

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  
 29 made by the act; amending ss. 381.026, 395.301, 627.6499,  
 30 and 641.54, F.S.; conforming a cross-reference; amending  
 31 s. 465.0244, F.S.; conforming a cross-reference;  
 32 prohibiting pharmacies from entering into contracts with  
 33 insurers and health maintenance organizations under  
 34 certain circumstances; providing communication criteria  
 35 for pharmacies, health insurers, health maintenance  
 36 organizations, and any agent, employee, administrator,  
 37 intermediary, assignee, or designee thereof; providing  
 38 responsibility of the Agency for Health Care  
 39 Administration for security of certain data and backup  
 40 systems; providing requirements for a secure storage  
 41 facility; providing an effective date.

42  
 43 Be It Enacted by the Legislature of the State of Florida:

44  
 45 Section 1. This act may be cited as the "Coordinated  
 46 Health Care Information and Transparency Act of 2006."

47 Section 2. The purpose of this act is to provide better  
 48 coordination of health information for purposes of public  
 49 health, policy analysis, and transparency of consumer health  
 50 care information.

51 Section 3. Section 408.05, Florida Statutes, is amended to  
 52 read:

53 408.05 Florida State Center for Health Information and  
 54 Policy Analysis Statistics.--

55 (1) ESTABLISHMENT.--The agency shall establish a Florida  
56 State Center for Health Information and Policy Analysis  
57 ~~Statistics~~. The center shall establish a comprehensive health  
58 information system to provide for the collection, compilation,  
59 coordination, analysis, indexing, dissemination, and utilization  
60 of both purposefully collected and extant health-related data  
61 and statistics. The center shall be staffed with public health  
62 experts, biostatisticians, information system analysts, health  
63 policy experts, economists, and other staff necessary to carry  
64 out its functions.

65 (2) HEALTH-RELATED DATA STATISTICS.--The comprehensive  
66 health information system operated by the Florida State Center  
67 for Health Information and Policy Analysis ~~Statistics~~ shall  
68 identify the best available data sources and coordinate the  
69 compilation of extant health-related data and statistics and  
70 purposefully collect data on:

71 (a) The extent and nature of illness and disability of the  
72 state population, including life expectancy, the incidence of  
73 various acute and chronic illnesses, and infant and maternal  
74 morbidity and mortality.

75 (b) The impact of illness and disability of the state  
76 population on the state economy and on other aspects of the  
77 well-being of the people in this state.

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

79 (d) Health knowledge and practices of the people in this  
80 state and determinants of health and nutritional practices and  
81 status.

82 (e) Health resources, including physicians, dentists,  
83 nurses, and other health professionals, by specialty and type of  
84 practice and acute, long-term care and other institutional care  
85 facility supplies and specific services provided by hospitals,  
86 nursing homes, home health agencies, and other health care  
87 facilities.

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

89 (g) Health care costs and financing, including trends in  
90 health care prices and costs, the sources of payment for health  
91 care services, and federal, state, and local expenditures for  
92 health care.

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

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

96 (j) The quality of care provided by various health care  
97 providers.

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

102 (a) Coordinate the activities of state agencies involved  
103 in the design and implementation of the comprehensive health  
104 information system.

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

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

110 (d) Develop written agreements with local, state, and  
111 federal agencies for the sharing of health-care-related data or  
112 using the facilities and services of such agencies. State  
113 agencies, local health councils, and other agencies under state  
114 ~~contract with the Department of Health~~ shall assist the center  
115 in obtaining, compiling, and transferring health-care-related  
116 data maintained by state and local agencies. Written agreements  
117 must specify the types, methods, and periodicity of data  
118 exchanges and specify the types of data that will be transferred  
119 to the center.

120 (e) ~~The agency shall~~ Establish by rule the types of data  
121 collected, compiled, processed, used, or shared. Decisions  
122 regarding center data sets should be made based on consultation  
123 with the State Consumer Comprehensive Health Information and  
124 Policy System ~~System~~ Advisory Council and other public and private  
125 users regarding the types of data which should be collected and  
126 their uses.

