

By Senator Fasano

11-999-06

1 A bill to be entitled
2 An act relating to the Coordinated Health Care
3 Information and Transparency Act; specifying
4 the purpose of the act; amending s. 20.42,
5 F.S., relating to the Agency for Health Care
6 Administration; conforming provisions to
7 changes made by the act; amending s. 408.05,
8 F.S.; renaming the State Center for Health
9 Statistics as the Florida Center for Health
10 Information and Policy Analysis; revising the
11 center's duties; authorizing the Agency for
12 Health Care Administration to manage and
13 monitor certain grants; requiring the agency to
14 oversee and manage health care data from
15 certain state agencies; deleting the agency's
16 requirement to establish the Comprehensive
17 Health Information System Trust Fund; renaming
18 the State Comprehensive Health Information
19 System Advisory Council as the State Consumer
20 Health Information and Policy Advisory Council;
21 revising the membership of the State Consumer
22 Health Information and Policy Advisory Council;
23 providing duties of the council; amending s.
24 408.061, F.S.; providing that data submitted by
25 health care providers may include professional
26 organizations and specialty board affiliations;
27 requiring the Secretary of Health Care
28 Administration to ensure the coordination of
29 health care data; amending s. 408.062, F.S.;
30 revising the number of most frequently
31 prescribed medicines for which the retail

1 prices may be statistically collected for a
2 special study; revising the date by which the
3 agency must make available on its Internet
4 website certain drug prices; deleting a
5 requirement that a provider hospital assist the
6 agency in determining the impact of ch. 408,
7 F.S., on caesarean section rates; deleting the
8 requirement for an annual report; providing an
9 effective date.

10

11 Be It Enacted by the Legislature of the State of Florida:

12

13 Section 1. (1) This act may be cited as the
14 "Coordinated Health Care Information and Transparency Act."

15 (2) The purpose of this act is to provide for better
16 coordination of health information for purposes of public
17 health, policy analysis, and transparency of consumer health
18 care information.

19 Section 2. Subsection (3) of section 20.42, Florida
20 Statutes, is amended to read:

21 20.42 Agency for Health Care Administration.--

22 (3) The department shall be the chief health policy
23 and planning entity for the state. The department is
24 responsible for health facility licensure, inspection, and
25 regulatory enforcement; investigation of consumer complaints
26 related to health care facilities and managed care plans; the
27 implementation of the certificate of need program; the
28 operation of the ~~Florida State~~ Center for Health Information
29 and Policy Analysis Statistics; the administration of the
30 Medicaid program; the administration of the contracts with the
31 Florida Healthy Kids Corporation; the certification of health

1 maintenance organizations and prepaid health clinics as set
2 forth in part III of chapter 641; and any other duties
3 prescribed by statute or agreement.

4 Section 3. Section 408.05, Florida Statutes, is
5 amended to read:

6 408.05 ~~Florida State~~ Center for Health Information and
7 Policy Analysis Statistics.--

8 (1) ESTABLISHMENT.--The agency shall establish a
9 Florida State Center for Health Information and Policy
10 Analysis Statistics. The center shall establish a
11 comprehensive health information system to provide for the
12 collection, compilation, coordination, analysis, indexing,
13 dissemination, and utilization of both purposefully collected
14 and extant health-related data and statistics. The center
15 shall be staffed with public health experts, biostatisticians,
16 information system analysts, health policy experts,
17 economists, and other staff necessary to carry out its
18 functions.

19 (2) HEALTH-RELATED DATA STATISTICS.--The comprehensive
20 health information system operated by the ~~Florida State~~ Center
21 for Health Information and Policy Analysis Statistics shall
22 identify the best available data sources and coordinate the
23 compilation of extant health-related data and statistics or
24 purposefully collect data concerning ~~on~~:

25 (a) The extent and nature of illness and disability of
26 the state population, including life expectancy, the incidence
27 of various acute and chronic illnesses, and infant and
28 maternal morbidity and mortality.

29 (b) The impact of illness and disability of the state
30 population on the state economy and on other aspects of the
31 well-being of the people in this state.

1 (c) Environmental, social, and other health hazards.

2 (d) Health knowledge and practices of the people in
3 this state and determinants of health and nutritional
4 practices and status.

