

1 A bill to be entitled

2 An act relating to health care information; providing a
3 short title; providing purpose; amending s. 408.05, F.S.;
4 renaming the State Center for Health Statistics; revising
5 criteria for collection and use of certain health-related
6 data; providing responsibilities of the Agency for Health
7 Care Administration; providing for agency consultation
8 with the State Consumer Health Information and Policy
9 Advisory Council for the dissemination of certain consumer
10 information; requiring the Florida Center for Health
11 Information and Policy Analysis to provide certain
12 technical assistance services; authorizing the agency to
13 monitor certain grants; removing a provision that
14 establishes the Comprehensive Health Information System
15 Trust Fund as the repository of certain funds; renaming
16 the State Comprehensive Health Information System Advisory
17 Council; providing for duties and responsibilities of the
18 State Consumer Health Information and Policy Advisory
19 Council; providing for membership, terms, officers, and
20 meetings; amending s. 408.061, F.S.; providing for health
21 care providers to submit additional data to the agency;
22 correcting a reference; amending s. 408.062, F.S.;
23 revising provisions relating to availability of specified
24 information on the agency's Internet website; requiring a
25 report; removing an obsolete provision; authorizing the
26 agency to develop an electronic health information
27 network; amending ss. 20.42, 381.001, 395.602, 395.6025,
28 408.07, and 408.18, F.S.; conforming references to changes

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29 | made by the act; amending ss. 381.026, 395.301, 465.0244,
 30 | 627.6499, and 641.54, F.S.; conforming a cross-reference;
 31 | providing an effective date.

32 |

33 | Be It Enacted by the Legislature of the State of Florida:

34 |

35 | Section 1. This act may be cited as the "Coordinated
 36 | Health Care Information and Transparency Act of 2006."

37 | Section 2. The purpose of this act is to provide better
 38 | coordination of health information for purposes of public
 39 | health, policy analysis, and transparency of consumer health
 40 | care information.

41 | Section 3. Section 408.05, Florida Statutes, is amended to
 42 | read:

43 | 408.05 Florida State Center for Health Information and
 44 | Policy Analysis Statistics.--

45 | (1) ESTABLISHMENT.--The agency shall establish a Florida
 46 | State Center for Health Information and Policy Analysis
 47 | Statistics. The center shall establish a comprehensive health
 48 | information system to provide for the collection, compilation,
 49 | coordination, analysis, indexing, dissemination, and utilization
 50 | of both purposefully collected and extant health-related data
 51 | and statistics. The center shall be staffed with public health
 52 | experts, biostatisticians, information system analysts, health
 53 | policy experts, economists, and other staff necessary to carry
 54 | out its functions.

55 | (2) HEALTH-RELATED DATA STATISTICS.--The comprehensive
 56 | health information system operated by the Florida State Center

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57 | for Health Information and Policy Analysis ~~Statistics~~ shall
58 | identify the best available data sources and coordinate the
59 | compilation of extant health-related data and statistics and
60 | purposefully collect data on:

61 | (a) The extent and nature of illness and disability of the
62 | state population, including life expectancy, the incidence of
63 | various acute and chronic illnesses, and infant and maternal
64 | morbidity and mortality.

65 | (b) The impact of illness and disability of the state
66 | population on the state economy and on other aspects of the
67 | well-being of the people in this state.

68 | (c) Environmental, social, and other health hazards.

69 | (d) Health knowledge and practices of the people in this
70 | state and determinants of health and nutritional practices and
71 | status.

72 | (e) Health resources, including physicians, dentists,
73 | nurses, and other health professionals, by specialty and type of
74 | practice and acute, long-term care and other institutional care
75 | facility supplies and specific services provided by hospitals,
76 | nursing homes, home health agencies, and other health care
77 | facilities.

78 | (f) Utilization of health care by type of provider.

79 | (g) Health care costs and financing, including trends in
80 | health care prices and costs, the sources of payment for health
81 | care services, and federal, state, and local expenditures for
82 | health care.

83 | (h) Family formation, growth, and dissolution.

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

86 (j) The quality of care provided by various health care
87 providers.

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

92 (a) Coordinate the activities of state agencies involved
93 in the design and implementation of the comprehensive health
94 information system.

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

97 (c) Review the statistical activities of state agencies to
98 ensure ~~the Department of Health to assure~~ that they are
99 consistent with the comprehensive health information system.