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

130 (f) ~~(g)~~ Establish minimum health-care-related data sets  
131 which are necessary on a continuing basis to fulfill the  
132 collection requirements of the center and which shall be used by  
133 state agencies in collecting and compiling health-care-related

134 data. The agency shall periodically review ongoing health care  
 135 data collections of the Department of Health and other state  
 136 agencies to determine if the collections are being conducted in  
 137 accordance with the established minimum sets of data.

138 (g)~~(h)~~ Establish advisory standards to ensure ~~assure~~ the  
 139 quality of health statistical and epidemiological data  
 140 collection, processing, and analysis by local, state, and  
 141 private organizations.

142 (h)~~(i)~~ Prescribe standards for the publication of health-  
 143 care-related data reported pursuant to this section which ensure  
 144 the reporting of accurate, valid, reliable, complete, and  
 145 comparable data. Such standards should include advisory warnings  
 146 to users of the data regarding the status and quality of any  
 147 data reported by or available from the center.

148 (i)~~(j)~~ Prescribe standards for the maintenance and  
 149 preservation of the center's data. This should include methods  
 150 for archiving data, retrieval of archived data, and data editing  
 151 and verification.

152 (j)~~(k)~~ Ensure that strict quality control measures are  
 153 maintained for the dissemination of data through publications,  
 154 studies, or user requests.

155 (k)~~(l)~~ Develop, in conjunction with the State Consumer  
 156 ~~Comprehensive~~ Health Information and Policy System Advisory  
 157 Council, and implement a long-range plan for making available  
 158 health care quality measures ~~performance outcome~~ and financial  
 159 data that will allow consumers to compare health care services.  
 160 The health care quality measures ~~performance outcomes~~ and

161 financial data the agency must make available shall include, but  
162 is not limited to, pharmaceuticals, physicians, health care  
163 facilities, and health plans and managed care entities. The  
164 agency shall submit the initial plan to the Governor, the  
165 President of the Senate, and the Speaker of the House of  
166 Representatives by January 1, 2006, and shall update the plan  
167 and report on the status of its implementation annually  
168 thereafter. The agency shall also make the plan and status  
169 report available to the public on its Internet website. As part  
170 of the plan, the agency shall identify the process and  
171 timeframes for implementation, any barriers to implementation,  
172 and recommendations of changes in the law that may be enacted by  
173 the Legislature to eliminate the barriers. As preliminary  
174 elements of the plan, the agency shall:

175 1. Make available patient-safety indicators, inpatient  
176 quality indicators, and performance outcome and patient charge  
177 data collected from health care facilities pursuant to s.  
178 408.061(1)(a) and (2). The terms "patient-safety indicators" and  
179 "inpatient quality indicators" shall be as defined by the  
180 Centers for Medicare and Medicaid Services, the National Quality  
181 Forum, the Joint Commission on Accreditation of Healthcare  
182 Organizations, the Agency for Healthcare Research and Quality,  
183 the Centers for Disease Control and Prevention, or a similar  
184 national entity that establishes standards to measure the  
185 performance of health care providers, or by other states. The  
186 agency shall determine which conditions, ~~and~~ procedures, health  
187 care quality measures ~~performance outcomes~~, and patient charge

188 data to disclose based upon input from the council. When  
 189 determining which conditions and procedures are to be disclosed,  
 190 the council and the agency shall consider variation in costs,  
 191 variation in outcomes, and magnitude of variations and other  
 192 relevant information. When determining which health care quality  
 193 measures ~~performance outcomes~~ to disclose, the agency:

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

198 b. May consider such additional measures that are adopted  
 199 by the Centers for Medicare and Medicaid Studies, National  
 200 Quality Forum, the Joint Commission on Accreditation of  
 201 Healthcare Organizations, the Agency for Healthcare Research and  
 202 Quality, Centers for Disease Control and Prevention, or a  
 203 similar national entity that establishes standards to measure  
 204 the performance of health care providers, or by other states.

