopting trauma care system standards. 15 (2) The department shall adopt, by rule, standards for 16 verification of trauma centers based on national guidelines, 17 18 including those established by the American College of Surgeons entitled "Hospital and Prehospital Resources for 19 Optimal Care of the Injured Patient" and published appendices 20 thereto. Standards specific to pediatric trauma referral 21 22 centers shall be developed in conjunction with Children's 23 Medical Services and adopted by rule of the department. 24 (3) The department may withdraw local or regional agency authority, prescribe corrective actions, or use the 25 administrative remedies as provided in s. 395.1065 for the 26 violation of any provision of this section and ss. 395.4015, 27 28 395.402, 395.4025, 395.403, 395.404, and 395.4045 or rules 29 adopted thereunder. All amounts collected pursuant to this subsection shall be deposited into the Emergency Medical 30 31 Services Trust Fund provided in s. 401.34.

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First Engrossed (ntc)
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Section 6. Section 395.4015, Florida Statutes, is 1 2 amended to read: 3 395.4015 State regional trauma planning; trauma regions.--4 5 (1) The department shall establish a state trauma б system plan. As part of the state trauma system plan, the 7 department shall establish trauma regions that which cover all 8 geographical areas of the state and have boundaries that are coterminous with the boundaries of the regional domestic 9 security task forces established under s. 943.0312. These 10 regions may serve as the basis for the development of 11 department-approved local or regional trauma plans. However, 12 13 the delivery of trauma services by or in coordination with a trauma agency established before July 1, 2004, may continue in 14 accordance with public and private agreements and operational 15 procedures entered into as provided in s. 395.401. The 16 department shall base its definition of the regions upon: 17 18 (a) Geographical considerations so as to ensure rapid 19 access to trauma care by patients; 20 (b) Historical patterns of patient referral and 21 transfer in an area; 22 (c) Inventories of available trauma care resources; 23 <del>(d)</del> - Predicted population growth characteristics; 24 (e) Transportation capabilities, including ground and 25 air transport; 26 (f) Medically appropriate ground and air travel times; 27 and 28 (g) Other appropriate criteria. 29 (2) The department shall develop trauma systems plans for the department defined trauma regions which include at 30 minimum the following components: 31

(a) An assessment of current and future trauma care 1 2 needs of the population, based upon incidence rates and acuity 3 indicators developed by the department, as well as other relevant characteristics of the region. 4 (b) The organizational structure of the regional 5 trauma system, including the identification of local trauma б 7 agency service areas within the region. 8 (c) Prehospital care management guidelines for triage 9 and transportation of trauma cases. (d) Flow patterns of trauma cases and transportation 10 system design and resources, including air transportation 11 services, provision for interfacility trauma transfer, and the 12 13 prehospital transportation of trauma victims. The department 14 shall plan for the development of a system of transportation of trauma alert victims to trauma centers where the distance 15 or time to a trauma center or transportation resources 16 diminish access by trauma alert victims. 17 18 (e) The current and projected number, acuity level, 19 and geographic location of trauma cases expected so as to assure that the assessed current and future trauma care needs 20 of the population are adequately met and that state sponsored 21 22 trauma centers will maintain the volume of cases sufficient to 23 provide quality care to trauma cases referred to them. (f) The availability of qualified health 24 professionals, including physicians and surgeons, capable of 25 staffing trauma centers to the level of current and future 26 assessed needs. 27 28 (g) Data collection regarding system operation and 29 patient outcome, as well as the number, type, and generalized locations of state sponsored trauma centers needed to meet the 30 31 needs of the population.

(h) Periodic performance evaluation of the trauma 1 2 system and its components. 3 (i) The type and extent of air transport services available and needed in each region. 4 5 (j) Public information and education about the trauma б system. 7 (k) Emergency medical services communication system 8 usage and dispatching. 9 (1) The coordination and integration between the trauma centers and other health care facilities which may 10 provide services to trauma victims. 11 (m) Medical control and accountability. 12 13 (n) Quality management and system evaluation. 14 (2) (3) The department shall consider the advice and recommendations of any affected local or regional trauma 15 agency in developing the state trauma system systems plan. 16 The department may, in lieu of specific regional components of 17 its own plan, accept components developed by local or regional 18 19 trauma agencies. (3) (4) The department shall use the state trauma 20 system plan as the basis for establishing a statewide 21 22 inclusive trauma system. 23 Section 7. Section 395.402, Florida Statutes, is 24 amended to read: 395.402 Trauma service areas; number and location of 25 trauma centers.--26 27 (1) The Legislature recognizes the need for a 28 statewide, cohesive, uniform, and integrated trauma system. 29 Within the trauma service areas, that Level I and Level II trauma centers shall should each be capable of annually 30 31 treating a minimum of 1,000 and 500 patients, respectively,

with an injury severity score (ISS) of 9 or greater. Level II 1 2 trauma centers in counties with a population of more than 500,000 shall have the capacity to care for a minimum of 1,000 3 patients per year. Further, the Legislature finds that, based 4 on the numbers and locations of trauma victims with these 5 б injury severity scores, there should be 19 trauma service 7 areas in the state, and, at a minimum, there should be at 8 least one trauma center in each service area. 9 (2) It is the intent of the Legislature that, as a planning quideline, Level I and Level II trauma centers should 10 generally each provide care annually to a minimum of 1,000 and 11 12 500 patients, respectively. Level II trauma centers in 13 counties of more than 500,000 population are expected to be 14 able to care for 1,000 patients per year, as a planning guideline. 15 (2)(3) Trauma service areas as described in this 16 section are to be utilized until the Department of Health 17 18 completes an assessment of the trauma system and reports its findings to the Governor, the President of the Senate, the 19 Speaker of the House of Representatives, and the substantive 20 legislative committees. The report shall be submitted by 21 22 December 1, 2004. The department shall review the existing 23 trauma system and determine whether it is effective in 24 providing trauma care uniformly throughout the state. The assessment shall: 25 (a) Consider aligning trauma service areas within the 26 trauma region boundaries as established in July 2004. 27 28 (b) Review the number and level of trauma centers 29 needed for each trauma service area to provide a statewide integrated trauma system. 30 31

