

By the Committees on Health and Human Services Appropriations;
Health Care; and Senator Fasano

603-2138-06

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 for staggered terms of office;
24 authorizing the reappointment of members to the
25 council; providing duties of the council;
26 amending s. 408.061, F.S.; providing that data
27 submitted by health care providers may include
28 professional organizations and specialty board
29 affiliations; requiring the Secretary of Health
30 Care Administration to ensure the coordination
31 of health care data; amending s. 408.062, F.S.;

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 ~~en~~:

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:
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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 patient-safety indicators, inpatient
17 quality indicators, and performance outcome and patient charge
18 data collected from health care facilities pursuant to s.
19 408.061(1)(a) and (2). The terms "patient-safety indicators"
20 and "inpatient quality indicators" shall be defined by the
21 Centers for Medicare and Medicaid Studies, the National
22 Quality Forum, the Joint Commission on Accreditation of
23 Healthcare Organizations, the Agency for Healthcare Research
24 and Quality, the Centers for Disease Control and Prevention,
25 or a similar national entity that establishes standards to
26 measure the performance of health care providers, or by other
27 states. The agency shall determine which conditions, ~~and~~
28 procedures, health care quality measures ~~performance outcomes~~,
29 and patient charge data to disclose based upon input from the
30 council. When determining which conditions and procedures are
31 to be disclosed, the council and the agency shall consider

1 | variation in costs, variation in outcomes, and magnitude of
2 | variations and other relevant information. When determining
3 | which health care quality measures ~~performance outcomes~~ to
4 | disclose, the agency:

5 | a. Shall consider such factors as volume of cases;
6 | average patient charges; average length of stay; complication
7 | rates; mortality rates; and infection rates, among others,
8 | which shall be adjusted for case mix and severity, if
9 | applicable.

10 | b. May consider such additional measures that are
11 | adopted by the Centers for Medicare and Medicaid Studies,
12 | National Quality Forum, the Joint Commission on Accreditation
13 | of Healthcare Organizations, the Agency for Healthcare
14 | Research and Quality, the Centers for Disease Control and
15 | Prevention, or a similar national entity that establishes
16 | standards to measure the performance of health care providers,
17 | or by other states.

18 |
19 | When determining which patient charge data to disclose, the
20 | agency shall consider such measures as average charge, average
21 | net revenue per adjusted patient day, average cost per
22 | adjusted patient day, and average cost per admission, among
23 | others.

24 | 2. Make available performance measures, benefit
25 | design, and premium cost data from health plans licensed
26 | pursuant to chapter 627 or chapter 641. The agency shall
27 | determine which performance outcome and member and subscriber
28 | cost data to disclose, based upon input from the council. When
29 | determining which data to disclose, the agency shall consider
30 | information that may be required by either individual or group
31 | purchasers to assess the value of the product, which may

1 include membership satisfaction, quality of care, current
2 enrollment or membership, coverage areas, accreditation
3 status, premium costs, plan costs, premium increases, range of
4 benefits, copayments and deductibles, accuracy and speed of
5 claims payment, credentials of physicians, number of
6 providers, names of network providers, and hospitals in the
7 network. Health plans shall make available to the agency any
8 such data or information that is not currently reported to the
9 agency or the office.

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

29 (4) TECHNICAL ASSISTANCE.--The center shall provide
30 technical assistance to persons or organizations engaged in
31 health planning activities in the effective use of statistics

1 collected and compiled by the center. The center shall also
2 provide the following additional technical assistance
3 services:

4 (a) Establish procedures identifying the circumstances
5 under which, the places at which, the persons from whom, and
6 the methods by which a person may secure data from the center,
7 including procedures governing requests, the ordering of
8 requests, timeframes for handling requests, and other
9 procedures necessary to facilitate the use of the center's
10 data. To the extent possible, the center should provide
11 current data timely in response to requests from public or
12 private agencies.

13 (b) Provide assistance to data sources and users in
14 the areas of database design, survey design, sampling
15 procedures, statistical interpretation, and data access to
16 promote improved health-care-related data sets.

17 (c) Identify health care data gaps and provide
18 technical assistance to ~~seek cooperative agreements with~~ other
19 public or private organizations for meeting documented health
20 care data needs.