100 (d) Develop written agreements with local, state, and
101 federal agencies for the sharing of health-care-related data or
102 using the facilities and services of such agencies. State
103 agencies, local health councils, and other agencies under state
104 ~~contract with the Department of Health~~ shall assist the center
105 in obtaining, compiling, and transferring health-care-related
106 data maintained by state and local agencies. Written agreements
107 must specify the types, methods, and periodicity of data
108 exchanges and specify the types of data that will be transferred
109 to the center.

110 (e) ~~The agency shall~~ Establish by rule the types of data
111 collected, compiled, processed, used, or shared. Decisions

112 regarding center data sets should be made based on consultation
 113 with the State Consumer Comprehensive Health Information and
 114 Policy System Advisory Council and other public and private
 115 users regarding the types of data which should be collected and
 116 their uses.

117 ~~(f)~~ The center shall establish standardized means for
 118 collecting health information and statistics under laws and
 119 rules administered by the agency.

120 (f)~~(g)~~ Establish minimum health-care-related data sets
 121 which are necessary on a continuing basis to fulfill the
 122 collection requirements of the center and which shall be used by
 123 state agencies in collecting and compiling health-care-related
 124 data. The agency shall periodically review ongoing health care
 125 data collections of the Department of Health and other state
 126 agencies to determine if the collections are being conducted in
 127 accordance with the established minimum sets of data.

128 (g)~~(h)~~ Establish advisory standards to ensure ~~assure~~ the
 129 quality of health statistical and epidemiological data
 130 collection, processing, and analysis by local, state, and
 131 private organizations.

132 (h)~~(i)~~ Prescribe standards for the publication of health-
 133 care-related data reported pursuant to this section which ensure
 134 the reporting of accurate, valid, reliable, complete, and
 135 comparable data. Such standards should include advisory warnings
 136 to users of the data regarding the status and quality of any
 137 data reported by or available from the center.

138 (i)~~(j)~~ Prescribe standards for the maintenance and
 139 preservation of the center's data. This should include methods

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140 for archiving data, retrieval of archived data, and data editing
 141 and verification.

142 ~~(j)-(k)~~ Ensure that strict quality control measures are
 143 maintained for the dissemination of data through publications,
 144 studies, or user requests.

145 ~~(k)-(l)~~ Develop, in conjunction with the State Consumer
 146 ~~Comprehensive~~ Health Information and Policy System Advisory
 147 Council, and implement a long-range plan for making available
 148 health care quality measures performance outcome and financial
 149 data that will allow consumers to compare health care services.
 150 The health care quality measures performance outcomes and
 151 financial data the agency must make available shall include, but
 152 is not limited to, pharmaceuticals, physicians, health care
 153 facilities, and health plans and managed care entities. The
 154 agency shall submit the initial plan to the Governor, the
 155 President of the Senate, and the Speaker of the House of
 156 Representatives by January 1, 2006, and shall update the plan
 157 and report on the status of its implementation annually
 158 thereafter. The agency shall also make the plan and status
 159 report available to the public on its Internet website. As part
 160 of the plan, the agency shall identify the process and
 161 timeframes for implementation, any barriers to implementation,
 162 and recommendations of changes in the law that may be enacted by
 163 the Legislature to eliminate the barriers. As preliminary
 164 elements of the plan, the agency shall:

- 165 1. Make available health care quality measures that
 166 include, but are not limited to, process measures, patient
 167 safety measures, inpatient quality indicators, performance

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168 measures, ~~outcome~~ and patient charge data collected from health
169 care facilities pursuant to s. 408.061(1)(a) and (2). The agency
170 shall determine which conditions, ~~and~~ procedures, health care
171 quality measures ~~performance outcomes~~, and patient charge data
172 to disclose based upon input from the council. When determining
173 which conditions and procedures are to be disclosed, the council
174 and the agency shall consider variation in costs, variation in
175 outcomes, and magnitude of variations and other relevant
176 information. When determining which health care quality measures
177 ~~performance outcomes~~ to disclose, the agency:

178 a. Shall consider such factors as volume of cases; average
179 patient charges; average length of stay; complication rates;
180 mortality rates; and infection rates, among others, which shall
181 be adjusted for case mix and severity, if applicable.

182 b. May consider such additional measures that are adopted
183 by the Centers for Medicare and Medicaid Studies, National
184 Quality Forum, the Joint Commission on Accreditation of
185 Healthcare Organizations, the Agency for Healthcare Research and
186 Quality, Centers for Disease Control and Prevention, or a
187 similar national entity that establishes standards to measure
188 the performance of health care providers, or by other states.