5 (e) Health resources, including physicians, dentists,
6 nurses, and other health professionals, by specialty and type
7 of practice and acute, long-term care and other institutional
8 care facility supplies and specific services provided by
9 hospitals, nursing homes, home health agencies, and other
10 health care facilities.

11 (f) Utilization of health care by type of provider.

12 (g) Health care costs and financing, including trends
13 in health care prices and costs, the sources of payment for
14 health care services, and federal, state, and local
15 expenditures for health care.

16 (h) Family formation, growth, and dissolution.

17 (i) The extent of public and private health insurance
18 coverage in this state.

19 (j) The quality of care provided by various health
20 care providers.

21 (3) COMPREHENSIVE HEALTH INFORMATION SYSTEM.--In order
22 to produce comparable and uniform health information and
23 statistics for the development of policy recommendations, the
24 agency shall perform the following functions:

25 (a) Coordinate the activities of state agencies
26 involved in the design and implementation of the comprehensive
27 health information system.

28 (b) Undertake research, development, and evaluation
29 respecting the comprehensive health information system.

30 (c) Review the statistical activities of state
31 agencies ~~the Department of Health~~ to ensure ~~assure~~ that they

1 are consistent with the comprehensive health information
2 system.

3 (d) Develop written agreements with local, state, and
4 federal agencies for the sharing of health-care-related data
5 or using the facilities and services of such agencies. State
6 agencies, local health councils, and other agencies under
7 contract with a state agency ~~the Department of Health~~ shall
8 assist the center in obtaining, compiling, and transferring
9 health-care-related data maintained by state and local
10 agencies. Written agreements must specify the types, methods,
11 and periodicity of data exchanges and specify the types of
12 data that will be transferred to the center.

13 (e) The agency shall establish by rule the types of
14 data collected, compiled, processed, used, or shared.
15 Decisions regarding center data sets should be made based on
16 consultation with the Consumer Comprehensive Health
17 Information and Policy System ~~System~~ Advisory Council and other
18 public and private users regarding the types of data which
19 should be collected and their uses.

20 (f) The center shall establish standardized means for
21 collecting health information and statistics under laws and
22 rules administered by the agency.

23 (g) Establish minimum health-care-related data sets
24 which are necessary on a continuing basis to fulfill the
25 collection requirements of the center and which shall be used
26 by state agencies in collecting and compiling
27 health-care-related data. The agency shall periodically
28 review ongoing health care data collections of the Department
29 of Health and other state agencies to determine if the
30 collections are being conducted in accordance with the
31 established minimum sets of data.

1 (h) Establish advisory standards to assure the quality
2 of health statistical and epidemiological data collection,
3 processing, and analysis by local, state, and private
4 organizations.

5 (i) Prescribe standards for the publication of
6 health-care-related data reported pursuant to this section
7 which ensure the reporting of accurate, valid, reliable,
8 complete, and comparable data. Such standards should include
9 advisory warnings to users of the data regarding the status
10 and quality of any data reported by or available from the
11 center.

12 (j) Prescribe standards for the maintenance and
13 preservation of the center's data. This should include
14 methods for archiving data, retrieval of archived data, and
15 data editing and verification.

16 (k) Ensure that strict quality control measures are
17 maintained for the dissemination of data through publications,
18 studies, or user requests.

19 (l) Develop, in conjunction with the State Consumer
20 ~~Comprehensive~~ Health Information and Policy System Advisory
21 Council, and implement a long-range plan for making available
22 health care quality measures performance outcome and financial
23 data that will allow consumers to compare health care
24 services. The health care quality measures performance
25 ~~outcomes~~ and financial data the agency must make available
26 shall include, but is not limited to, pharmaceuticals,
27 physicians, health care facilities, and health plans and
28 managed care entities. The agency shall submit the initial
29 plan to the Governor, the President of the Senate, and the
30 Speaker of the House of Representatives by January 1, 2006,
31 and shall update the plan and report on the status of its

1 implementation annually thereafter. The agency shall also make
2 the plan and status report available to the public on its
3 Internet website. As part of the plan, the agency shall
4 identify the process and timeframes for implementation, any
5 barriers to implementation, and recommendations of changes in
6 the law that may be enacted by the Legislature to eliminate
7 the barriers. As preliminary elements of the plan, the agency
8 shall:

