

1 revising the number of most frequently
2 prescribed medicines for which the retail
3 prices may be statistically collected for a
4 special study; revising the date by which the
5 agency must make available on its Internet
6 website certain drug prices; deleting a
7 requirement that a provider hospital assist the
8 agency in determining the impact of ch. 408,
9 F.S., on caesarean section rates; deleting the
10 requirement for an annual report; authorizing
11 the agency to develop an electronic health
12 information network; providing an effective
13 date.

14
15 Be It Enacted by the Legislature of the State of Florida:

16
17 Section 1. (1) This act may be cited as the
18 "Coordinated Health Care Information and Transparency Act."

19 (2) The purpose of this act is to provide for better
20 coordination of health information for purposes of public
21 health, policy analysis, and transparency of consumer health
22 care information.

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

25 20.42 Agency for Health Care Administration.--

26 (3) The department shall be the chief health policy
27 and planning entity for the state. The department is
28 responsible for health facility licensure, inspection, and
29 regulatory enforcement; investigation of consumer complaints
30 related to health care facilities and managed care plans; the
31 implementation of the certificate of need program; the

1 operation of the Florida State Center for Health Information
2 and Policy Analysis Statistics; the administration of the
3 Medicaid program; the administration of the contracts with the
4 Florida Healthy Kids Corporation; the certification of health
5 maintenance organizations and prepaid health clinics as set
6 forth in part III of chapter 641; and any other duties
7 prescribed by statute or agreement.

8 Section 3. Section 408.05, Florida Statutes, is
9 amended to read:

10 408.05 Florida State Center for Health Information and
11 Policy Analysis Statistics.--

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

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

29 (a) The extent and nature of illness and disability of
30 the state population, including life expectancy, the incidence
31

1 of various acute and chronic illnesses, and infant and
2 maternal morbidity and mortality.

3 (b) The impact of illness and disability of the state
4 population on the state economy and on other aspects of the
5 well-being of the people in this state.

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

7 (d) Health knowledge and practices of the people in
8 this state and determinants of health and nutritional
9 practices and status.

10 (e) Health resources, including physicians, dentists,
11 nurses, and other health professionals, by specialty and type
12 of practice and acute, long-term care and other institutional
13 care facility supplies and specific services provided by
14 hospitals, nursing homes, home health agencies, and other
15 health care facilities.

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

17 (g) Health care costs and financing, including trends
18 in health care prices and costs, the sources of payment for
19 health care services, and federal, state, and local
20 expenditures for health care.

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

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

24 (j) The quality of care provided by various health
25 care providers.

26 (3) COMPREHENSIVE HEALTH INFORMATION SYSTEM.--In order
27 to produce comparable and uniform health information and
28 statistics for the development of policy recommendations, the
29 agency shall perform the following functions:
30
31

1 (a) Coordinate the activities of state agencies
2 involved in the design and implementation of the comprehensive
3 health information system.

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

6 (c) Review the statistical activities of state
7 agencies ~~the Department of Health~~ to ensure ~~assure~~ that they
8 are consistent with the comprehensive health information
9 system.

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

20 (e) The agency shall establish by rule the types of
21 data collected, compiled, processed, used, or shared.
22 Decisions regarding center data sets should be made based on
23 consultation with the Consumer ~~Comprehensive~~ Health
24 Information and Policy ~~System~~ Advisory Council and other
25 public and private users regarding the types of data which
26 should be collected and their uses.

27 (f) The center shall establish standardized means for
28 collecting health information and statistics under laws and
29 rules administered by the agency.

30 (g) Establish minimum health-care-related data sets
31 which are necessary on a continuing basis to fulfill the

1 collection requirements of the center and which shall be used
2 by state agencies in collecting and compiling
3 health-care-related data. The agency shall periodically
4 review ongoing health care data collections of the Department
5 of Health and other state agencies to determine if the
6 collections are being conducted in accordance with the
7 established minimum sets of data.

8 (h) Establish advisory standards to assure the quality
9 of health statistical and epidemiological data collection,
10 processing, and analysis by local, state, and private
11 organizations.