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1	(c) Establish criteria for determining the number and
2	level of trauma centers needed to serve the population in a
3	<u>defined trauma service area or region.</u>
4	<u>(d) Consider including a criteria within trauma center</u>
5	verification standards based upon the number of trauma victims
6	served within a service area.
7	(3) In conducting this assessment and subsequent
8	annual reviews, the department shall consider:
9	(a) The recommendations made as part of the regional
10	trauma system plans submitted by regional trauma agencies.
11	(b) Stakeholder recommendations.
12	(c) The geographical composition of an area to ensure
13	rapid access to trauma care by patients.
14	(d) Historical patterns of patient referral and
15	<u>transfer in an area.</u>
16	(e) Inventories of available trauma care resources,
17	including professional medical staff.
18	(f) Population growth characteristics.
19	(q) Transportation capabilities, including ground and
20	<u>air transport.</u>
21	(h) Medically appropriate ground and air travel times.
22	(i) Recommendations of the Regional Domestic Security
23	Task Force.
24	(j) The actual number of trauma victims currently
25	being served by each trauma center.
26	<u>(k) Other appropriate criteria.</u>
27	(4) Annually thereafter, used. the department shall
28	<del>periodically</del> review the assignment of the 67 counties to
29	trauma service areas, in addition to the requirements of
30	paragraphs (2)(b)-(e) and subsection (3). County These
31	assignments are made for the purpose of developing a system of

trauma centers. Revisions made by the department shall should 1 2 take into consideration the recommendations made as part of the regional trauma system plans approved by the department, 3 and as well as the recommendations made as part of the state 4 trauma system plan. In cases where a trauma service area is 5 located within the boundaries of more than one trauma region, б 7 the trauma service area's needs, response capability, and 8 system requirements shall be considered by each trauma region served by that trauma service area in its regional system plan 9 These areas must, at a minimum, be reviewed in the year 2000 10 and every 5 years thereafter. Until the department completes 11 the December 2004 assessment its initial review, the 12 13 assignment of counties shall remain as established in this 14 section pursuant to chapter 90 284, Laws of Florida. (a) The following trauma service areas are hereby 15 established: 16 1. Trauma service area 1 shall consist of Escambia, 17 18 Okaloosa, Santa Rosa, and Walton Counties. 19 2. Trauma service area 2 shall consist of Bay, Gulf, Holmes, and Washington Counties. 20 3. Trauma service area 3 shall consist of Calhoun, 21 22 Franklin, Gadsden, Jackson, Jefferson, Leon, Liberty, Madison, 23 Taylor, and Wakulla Counties. 24 4. Trauma service area 4 shall consist of Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, 25 Levy, Putnam, Suwannee, and Union Counties. 26 5. Trauma service area 5 shall consist of Baker, Clay, 27 28 Duval, Nassau, and St. Johns Counties. 29 6. Trauma service area 6 shall consist of Citrus, Hernando, and Marion Counties. 30 31

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7. Trauma service area 7 shall consist of Flagler and 1 2 Volusia Counties. 8. Trauma service area 8 shall consist of Lake, 3 4 Orange, Osceola, Seminole, and Sumter Counties. 5 9. Trauma service area 9 shall consist of Pasco and б Pinellas Counties. 7 10. Trauma service area 10 shall consist of 8 Hillsborough County. 9 11. Trauma service area 11 shall consist of Hardee, 10 Highlands, and Polk Counties. 11 12. Trauma service area 12 shall consist of Brevard and Indian River Counties. 12 13 13. Trauma service area 13 shall consist of DeSoto, Manatee, and Sarasota Counties. 14 14. Trauma service area 14 shall consist of Martin, 15 Okeechobee, and St. Lucie Counties. 16 15. Trauma service area 15 shall consist of Charlotte, 17 18 Glades, Hendry, and Lee Counties. 16. Trauma service area 16 shall consist of Palm Beach 19 County. 20 17. Trauma service area 17 shall consist of Collier 21 22 County. 23 18. Trauma service area 18 shall consist of Broward 24 County. 19. Trauma service area 19 shall consist of Dade and 25 Monroe Counties. 26 27 (b) Each trauma service area should have at least one 28 Level I or Level II trauma center. The department shall 29 allocate, by rule, the number of trauma centers needed for each trauma service area. 30 31

First Engrossed (ntc)

1 (c) There shall be no more than a total of 44 2 state sponsored trauma centers in the state. 3 Section 8. Section 395.4025, Florida Statutes, is 4 amended to read: 5 395.4025 State approved Trauma centers; selection; б quality assurance; records. --7 (1) For purposes of developing a system of 8 state approved trauma centers, the department shall use the 19 trauma service areas established in s. 395.402. Within each 9 service area and based on the state trauma system plan, the 10 local or regional trauma services system plan, and 11 recommendations of the local or regional trauma agency, and 12 13 the 1990 Report and Proposal for Funding State Sponsored 14 Trauma Centers, the department shall establish the approximate number of state approved trauma centers needed to ensure 15 reasonable access to high-quality trauma services. The Using 16 the quidelines and procedures outlined in the 1990 report, 17 18 except when in conflict with those prescribed in this section, 19 the department shall select those hospitals that are to be recognized as state approved trauma centers and shall include 20 all trauma centers verified as of October 1, 1990, and 21 22 subsequently, subject to specific programmatic and quality of 23 care standards. 24 (2)(a) The department shall annually notify each acute care general hospital and each local and each regional trauma 25 agency in the state that the department is accepting letters 26 of intent from hospitals that are interested in becoming 27 28 state approved trauma centers. In order to be considered by 29 the department, a hospital that operates within the geographic

31 its intent to operate as a state approved trauma center is

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area of a local or regional trauma agency must certify that

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consistent with the trauma services plan of the local or 1 2 regional trauma agency, as approved by the department, if such agency exists. Letters of intent must be postmarked no later 3 than midnight October 1. This paragraph does not apply to any 4 hospital that is a provisional or verified trauma center on 5 January 1, 1992. б 7 (b) By October 15, the department shall send to all 8 hospitals that submitted a letter of intent an application 9 package that will provide the hospitals with instructions for submitting information to the department for selection as a 10 state approved trauma center. The standards for verification 11 of trauma centers and pediatric trauma referral centers 12 13 provided for in s. 395.401(2), as adopted by rule of the 14 department, shall serve as the basis for these instructions. (c) In order to be considered by the department, 15 applications from those hospitals seeking selection as 16 state approved trauma centers, including those current 17 18 verified trauma centers that seek a change or redesignation in approval status as a trauma center to be state approved trauma 19 centers, must be received by the department no later than the 20 close of business on April 1. The department shall conduct a 21 22 provisional review of each application for the purpose of 23 determining that the hospital's application is complete and 24 that the hospital has the critical elements required for a state approved trauma center. This critical review will be 25 based on trauma center verification standards and shall 26 include, but not be limited to, a review of whether the 27 28 hospital has: 29 1. Equipment and physical facilities necessary to provide trauma services. 30 31