9 1. Make available health care quality measures that
10 include, but are not limited to, process measures,
11 patient-safety measures, inpatient quality indicators,
12 preventable adverse drug events, performance measures,
13 ~~performance outcome~~ and patient charge data collected from
14 health care facilities pursuant to s. 408.061(1)(a) and (2).
15 The agency shall determine which conditions, ~~and~~ procedures,
16 health care quality measures ~~performance outcomes~~, and patient
17 charge data to disclose based upon input from the council.
18 When determining which conditions and procedures are to be
19 disclosed, the council and the agency shall consider variation
20 in costs, variation in outcomes, and magnitude of variations
21 and other relevant information. When determining which health
22 care quality measures ~~performance outcomes~~ to disclose, the
23 agency:

24 a. Shall consider such factors as volume of cases;
25 average patient charges; average length of stay; complication
26 rates; mortality rates; and infection rates, among others,
27 which shall be adjusted for case mix and severity, if
28 applicable.

29 b. May consider such additional measures that are
30 adopted by the Centers for Medicare and Medicaid Studies,
31 National Quality Forum, the Joint Commission on Accreditation

1 of Healthcare Organizations, the Agency for Healthcare
2 Research and Quality, the Centers for Disease Control and
3 Prevention, or a similar national entity that establishes
4 standards to measure the performance of health care providers,
5 or by other states.

6
7 When determining which patient charge data to disclose, the
8 agency shall consider such measures as average charge, average
9 net revenue per adjusted patient day, average cost per
10 adjusted patient day, and average cost per admission, among
11 others.

12 2. Make available performance measures, benefit
13 design, and premium cost data from health plans licensed
14 pursuant to chapter 627 or chapter 641. The agency shall
15 determine which performance outcome and member and subscriber
16 cost data to disclose, based upon input from the council. When
17 determining which data to disclose, the agency shall consider
18 information that may be required by either individual or group
19 purchasers to assess the value of the product, which may
20 include membership satisfaction, quality of care, current
21 enrollment or membership, coverage areas, accreditation
22 status, premium costs, plan costs, premium increases, range of
23 benefits, copayments and deductibles, accuracy and speed of
24 claims payment, credentials of physicians, number of
25 providers, names of network providers, and hospitals in the
26 network. Health plans shall make available to the agency any
27 such data or information that is not currently reported to the
28 agency or the office.

29 3. Determine the method and format for public
30 disclosure of data reported pursuant to this paragraph. The
31 agency shall make its determination based upon input from the

1 ~~Consumer Comprehensive Health Information and Policy System~~
2 Advisory Council. At a minimum, the data shall be made
3 available on the agency's Internet website in a manner that
4 allows consumers to conduct an interactive search that allows
5 them to view and compare the information for specific
6 providers. The website must include such additional
7 information as is determined necessary to ensure that the
8 website enhances informed decisionmaking among consumers and
9 health care purchasers, which shall include, at a minimum,
10 appropriate guidance on how to use the data and an explanation
11 of why the data may vary from provider to provider. The data
12 specified in subparagraph 1. shall be released no later than
13 January 1, 2006, for the reporting of infection rates, and no
14 later than October 1, 2005, for mortality rates and
15 complication rates. The data specified in subparagraph 2.
16 shall be released no later than October 1, 2006.

17 (4) TECHNICAL ASSISTANCE.--The center shall provide
18 technical assistance to persons or organizations engaged in
19 health planning activities in the effective use of statistics
20 collected and compiled by the center. The center shall also
21 provide the following additional technical assistance
22 services:

23 (a) Establish procedures identifying the circumstances
24 under which, the places at which, the persons from whom, and
25 the methods by which a person may secure data from the center,
26 including procedures governing requests, the ordering of
27 requests, timeframes for handling requests, and other
28 procedures necessary to facilitate the use of the center's
29 data. To the extent possible, the center should provide
30 current data timely in response to requests from public or
31 private agencies.

1 (b) Provide assistance to data sources and users in
2 the areas of database design, survey design, sampling
3 procedures, statistical interpretation, and data access to
4 promote improved health-care-related data sets.

5 (c) Identify health care data gaps and provide
6 technical assistance to ~~seek cooperative agreements with~~ other
7 public or private organizations for meeting documented health
8 care data needs.

9 (d) Assist other organizations in developing
10 statistical abstracts of their data sets which ~~that~~ could be
11 used by the center.

