



## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. HOUSE PRINCIPLES ANALYSIS:

**Empower Families**—Expands the duties of the State Center for Health Statistics to provide more transparency in prescription drug prices by expanding the list of available online prescription drug prices from 50 to 100 drugs and provides consumers additional access to information on health care providers.

#### B. EFFECT OF PROPOSED CHANGES:

##### **Public Reporting**

House Bill 7073 on Health Care Information changes the terminology used to describe the type of measures the Agency for Health Care Administration (AHCA) publicly reports from performance outcomes to healthcare quality measures and defines those measures to include but not be limited to:

- Process measures.
- Patient safety indicators.
- Inpatient quality indicators.
- Performance measures.

The current requirements for public reporting in ss. 408.05 (3)(l) & 408.062(1)(j), F.S., use the terms “performance outcome data” or “performance outcome indicators.” There are specific references to the publication of mortality rates, complication rates and infection rates in s. 408.05 (3) (l), F.S. According to AHCA, the change in terminology and specification of various types of performance measures reflect the variety of types of measures available for public reporting and the development of new measures.

The bill includes the Centers for Disease Control and Prevention as a resource for potential standards to measure health care providers’ performance. This change adds a resource for data standards regarding hospital infections and other standards related to the performance of health care providers.

##### **State Comprehensive Health Information System Advisory Council**

The bill changes the name of the State Comprehensive Health Information System Advisory Council to the State Consumer Health Information and Policy Advisory Council and specifies certain responsibilities of the council in its advisory role regarding the development of the comprehensive health information system. According to AHCA, the change in council name will increase awareness among consumers and other interested parties regarding the council’s mission to advise AHCA regarding consumer health information.

The bill specifies that the council will advise AHCA regarding the identification, collection, standardization, sharing, and coordination of health-related data, including fraud and abuse data, and professional and facility licensing data among federal, state, local and private entities. The council will also advise AHCA regarding improvements to the comprehensive health information system for purposes of public health, policy analysis, and transparency of consumer health care information.

The bill specifies that the council's duties and responsibilities will include developing a plan for the coordination of health-related data across federal, state, and local government and private-sector entities and a review process to ensure cooperative planning among agencies that collect or maintain health-related data. The specification of Council duties clarifies the council’s role and creates

consistency with the current responsibilities of AHCA and new responsibilities related to a health information network.

In s. 408.05 (3)(l), F.S., AHCA is directed to develop, in conjunction with the council, a long-range plan for public reporting to allow consumers to compare health care services, beginning with the release of patient charges, infection rates, mortality rates, complication rates and data on health plans by the dates specified. The council's role is to advise AHCA on the method and format for public disclosure.

The bill also changes council member terms from 4 years to 2 years. However, council members may be reappointed.

### **Health Information Network**

The bill authorizes AHCA and the State Center for Health Statistics to support the development of a health information network. These support activities include developing a network in incremental steps through the initiation of pilot projects, integrating health data collected and maintained by state agencies, and providing technical assistance to pilot projects and other stakeholders participating in the development of a health information network.

The bill codifies the activities related to the grant funding of an information network. It adds responsibilities related to the integration and transfer of state data sets to a health information network.

### **Policy Analysis**

The bill changes the name of the State Center for Health Statistics to the Florida Center for Health Information and Policy Analysis (center). The bill provides that the center shall include health-related data and statistics in the development of the comprehensive health information system and shall produce health information and statistics for the development of policy recommendations.

According to AHCA, the bill changes the title and description of responsibilities to direct the Center to perform policy analysis and develop policy recommendations. It broadens the purpose of the comprehensive health information system to include the development of public policy and expands the mission of the Center.

## **CURRENT SITUATION**

### **Public Reporting**

The Agency for Health Care Administration (AHCA) currently publishes data for public use on its consumer websites. In addition to the AHCA's central website ([www.ahca@myflorida.com](http://www.ahca@myflorida.com)), AHCA publishes data on [www.FloridaHealthStat.com](http://www.FloridaHealthStat.com), [www.FloridaCompareCare.gov](http://www.FloridaCompareCare.gov) and [www.MyFloridaRx.com](http://www.MyFloridaRx.com).

The data made available on these consumer websites includes volume of cases, length-of-stay, and charges at each health care facility for groups of related diagnoses and procedures. The published data is adjusted for severity of illness or condition. Data for calendar year 2004 is currently available in an interactive format where the user selects the type of data to be viewed based on a menu of options ([www.ahca@myflorida.com/](http://www.ahca@myflorida.com/) [www.floridahealthstat.com](http://www.floridahealthstat.com)).

As of November 2005, AHCA has released, via website, the hospital readmission rates, complication rates, mortality rates, and infection rates ([www.CompareCare.gov](http://www.CompareCare.gov)). In coordination with the Attorney General's Office, retail prices for select prescription drugs have been published since June 2005 through a searchable consumer website ([www.MyFloridaRx.com](http://www.MyFloridaRx.com)).

AHCA uses the methodology developed by the Federal Agency for Healthcare Research and Quality to produce comparative consumer indicators. Licensed hospitals and ambulatory surgical centers report patient data that is used to develop the indicators.<sup>1</sup>

Pursuant to 59E-7, F.A.C., beginning in 2007 AHCA will require hospitals to report whether any secondary diagnosis contained in the records submitted to AHCA was present at admission. The additional admission data will enable the AHCA to expand and enhance reportable information on infection rates and complication rates.