189
190 When determining which patient charge data to disclose, the
191 agency shall consider such measures as average charge, average
192 net revenue per adjusted patient day, average cost per adjusted
193 patient day, and average cost per admission, among others.

194 2. Make available performance measures, benefit design,
195 and premium cost data from health plans licensed pursuant to

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196 chapter 627 or chapter 641. The agency shall determine which
197 health care quality measures ~~performance outcome~~ and member and
198 subscriber cost data to disclose, based upon input from the
199 council. When determining which data to disclose, the agency
200 shall consider information that may be required by either
201 individual or group purchasers to assess the value of the
202 product, which may include membership satisfaction, quality of
203 care, current enrollment or membership, coverage areas,
204 accreditation status, premium costs, plan costs, premium
205 increases, range of benefits, copayments and deductibles,
206 accuracy and speed of claims payment, credentials of physicians,
207 number of providers, names of network providers, and hospitals
208 in the network. Health plans shall make available to the agency
209 any such data or information that is not currently reported to
210 the agency or the office.

211 3. Determine the method and format for public disclosure
212 of data reported pursuant to this paragraph. The agency shall
213 make its determination based upon input from the State Consumer
214 ~~Comprehensive~~ Health Information and Policy ~~System~~ Advisory
215 Council. At a minimum, the data shall be made available on the
216 agency's Internet website in a manner that allows consumers to
217 conduct an interactive search that allows them to view and
218 compare the information for specific providers. The website must
219 include such additional information as is determined necessary
220 to ensure that the website enhances informed decisionmaking
221 among consumers and health care purchasers, which shall include,
222 at a minimum, appropriate guidance on how to use the data and an
223 explanation of why the data may vary from provider to provider.

224 The data specified in subparagraph 1. shall be released no later
 225 than January 1, 2006, for the reporting of infection rates, and
 226 no later than October 1, 2005, for mortality rates and
 227 complication rates. The data specified in subparagraph 2. shall
 228 be released no later than October 1, 2006.

229 (4) TECHNICAL ASSISTANCE.--

230 (a) The center shall provide technical assistance to
 231 persons or organizations engaged in health planning activities
 232 in the effective use of statistics collected and compiled by the
 233 center. The center shall also provide the following additional
 234 technical assistance services:

235 1.~~(a)~~ Establish procedures identifying the circumstances
 236 under which, the places at which, the persons from whom, and the
 237 methods by which a person may secure data from the center,
 238 including procedures governing requests, the ordering of
 239 requests, timeframes for handling requests, and other procedures
 240 necessary to facilitate the use of the center's data. To the
 241 extent possible, the center should provide current data timely
 242 in response to requests from public or private agencies.

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

247 3.~~(c)~~ Identify health care data gaps and provide technical
 248 assistance to ~~seek cooperative agreements with~~ other public or
 249 private organizations for meeting documented health care data
 250 needs.

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251 ~~4.(d)~~ Assist other organizations in developing statistical
252 abstracts of their data sets that could be used by the center.

253 ~~5.(e)~~ Provide statistical support to state agencies with
254 regard to the use of databases maintained by the center.

255 ~~6.(f)~~ To the extent possible, respond to multiple requests
256 for information not currently collected by the center or
257 available from other sources by initiating data collection.

258 ~~7.(g)~~ Maintain detailed information on data maintained by
259 other local, state, federal, and private agencies in order to
260 advise those who use the center of potential sources of data
261 which are requested but which are not available from the center.

262 ~~8.(h)~~ Respond to requests for data which are not available
263 in published form by initiating special computer runs on data
264 sets available to the center.

265 9. Monitor innovations in health information technology,
266 informatics, and the exchange of health information and maintain
267 a repository of technical resources to support the development
268 of a health information network.

269 (b) The agency shall administer, manage, and monitor
270 grants to not-for-profit organizations, regional health
271 information organizations, public health departments, or state
272 agencies that submit proposals for planning, implementation, or
273 training projects to advance the development of a health
274 information network. Any grant contract shall be evaluated to
275 ensure the effective outcome of the health information project.

276 (c) The agency shall initiate, oversee, manage, and
277 evaluate the integration of health care data from each state
278 agency that collects, stores, and reports on health care issues

279 and make that data available to any health care practitioner
 280 through a state health information network.

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

285 (a) The center shall publish and make available
 286 periodically to agencies and individuals health statistics
 287 publications of general interest, including health plan consumer
 288 reports and health maintenance organization member satisfaction
 289 surveys ~~HMO report cards~~; publications providing health
 290 statistics on topical health policy issues; publications that
 291 provide health status profiles of the people in this state; and
 292 other topical health statistics publications.