12 (e) Provide statistical support to state agencies with
13 regard to the use of databases maintained by the center.

14 (f) To the extent possible, respond to multiple
15 requests for information not currently collected by the center
16 or available from other sources by initiating data collection.

17 (g) Maintain detailed information on data maintained
18 by other local, state, federal, and private agencies in order
19 to advise those who use the center of potential sources of
20 data which are requested but which are not available from the
21 center.

22 (h) Respond to requests for data which are not
23 available in published form by initiating special computer
24 runs on data sets available to the center.

25 (i) Monitor innovations in health information
26 technology, informatics, and the exchange of health
27 information and maintain a repository of technical resources
28 for support of the Florida Health Information Network.

29 (j) Administer, manage, and monitor grants to
30 not-for-profit organizations, regional health information
31 organizations, public health departments or state agencies

1 that submit proposals for planning, implementation, or
2 training projects to advance the Florida Health Information
3 Network. Any grant contract shall be evaluated to ensure the
4 effective outcome of the health information project.

5 (k) Initiate, oversee, manage, and evaluate the
6 integration of health care data from each state agency that
7 collects, stores, and reports on health care issues, and make
8 that data available to any health care practitioner through
9 the Florida Health Information Network.

10 (5) PUBLICATIONS; REPORTS; SPECIAL STUDIES.--The
11 center shall provide for the widespread dissemination of data
12 which it collects and analyzes. The center shall have the
13 following publication, reporting, and special study functions:

14 (a) The center shall publish and make available
15 periodically to agencies and individuals health statistics
16 publications of general interest, including consumer reports
17 concerning health plans and satisfaction surveys for HMOs ~~HMO~~
18 ~~report cards~~; publications providing health statistics on
19 topical health policy issues; publications that provide health
20 status profiles of the people in this state; and other topical
21 health statistics publications.

22 (b) The center shall publish, make available, and
23 disseminate, promptly and as widely as practicable, the
24 results of special health surveys, health care research, and
25 health care evaluations conducted or supported under this
26 section. Any publication by the center must include a
27 statement of the limitations on the quality, accuracy, and
28 completeness of the data.

29 (c) The center shall provide indexing, abstracting,
30 translation, publication, and other services leading to a more
31 effective and timely dissemination of health care statistics.

1 (d) The center shall be responsible for publishing and
2 disseminating an annual report on the center's activities.

3 (e) The center shall be responsible, to the extent
4 resources are available, for conducting a variety of special
5 studies and surveys to expand the health care information and
6 statistics available for health policy analyses, particularly
7 for the review of public policy issues. The center shall
8 develop a process by which users of the center's data are
9 periodically surveyed regarding critical data needs and the
10 results of the survey considered in determining which special
11 surveys or studies will be conducted. The center shall select
12 problems in health care for research, policy analyses, or
13 special data collections on the basis of their local,
14 regional, or state importance; the unique potential for
15 definitive research on the problem; and opportunities for
16 application of the study findings.

17 ~~(6) PROVIDER DATA REPORTING. This section does not~~
18 ~~confer on the agency the power to demand or require that a~~
19 ~~health care provider or professional furnish information,~~
20 ~~records of interviews, written reports, statements, notes,~~
21 ~~memoranda, or data other than as expressly required by law.~~

22 ~~(6)(7) BUDGET; FEES; TRUST FUND.--~~

23 (a) The Legislature intends that funding for the
24 Florida State Center for Health Information and Policy
25 Analysis Statistics be appropriated from the General Revenue
26 Fund.

27 (b) The Florida State Center for Health Information
28 and Policy Analysis Statistics may apply for and receive and
29 accept grants, gifts, and other payments, including property
30 and services, from any governmental or other public or private
31 entity or person and make arrangements as to the use of same,

1 including the undertaking of special studies and other
2 projects relating to health-care-related topics. Funds
3 obtained pursuant to this paragraph may not be used to offset
4 annual appropriations from the General Revenue Fund.

5 (c) The center may charge such reasonable fees for
6 services as the agency prescribes by rule. The established
7 fees may not exceed the reasonable cost for such services.
8 Fees collected may not be used to offset annual appropriations
9 from the General Revenue Fund.