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2. Personnel in sufficient numbers and with proper 1 2 qualifications to provide trauma services. 3 3. An effective quality assurance process. 4 4. Submitted written confirmation by the local or regional trauma agency that the verification of the hospital 5 6 applying to become as a state approved trauma center is 7 consistent with the plan of the local or regional trauma 8 agency, as approved by the department, if such agency exists. 9 This subparagraph applies to any hospital that is not a provisional or verified trauma center on January 1, 1992. 10 (d)1. Notwithstanding other provisions in this 11 section, the department may grant up to an additional 18 12 13 months to a hospital applicant that is unable to meet all 14 requirements as provided in paragraph (c) at the time of application if the number of applicants in the service area in 15 which the applicant is located is equal to or less than the 16 service area allocation, as provided by rule of the 17 18 department. An applicant that is granted additional time pursuant to this paragraph shall submit a plan for 19 departmental approval which includes timelines and activities 20 that the applicant proposes to complete in order to meet 21 22 application requirements. Any applicant that demonstrates an 23 ongoing effort to complete the activities within the timelines 24 outlined in the plan shall be included in the number of state approved trauma centers at such time that the department 25 has conducted a provisional review of the application and has 26 determined that the application is complete and that the 27 28 hospital has the critical elements required for a 29 state approved trauma center. 30 2. Timeframes provided in subsections (1)-(8) shall be 31 stayed until the department determines that the application is

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complete and that the hospital has the critical elements 1 2 required for a state approved trauma center. 3 (3) After April 30, any hospital that submitted an 4 application found acceptable by the department based on provisional review, including all trauma centers verified as 5 of December 1, 1989, shall be eliqible to operate as a б 7 provisional state approved trauma center. 8 (4) Between May 1 and October 1 of each year, the department shall conduct an in-depth evaluation of all 9 applications found acceptable in the provisional review. The 10 applications shall be evaluated against criteria enumerated in 11 the application packages as provided to the hospitals by the 12 13 department. (5) Beginning October 1 of each year and ending no 14 later than June 1 of the following year, a review team of 15 out-of-state experts assembled by the department shall make 16 onsite visits to all provisional state approved trauma 17 18 centers. The department shall develop a survey instrument to 19 be used by the expert team of reviewers. The instrument shall include objective criteria and guidelines for reviewers based 20 on existing trauma center and pediatric trauma referral center 21 22 verification standards such that all trauma centers and 23 pediatric trauma referral centers are assessed equally. The 24 survey instrument shall also include a uniform rating system that will be used by reviewers to indicate the degree of 25 compliance of each trauma center with specific standards, and 26 to indicate the quality of care provided by each trauma center 27 28 as determined through an audit of patient charts. In addition, 29 hospitals being considered as provisional state approved trauma centers shall meet all the requirements of a verified 30 31 trauma center or pediatric trauma referral center, and shall

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be located in a trauma service area that has a need for such a 1 2 trauma center. 3 (6) Based on recommendations from the review team, the department shall select state approved trauma centers by July 4 1. An applicant for designation as a state approved trauma 5 б center or a state approved pediatric trauma referral center 7 may request an extension of its provisional status if it 8 submits a corrective action plan to the department. The 9 corrective action plan must demonstrate the ability of the applicant to correct deficiencies noted during the applicant's 10 onsite review conducted by the department between the previous 11 October 1 and June 1. The department may extend the 12 13 provisional status of an applicant for designation as a 14 state approved trauma center or a state approved pediatric trauma referral center through December 31 if the applicant 15 provides a corrective action plan acceptable to the 16 department. The department or a team of out-of-state experts 17 18 assembled by the department shall conduct an onsite visit on 19 or before November 1 to confirm that the deficiencies have been corrected. The provisional state approved trauma center 20 or the provisional state approved pediatric trauma referral 21 center is responsible for all costs associated with the onsite 2.2 23 visit in a manner prescribed by rule of the department. By 24 January 1, the department must approve or deny the application of any provisional applicant granted an extension. Each 25 state approved trauma center shall be granted a 7-year 26 approval verification period during which time it must 27 28 continue to maintain trauma center verification standards and 29 acceptable patient outcomes as determined by department rule. An approval A verification, unless sooner suspended or 30 31 revoked, automatically expires 7 years after the date of

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issuance and is renewable upon application for renewal as
 prescribed by rule of the department. After July 1, 1992, only
 those hospitals selected as state approved trauma centers may
 operate as trauma centers.

5 (7) Any hospital that wishes to protest a decision б made by the department based on the department's preliminary 7 or in-depth review of applications or on the recommendations 8 of the site visit review team pursuant to this section shall 9 proceed as provided in chapter 120. Hearings held under this subsection shall be conducted in the same manner as provided 10 in ss. 120.569 and 120.57. Cases filed under chapter 120 may 11 combine all disputes between parties. 12

13 (8) Notwithstanding any provision of chapter 381, a 14 hospital licensed under ss. 395.001-395.3025 that operates a state approved trauma center may not terminate or 15 substantially reduce the availability of trauma service 16 without providing at least 180 days' 6 months' notice of its 17 18 intent to terminate such service. Such notice shall be given to the department of Health, to all affected local or regional 19 trauma agencies, and to all state approved trauma centers, 20 hospitals, and emergency medical service providers in the 21 22 trauma service area. The department shall adopt by rule the 23 procedures and process for notification, duration, and 24 explanation of the termination of trauma services.

(9) Except as otherwise provided in this subsection, the department or its agent may collect trauma care and registry data, as prescribed by rule of the department, from trauma centers, pediatric trauma referral centers, hospitals, emergency medical service providers, local or regional trauma agencies, or medical examiners for the purposes of evaluating trauma system effectiveness, ensuring compliance with the

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standards of verification, and monitoring patient outcomes. A 1 2 trauma center, pediatric trauma referral center, hospital, 3 emergency medical service provider, medical examiner, or local trauma agency or regional trauma agency, or a panel or 4 committee assembled by such an agency under s. 395.50(1) may, 5 but is not required to, disclose to the department patient б 7 care quality assurance proceedings, records, or reports. 8 However, the department may require a local trauma agency or a 9 regional trauma agency, or a panel or committee assembled by such an agency to disclose to the department patient care 10 quality assurance proceedings, records, or reports that the 11 department needs solely to conduct quality assurance 12 13 activities under s. 395.4015, or to ensure compliance with the 14 quality assurance component of the trauma agency's plan approved under s. 395.401. The patient care quality assurance 15 proceedings, records, or reports that the department may 16 require for these purposes include, but are not limited to, 17 18 the structure, processes, and procedures of the agency's quality assurance activities, and any recommendation for 19 improving or modifying the overall trauma system, if the 20 identity of a trauma center, pediatric trauma referral center, 21 hospital, emergency medical service provider, medical 2.2 23 examiner, or an individual who provides trauma services is not 24 disclosed. (10) Out-of-state experts assembled by the department 25 to conduct onsite visits are agents of the department for the 26 purposes of s. 395.3025. An out-of-state expert who acts as an 27