205  
 206 When determining which patient charge data to disclose, the  
 207 agency shall consider such measures as average charge, average  
 208 net revenue per adjusted patient day, average cost per adjusted  
 209 patient day, and average cost per admission, among others.

210 2. Make available performance measures, benefit design,  
 211 and premium cost data from health plans licensed pursuant to  
 212 chapter 627 or chapter 641. The agency shall determine which  
 213 health care quality measures ~~performance outcome~~ and member and  
 214 subscriber cost data to disclose, based upon input from the



215 council. When determining which data to disclose, the agency  
216 shall consider information that may be required by either  
217 individual or group purchasers to assess the value of the  
218 product, which may include membership satisfaction, quality of  
219 care, current enrollment or membership, coverage areas,  
220 accreditation status, premium costs, plan costs, premium  
221 increases, range of benefits, copayments and deductibles,  
222 accuracy and speed of claims payment, credentials of physicians,  
223 number of providers, names of network providers, and hospitals  
224 in the network. Health plans shall make available to the agency  
225 any such data or information that is not currently reported to  
226 the agency or the office.

227 3. Determine the method and format for public disclosure  
228 of data reported pursuant to this paragraph. The agency shall  
229 make its determination based upon input from the State Consumer  
230 ~~Comprehensive~~ Health Information and Policy System Advisory  
231 Council. At a minimum, the data shall be made available on the  
232 agency's Internet website in a manner that allows consumers to  
233 conduct an interactive search that allows them to view and  
234 compare the information for specific providers. The website must  
235 include such additional information as is determined necessary  
236 to ensure that the website enhances informed decisionmaking  
237 among consumers and health care purchasers, which shall include,  
238 at a minimum, appropriate guidance on how to use the data and an  
239 explanation of why the data may vary from provider to provider.  
240 The data specified in subparagraph 1. shall be released no later  
241 than January 1, 2006, for the reporting of infection rates, and

242 no later than October 1, 2005, for mortality rates and  
243 complication rates. The data specified in subparagraph 2. shall  
244 be released no later than October 1, 2006.

245 (4) TECHNICAL ASSISTANCE.--

246 (a) The center shall provide technical assistance to  
247 persons or organizations engaged in health planning activities  
248 in the effective use of statistics collected and compiled by the  
249 center. The center shall also provide the following additional  
250 technical assistance services:

251 1.(a) Establish procedures identifying the circumstances  
252 under which, the places at which, the persons from whom, and the  
253 methods by which a person may secure data from the center,  
254 including procedures governing requests, the ordering of  
255 requests, timeframes for handling requests, and other procedures  
256 necessary to facilitate the use of the center's data. To the  
257 extent possible, the center should provide current data timely  
258 in response to requests from public or private agencies.

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

263 3.(c) Identify health care data gaps and provide technical  
264 assistance to ~~seek cooperative agreements with~~ other public or  
265 private organizations for meeting documented health care data  
266 needs.

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

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

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

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

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

281        9. Monitor innovations in health information technology,  
282 informatics, and the exchange of health information and maintain  
283 a repository of technical resources to support the development  
284 of a health information network.

285        (b) The agency shall administer, manage, and monitor  
286 grants to not-for-profit organizations, regional health  
287 information organizations, public health departments, or state  
288 agencies that submit proposals for planning, implementation, or  
289 training projects to advance the development of a health  
290 information network. Any grant contract shall be evaluated to  
291 ensure the effective outcome of the health information project.

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

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

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

301 (a) The center shall publish and make available  
302 periodically to agencies and individuals health statistics  
303 publications of general interest, including health plan consumer  
304 reports and health maintenance organization member satisfaction  
305 surveys ~~HMO report cards~~; publications providing health  
306 statistics on topical health policy issues; publications that  
307 provide health status profiles of the people in this state; and  
308 other topical health statistics publications.

309 (b) The center shall publish, make available, and  
310 disseminate, promptly and as widely as practicable, the results  
311 of special health surveys, health care research, and health care  
312 evaluations conducted or supported under this section. Any  
313 publication by the center must include a statement of the  
314 limitations on the quality, accuracy, and completeness of the  
315 data.