10 ~~(d) The agency shall establish a Comprehensive Health~~
11 ~~Information System Trust Fund as the repository of all funds~~
12 ~~appropriated to, and fees and grants collected for, services~~
13 ~~of the State Center for Health Statistics. Any funds, other~~
14 ~~than funds appropriated to the center from the General Revenue~~
15 ~~Fund, which are raised or collected by the agency for the~~
16 ~~operation of the center and which are not needed to meet the~~
17 ~~expenses of the center for its current fiscal year shall be~~
18 ~~available to the agency in succeeding years.~~

19 ~~(7)(8) STATE CONSUMER COMPREHENSIVE HEALTH INFORMATION~~
20 ~~AND POLICY SYSTEM ADVISORY COUNCIL.--~~

21 (a) There is established in the agency the State
22 Consumer Comprehensive Health Information and Policy System
23 Advisory Council to assist the center in reviewing the
24 comprehensive health information system, including the
25 identification, collection, standardization, sharing, and
26 coordination of health-related data, including fraud and abuse
27 data and professional and facility licensing data, among
28 federal, state, local, and private entities and to recommend
29 improvements for purposes of public health, policy analysis,
30 and transparency of consumer health care information such
31 system. The council shall consist of the following members:

1 1. An employee of the Executive Office of the
2 Governor, to be appointed by the Governor.

3 2. An employee of the Office of Insurance Regulation,
4 to be appointed by the director of the office.

5 3. An employee of the Department of Education, to be
6 appointed by the Commissioner of Education.

7 4. Ten persons, to be appointed by the Secretary of
8 Health Care Administration, representing other state and local
9 agencies, state universities, ~~the Florida Association of~~
10 business/health coalitions, local health councils,
11 professional health-care-related associations, consumers, and
12 purchasers.

13 (b) Each member of the council shall be appointed to
14 serve for a term of 2 4 years following ~~from~~ the date of
15 appointment, except that a vacancy shall be filled by
16 appointment for the remainder of the term. ~~and except that:~~

17 ~~1. Three of the members initially appointed by the~~
18 ~~Director of Health Care Administration shall each be appointed~~
19 ~~for a term of 3 years.~~

20 ~~2. Two of the members initially appointed by the~~
21 ~~Director of Health Care Administration shall each be appointed~~
22 ~~for a term of 2 years.~~

23 ~~3. Two of the members initially appointed by the~~
24 ~~Director of Health Care Administration shall each be appointed~~
25 ~~for a term of 1 year.~~

26 (c) The council may meet at the call of its chair, at
27 the request of the agency department, or at the request of a
28 majority of its membership, but at least quarterly.

29 (d) Members shall elect a chair and a vice chair
30 annually.

31

1 (e) A majority of the members constitutes a quorum,
2 and the affirmative vote of a majority of a quorum is
3 necessary to take action.

4 (f) The council shall maintain minutes of each meeting
5 and shall make such minutes available to any person.

6 (g) Members of the council shall serve without
7 compensation but are ~~shall be~~ entitled to receive
8 reimbursement for per diem and travel expenses as provided in
9 s. 112.061.

10 (h) The council's duties and responsibilities include,
11 but are not limited to:

12 1. Developing a mission statement, goals, and plan of
13 action, based on the guiding principles specified in s.
14 282.3032, for the identifying, collecting, standardizing,
15 sharing, and coordinating health-related data among federal,
16 state, and local government and private-sector entities.

17 2. Developing a review process to ensure cooperative
18 planning among agencies that collect or maintain
19 health-related data.

20 3. Creating ad hoc, issue-oriented technical
21 workgroups, as needed to make recommendations to the council.

22 ~~(8)(9) Nothing in~~ This section does not ~~shall~~ limit,
23 restrict, affect, or control the collection, analysis,
24 release, or publication of data by any state agency pursuant
25 to its statutory authority, duties, or responsibilities.

26 Section 4. Paragraph (b) of subsection (1) and
27 subsection (10) of section 408.061, Florida Statutes, are
28 amended to read:

29 408.061 Data collection; uniform systems of financial
30 reporting; information relating to physician charges;
31 confidential information; immunity.--

1 (1)
2 (b) Data to be submitted by health care providers may
3 include, but are not limited to: affiliations with
4 professional organizations and specialty boards, Medicare and
5 Medicaid participation, types of services offered to patients,
6 amount of revenue and expenses of the health care provider,
7 and such other data which are reasonably necessary to study
8 utilization patterns. Data submitted shall be certified by the
9 appropriate duly authorized representative or employee of the
10 health care provider that the information submitted is true
11 and accurate.