29 for any civil damages as a result of actions taken by him or 30 her, unless he or she is found to be operating outside the

agent of the department under this subsection is not liable

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scope of the authority and responsibility assigned by the 1 2 department. 3 (11) Onsite visits by the department or its agent may be conducted at any reasonable time and may include but not be 4 limited to a review of records in the possession of trauma 5 б centers, pediatric trauma referral centers, hospitals, 7 emergency medical service providers, local or regional trauma 8 agencies, or medical examiners regarding the care, transport, 9 treatment, or examination of trauma patients. 10 (12) Patient care, transport, or treatment records or reports, or patient care quality assurance proceedings, 11 records, or reports obtained or made pursuant to this section, 12 13 s. 395.3025(4)(f), s. 395.401, s. 395.4015, s. 395.402, s. 14 395.403, s. 395.404, s. 395.4045, s. 395.405, s. 395.50, or s. 395.51 must be held confidential by the department or its 15 agent and are exempt from the provisions of s. 119.07(1). 16 Patient care quality assurance proceedings, records, or 17 18 reports obtained or made pursuant to these sections are not 19 subject to discovery or introduction into evidence in any civil or administrative action. 20 (13) The department may adopt, by rule, the procedures 21 and process by which it will select state approved trauma 2.2 23 centers. Such procedures and process must be used in annually 24 selecting state approved trauma centers and must be consistent with subsections (1)-(8) except in those situations in which 25 it is in the best interest of, and mutually agreed to by, all 26 applicants within a service area and the department to reduce 27 28 the timeframes. 29 (14) Notwithstanding any other provision of this section and rules adopted pursuant to this section that impose 30 time limits on the applications by hospitals seeking approval 31

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and verification to operate as a trauma center, any acute care 1 2 general or pediatric hospital that is located in a trauma service area where there is no existing trauma center and that 3 has not already been previously approved may apply beginning 4 on July 1, 2004, to the Department of Health for approval and 5 verification to operate as a provisional trauma center or б 7 trauma center within the framework and substantive requirements under this part. Likewise, until the department 8 has conducted the review provided under s. 395.402, only 9 hospitals located in trauma service areas where there is no 10 existing trauma center may apply. 11 Section 9. Section 395.403, Florida Statutes, is 12 13 amended to read: 14 395.403 Reimbursement of state sponsored trauma centers.--15 (1) The Legislature finds that many hospitals which 16 provide services to trauma victims are not adequately 17 18 compensated for such treatment. The Legislature also recognizes that the current verified trauma centers are 19 providing such services without adequate reimbursement. 20 Therefore, it is the intent of the Legislature to provide 21 22 financial support to the current verified trauma centers and 23 to establish a system of state sponsored trauma centers as 24 soon as feasibly possible. It is also the intent of the Legislature that this system of state sponsored trauma centers 25 be assisted financially based on the volume and acuity of 26 uncompensated trauma care provided. 27 28 (2) All provisional trauma centers and state approved 29 trauma centers shall be considered eligible to receive state funding state sponsored trauma centers when state revenues 30 dedicated for trauma centers funds are specifically 31

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appropriated for state sponsored trauma centers in the General 1 2 Appropriations Act. The department shall make annual payments from the Administrative Trust Fund under s. 20.435 to the 3 trauma centers and provisional trauma centers in recognition 4 of the trauma centers' meeting the standards of trauma 5 readiness and preparedness as prescribed in this part. The б 7 payments established in the General Appropriations Act shall 8 be in equal amounts for the provisional trauma centers and 9 trauma centers approved by the department during the fiscal year in which funding is appropriated. If a provisional trauma 10 center or trauma center does not maintain its status as a 11 trauma center for any state fiscal year in which such funding 12 13 is appropriated, the provisional trauma center or trauma 14 center shall repay the state for the portion of the year during which it was not a trauma center. 15 (3) For fiscal year 2005-2006 and thereafter, the 16 department shall allocate funds not disbursed under subsection 17 18 (1) for trauma readiness and preparedness to provisional 19 trauma centers and trauma centers based on volume, acuity, and levels of uncompensated trauma care. Distribution to a 20 provisional trauma center or trauma center shall be in an 21 22 amount that bears the same ratio to the total amount of such distributions as the volume, acuity, and uncompensated trauma 23 24 care provided by the center bears to the total volume, acuity, and uncompensated trauma care provided by all trauma centers 25 and provisional trauma centers in the state, as indicated in 26 the most recent year for which data is available. 27 28 (4) Provisional trauma centers and trauma centers 29 eligible to receive distributions from the Administrative Trust Fund under s. 20.435 in accordance with subsections (2) 30 31

and (3) may request that such funds be used as 1 intergovernmental transfer funds in the Medicaid program. 2 3 (3) To receive state funding, a state sponsored trauma 4 center shall submit a claim electronically via the Trauma Claims Processing System, designed, developed, implemented, 5 and operated by the department's Medicaid program, to the б 7 department's Medicaid program upon discharge of a trauma 8 patient. When a hospital stay spans a state fiscal year, a separate hospital claim shall be submitted for the hospital 9 days incurred in each fiscal year. 10 (4)(a) State sponsored trauma centers shall determine 11 each trauma patient's eligibility for state funding prior to 12 13 the submission of a claim. (b) A trauma patient treated must meet the definition 14 of charity care, have been designated as having an ISS score 15 of 9 or greater, and have received services that are medically 16 necessary from a state sponsored trauma center in order for 17 18 the state sponsored trauma center to receive state funding for 19 that patient. (c) Each state sponsored trauma center shall retain 20 appropriate documentation showing a trauma patient's 21 22 eligibility for state funding. Documentation recognized by the 23 department as appropriate shall be limited to one of the 24 following: 1. W 2 withholding forms. 25 2. Payroll stubs. 26 27 3. Income tax returns. 28 4. Forms approving or denying unemployment 29 compensation or workers' compensation. 5. Written verification of wages from employer. 30 31