293 (b) The center shall publish, make available, and
 294 disseminate, promptly and as widely as practicable, the results
 295 of special health surveys, health care research, and health care
 296 evaluations conducted or supported under this section. Any
 297 publication by the center must include a statement of the
 298 limitations on the quality, accuracy, and completeness of the
 299 data.

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

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

305 (e) The center shall be responsible, to the extent
 306 resources are available, for conducting a variety of special

307 studies and surveys to expand the health care information and
 308 statistics available for health policy analyses, particularly
 309 for the review of public policy issues. The center shall develop
 310 a process by which users of the center's data are periodically
 311 surveyed regarding critical data needs and the results of the
 312 survey considered in determining which special surveys or
 313 studies will be conducted. The center shall select problems in
 314 health care for research, policy analyses, or special data
 315 collections on the basis of their local, regional, or state
 316 importance; the unique potential for definitive research on the
 317 problem; and opportunities for application of the study
 318 findings.

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

324 (7) BUDGET; FEES; ~~TRUST FUND~~---

325 (a) The Legislature intends that funding for the Florida
 326 State Center for Health Information and Policy Analysis
 327 ~~Statistics~~ be appropriated from the General Revenue Fund.

328 (b) The Florida State Center for Health Information and
 329 Policy Analysis Statistics may apply for and receive and accept
 330 grants, gifts, and other payments, including property and
 331 services, from any governmental or other public or private
 332 entity or person and make arrangements as to the use of same,
 333 including the undertaking of special studies and other projects
 334 relating to health-care-related topics. Funds obtained pursuant

335 to this paragraph may not be used to offset annual
 336 appropriations from the General Revenue Fund.

337 (c) The center may charge such reasonable fees for
 338 services as the agency prescribes by rule. The established fees
 339 may not exceed the reasonable cost for such services. Fees
 340 collected may not be used to offset annual appropriations from
 341 the General Revenue Fund.

342 ~~(d) The agency shall establish a Comprehensive Health
 343 Information System Trust Fund as the repository of all funds
 344 appropriated to, and fees and grants collected for, services of
 345 the State Center for Health Statistics. Any funds, other than
 346 funds appropriated to the center from the General Revenue Fund,
 347 which are raised or collected by the agency for the operation of
 348 the center and which are not needed to meet the expenses of the
 349 center for its current fiscal year shall be available to the
 350 agency in succeeding years.~~

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

353 (a) There is established in the agency the State Consumer
 354 ~~Comprehensive~~ Health Information and Policy System Advisory
 355 Council to assist the center in reviewing the comprehensive
 356 health information system, including the identification,
 357 collection, standardization, sharing, and coordination of
 358 health-related data, fraud and abuse data, and professional and
 359 facility licensing data among federal, state, local, and private
 360 entities and to recommend improvements for purposes of public
 361 health, policy analysis, and transparency of consumer health

362 care information ~~such system~~. The council shall consist of the
 363 following members:

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

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

368 3. An employee of the Department of Education, to be
 369 appointed by the Commissioner of Education.

370 4. Ten persons, to be appointed by the Secretary of Health
 371 Care Administration, representing other state and local
 372 agencies, state universities, business and health ~~the Florida~~
 373 ~~Association of Business/Health~~ coalitions, local health
 374 councils, professional health-care-related associations,
 375 consumers, and purchasers.

376 (b) Each member of the council shall be appointed to serve
 377 for a term of 2 4 years following ~~from~~ the date of appointment,
 378 except the term of appointment shall end 3 years following the
 379 date of appointment for members appointed in 2003, 2004, and
 380 2005. ~~that~~ A vacancy shall be filled by appointment for the
 381 remainder of the term, and each appointing authority retains the
 382 right to reappoint members whose terms of appointment have
 383 expired. ~~and except that:~~

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

387 2. ~~Two of the members initially appointed by the Director~~
 388 ~~of Health Care Administration shall each be appointed for a term~~
 389 ~~of 2 years.~~

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390 ~~3. Two of the members initially appointed by the Director~~
391 ~~of Health Care Administration shall each be appointed for a term~~
392 ~~of 1 year.~~

393 (c) The council may meet at the call of its chair, at the
394 request of the agency department, or at the request of a
395 majority of its membership, but the council must meet at least
396 quarterly.

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

398 (e) A majority of the members constitutes a quorum, and
399 the affirmative vote of a majority of a quorum is necessary to
400 take action.

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

403 (g) Members of the council shall serve without
404 compensation but shall be entitled to receive reimbursement for
405 per diem and travel expenses as provided in s. 112.061.