The current requirements for public reporting in ss. 408.05 (3)(l) & 408.062(1)(j), F.S., use the terms "performance outcome data" or "performance outcome indicators." There are specific references to the publication of mortality rates, complication rates and infection rates in s. 408.05 (3)(l), F.S.

### **State Comprehensive Health Information System Advisory Council**

The State Comprehensive Health Information System Advisory Council was established by s. 408.05 (8), F.S. to advise AHCA regarding the collection and dissemination of health information and make recommendations for improvements. The council consists of 13 members with 10 members appointed by the Secretary of Health Care Administration, one member appointed by the Governor, one member appointed by the Chief Financial Officer, and one member appointed by the Commissioner of Education. Members are appointed for a term of four years.

Current section 408.05 (3)(l), F.S., directs AHCA to develop, in conjunction with the council, a long-range plan for public reporting to allow consumers to compare health care services, beginning with the release of patient charges, infection rates, mortality rates, complications rates and information on health plans by the dates specified. The council advises AHCA on the method and format for public disclosure.

### **Health Information Network**

Existing section 408.062(5), F.S., requires AHCA to develop a strategic plan for the adoption and use of electronic health records. AHCA is authorized to develop rules to facilitate the functionality and protect the confidentiality of electronic health records.

AHCA provides staff support to the Governor's Health Information Infrastructure Advisory Board which was established by Executive Order 04-93 in May of 2004. The Advisory Board advises and supports AHCA as it develops and implements a strategy for the adoption and use of electronic health records and creates a plan to promote the development and implementation of a health information infrastructure. Under current law, the board may continue to operate until June of 2007.

AHCA received a non-recurring appropriation of \$1.5 million in fiscal year 2005-2006 to provide grants that would help develop a Florida health information network.

### **Policy Analysis**

Currently, the State Center for Health Statistics is authorized to produce publications on topical health policy issues in s. 408.05 (5)(a), F.S., although there is no specific requirement that AHCA perform public policy analysis or develop policy recommendations in this section. AHCA is required to report certain research studies in s. 408.062, F.S., including a report on health expenditures and a study of emergency department utilization and costs.

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<sup>1</sup> Data reported to AHCA is specified in 59B-9.010 through 59B-9.023, F.A.C. and 59E-7.011 through 59E-7.016, F.A.C. as authorized in s. 408.061, F.S.

C. SECTION DIRECTORY:

**Section 1.** Provides for a name citation as the, “Coordinated Health Care Information and Transparency Act of 2006.”

**Section 2.** Provides the purpose of the act is to provide for better coordination of health information for purposes of public health, policy analysis, and transparency of consumer health information.

**Section 3. –** Amends s. 408.05, F.S., to change the title of the State Center for Health Statistics to Florida Center for Health Information and Policy Analysis. The act changes a number of provisions in current statute to better coordinate health information. Some of the changes made include:

- Specifies that the State Center for Health Statistics’s role is to identify the best available data sources and coordinate the compilation of health-related data and statistics;
- Renames the State Comprehensive Health Information System Advisory Council to the State Consumer Health Information and Policy Advisory Council;
- Specifies duties and responsibility of the Council;
- Authorizes the Agency for Health Care Administration (AHCA) to manage and monitor grants to advance a health information network; and
- Requires AHCA to oversee and manage data received from other state agencies.

**Section 4.** Amends s. 408.061, F.S., to specify that data be submitted by health care providers pursuant to the section may include their associations with professional organizations and their specialty board affiliations.

**Section 5.** Amends s. 408.062, F.S., to increase the number of frequently prescribed medicines that will be posted on AHCA’s website October 1, 2006 from 50 medicines to 100 medicines; require that performance indicators will be made available on AHCA’s website, and that AHCA will submit an annual report on healthcare quality measures; and to provide that the required cesarean section report will be published periodically instead of annually on AHCA’s website.

**Section 6.** Amends s. 20.42, F.S., to change the name of the State Center for Health Statistics to the Florida Center for Health Statistics.

**Section 7 through section 16.** Amends ss. 381.001, 395.602, 395.6025, 408.07, & 408.18, 381.026, 395.301, 465.0244, 627.6499, and 641.54, F.S., to provide cross references.

**Section 17.** Provides that the bill will take effect upon becoming law.

## II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

The bill requires the agency to administer, manage, and monitor grants. Nonrecurring funds however, were used in the current fiscal year for this purpose. The proposed House General Appropriations Act provides \$1.3 million in recurring funds for this purpose.

### III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not require counties or municipalities to spend funds or take action requiring the expenditure of funds. This bill does not reduce the percentage of state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenue.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

The AHCA has sufficient rulemaking authority to implement the provisions in the bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

### IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On February 22, 2006 the Health Care Regulation Committee adopted 5 amendments to the bill.

**Amendment 1:** Clarified that some health information is not to be disclosed publicly.

**Amendment 2:** Clarified that the Florida Center for Health Information and Policy Analysis can provide technical assistance relating to the development of a health information network and electronic medical records.

**Amendment 3:** Restored some original statutory language that protects health care providers from disclosing extra information outside of the information that is required to be reported by law.

**Amendment 4:** Clarified that members of the State Consumer Health Information and Policy Advisory Council may be reappointed.

**Amendment 5:** Authorized the AHCA to develop an electronic health information network for the sharing of electronic health records among health care facilities, health care providers, and health insurers.