12 (i) Prescribe standards for the publication of
13 health-care-related data reported pursuant to this section
14 which ensure the reporting of accurate, valid, reliable,
15 complete, and comparable data. Such standards should include
16 advisory warnings to users of the data regarding the status
17 and quality of any data reported by or available from the
18 center.

19 (j) Prescribe standards for the maintenance and
20 preservation of the center's data. This should include
21 methods for archiving data, retrieval of archived data, and
22 data editing and verification.

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

26 (l) Develop, in conjunction with the State Consumer
27 ~~Comprehensive~~ Health Information and Policy System Advisory
28 Council, and implement a long-range plan for making available
29 health care quality measures performance outcome and financial
30 data that will allow consumers to compare health care
31 services. The health care quality measures performance

1 ~~outcomes~~ and financial data the agency must make available
2 shall include, but is not limited to, pharmaceuticals,
3 physicians, health care facilities, and health plans and
4 managed care entities. The agency shall submit the initial
5 plan to the Governor, the President of the Senate, and the
6 Speaker of the House of Representatives by January 1, 2006,
7 and shall update the plan and report on the status of its
8 implementation annually thereafter. The agency shall also make
9 the plan and status report available to the public on its
10 Internet website. As part of the plan, the agency shall
11 identify the process and timeframes for implementation, any
12 barriers to implementation, and recommendations of changes in
13 the law that may be enacted by the Legislature to eliminate
14 the barriers. As preliminary elements of the plan, the agency
15 shall:

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

30 a. Shall consider such factors as volume of cases;
31 average patient charges; average length of stay; complication

1 rates; mortality rates; and infection rates, among others,
2 which shall be adjusted for case mix and severity, if
3 applicable.

4 b. May consider such additional measures that are
5 adopted by the Centers for Medicare and Medicaid Studies,
6 National Quality Forum, the Joint Commission on Accreditation
7 of Healthcare Organizations, the Agency for Healthcare
8 Research and Quality, the Centers for Disease Control and
9 Prevention, or a similar national entity that establishes
10 standards to measure the performance of health care providers,
11 or by other states.

12
13 When determining which patient charge data to disclose, the
14 agency shall consider such measures as average charge, average
15 net revenue per adjusted patient day, average cost per
16 adjusted patient day, and average cost per admission, among
17 others.

18 2. Make available performance measures, benefit
19 design, and premium cost data from health plans licensed
20 pursuant to chapter 627 or chapter 641. The agency shall
21 determine which performance outcome and member and subscriber
22 cost data to disclose, based upon input from the council. When
23 determining which data to disclose, the agency shall consider
24 information that may be required by either individual or group
25 purchasers to assess the value of the product, which may
26 include membership satisfaction, quality of care, current
27 enrollment or membership, coverage areas, accreditation
28 status, premium costs, plan costs, premium increases, range of
29 benefits, copayments and deductibles, accuracy and speed of
30 claims payment, credentials of physicians, number of
31 providers, names of network providers, and hospitals in the

1 network. Health plans shall make available to the agency any
2 such data or information that is not currently reported to the
3 agency or the office.

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

23 (4) TECHNICAL ASSISTANCE.--The center shall provide
24 technical assistance to persons or organizations engaged in
25 health planning activities in the effective use of statistics
26 collected and compiled by the center. The center shall also
27 provide the following additional technical assistance
28 services:

29 (a) Establish procedures identifying the circumstances
30 under which, the places at which, the persons from whom, and
31 the methods by which a person may secure data from the center,

1 including procedures governing requests, the ordering of
2 requests, timeframes for handling requests, and other
3 procedures necessary to facilitate the use of the center's
4 data. To the extent possible, the center should provide
5 current data timely in response to requests from public or
6 private agencies.

7 (b) Provide assistance to data sources and users in
8 the areas of database design, survey design, sampling
9 procedures, statistical interpretation, and data access to
10 promote improved health-care-related data sets.

11 (c) Identify health care data gaps and provide
12 technical assistance to ~~seek cooperative agreements with~~ other
13 public or private organizations for meeting documented health
14 care data needs.

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

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

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

23 (g) Maintain detailed information on data maintained
24 by other local, state, federal, and private agencies in order
25 to advise those who use the center of potential sources of
26 data which are requested but which are not available from the
27 center.