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

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

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

29 (g) Maintain detailed information on data maintained
30 by other local, state, federal, and private agencies in order
31 to advise those who use the center of potential sources of

1 data which are requested but which are not available from the
2 center.

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

6 (i) Monitor innovations in health information
7 technology, informatics, and the exchange of health
8 information, and maintain a repository of technical resources
9 to support the development of a Florida health information
10 network.

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

19 (k) Initiate, oversee, manage, and evaluate the
20 integration of health care data from each state agency that
21 collects, stores, and reports on health care issues, and make
22 that data available to any health care practitioner through
23 the Florida health information network.

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

28 (a) The center shall publish and make available
29 periodically to agencies and individuals health statistics
30 publications of general interest, including consumer reports
31 concerning health plans and satisfaction surveys for HMOs ~~HMO~~

1 ~~report cards~~; publications providing health statistics on
2 topical health policy issues; publications that provide health
3 status profiles of the people in this state; and other topical
4 health statistics publications.

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

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

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

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

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

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

7 (a) The Legislature intends that funding for the
8 Florida State Center for Health Information and Policy
9 Analysis Statistics be appropriated from the General Revenue
10 Fund.

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

20 (c) The center may charge such reasonable fees for
21 services as the agency prescribes by rule. The established
22 fees may not exceed the reasonable cost for such services.
23 Fees collected may not be used to offset annual appropriations
24 from the General Revenue Fund.

25 ~~(d) The agency shall establish a Comprehensive Health~~
26 ~~Information System Trust Fund as the repository of all funds~~
27 ~~appropriated to, and fees and grants collected for, services~~
28 ~~of the State Center for Health Statistics. Any funds, other~~
29 ~~than funds appropriated to the center from the General Revenue~~
30 ~~Fund, which are raised or collected by the agency for the~~
31 ~~operation of the center and which are not needed to meet the~~

1 ~~expenses of the center for its current fiscal year shall be~~
2 ~~available to the agency in succeeding years.~~

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

5 (a) There is established in the agency the State
6 Consumer Comprehensive Health Information and Policy System
7 Advisory Council to assist the center in reviewing the
8 comprehensive health information system, to include the
9 identification, collection, standardization, sharing, and
10 coordination of health-related data, to include fraud and
11 abuse data and professional and facility licensing data, among
12 federal, state, local, and private entities and to recommend
13 improvements for purposes of public health, policy analysis,
14 and transparency of consumer health care information ~~such~~
15 ~~system~~. The council shall consist of the following members:

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

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

20 3. An employee of the Department of Education, to be
21 appointed by the Commissioner of Education.

22 4. Ten persons, to be appointed by the Secretary of
23 Health Care Administration, representing other state and local
24 agencies, state universities, ~~the Florida Association of~~
25 business/health coalitions, local health councils,
26 professional health-care-related associations, consumers, and
27 purchasers.

28 (b) Each member of the council shall be appointed to
29 serve for a term of 2 4 years following ~~from~~ the date of
30 appointment, except the term of appointment shall end 3 years
31 following the date of appointment for members appointed in

1 2003, 2004, and 2005. ~~that~~ A vacancy shall be filled by
2 appointment for the remainder of the term, and each appointing
3 authority retains the right to reappoint members whose terms
4 of appointment have expired. ~~and except that:~~

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

8 2. ~~Two of the members initially appointed by the~~
9 ~~Director of Health Care Administration shall each be appointed~~
10 ~~for a term of 2 years.~~

11 3. ~~Two of the members initially appointed by the~~
12 ~~Director of Health Care Administration shall each be appointed~~
13 ~~for a term of 1 year.~~

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

17 (d) Members shall elect a chair and a vice chair
18 annually.

19 (e) A majority of the members constitutes a quorum,
20 and the affirmative vote of a majority of a quorum is
21 necessary to take action.

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

24 (g) Members of the council shall serve without
25 compensation but are ~~shall be~~ entitled to receive
26 reimbursement for per diem and travel expenses as provided in
27 s. 112.061.

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

30 1. Developing a mission statement, goals, and plan of
31 action, based on the guiding principles specified in s.

1 282.3032, for the identifying, collecting, standardizing,
2 sharing, and coordinating health-related data among federal,
3 state, and local government and private-sector entities.