1	6. Written verification from public welfare agencies
2	or any other governmental agency which can attest to the
3	patient's income status for the past 12 months.
4	7. A witnessed statement signed by the patient or
5	responsible party, as provided for in Pub. L. No. 79 725, as
6	amended, known as the Hill Burton Act, except that such
7	statement need not be obtained within 48 hours of the
8	patient's admission to the hospital as required by the
9	Hill Burton Act. The statement shall include acknowledgment
10	that, in accordance with s. 817.50, providing false
11	information to defraud a hospital for the purposes of
12	obtaining goods or services is a misdemeanor of the second
13	degree.
14	(d) The department shall conduct an audit or shall
15	contract with an independent party to conduct an audit of each
16	state sponsored trauma center's claims to ensure that state
17	funding was only provided for eligible trauma patients and
18	medically necessary services.
19	(e) The department's Medicaid program office shall
20	check each claim to confirm that the patient is not covered
21	under the Medicaid program and shall pay the claim out of the
22	Trauma Services Trust Fund. Trauma patients who are eligible
23	for the Medicaid program shall not be considered eligible for
24	the state sponsored trauma center program except for Medicaid
25	noncovered services. If a claim is denied by the Trauma
26	Claims Processing System as a result of Medicaid eligibility
27	for Medicaid covered services, the hospital shall submit a
28	claim to the Medicaid fiscal agent for payment.
29	(5) State funding shall be at a per diem rate equal to
30	\$860 to provisional state approved and state approved trauma
31	centers. This rate shall be effective for the first 12 months

of funding, after which time payment to provisional 1 2 state approved and state approved trauma centers shall be based on a trauma cost based reimbursement methodology 3 developed by the department. The department shall consult with 4 representatives from the hospital industry including the 5 Florida Hospital Association, the Association of Voluntary б 7 Hospitals of Florida, and the Florida League of Hospitals in 8 the development of the reimbursement methodology. 9 (6)(a) To ensure a fair distribution of funds appropriated for state sponsored trauma centers and to ensure 10 that no state sponsored trauma center gains an unfair 11 advantage due solely to its ability to bill more quickly than 12 13 another state sponsored trauma center, the total amount of 14 state funds appropriated in the General Appropriations Act for this section shall be divided into 19 trauma fund accounts 15 with an account for each service area established in s. 16 395.402(3). The amount of funds distributed to a service area 17 18 shall be based on the following formula: 19 20 SAAA = <u>SATD</u> x TA 21 22 TTD23 where: 24 SAAA = service area appropriation amount. 25 SATD = uncompensated service area trauma days with ISS 26 score of 9 or greater. 27 TTD = uncompensated total trauma days with ISS score of 28 9 or greater for all 19 service areas. 29 TA = total dollars appropriated for state sponsored 30 trauma centers. 31

(b) The database to be used for this calculation shall 1 2 be the detailed patient discharge data of the most recently 3 completed calendar year for which the board possesses data. Out of state days that are included in the database shall be 4 allocated to the service area where the treating hospital is 5 located. б 7 (c) Fifty percent of the funds allocated to those 8 service areas which had one or more trauma centers as of December 1, 1989, shall be distributed to those verified 9 trauma centers proportionately based on volume and acuity of 10 uncompensated trauma care provided during the most recently 11 completed calendar year for which the board possesses data in 12 13 a lump sum payment on the date funding becomes available. 14 These trauma centers shall submit claims pursuant to subsection (3) in order to justify this funding. Effective 9 15 months after funding becomes available, any trauma center 16 which fails to submit claims for reimbursement equal to or 17 18 greater than the amount the trauma center received under the initial allocation shall return any unearned funds to the 19 department for distribution pursuant to paragraph (e). Once 20 this 50 percent lump sum is depleted, a trauma center will be 21 22 reimbursed from the remaining 50 percent of the service area's 23 original allocation. 24 (d) The department shall pay trauma claims on a monthly basis. In a given month when the outstanding claims 25 will exceed the unexpended funds allocated to a service area, 26 the department shall pay all of the submitted claims for the 27 28 service area on a pro rata basis. 29 (e) At the end of the fiscal year, the unexpended funds for each service area shall be placed in one large state 30 trauma account from which all remaining claims are paid 31

1 without regard to service area on a pro rata basis until such 2 funds are depleted. 3 (f) For any state fiscal year, reimbursement for any 4 patient residing outside the trauma service area of the 5 state sponsored trauma center where the patient is treated shall be paid out of the funds allocated for the trauma б 7 service area where the patient resides. Out of state days 8 shall be paid from the service area where the treating 9 hospital is located. (5)(7) In order to receive state funding payments 10 under this section, a hospital shall be a state sponsored 11 trauma center and shall: 12 13 (a) Agree to conform to all departmental requirements 14 as provided by rule to assure high-quality trauma services. (b) Agree to provide information concerning the 15 provision of trauma services to the department, in a form and 16 manner prescribed by rule of the department. 17 18 (c) Agree to accept all trauma patients, regardless of ability to pay, on a functional space-available basis. 19 (6)(8) A state sponsored trauma center that which 20 fails to comply with any of the conditions listed in 21 22 subsection(3)(7) or the applicable rules of the department 23 shall not receive payments under this section for the period 24 in which it was not in compliance. Section 10. Section 395.404, Florida Statutes, is 25 amended to read: 26 27 395.404 Review of trauma registry data; report to central registry; confidentiality and limited release.--28 29 (1)(a) Each trauma center shall furnish, and, upon request of the department, all acute care hospitals shall 30 31 furnish for department review, trauma registry data as

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prescribed by rule of the department for the purpose of 1 2 monitoring patient outcome and ensuring compliance with the standards of approval. 3 4 (b) Trauma registry data obtained pursuant to this subsection are confidential and exempt from the provisions of 5 s. 119.07(1) and s. 24(a), Art. I of the State Constitution. б 7 However, the department may provide such trauma registry data 8 to the person, trauma center, hospital, emergency medical service provider, local or regional trauma agency, medical 9 examiner, or other entity from which the data were obtained. 10 The department may also use or provide trauma registry data 11 for purposes of research in accordance with the provisions of 12 13 chapter 405. 14 (2) Each trauma center and acute care hospital shall report to the department's brain and spinal cord injury 15 central registry, consistent with the procedures and 16 timeframes of s. 381.74, any person who has a 17 18 moderate-to-severe brain or spinal cord injury, and shall 19 include in the report the name, age, residence, and type of disability of the individual and any additional information 20 that the department finds necessary. Notwithstanding the 21 22 provisions of s. 381.74, each trauma center and acute care 23 hospital shall submit severe disability and head injury 24 registry data to the department as provided by rule. Each 25 trauma center and acute care hospital shall continue to provide initial notification of persons who have severe 26 disabilities and head injuries to the Department of Health 27 28 within timeframes provided in chapter 413. Such initial 29 notification shall be made in the manner prescribed by the 30 Department of Health for the purpose of providing timely 31