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

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

321 (e) The center shall be responsible, to the extent  
322 resources are available, for conducting a variety of special  
323 studies and surveys to expand the health care information and  
324 statistics available for health policy analyses, particularly  
325 for the review of public policy issues. The center shall develop  
326 a process by which users of the center's data are periodically  
327 surveyed regarding critical data needs and the results of the  
328 survey considered in determining which special surveys or  
329 studies will be conducted. The center shall select problems in  
330 health care for research, policy analyses, or special data  
331 collections on the basis of their local, regional, or state  
332 importance; the unique potential for definitive research on the  
333 problem; and opportunities for application of the study  
334 findings.

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

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

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

344 (b) The Florida State Center for Health Information and  
345 Policy Analysis Statistics may apply for and receive and accept  
346 grants, gifts, and other payments, including property and  
347 services, from any governmental or other public or private

348 | entity or person and make arrangements as to the use of same,  
 349 | including the undertaking of special studies and other projects  
 350 | relating to health-care-related topics. Funds obtained pursuant  
 351 | to this paragraph may not be used to offset annual  
 352 | appropriations from the General Revenue Fund.

353 | (c) The center may charge such reasonable fees for  
 354 | services as the agency prescribes by rule. The established fees  
 355 | may not exceed the reasonable cost for such services. Fees  
 356 | collected may not be used to offset annual appropriations from  
 357 | the General Revenue Fund.

358 | ~~(d) The agency shall establish a Comprehensive Health~~  
 359 | ~~Information System Trust Fund as the repository of all funds~~  
 360 | ~~appropriated to, and fees and grants collected for, services of~~  
 361 | ~~the State Center for Health Statistics. Any funds, other than~~  
 362 | ~~funds appropriated to the center from the General Revenue Fund,~~  
 363 | ~~which are raised or collected by the agency for the operation of~~  
 364 | ~~the center and which are not needed to meet the expenses of the~~  
 365 | ~~center for its current fiscal year shall be available to the~~  
 366 | ~~agency in succeeding years.~~

367 | (8) STATE CONSUMER ~~COMPREHENSIVE~~ HEALTH INFORMATION AND  
 368 | POLICY ~~SYSTEM~~ ADVISORY COUNCIL.--

369 | (a) There is established in the agency the State Consumer  
 370 | ~~Comprehensive~~ Health Information and Policy ~~System~~ Advisory  
 371 | Council to assist the center in reviewing the comprehensive  
 372 | health information system, including the identification,  
 373 | collection, standardization, sharing, and coordination of  
 374 | health-related data, fraud and abuse data, and professional and

375 | facility licensing data among federal, state, local, and private  
 376 | entities and to recommend improvements for purposes of public  
 377 | health, policy analysis, and transparency of consumer health  
 378 | care information ~~such system~~. The council shall consist of the  
 379 | following members:

380 |         1. An employee of the Executive Office of the Governor, to  
 381 | be appointed by the Governor.

382 |         2. An employee of the Office of Insurance Regulation, to  
 383 | be appointed by the director of the office.

384 |         3. An employee of the Department of Education, to be  
 385 | appointed by the Commissioner of Education.

386 |         4. Ten persons, to be appointed by the Secretary of Health  
 387 | Care Administration, representing other state and local  
 388 | agencies, state universities, business and health ~~the Florida~~  
 389 | ~~Association of Business/Health~~ coalitions, local health  
 390 | councils, professional health-care-related associations,  
 391 | consumers, and purchasers.