406 (h) The council's duties and responsibilities include, but
407 are not limited to, the following:

408 1. To develop a mission statement, goals, and a plan of
409 action based on the guiding principles specified in s. 282.3032
410 for the identification, collection, standardization, sharing,
411 and coordination of health-related data across federal, state,
412 and local government and private-sector entities.

413 2. To develop a review process to ensure cooperative
414 planning among agencies that collect or maintain health-related
415 data.

416 3. To create ad hoc issue-oriented technical workgroups on
417 an as-needed basis to make recommendations to the council.

418 (9) APPLICATION TO OTHER AGENCIES.--Nothing in this
419 section shall limit, restrict, affect, or control the
420 collection, analysis, release, or publication of data by any
421 state agency pursuant to its statutory authority, duties, or
422 responsibilities.

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

425 408.061 Data collection; uniform systems of financial
426 reporting; information relating to physician charges;
427 confidential information; immunity.--

428 (1) The agency shall require the submission by health care
429 facilities, health care providers, and health insurers of data
430 necessary to carry out the agency's duties. Specifications for
431 data to be collected under this section shall be developed by
432 the agency with the assistance of technical advisory panels
433 including representatives of affected entities, consumers,
434 purchasers, and such other interested parties as may be
435 determined by the agency.

436 (b) Data to be submitted by health care providers may
437 include, but are not limited to: professional organization and
438 specialty board affiliations, Medicare and Medicaid
439 participation, types of services offered to patients, amount of
440 revenue and expenses of the health care provider, and such other
441 data which are reasonably necessary to study utilization
442 patterns. Data submitted shall be certified by the appropriate
443 duly authorized representative or employee of the health care
444 provider that the information submitted is true and accurate.

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445 (10) The agency shall be the primary source for collection
446 and dissemination of health care data. No other agency of state
447 government may gather data from a health care provider licensed
448 or regulated under this chapter without first determining if the
449 data is currently being collected by the agency and
450 affirmatively demonstrating that it would be more cost-effective
451 for an agency of state government other than the agency to
452 gather the health care data. The secretary ~~director~~ shall ensure
453 that health care data collected by the divisions within the
454 agency is coordinated. It is the express intent of the
455 Legislature that all health care data be collected by a single
456 source within the agency and that other divisions within the
457 agency, and all other agencies of state government, obtain data
458 for analysis, regulation, and public dissemination purposes from
459 that single source. Confidential information may be released to
460 other governmental entities or to parties contracting with the
461 agency to perform agency duties or functions as needed in
462 connection with the performance of the duties of the receiving
463 entity. The receiving entity or party shall retain the
464 confidentiality of such information as provided for herein.

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

468 408.062 Research, analyses, studies, and reports.--

469 (1) The agency shall conduct research, analyses, and
470 studies relating to health care costs and access to and quality
471 of health care services as access and quality are affected by

472 changes in health care costs. Such research, analyses, and
473 studies shall include, but not be limited to:

474 (h) The collection of a statistically valid sample of data
475 on the retail prices charged by pharmacies for the 100 ~~50~~ most
476 frequently prescribed medicines from any pharmacy licensed by
477 this state as a special study authorized by the Legislature to
478 be performed by the agency quarterly. If the drug is available
479 generically, price data shall be reported for the generic drug
480 and price data of a brand-named drug for which the generic drug
481 is the equivalent shall be reported. The agency shall make
482 available on its Internet website for each pharmacy, no later
483 than October 1, 2006 ~~2005~~, drug prices for a 30-day supply at a
484 standard dose. The data collected shall be reported for each
485 drug by pharmacy and by metropolitan statistical area or region
486 and updated quarterly.

487 (j) The making available on its Internet website beginning
488 no later than October 1, 2004, and in a hard-copy format upon
489 request, of patient charge, volumes, length of stay, and
490 performance ~~outcome~~ indicators collected from health care
491 facilities pursuant to s. 408.061(1)(a) for specific medical
492 conditions, surgeries, and procedures provided in inpatient and
493 outpatient facilities as determined by the agency. In making the
494 determination of specific medical conditions, surgeries, and
495 procedures to include, the agency shall consider such factors as
496 volume, severity of the illness, urgency of admission,
497 individual and societal costs, and whether the condition is
498 acute or chronic. Performance ~~outcome~~ indicators shall be risk
499 adjusted or severity adjusted, as applicable, using nationally

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500 recognized risk adjustment methodologies or software consistent
501 with the standards of the Agency for Healthcare Research and
502 Quality and as selected by the agency. The website shall also
503 provide an interactive search that allows consumers to view and
504 compare the information for specific facilities, a map that
505 allows consumers to select a county or region, definitions of
506 all of the data, descriptions of each procedure, and an
507 explanation about why the data may differ from facility to
508 facility. Such public data shall be updated quarterly. The
509 agency shall submit an annual status report on the collection of
510 data and publication of health care quality measures performance
511 ~~outcome indicators~~ to the Governor, the Speaker of the House of
512 Representatives, the President of the Senate, and the
513 substantive legislative committees with the first status report
514 due January 1, 2005.