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

31

1 (i) Monitor innovations in health information
2 technology, informatics, and the exchange of health
3 information, and maintain a repository of technical resources
4 to support the development of a Florida health information
5 network.

6 (j) Administer, manage, and monitor grants to
7 not-for-profit organizations, regional health information
8 organizations, public health departments, or state agencies
9 that submit proposals for planning, implementation, or
10 training projects to advance the development of a Florida
11 health information network. Any grant contract shall be
12 evaluated to ensure the effective outcome of the health
13 information project.

14 (k) Initiate, oversee, manage, and evaluate the
15 integration of health care data from each state agency that
16 collects, stores, and reports on health care issues, and make
17 that data available to any health care practitioner through
18 the Florida health information network.

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

23 (a) The center shall publish and make available
24 periodically to agencies and individuals health statistics
25 publications of general interest, including consumer reports
26 concerning health plans and satisfaction surveys for HMOs ~~HMO~~
27 ~~report cards~~; publications providing health statistics on
28 topical health policy issues; publications that provide health
29 status profiles of the people in this state; and other topical
30 health statistics publications.

31

1 (b) The center shall publish, make available, and
2 disseminate, promptly and as widely as practicable, the
3 results of special health surveys, health care research, and
4 health care evaluations conducted or supported under this
5 section. Any publication by the center must include a
6 statement of the limitations on the quality, accuracy, and
7 completeness of the data.

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

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

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

27 (6) PROVIDER DATA REPORTING.--This section does not
28 confer on the agency the power to demand or require that a
29 health care provider or professional furnish information,
30 records of interviews, written reports, statements, notes,
31 memoranda, or data other than as expressly required by law.

1 (7) BUDGET; FEES; ~~TRUST FUND~~.--

2 (a) The Legislature intends that funding for the
3 Florida State Center for Health Information and Policy
4 Analysis Statistics be appropriated from the General Revenue
5 Fund.

6 (b) The Florida State Center for Health Information
7 and Policy Analysis Statistics may apply for and receive and
8 accept grants, gifts, and other payments, including property
9 and services, from any governmental or other public or private
10 entity or person and make arrangements as to the use of same,
11 including the undertaking of special studies and other
12 projects relating to health-care-related topics. Funds
13 obtained pursuant to this paragraph may not be used to offset
14 annual appropriations from the General Revenue Fund.

15 (c) The center may charge such reasonable fees for
16 services as the agency prescribes by rule. The established
17 fees may not exceed the reasonable cost for such services.
18 Fees collected may not be used to offset annual appropriations
19 from the General Revenue Fund.

20 ~~(d) The agency shall establish a Comprehensive Health~~
21 ~~Information System Trust Fund as the repository of all funds~~
22 ~~appropriated to, and fees and grants collected for, services~~
23 ~~of the State Center for Health Statistics. Any funds, other~~
24 ~~than funds appropriated to the center from the General Revenue~~
25 ~~Fund, which are raised or collected by the agency for the~~
26 ~~operation of the center and which are not needed to meet the~~
27 ~~expenses of the center for its current fiscal year shall be~~
28 ~~available to the agency in succeeding years.~~

29 (8) STATE CONSUMER ~~COMPREHENSIVE~~ HEALTH INFORMATION
30 AND POLICY ~~SYSTEM~~ ADVISORY COUNCIL.--

31

1 (a) There is established in the agency the State
2 ~~Consumer Comprehensive Health Information and Policy System~~
3 Advisory Council to assist the center in reviewing the
4 comprehensive health information system, to include the
5 identification, collection, standardization, sharing, and
6 coordination of health-related data, to include fraud and
7 abuse data and professional and facility licensing data, among
8 federal, state, local, and private entities and to recommend
9 improvements for purposes of public health, policy analysis,
10 and transparency of consumer health care information ~~such~~
11 ~~system~~. The council shall consist of the following members:
12 1. An employee of the Executive Office of the
13 Governor, to be appointed by the Governor.
14 2. An employee of the Office of Insurance Regulation,
15 to be appointed by the director of the office.
16 3. An employee of the Department of Education, to be
17 appointed by the Commissioner of Education.
18 4. Ten persons, to be appointed by the Secretary of
19 Health Care Administration, representing other state and local
20 agencies, state universities, ~~the Florida Association of~~
21 business/health coalitions, local health councils,
22 professional health-care-related associations, consumers, and
23 purchasers.
24 (b) Each member of the council shall be appointed to
25 serve for a term of 2 4 years following from the date of
26 appointment, except the term of appointment shall end 3 years
27 following the date of appointment for members appointed in
28 2003, 2004, and 2005. ~~that~~ A vacancy shall be filled by
29 appointment for the remainder of the term, and each appointing
30 authority retains the right to reappoint members whose terms
31 of appointment have expired. ~~and except that:~~