392 |         (b) Each member of the council shall be appointed to serve  
 393 | for a term of 2 4 years following ~~from~~ the date of appointment,  
 394 | except the term of appointment shall end 3 years following the  
 395 | date of appointment for members appointed in 2003, 2004, and  
 396 | 2005. ~~that~~ A vacancy shall be filled by appointment for the  
 397 | remainder of the term, and each appointing authority retains the  
 398 | right to reappoint members whose terms of appointment have  
 399 | expired. ~~and except that:~~

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

403           ~~2. Two of the members initially appointed by the Director~~  
 404 ~~of Health Care Administration shall each be appointed for a term~~  
 405 ~~of 2 years.~~

406           ~~3. Two of the members initially appointed by the Director~~  
 407 ~~of Health Care Administration shall each be appointed for a term~~  
 408 ~~of 1 year.~~

409           (c) The council may meet at the call of its chair, at the  
 410 request of the agency department, or at the request of a  
 411 majority of its membership, but the council must meet at least  
 412 quarterly.

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

414           (e) A majority of the members constitutes a quorum, and  
 415 the affirmative vote of a majority of a quorum is necessary to  
 416 take action.

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

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

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

424           1. To develop a mission statement, goals, and a plan of  
 425 action based on the guiding principles specified in s. 282.3032  
 426 for the identification, collection, standardization, sharing,



427 and coordination of health-related data across federal, state,  
428 and local government and private-sector entities.

429 2. To develop a review process to ensure cooperative  
430 planning among agencies that collect or maintain health-related  
431 data.

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

434 (9) APPLICATION TO OTHER AGENCIES.--Nothing in this  
435 section shall limit, restrict, affect, or control the  
436 collection, analysis, release, or publication of data by any  
437 state agency pursuant to its statutory authority, duties, or  
438 responsibilities.

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

441 408.061 Data collection; uniform systems of financial  
442 reporting; information relating to physician charges;  
443 confidential information; immunity.--

444 (1) The agency shall require the submission by health care  
445 facilities, health care providers, and health insurers of data  
446 necessary to carry out the agency's duties. Specifications for  
447 data to be collected under this section shall be developed by  
448 the agency with the assistance of technical advisory panels  
449 including representatives of affected entities, consumers,  
450 purchasers, and such other interested parties as may be  
451 determined by the agency.

452 (b) Data to be submitted by health care providers may  
453 include, but are not limited to: professional organization and

454 specialty board affiliations, Medicare and Medicaid  
455 participation, types of services offered to patients, amount of  
456 revenue and expenses of the health care provider, and such other  
457 data which are reasonably necessary to study utilization  
458 patterns. Data submitted shall be certified by the appropriate  
459 duly authorized representative or employee of the health care  
460 provider that the information submitted is true and accurate.

461 (10) The agency shall be the primary source for collection  
462 and dissemination of health care data. No other agency of state  
463 government may gather data from a health care provider licensed  
464 or regulated under this chapter without first determining if the  
465 data is currently being collected by the agency and  
466 affirmatively demonstrating that it would be more cost-effective  
467 for an agency of state government other than the agency to  
468 gather the health care data. The secretary ~~director~~ shall ensure  
469 that health care data collected by the divisions within the  
470 agency is coordinated. It is the express intent of the  
471 Legislature that all health care data be collected by a single  
472 source within the agency and that other divisions within the  
473 agency, and all other agencies of state government, obtain data  
474 for analysis, regulation, and public dissemination purposes from  
475 that single source. Confidential information may be released to  
476 other governmental entities or to parties contracting with the  
477 agency to perform agency duties or functions as needed in  
478 connection with the performance of the duties of the receiving  
479 entity. The receiving entity or party shall retain the  
480 confidentiality of such information as provided for herein.

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

484 408.062 Research, analyses, studies, and reports.--

485 (1) The agency shall conduct research, analyses, and  
 486 studies relating to health care costs and access to and quality  
 487 of health care services as access and quality are affected by  
 488 changes in health care costs. Such research, analyses, and  
 489 studies shall include, but not be limited to:

490 (h) The collection of a statistically valid sample of data  
 491 on the retail prices charged by pharmacies for the 100 ~~50~~ most  
 492 frequently prescribed medicines from any pharmacy licensed by  
 493 this state as a special study authorized by the Legislature to  
 494 be performed by the agency quarterly. If the drug is available  
 495 generically, price data shall be reported for the generic drug  
 496 and price data of a brand-named drug for which the generic drug  
 497 is the equivalent shall be reported. The agency shall make  
 498 available on its Internet website for each pharmacy, no later  
 499 than October 1, 2006 ~~2005~~, drug prices for a 30-day supply at a  
 500 standard dose. The data collected shall be reported for each  
 501 drug by pharmacy and by metropolitan statistical area or region  
 502 and updated quarterly.