515 (2) The agency may assess annually the caesarean section
516 rate in Florida hospitals using the analysis methodology that
517 the agency determines most appropriate. The data from this
518 assessment shall be published periodically on the agency's
519 Internet website. ~~To assist the agency in determining the impact~~
520 ~~of this chapter on Florida hospitals' caesarean section rates,~~
521 ~~each provider hospital, as defined in s. 383.336, shall notify~~
522 ~~the agency of the date of implementation of the practice~~
523 ~~parameters and the date of the first meeting of the hospital~~
524 ~~peer review board created pursuant to this chapter. The agency~~
525 ~~shall use these dates in monitoring any change in provider~~
526 ~~hospital caesarean section rates. An annual report based on this~~
527 ~~monitoring and assessment shall be submitted to the Governor,~~

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528 ~~the Speaker of the House of Representatives, and the President~~
 529 ~~of the Senate by the agency, with the first annual report due~~
 530 ~~January 1, 1993.~~

531 (5) The agency shall develop and implement a strategy for
 532 the adoption and use of electronic health records, including the
 533 development of an electronic health information network for the
 534 sharing of electronic health records among health care
 535 facilities, health care providers, and health insurers. The
 536 agency may develop rules to facilitate the functionality and
 537 protect the confidentiality of electronic health records. The
 538 agency shall report to the Governor, the Speaker of the House of
 539 Representatives, and the President of the Senate on legislative
 540 recommendations to protect the confidentiality of electronic
 541 health records.

542 Section 6. Subsection (3) of section 20.42, Florida
 543 Statutes, is amended to read:

544 20.42 Agency for Health Care Administration.--

545 (3) The department shall be the chief health policy and
 546 planning entity for the state. The department is responsible for
 547 health facility licensure, inspection, and regulatory
 548 enforcement; investigation of consumer complaints related to
 549 health care facilities and managed care plans; the
 550 implementation of the certificate of need program; the operation
 551 of the Florida State Center for Health Information and Policy
 552 Analysis Statistics; the administration of the Medicaid program;
 553 the administration of the contracts with the Florida Healthy
 554 Kids Corporation; the certification of health maintenance
 555 organizations and prepaid health clinics as set forth in part

556 III of chapter 641; and any other duties prescribed by statute
 557 or agreement.

558 Section 7. Subsection (3) of section 381.001, Florida
 559 Statutes, is amended to read:

560 381.001 Legislative intent; public health system.--

561 (3) It is, furthermore, the intent of the Legislature that
 562 the public health system include comprehensive planning, data
 563 collection, technical support, and health resource development
 564 functions. These functions include, but are not limited to,
 565 state laboratory and pharmacy services, the state vital
 566 statistics system, the Florida State Center for Health
 567 Information and Policy Analysis Statistics, emergency medical
 568 services coordination and support, and recruitment, retention,
 569 and development of preventive and primary health care
 570 professionals and managers.

571 Section 8. Paragraph (e) of subsection (2) of section
 572 395.602, Florida Statutes, is amended to read:

573 395.602 Rural hospitals.--

574 (2) DEFINITIONS.--As used in this part:

575 (e) "Rural hospital" means an acute care hospital licensed
 576 under this chapter, having 100 or fewer licensed beds and an
 577 emergency room, which is:

578 1. The sole provider within a county with a population
 579 density of no greater than 100 persons per square mile;

580 2. An acute care hospital, in a county with a population
 581 density of no greater than 100 persons per square mile, which is
 582 at least 30 minutes of travel time, on normally traveled roads

583 under normal traffic conditions, from any other acute care
 584 hospital within the same county;

585 3. A hospital supported by a tax district or subdistrict
 586 whose boundaries encompass a population of 100 persons or fewer
 587 per square mile;