1	vocational rehabilitation services to the severely disabled or
2	head injured person.
3	(3) Trauma registry data obtained pursuant to this
4	section are confidential and exempt from the provisions of s.
5	119.07(1) and s. 24(a), Art. I of the State Constitution.
6	However, the department may provide such trauma registry data
7	to the person, trauma center, pediatric trauma referral
8	center, hospital, emergency medical service provider, local or
9	regional trauma agency, medical examiner, or other entity from
10	which the data were obtained. The department may also use or
11	provide trauma registry data for purposes of research in
12	accordance with the provisions of chapter 405.
13	Section 11. Section 395.405, Florida Statutes, is
14	amended to read:
15	395.405 RulemakingThe department shall adopt and
16	enforce all rules necessary to administer <u>this part</u> <del>ss.</del>
17	<del>395.0199, 395.401, 395.4015, 395.402, 395.4025, 395.403,</del>
18	<del>395.404, and 395.4045</del> .
19	Section 12. <u>The Department of Health shall establish a</u>
20	task force by August 1, 2004 for the purpose of studying and
21	making recommendations regarding the formula for the
22	distribution of funds deposited in the Administrative Trust
23	Fund in the Department of Health for distribution pursuant to
24	section 395.403, Florida Statutes, and alternative financing
25	options. The task force shall include representatives of the
26	Governor's Office, the Department of Health, the Agency for
27	Health Care Administration, and representatives from Level I,
28	Level II, and pediatric trauma centers, and at least two
29	surgeons. The report of the task force shall be submitted to
30	the Governor, the President of the Senate, and the Speaker of
31	the House of Representatives by January 15, 2005.

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Section 13. Trauma Center Matching Grant Program. -- It 1 2 is the intent of the Legislature to promote the development of 3 at least one trauma center in every trauma service area. The Trauma Center matching grant program shall be established and 4 administered by the Department of Health. The purpose of the 5 program is to provide start-up funds as an incentive to б 7 encourage development of new trauma centers. The grant 8 program shall function as a partnership between state and 9 local governments and private-sector health care providers. Private providers shall provide \$1 in local matching funds for 10 each \$1 grant payment made by the state. Hospitals may apply 11 for matching grant funds by submitting a grant application to 12 the department. Applications shall be competitively reviewed 13 14 by an independent panel appointed by the secretary of the department. The department may use up to \$2 million annually 15 from the Administrative Trust Fund for this program. 16 Section 14. Subsection (5) of section 318.14, Florida 17 18 Statutes, is amended to read: 318.14 Noncriminal traffic infractions; exception; 19 20 procedures.--21 (5) Any person electing to appear before the 22 designated official or who is required so to appear shall be 23 deemed to have waived his or her right to the civil penalty 24 provisions of s. 318.18. The official, after a hearing, shall make a determination as to whether an infraction has been 25 committed. If the commission of an infraction has been proven, 26 the official may impose a civil penalty not to exceed \$500, 27 28 except that in cases involving unlawful speed in a school zone 29 or, involving unlawful speed in a construction zone, or 30 involving a death, the civil penalty may not exceed \$1,000; or 31 require attendance at a driver improvement school, or both. If

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the person is required to appear before the designated 1 2 official pursuant to s. 318.19(1) and is found to have committed the infraction, the designated official shall impose 3 a civil penalty of \$1,000 in addition to any other penalties. 4 If the person is required to appear before the designated 5 official pursuant to s. 318.19(2) and is found to have б 7 committed the infraction, the designated official shall impose 8 a civil penalty of \$500 in addition to any other penalties. If 9 the official determines that no infraction has been committed, no costs or penalties shall be imposed and any costs or 10 penalties that have been paid shall be returned. Moneys 11 received from the mandatory civil penalties imposed pursuant 12 13 to this subsection upon persons required to appear before a 14 designated official pursuant to s. 318.19(1) or (2) shall be remitted to the Department of Revenue and distributed into the 15 Administrative Trust Fund created under s. 20.435 to be used 16 by the Department of Health as required under s. 395.403. 17 18 Section 15. Subsection (13) is added to section 19 318.21, Florida Statutes, to read: 318.21 Disposition of civil penalties by county 20 courts. -- All civil penalties received by a county court 21 22 pursuant to the provisions of this chapter shall be 23 distributed and paid monthly as follows: 24 (13)(a) Notwithstanding subsections (1) and (2), the proceeds from the mandatory civil penalties imposed pursuant 25 26 to s. 318.14(5) shall be distributed as provided in that section. 27 28 (b) Notwithstanding subsections (1) and (2), the 29 proceeds from the fines imposed under s. 318.18(13) and (14) shall be distributed as provided in that section. 30 31

CS for CS for SB 2842

Section 16. Section 322.0261, Florida Statutes, is 1 2 amended to read: 3 322.0261 Mandatory Driver improvement course; requirement to maintain driving privileges; failure to 4 complete; department approval of course certain crashes .--5 6 (1) The department shall screen crash reports received 7 under s. 316.066 or s. 324.051 to identify crashes involving 8 the following: (a) A crash involving death or a bodily injury 9 requiring transport to a medical facility; or 10 (b) A second crash by the same operator within the 11 previous 2-year period involving property damage in an 12 13 apparent amount of at least \$500. 14 (2) With respect to an operator convicted of, or who pleaded nolo contendere to, a traffic offense giving rise to a 15 crash identified pursuant to subsection (1), the department 16 shall require that the operator, in addition to other 17 18 applicable penalties, attend a department-approved departmentally approved driver improvement course in order to 19 maintain driving privileges. If the operator fails to complete 20 the course within 90 days of receiving notice from the 21 22 department, the operator's driver's license shall be canceled 23 by the department until the course is successfully completed. 24 (3) The department shall identify any operator convicted of, or who pleaded nolo contendere to, a second 25 violation of s. 316.075(1)(c)1. or convicted of, or who 26 pleaded nolo contendere to, a second steady red signal 27 28 violation as provided in s. 316.074(1), which violation 29 occurred within 12 months after the first violation, and shall require that operator, in addition to other applicable 30 31 penalties, to attend a department-approved driver improvement