503 (j) The making available on its Internet website beginning  
 504 no later than October 1, 2004, and in a hard-copy format upon  
 505 request, of patient charge, volumes, length of stay, and  
 506 performance ~~outcome~~ indicators collected from health care  
 507 facilities pursuant to s. 408.061(1)(a) for specific medical

508 conditions, surgeries, and procedures provided in inpatient and  
509 outpatient facilities as determined by the agency. In making the  
510 determination of specific medical conditions, surgeries, and  
511 procedures to include, the agency shall consider such factors as  
512 volume, severity of the illness, urgency of admission,  
513 individual and societal costs, and whether the condition is  
514 acute or chronic. Performance outcome indicators shall be risk  
515 adjusted or severity adjusted, as applicable, using nationally  
516 recognized risk adjustment methodologies or software consistent  
517 with the standards of the Agency for Healthcare Research and  
518 Quality and as selected by the agency. The website shall also  
519 provide an interactive search that allows consumers to view and  
520 compare the information for specific facilities, a map that  
521 allows consumers to select a county or region, definitions of  
522 all of the data, descriptions of each procedure, and an  
523 explanation about why the data may differ from facility to  
524 facility. Such public data shall be updated quarterly. The  
525 agency shall submit an annual status report on the collection of  
526 data and publication of health care quality measures ~~performance~~  
527 ~~outcome indicators~~ to the Governor, the Speaker of the House of  
528 Representatives, the President of the Senate, and the  
529 substantive legislative committees with the first status report  
530 due January 1, 2005.

531 (2) The agency may assess annually the caesarean section  
532 rate in Florida hospitals using the analysis methodology that  
533 the agency determines most appropriate. The data from this  
534 assessment shall be published periodically on the agency's

535 Internet website. ~~To assist the agency in determining the impact~~  
536 ~~of this chapter on Florida hospitals' caesarean section rates,~~  
537 ~~each provider hospital, as defined in s. 383.336, shall notify~~  
538 ~~the agency of the date of implementation of the practice~~  
539 ~~parameters and the date of the first meeting of the hospital~~  
540 ~~peer review board created pursuant to this chapter. The agency~~  
541 ~~shall use these dates in monitoring any change in provider~~  
542 ~~hospital caesarean section rates. An annual report based on this~~  
543 ~~monitoring and assessment shall be submitted to the Governor,~~  
544 ~~the Speaker of the House of Representatives, and the President~~  
545 ~~of the Senate by the agency, with the first annual report due~~  
546 ~~January 1, 1993.~~

547 (5) The agency shall develop and implement a strategy for  
548 the adoption and use of electronic health records, including the  
549 development of an electronic health information network for the  
550 sharing of electronic health records among health care  
551 facilities, health care providers, and health insurers. The  
552 agency may develop rules to facilitate the functionality and  
553 protect the confidentiality of electronic health records. The  
554 agency shall report to the Governor, the Speaker of the House of  
555 Representatives, and the President of the Senate on legislative  
556 recommendations to protect the confidentiality of electronic  
557 health records.

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

560 20.42 Agency for Health Care Administration.--

561 (3) The department shall be the chief health policy and  
 562 planning entity for the state. The department is responsible for  
 563 health facility licensure, inspection, and regulatory  
 564 enforcement; investigation of consumer complaints related to  
 565 health care facilities and managed care plans; the  
 566 implementation of the certificate of need program; the operation  
 567 of the Florida State Center for Health Information and Policy  
 568 Analysis Statistics; the administration of the Medicaid program;  
 569 the administration of the contracts with the Florida Healthy  
 570 Kids Corporation; the certification of health maintenance  
 571 organizations and prepaid health clinics as set forth in part  
 572 III of chapter 641; and any other duties prescribed by statute  
 573 or agreement.