588 4. A hospital in a constitutional charter county with a
 589 population of over 1 million persons that has imposed a local
 590 option health service tax pursuant to law and in an area that
 591 was directly impacted by a catastrophic event on August 24,
 592 1992, for which the Governor of Florida declared a state of
 593 emergency pursuant to chapter 125, and has 120 beds or less that
 594 serves an agricultural community with an emergency room
 595 utilization of no less than 20,000 visits and a Medicaid
 596 inpatient utilization rate greater than 15 percent;

597 5. A hospital with a service area that has a population of
 598 100 persons or fewer per square mile. As used in this
 599 subparagraph, the term "service area" means the fewest number of
 600 zip codes that account for 75 percent of the hospital's
 601 discharges for the most recent 5-year period, based on
 602 information available from the hospital inpatient discharge
 603 database in the Florida State Center for Health Information and
 604 Policy Analysis Statistics at the Agency for Health Care
 605 Administration; or

606 6. A hospital designated as a critical access hospital, as
 607 defined in s. 408.07(15).

608
 609 Population densities used in this paragraph must be based upon
 610 the most recently completed United States census. A hospital

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611 that received funds under s. 409.9116 for a quarter beginning no
612 later than July 1, 2002, is deemed to have been and shall
613 continue to be a rural hospital from that date through June 30,
614 2012, if the hospital continues to have 100 or fewer licensed
615 beds and an emergency room, or meets the criteria of
616 subparagraph 4. An acute care hospital that has not previously
617 been designated as a rural hospital and that meets the criteria
618 of this paragraph shall be granted such designation upon
619 application, including supporting documentation to the Agency
620 for Health Care Administration.

621 Section 9. Section 395.6025, Florida Statutes, is amended
622 to read:

623 395.6025 Rural hospital replacement
624 facilities.--Notwithstanding the provisions of s. 408.036, a
625 hospital defined as a statutory rural hospital in accordance
626 with s. 395.602, or a not-for-profit operator of rural
627 hospitals, is not required to obtain a certificate of need for
628 the construction of a new hospital located in a county with a
629 population of at least 15,000 but no more than 18,000 and a
630 density of less than 30 persons per square mile, or a
631 replacement facility, provided that the replacement, or new,
632 facility is located within 10 miles of the site of the currently
633 licensed rural hospital and within the current primary service
634 area. As used in this section, the term "service area" means the
635 fewest number of zip codes that account for 75 percent of the
636 hospital's discharges for the most recent 5-year period, based
637 on information available from the hospital inpatient discharge
638 database in the Florida State Center for Health Information and

639 | Policy Analysis Statistics ~~Statistics~~ at the Agency for Health Care
 640 | Administration.

641 | Section 10. Paragraph (d) of subsection (43) of section
 642 | 408.07, Florida Statutes, is amended to read:

643 | 408.07 Definitions.--As used in this chapter, with the
 644 | exception of ss. 408.031-408.045, the term:

645 | (43) "Rural hospital" means an acute care hospital
 646 | licensed under chapter 395, having 100 or fewer licensed beds
 647 | and an emergency room, and which is:

648 | (d) A hospital with a service area that has a population
 649 | of 100 persons or fewer per square mile. As used in this
 650 | paragraph, the term "service area" means the fewest number of
 651 | zip codes that account for 75 percent of the hospital's
 652 | discharges for the most recent 5-year period, based on
 653 | information available from the hospital inpatient discharge
 654 | database in the Florida State Center for Health Information and
 655 | Policy Analysis Statistics ~~Statistics~~ at the Agency for Health Care
 656 | Administration; or

657 |
 658 | Population densities used in this subsection must be based upon
 659 | the most recently completed United States census. A hospital
 660 | that received funds under s. 409.9116 for a quarter beginning no
 661 | later than July 1, 2002, is deemed to have been and shall
 662 | continue to be a rural hospital from that date through June 30,
 663 | 2012, if the hospital continues to have 100 or fewer licensed
 664 | beds and an emergency room, or meets the criteria of s.
 665 | 395.602(2)(e)4. An acute care hospital that has not previously
 666 | been designated as a rural hospital and that meets the criteria

667 of this subsection shall be granted such designation upon
 668 application, including supporting documentation, to the Agency
 669 for Health Care Administration.

670 Section 11. Paragraph (a) of subsection (4) of section
 671 408.18, Florida Statutes, is amended to read:

672 408.18 Health Care Community Antitrust Guidance Act;
 673 antitrust no-action letter; market-information collection and
 674 education.--

675 (4) (a) Members of the health care community who seek
 676 antitrust guidance may request a review of their proposed
 677 business activity by the Attorney General's office. In
 678 conducting its review, the Attorney General's office may seek
 679 whatever documentation, data, or other material it deems
 680 necessary from the Agency for Health Care Administration, the
 681 Florida State Center for Health Information and Policy Analysis
 682 ~~Statistics~~, and the Office of Insurance Regulation of the
 683 Financial Services Commission.