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

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

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

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

16 408.061 Data collection; uniform systems of financial
17 reporting; information relating to physician charges;
18 confidential information; immunity.--

19 (1)

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

30 (10) The agency shall be the primary source for
31 collection and dissemination of health care data. No other

1 agency of state government may gather data from a health care
2 provider licensed or regulated under this chapter without
3 first determining if the data is currently being collected by
4 the agency and affirmatively demonstrating that it would be
5 more cost-effective for an agency of state government other
6 than the agency to gather the health care data. The secretary
7 ~~director~~ shall ensure that health care data collected by the
8 divisions within the agency is coordinated. It is the express
9 intent of the Legislature that all health care data be
10 collected by a single source within the agency and that other
11 divisions within the agency, and all other agencies of state
12 government, obtain data for analysis, regulation, and public
13 dissemination purposes from that single source. Confidential
14 information may be released to other governmental entities or
15 to parties contracting with the agency to perform agency
16 duties or functions as needed in connection with the
17 performance of the duties of the receiving entity. The
18 receiving entity or party shall retain the confidentiality of
19 such information as provided for herein.

20 Section 5. Paragraphs (h) and (j) of subsection (1)
21 and subsections (2) and (5) of section 408.062, Florida
22 Statutes, are amended to read:

23 408.062 Research, analyses, studies, and reports.--

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

29 (h) The collection of a statistically valid sample of
30 data on the retail prices charged by pharmacies for the 100 ~~50~~
31 most frequently prescribed medicines from any pharmacy

1 licensed by this state as a special study authorized by the
2 Legislature to be performed by the agency quarterly. If the
3 drug is available generically, price data shall be reported
4 for the generic drug and price data of a brand-named drug for
5 which the generic drug is the equivalent shall be reported.
6 The agency shall make available on its Internet website for
7 each pharmacy, no later than October 1, 2006 ~~2005~~, drug prices
8 for a 30-day supply at a standard dose. The data collected
9 shall be reported for each drug by pharmacy and by
10 metropolitan statistical area or region and updated quarterly.

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

1 explanation about why the data may differ from facility to
2 facility. Such public data shall be updated quarterly. The
3 agency shall submit an annual status report on the collection
4 of data and publication of health care quality measures
5 ~~performance outcome indicators~~ to the Governor, the Speaker of
6 the House of Representatives, the President of the Senate, and
7 the substantive legislative committees with the first status
8 report due January 1, 2005.

9 (2) The agency may assess annually the caesarean
10 section rate in ~~Florida~~ hospitals in this state using the
11 analysis methodology that the agency determines most
12 appropriate. The data from this assessment shall be published
13 periodically on the agency's website. ~~To assist the agency in~~
14 ~~determining the impact of this chapter on Florida hospitals'~~
15 ~~caesarean section rates, each provider hospital, as defined in~~
16 ~~s. 383.336, shall notify the agency of the date of~~
17 ~~implementation of the practice parameters and the date of the~~
18 ~~first meeting of the hospital peer review board created~~
19 ~~pursuant to this chapter. The agency shall use these dates in~~
20 ~~monitoring any change in provider hospital caesarean section~~
21 ~~rates. An annual report based on this monitoring and~~
22 ~~assessment shall be submitted to the Governor, the Speaker of~~
23 ~~the House of Representatives, and the President of the Senate~~
24 ~~by the agency, with the first annual report due January 1,~~
25 ~~1993.~~

26 (5) The agency shall develop and implement a strategy
27 for the adoption and use of electronic health records,
28 including the development of an electronic health information
29 network for the sharing of electronic health records among
30 health care facilities, health care providers, and health
31 insurers. The agency may develop rules to facilitate the

1 | functionality and protect the confidentiality of electronic
2 | health records. The agency shall report to the Governor, the
3 | Speaker of the House of Representatives, and the President of
4 | the Senate on legislative recommendations to protect the
5 | confidentiality of electronic health records.

6 | Section 6. This act shall take effect upon becoming a
7 | law.

8 |
9 | STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
10 | COMMITTEE SUBSTITUTE FOR
11 | CS for SB 1332

12 | Requires the agency to make available patient-safety
13 | indicators and inpatient quality indicators collected from
14 | health care facilities.

15 | Defines the terms "patient-safety indicators "and "inpatient
16 | quality indicators".
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