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

576 381.001 Legislative intent; public health system.--

577 (3) It is, furthermore, the intent of the Legislature that  
 578 the public health system include comprehensive planning, data  
 579 collection, technical support, and health resource development  
 580 functions. These functions include, but are not limited to,  
 581 state laboratory and pharmacy services, the state vital  
 582 statistics system, the Florida State Center for Health  
 583 Information and Policy Analysis Statistics, emergency medical  
 584 services coordination and support, and recruitment, retention,  
 585 and development of preventive and primary health care  
 586 professionals and managers.

587 Section 8. Paragraph (e) of subsection (2) of section  
 588 395.602, Florida Statutes, is amended to read:  
 589 395.602 Rural hospitals.--  
 590 (2) DEFINITIONS.--As used in this part:  
 591 (e) "Rural hospital" means an acute care hospital licensed  
 592 under this chapter, having 100 or fewer licensed beds and an  
 593 emergency room, which is:  
 594 1. The sole provider within a county with a population  
 595 density of no greater than 100 persons per square mile;  
 596 2. An acute care hospital, in a county with a population  
 597 density of no greater than 100 persons per square mile, which is  
 598 at least 30 minutes of travel time, on normally traveled roads  
 599 under normal traffic conditions, from any other acute care  
 600 hospital within the same county;  
 601 3. A hospital supported by a tax district or subdistrict  
 602 whose boundaries encompass a population of 100 persons or fewer  
 603 per square mile;  
 604 4. A hospital in a constitutional charter county with a  
 605 population of over 1 million persons that has imposed a local  
 606 option health service tax pursuant to law and in an area that  
 607 was directly impacted by a catastrophic event on August 24,  
 608 1992, for which the Governor of Florida declared a state of  
 609 emergency pursuant to chapter 125, and has 120 beds or less that  
 610 serves an agricultural community with an emergency room  
 611 utilization of no less than 20,000 visits and a Medicaid  
 612 inpatient utilization rate greater than 15 percent;

613           5. A hospital with a service area that has a population of  
614 100 persons or fewer per square mile. As used in this  
615 subparagraph, the term "service area" means the fewest number of  
616 zip codes that account for 75 percent of the hospital's  
617 discharges for the most recent 5-year period, based on  
618 information available from the hospital inpatient discharge  
619 database in the Florida State Center for Health Information and  
620 Policy Analysis Statistics at the Agency for Health Care  
621 Administration; or

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

624  
625 Population densities used in this paragraph must be based upon  
626 the most recently completed United States census. A hospital  
627 that received funds under s. 409.9116 for a quarter beginning no  
628 later than July 1, 2002, is deemed to have been and shall  
629 continue to be a rural hospital from that date through June 30,  
630 2012, if the hospital continues to have 100 or fewer licensed  
631 beds and an emergency room, or meets the criteria of  
632 subparagraph 4. An acute care hospital that has not previously  
633 been designated as a rural hospital and that meets the criteria  
634 of this paragraph shall be granted such designation upon  
635 application, including supporting documentation to the Agency  
636 for Health Care Administration.

637           Section 9. Section 395.6025, Florida Statutes, is amended  
638 to read:



639           395.6025 Rural hospital replacement  
640 facilities.--Notwithstanding the provisions of s. 408.036, a  
641 hospital defined as a statutory rural hospital in accordance  
642 with s. 395.602, or a not-for-profit operator of rural  
643 hospitals, is not required to obtain a certificate of need for  
644 the construction of a new hospital located in a county with a  
645 population of at least 15,000 but no more than 18,000 and a  
646 density of less than 30 persons per square mile, or a  
647 replacement facility, provided that the replacement, or new,  
648 facility is located within 10 miles of the site of the currently  
649 licensed rural hospital and within the current primary service  
650 area. As used in this section, the term "service area" means the  
651 fewest number of zip codes that account for 75 percent of the  
652 hospital's discharges for the most recent 5-year period, based  
653 on information available from the hospital inpatient discharge  
654 database in the Florida State Center for Health Information and  
655 Policy Analysis ~~Statistics~~ at the Agency for Health Care  
656 Administration.