course in order to maintain driving privileges. If the 1 2 operator fails to complete the course within 90 days after 3 receiving notice from the department, the operator's driver's license shall be canceled by the department until the course 4 is successfully completed. 5 6 (4) (4) (3) In determining whether to approve a driver 7 improvement course for the purposes of this section, the 8 department shall consider course content designed to promote 9 safety, driver awareness, crash avoidance techniques, and other factors or criteria to improve driver performance from a 10 safety viewpoint. 11 Section 17. Paragraph (d) of subsection (3) of section 12 13 322.27, Florida Statutes, is amended to read: 14 322.27 Authority of department to suspend or revoke license.--15 (3) There is established a point system for evaluation 16 of convictions of violations of motor vehicle laws or 17 18 ordinances, and violations of applicable provisions of s. 403.413(6)(b) when such violations involve the use of motor 19 vehicles, for the determination of the continuing 20 qualification of any person to operate a motor vehicle. The 21 22 department is authorized to suspend the license of any person 23 upon showing of its records or other good and sufficient 24 evidence that the licensee has been convicted of violation of motor vehicle laws or ordinances, or applicable provisions of 25 s. 403.413(6)(b), amounting to 12 or more points as determined 26 by the point system. The suspension shall be for a period of 27 28 not more than 1 year. 29 (d) The point system shall have as its basic element a 30 graduated scale of points assigning relative values to 31 convictions of the following violations:

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1. Reckless driving, willful and wanton--4 points. 1 2 2. Leaving the scene of a crash resulting in property damage of more than \$50--6 points. 3 4 3. Unlawful speed resulting in a crash--6 points. 5 4. Passing a stopped school bus--4 points. 5. Unlawful speed: б 7 a. Not in excess of 15 miles per hour of lawful or 8 posted speed--3 points. 9 b. In excess of 15 miles per hour of lawful or posted speed--4 points. 10 6. A violation of a traffic control signal device as 11 provided in s. 316.075(1)(c)1.--4 points. 12 13 7.6. All other moving violations (including parking on 14 a highway outside the limits of a municipality)--3 points. However, no points shall be imposed for a violation of s. 15 316.0741 or s. 316.2065(12). 16 8.7. Any moving violation covered above, excluding 17 18 unlawful speed, resulting in a crash--4 points. 9.8. Any conviction under s. 403.413(5)(b)--3 points. 19 Section 18. Subsections (13), (14), and (15) are added 20 to section 318.18, Florida Statutes, to read: 21 22 318.18 Amount of civil penalties.--The penalties 23 required for a noncriminal disposition pursuant to s. 318.14 24 are as follows: (13) One hundred ten dollars for a violation of s. 25 <u>316.075(1)(c)1. or for a steady red signal violation as</u> 26 provided in s. 316.074(1), of which \$60 shall be distributed 27 28 as provided in s. 318.21 and the remaining \$50 shall be 29 remitted to the Department of Revenue for deposit into the Administrative Trust Fund created under s. 20.435 to be used 30 31 by the Department of Health as required under s. 395.403.

1	(14) Two hundred sixty dollars for any infraction that
2	results in a crash that causes any bodily injury other than
3	"serious bodily injury" as defined in s. 316.1933(1), of which
4	\$60 shall be distributed as provided in s. 318.21 and the
5	remaining \$200 shall be remitted to the Department of Revenue
6	for deposit into the Administrative Trust Fund created under
7	s. 20.435 to be used by the Department of Health as required
8	<u>under s. 395.403.</u>
9	(15) Notwithstanding any law to the contrary, the
10	clerk of the court shall collect an additional \$10 for each
11	civil violation of chapter 316; \$20 for each offense
12	specifically enumerated in s. 318.17; and \$20 for any other
13	offense in chapter 316 which is classified as a criminal
14	violation. The fines collected under this subsection shall be
15	remitted to the Department of Revenue for deposit in the
16	Administrative Trust Fund under s. 20.435 to be used by the
17	Department of Health as required under s. 395.403.
18	Section 19. Section 322.751, Florida Statutes, is
19	created to read:
20	322.751 Annual surcharge for points
21	(1) Each year the department shall assess a surcharge
22	on each person who has accumulated eight or more points
23	against his or her driver's license during the preceding
24	<u>36-month period.</u>
25	(2) The amount of a surcharge under this section is
26	\$100 for the first eight points and \$25 for each additional
27	point.
28	(3) The department shall notify the holder of a
29	driver's license of the assignment of a fourth point on that
30	license by first-class mail sent to the person's most recent
31	address as shown on the records of the department.

(4) This section only applies to a violation that 1 2 occurs on or after July 1, 2004. 3 (5) All moneys due under this section shall be billed 4 and collected by the Department of Highway Safety and Motor 5 Vehicles or its designee for deposit in the Highway Safety Operating Trust Fund. Of the moneys collected annually, the б 7 department shall retain the actual cost of developing, 8 implementing, and administering the driver responsibility 9 program. The remainder shall be transferred at least quarterly to the Administrative Trust Fund created under s. 20.435 to be 10 used by the Department of Health as required under s. 395.403. 11 Section 20. Paragraph (a) of subsection (2) of section 12 13 316.193, Florida Statutes, is amended to read: 14 316.193 Driving under the influence; penalties.--(2)(a) Except as provided in paragraph (b), subsection 15 (3), or subsection (4), any person who is convicted of a 16 violation of subsection (1) shall be punished: 17 18 1. By a fine of: 19 a. Not less than \$250 or more than \$500 for a first conviction. 20 b. Not less than \$500 or more than \$1,000 for a second 21 22 conviction; and 23 2. By imprisonment for: 24 a. Not more than 6 months for a first conviction. b. Not more than 9 months for a second conviction. 25 3. For a second conviction, by mandatory placement for 26 a period of at least 1 year, at the convicted person's sole 27 28 expense, of an ignition interlock device approved by the 29 department in accordance with s. 316.1938 upon all vehicles that are individually or jointly leased or owned and routinely 30 31 operated by the convicted person, when the convicted person

qualifies for a permanent or restricted license. The 1 2 installation of such device may not occur before July 1, 2003. 3 In addition to the fines and penalties established 4. 4 in this subsection, the court shall impose a surcharge, to be 5 collected by the department and to be subject to a court's determination of financial ability to pay, as follows: б 7 a. Each year the department shall assess a surcharge 8 on each person who has a final conviction during the preceding 9 <u>36-month period for an offense relating to s. 316.193.</u> b. The amount of a surcharge under this section is 10 \$500 per year, except that the amount of the surcharge is: 11 (I) Seven hundred fifty dollars per year for a second 12 13 or subsequent conviction within a 36-month period; and 14 (II) One thousand dollars for a first or subsequent conviction if the blood-alcohol level of the person was 0.20 15 or higher at the time the analysis was performed. 16 c. A surcharge under this section for the same 17 18 conviction may not be assessed in more than 3 years. 19 d. This section only applies to a violation that occurs on or after July 1, 2004. 20 e. All moneys due under this subparagraph shall be 21 22 billed and collected by the Department of Highway Safety and 23 Motor Vehicles or its designee for deposit in the Highway 24 Safety Operating Trust Fund. Of the moneys collected annually, the department shall retain the actual cost of developing, 25 implementing, and administering the driver responsibility 26 program. The remainder shall be transferred at least quarterly 27 28 to the Administrative Trust Fund created under s. 20.435 to be 29 used by the Department of Health as required under s. 395.403. Section 21. Section 794.056, Florida Statutes, is 30 31 amended to read:

794.056 Rape Crisis Program Trust Fund .--1 2 (1) The Rape Crisis Program Trust Fund is created 3 within the Department of Health for the purpose of providing 4 funds for rape crisis centers in this state. Trust fund moneys shall be used exclusively for the purpose of providing 5 services for victims of sexual assault. Funds deposited in the б 7 trust fund shall include revenues as provided by law, moneys as appropriated by the Legislature, and grants from public or 8 private entities. Funds credited to the trust fund consist of 9 those funds collected as an additional court assessment in 10 each case in which a defendant pleads guilty or nolo 11 contendere to, or is found guilty of, regardless of 12 13 adjudication, an offense defined in s. 784.011, s. 784.021, s. 14 784.03, s. 784.041, s. 784.045, s. 784.048, s. 784.07, s. 784.08, s. 784.081, s. 784.082, s. 784.083, s. 785.085, or s. 15 794.011. 16 (2) The Department of Health shall establish by rule, 17 18 consistent with s. 794.055(3)(a), criteria for distributing moneys from the trust fund to the statewide nonprofit 19 association the primary purpose of which is to represent and 20 provide technical assistance to rape crisis centers for 21 22 distribution to rape crisis centers. 23 (3) In accordance with s. 19(f)(2), Art. III of the 24 State Constitution, the Rape Crisis Program Trust Fund shall be terminated on July 1, 2007, unless terminated sooner. 25 Before its scheduled termination, the trust fund shall be 26 reviewed as provided in s. 215.3206(1) and (2). 27 Section 22. Section 322.7525, Florida Statutes, is 28 29 created to read: 322.7525 Notice of surcharge .--30 31

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(1) The department shall notify the holder of a 1 2 driver's license of the assessment of a surcharge on that license by first-class mail sent to the person's most recent 3 address as shown on the records of the department. The notice 4 must specify the date by which the surcharge must be paid and 5 and state the consequences of a failure to pay the surcharge. б 7 (2) If, before the 30th day after the date the 8 department sends a notice under s. 322.751, s. 322.7515, s. 9 322.7516, or s. 327.732, the person fails to pay the amount of <u>a surcharge on the person's license or fails to enter into an</u> 10 installment payment agreement with the department, the license 11 of the person is automatically suspended. 12 13 (3) A license suspended under this section remains 14 suspended until the person pays the amount of the surcharge and any related costs. 15 Section 23. Section 322.753, Florida Statutes, is 16 created to read: 17 18 322.753 Installment payment of surcharges.--19 (1) The department shall by rule provide for the payment of a surcharge in installments. 20 (2) A rule under this section: 21 (a) May not permit a person to pay a surcharge: 2.2 23 Of less than \$2,300 over a period of more than 12 1. 24 consecutive months; or 2. Of \$2,300 or more over a period of more than 24 25 26 consecutive months. 27 (b) May provide that if the person fails to make a 28 required installment payment, the department may declare the 29 amount of the unpaid surcharge immediately due and payable. (3) The department may by rule authorize the payment 30 of a surcharge by use of a credit card. The rules shall 31

require the person to pay all costs incurred by the department 1 2 in connection with the acceptance of the credit card. 3 (4) If a person pays a surcharge or related cost by credit card and the amount is subsequently reversed by the 4 5 issuer of the credit card, the license of that person is automatically suspended. б 7 (5) A license suspended under this section remains 8 suspended until the person pays the amount of the surcharge 9 and any related costs. Section 24. Section 395.4035, Florida Statutes, is 10 repealed. 11 Section 25. The Department of Highway Safety and Motor 12 13 Vehicles shall determine the level of funding necessary to 14 implement sections 19 and 20 of this act with department resources. If the department determines that such services 15 could be provided more effectively or efficiently, the 16 department may consider outsourcing proposals through 17 18 competitive processes. Notwithstanding the provisions of 19 chapter 287, Florida Statutes, in the event that less than four responsive bids are received, the department shall seek 20 approval by the Legislative Budget Commission. 21 22 Section 26. There is appropriated \$250,000 from the Highway Safety Operating Trust Fund for initial development 23 24 start-up costs related to sections 19 and 20 of this act. The Department of Highway Safety and Motor Vehicles shall submit a 25 budget amendment for approval by the Legislative Budget 26 Commission, pursuant to chapter 216, Florida Statutes, upon 27 28 determination of the additional budget amounts by 29 appropriation category that are necessary for full 30 implementation. 31

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Section 27. Of the funds received in the 1 2 Administrative Trust Fund, the Department of Health shall 3 retain 91.67 percent of monthly collections in the Administrative Trust Fund. The remaining 8.33 percent of 4 monthly collections shall be distributed to the Rape Crisis 5 Program Trust Fund, up to a maximum annual distribution of \$4 б 7 million. Once the \$4 million cap is reached for the Rape Crisis Program Trust Fund, 100 percent of collections shall be 8 retained in the Administrative Trust Fund in the Department of 9 Health. Annual collections in excess of \$55 million shall be 10 transferred as follows: \$5 million to the Brain and Spinal 11 Cord Injury Program Trust Fund for the purpose set forth in 12 13 section 381.79, Florida Statutes, and the remainder to the 14 General Revenue Fund. Section 28. There is appropriated from the 15 Administrative Trust Fund in the Department of Health the sum 16 of \$31,591,454 to provide funding for verified and provisional 17 18 trauma centers pursuant to section 395.403, Florida Statutes, 19 and \$4 million from the Rape Crisis Program Trust Fund in the Department of Health for the purpose of providing services for 20 victims of sexual assault. 21 22 Section 29. This act shall take effect July 1, 2004. 23 24 25 2.6 27 28 29 30 31