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

4 ~~2. Two of the members initially appointed by the~~
5 ~~Director of Health Care Administration shall each be appointed~~
6 ~~for a term of 2 years.~~

7 ~~3. Two of the members initially appointed by the~~
8 ~~Director of Health Care Administration shall each be appointed~~
9 ~~for a term of 1 year.~~

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

13 (d) Members shall elect a chair and a vice chair
14 annually.

15 (e) A majority of the members constitutes a quorum,
16 and the affirmative vote of a majority of a quorum is
17 necessary to take action.

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

20 (g) Members of the council shall serve without
21 compensation but are ~~shall be~~ entitled to receive
22 reimbursement for per diem and travel expenses as provided in
23 s. 112.061.

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

26 1. Developing a mission statement, goals, and plan of
27 action, based on the guiding principles specified in s.
28 282.3032, for the identifying, collecting, standardizing,
29 sharing, and coordinating health-related data among federal,
30 state, and local government and private-sector entities.

31

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

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

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

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

13 408.061 Data collection; uniform systems of financial
14 reporting; information relating to physician charges;
15 confidential information; immunity.--

16 (1)

17 (b) Data to be submitted by health care providers may
18 include, but are not limited to: affiliations with
19 professional organizations and specialty boards, Medicare and
20 Medicaid participation, types of services offered to patients,
21 amount of revenue and expenses of the health care provider,
22 and such other data which are reasonably necessary to study
23 utilization patterns. Data submitted shall be certified by the
24 appropriate duly authorized representative or employee of the
25 health care provider that the information submitted is true
26 and accurate.

27 (10) The agency shall be the primary source for
28 collection and dissemination of health care data. No other
29 agency of state government may gather data from a health care
30 provider licensed or regulated under this chapter without
31 first determining if the data is currently being collected by

1 | the agency and affirmatively demonstrating that it would be
2 | more cost-effective for an agency of state government other
3 | than the agency to gather the health care data. The secretary
4 | ~~director~~ shall ensure that health care data collected by the
5 | divisions within the agency is coordinated. It is the express
6 | intent of the Legislature that all health care data be
7 | collected by a single source within the agency and that other
8 | divisions within the agency, and all other agencies of state
9 | government, obtain data for analysis, regulation, and public
10 | dissemination purposes from that single source. Confidential
11 | information may be released to other governmental entities or
12 | to parties contracting with the agency to perform agency
13 | duties or functions as needed in connection with the
14 | performance of the duties of the receiving entity. The
15 | receiving entity or party shall retain the confidentiality of
16 | such information as provided for herein.

17 | Section 5. Paragraphs (h) and (j) of subsection (1)
18 | and subsections (2) and (5) of section 408.062, Florida
19 | Statutes, are amended to read:

20 | 408.062 Research, analyses, studies, and reports.--

21 | (1) The agency shall conduct research, analyses, and
22 | studies relating to health care costs and access to and
23 | quality of health care services as access and quality are
24 | affected by changes in health care costs. Such research,
25 | analyses, and studies shall include, but not be limited to:

26 | (h) The collection of a statistically valid sample of
27 | data on the retail prices charged by pharmacies for the 100 ~~50~~
28 | most frequently prescribed medicines from any pharmacy
29 | licensed by this state as a special study authorized by the
30 | Legislature to be performed by the agency quarterly. If the
31 | drug is available generically, price data shall be reported

1 | for the generic drug and price data of a brand-named drug for
2 | which the generic drug is the equivalent shall be reported.
3 | The agency shall make available on its Internet website for
4 | each pharmacy, no later than October 1, 2006 ~~2005~~, drug prices
5 | for a 30-day supply at a standard dose. The data collected
6 | shall be reported for each drug by pharmacy and by
7 | metropolitan statistical area or region and updated quarterly.