12 (10) The agency shall be the primary source for
13 collection and dissemination of health care data. No other
14 agency of state government may gather data from a health care
15 provider licensed or regulated under this chapter without
16 first determining if the data is currently being collected by
17 the agency and affirmatively demonstrating that it would be
18 more cost-effective for an agency of state government other
19 than the agency to gather the health care data. The secretary
20 ~~director~~ shall ensure that health care data collected by the
21 divisions within the agency is coordinated. It is the express
22 intent of the Legislature that all health care data be
23 collected by a single source within the agency and that other
24 divisions within the agency, and all other agencies of state
25 government, obtain data for analysis, regulation, and public
26 dissemination purposes from that single source. Confidential
27 information may be released to other governmental entities or
28 to parties contracting with the agency to perform agency
29 duties or functions as needed in connection with the
30 performance of the duties of the receiving entity. The
31

1 receiving entity or party shall retain the confidentiality of
2 such information as provided for herein.

3 Section 5. Paragraphs (h) and (j) of subsection (1)
4 and subsection (2) of section 408.062, Florida Statutes, are
5 amended to read:

6 408.062 Research, analyses, studies, and reports.--

7 (1) The agency shall conduct research, analyses, and
8 studies relating to health care costs and access to and
9 quality of health care services as access and quality are
10 affected by changes in health care costs. Such research,
11 analyses, and studies shall include, but not be limited to:

12 (h) The collection of a statistically valid sample of
13 data on the retail prices charged by pharmacies for the 100 ~~50~~
14 most frequently prescribed medicines from any pharmacy
15 licensed by this state as a special study authorized by the
16 Legislature to be performed by the agency quarterly. If the
17 drug is available generically, price data shall be reported
18 for the generic drug and price data of a brand-named drug for
19 which the generic drug is the equivalent shall be reported.
20 The agency shall make available on its Internet website for
21 each pharmacy, no later than October 1, 2006 ~~2005~~, drug prices
22 for a 30-day supply at a standard dose. The data collected
23 shall be reported for each drug by pharmacy and by
24 metropolitan statistical area or region and updated quarterly.

25 (j) The making available on its Internet website
26 beginning no later than October 1, 2004, and in a hard-copy
27 format upon request, of patient charge, volumes, length of
28 stay, and performance ~~outcome~~ indicators collected from health
29 care facilities pursuant to s. 408.061(1)(a) for specific
30 medical conditions, surgeries, and procedures provided in
31 inpatient and outpatient facilities as determined by the

1 agency. In making the determination of specific medical
2 conditions, surgeries, and procedures to include, the agency
3 shall consider such factors as volume, severity of the
4 illness, urgency of admission, individual and societal costs,
5 and whether the condition is acute or chronic. Performance
6 outcome indicators shall be risk adjusted or severity
7 adjusted, as applicable, using nationally recognized risk
8 adjustment methodologies or software consistent with the
9 standards of the Agency for Healthcare Research and Quality
10 and as selected by the agency. The website shall also provide
11 an interactive search that allows consumers to view and
12 compare the information for specific facilities, a map that
13 allows consumers to select a county or region, definitions of
14 all of the data, descriptions of each procedure, and an
15 explanation about why the data may differ from facility to
16 facility. Such public data shall be updated quarterly. The
17 agency shall submit an annual status report on the collection
18 of data and publication of health care quality measures
19 ~~performance outcome indicators~~ to the Governor, the Speaker of
20 the House of Representatives, the President of the Senate, and
21 the substantive legislative committees with the first status
22 report due January 1, 2005.

23 (2) The agency may assess annually the caesarean
24 section rate in ~~Florida~~ hospitals in this state using the
25 analysis methodology that the agency determines most
26 appropriate. The data from this assessment shall be published
27 periodically on the agency's website. ~~To assist the agency in~~
28 ~~determining the impact of this chapter on Florida hospitals'~~
29 ~~caesarean section rates, each provider hospital, as defined in~~
30 ~~s. 383.336, shall notify the agency of the date of~~
31 ~~implementation of the practice parameters and the date of the~~