684 Section 12. Paragraph (c) of subsection (4) of section
 685 381.026, Florida Statutes, is amended to read:

686 381.026 Florida Patient's Bill of Rights and
 687 Responsibilities.--

688 (4) RIGHTS OF PATIENTS.--Each health care facility or
 689 provider shall observe the following standards:

690 (c) Financial information and disclosure.--

691 1. A patient has the right to be given, upon request, by
 692 the responsible provider, his or her designee, or a
 693 representative of the health care facility full information and

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694 necessary counseling on the availability of known financial
695 resources for the patient's health care.

696 2. A health care provider or a health care facility shall,
697 upon request, disclose to each patient who is eligible for
698 Medicare, in advance of treatment, whether the health care
699 provider or the health care facility in which the patient is
700 receiving medical services accepts assignment under Medicare
701 reimbursement as payment in full for medical services and
702 treatment rendered in the health care provider's office or
703 health care facility.

704 3. A health care provider or a health care facility shall,
705 upon request, furnish a person, prior to provision of medical
706 services, a reasonable estimate of charges for such services.
707 Such reasonable estimate shall not preclude the health care
708 provider or health care facility from exceeding the estimate or
709 making additional charges based on changes in the patient's
710 condition or treatment needs.

711 4. Each licensed facility not operated by the state shall
712 make available to the public on its Internet website or by other
713 electronic means a description of and a link to the performance
714 outcome and financial data that is published by the agency
715 pursuant to s. 408.05(3) (k) ~~(l)~~. The facility shall place a
716 notice in the reception area that such information is available
717 electronically and the website address. The licensed facility
718 may indicate that the pricing information is based on a
719 compilation of charges for the average patient and that each
720 patient's bill may vary from the average depending upon the
721 severity of illness and individual resources consumed. The

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722 licensed facility may also indicate that the price of service is
 723 negotiable for eligible patients based upon the patient's
 724 ability to pay.

725 5. A patient has the right to receive a copy of an
 726 itemized bill upon request. A patient has a right to be given an
 727 explanation of charges upon request.

728 Section 13. Subsection (10) of section 395.301, Florida
 729 Statutes, is amended to read:

730 395.301 Itemized patient bill; form and content prescribed
 731 by the agency.--

732 (10) Each licensed facility shall make available on its
 733 Internet website a link to the performance outcome and financial
 734 data that is published by the Agency for Health Care
 735 Administration pursuant to s. 408.05(3) (k) ~~(l)~~. The facility
 736 shall place a notice in the reception area that the information
 737 is available electronically and the facility's Internet website
 738 address.

739 Section 14. Section 465.0244, Florida Statutes, is amended
 740 to read:

741 465.0244 Information disclosure.--Every pharmacy shall
 742 make available on its Internet website a link to the performance
 743 outcome and financial data that is published by the Agency for
 744 Health Care Administration pursuant to s. 408.05(3) (k) ~~(l)~~ and
 745 shall place in the area where customers receive filled
 746 prescriptions notice that such information is available
 747 electronically and the address of its Internet website.

748 Section 15. Subsection (2) of section 627.6499, Florida
 749 Statutes, is amended to read:

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750 627.6499 Reporting by insurers and third-party
751 administrators.--

752 (2) Each health insurance issuer shall make available on
753 its Internet website a link to the performance outcome and
754 financial data that is published by the Agency for Health Care
755 Administration pursuant to s. 408.05(3) (k) ~~(l)~~ and shall include
756 in every policy delivered or issued for delivery to any person
757 in the state or any materials provided as required by s.
758 627.64725 notice that such information is available
759 electronically and the address of its Internet website.

760 Section 16. Subsection (7) of section 641.54, Florida
761 Statutes, is amended to read:

762 641.54 Information disclosure.--

763 (7) Each health maintenance organization shall make
764 available on its Internet website a link to the performance
765 outcome and financial data that is published by the Agency for
766 Health Care Administration pursuant to s. 408.05(3) (k) ~~(l)~~ and
767 shall include in every policy delivered or issued for delivery
768 to any person in the state or any materials provided as required
769 by s. 627.64725 notice that such information is available
770 electronically and the address of its Internet website.

771 Section 17. This act shall take effect upon becoming a
772 law.