8 | (j) The making available on its Internet website
9 | beginning no later than October 1, 2004, and in a hard-copy
10 | format upon request, of patient charge, volumes, length of
11 | stay, and performance ~~outcome~~ indicators collected from health
12 | care facilities pursuant to s. 408.061(1)(a) for specific
13 | medical conditions, surgeries, and procedures provided in
14 | inpatient and outpatient facilities as determined by the
15 | agency. In making the determination of specific medical
16 | conditions, surgeries, and procedures to include, the agency
17 | shall consider such factors as volume, severity of the
18 | illness, urgency of admission, individual and societal costs,
19 | and whether the condition is acute or chronic. Performance
20 | outcome indicators shall be risk adjusted or severity
21 | adjusted, as applicable, using nationally recognized risk
22 | adjustment methodologies or software consistent with the
23 | standards of the Agency for Healthcare Research and Quality
24 | and as selected by the agency. The website shall also provide
25 | an interactive search that allows consumers to view and
26 | compare the information for specific facilities, a map that
27 | allows consumers to select a county or region, definitions of
28 | all of the data, descriptions of each procedure, and an
29 | explanation about why the data may differ from facility to
30 | facility. Such public data shall be updated quarterly. The
31 | agency shall submit an annual status report on the collection

1 of data and publication of health care quality measures
2 ~~performance outcome indicators~~ to the Governor, the Speaker of
3 the House of Representatives, the President of the Senate, and
4 the substantive legislative committees with the first status
5 report due January 1, 2005.

6 (2) The agency may assess annually the caesarean
7 section rate in ~~Florida~~ hospitals in this state using the
8 analysis methodology that the agency determines most
9 appropriate. The data from this assessment shall be published
10 periodically on the agency's website. ~~To assist the agency in~~
11 ~~determining the impact of this chapter on Florida hospitals'~~
12 ~~caesarean section rates, each provider hospital, as defined in~~
13 ~~s. 383.336, shall notify the agency of the date of~~
14 ~~implementation of the practice parameters and the date of the~~
15 ~~first meeting of the hospital peer review board created~~
16 ~~pursuant to this chapter. The agency shall use these dates in~~
17 ~~monitoring any change in provider hospital caesarean section~~
18 ~~rates. An annual report based on this monitoring and~~
19 ~~assessment shall be submitted to the Governor, the Speaker of~~
20 ~~the House of Representatives, and the President of the Senate~~
21 ~~by the agency, with the first annual report due January 1,~~
22 ~~1993.~~

23 (5) The agency shall develop and implement a strategy
24 for the adoption and use of electronic health records,
25 including the development of an electronic health information
26 network for the sharing of electronic health records among
27 health care facilities, health care providers, and health
28 insurers. The agency may develop rules to facilitate the
29 functionality and protect the confidentiality of electronic
30 health records. The agency shall report to the Governor, the
31 Speaker of the House of Representatives, and the President of

1 the Senate on legislative recommendations to protect the
2 confidentiality of electronic health records.

3 Section 6. This act shall take effect upon becoming a
4 law.

5

6 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
7 COMMITTEE SUBSTITUTE FOR
8 Senate Bill 1332

9 The committee substitute provides for staggered terms of
10 office and authorizes the reappointment of members to the
11 State consumer Health Information and Policy Advisory Council.
12 The committee substitute clarifies that the Florida Center for
13 Health Information and Policy Analysis in the agency can
14 provide technical assistance relating to the function of
15 developing a Florida health information network, rather than
16 provide technical assistance to a specified entity called the
17 Florida Health Information Network. The agency is authorized
18 to develop an electronic health information network for the
19 sharing of electronic health records among health care
20 facilities, health care providers, and health insurers.
21 Current statutory limitations on the data the agency can
22 require health care professionals or providers to furnish is
23 restored.

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