657           Section 10. Paragraph (d) of subsection (43) of section  
658 408.07, Florida Statutes, is amended to read:

659           408.07 Definitions.--As used in this chapter, with the  
660 exception of ss. 408.031-408.045, the term:

661           (43) "Rural hospital" means an acute care hospital  
662 licensed under chapter 395, having 100 or fewer licensed beds  
663 and an emergency room, and which is:

664           (d) A hospital with a service area that has a population  
665 of 100 persons or fewer per square mile. As used in this

666 paragraph, the term "service area" means the fewest number of  
667 zip codes that account for 75 percent of the hospital's  
668 discharges for the most recent 5-year period, based on  
669 information available from the hospital inpatient discharge  
670 database in the Florida State Center for Health Information and  
671 Policy Analysis Statistics at the Agency for Health Care  
672 Administration; or

673

674 Population densities used in this subsection must be based upon  
675 the most recently completed United States census. A hospital  
676 that received funds under s. 409.9116 for a quarter beginning no  
677 later than July 1, 2002, is deemed to have been and shall  
678 continue to be a rural hospital from that date through June 30,  
679 2012, if the hospital continues to have 100 or fewer licensed  
680 beds and an emergency room, or meets the criteria of s.  
681 395.602(2)(e)4. An acute care hospital that has not previously  
682 been designated as a rural hospital and that meets the criteria  
683 of this subsection shall be granted such designation upon  
684 application, including supporting documentation, to the Agency  
685 for Health Care Administration.

686 Section 11. Paragraph (a) of subsection (4) of section  
687 408.18, Florida Statutes, is amended to read:

688 408.18 Health Care Community Antitrust Guidance Act;  
689 antitrust no-action letter; market-information collection and  
690 education.--

691 (4)(a) Members of the health care community who seek  
692 antitrust guidance may request a review of their proposed

693 business activity by the Attorney General's office. In  
 694 conducting its review, the Attorney General's office may seek  
 695 whatever documentation, data, or other material it deems  
 696 necessary from the Agency for Health Care Administration, the  
 697 Florida State Center for Health Information and Policy Analysis  
 698 ~~Statistics~~, and the Office of Insurance Regulation of the  
 699 Financial Services Commission.

700 Section 12. Paragraph (c) of subsection (4) of section  
 701 381.026, Florida Statutes, is amended to read:

702 381.026 Florida Patient's Bill of Rights and  
 703 Responsibilities.--

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

706 (c) Financial information and disclosure.--

707 1. A patient has the right to be given, upon request, by  
 708 the responsible provider, his or her designee, or a  
 709 representative of the health care facility full information and  
 710 necessary counseling on the availability of known financial  
 711 resources for the patient's health care.

712 2. A health care provider or a health care facility shall,  
 713 upon request, disclose to each patient who is eligible for  
 714 Medicare, in advance of treatment, whether the health care  
 715 provider or the health care facility in which the patient is  
 716 receiving medical services accepts assignment under Medicare  
 717 reimbursement as payment in full for medical services and  
 718 treatment rendered in the health care provider's office or  
 719 health care facility.

720           3. A health care provider or a health care facility shall,  
721 upon request, furnish a person, prior to provision of medical  
722 services, a reasonable estimate of charges for such services.  
723 Such reasonable estimate shall not preclude the health care  
724 provider or health care facility from exceeding the estimate or  
725 making additional charges based on changes in the patient's  
726 condition or treatment needs.

727           4. Each licensed facility not operated by the state shall  
728 make available to the public on its Internet website or by other  
729 electronic means a description of and a link to the performance  
730 outcome and financial data that is published by the agency  
731 pursuant to s. 408.05(3) (k) ~~(l)~~. The facility shall place a  
732 notice in the reception area that such information is available  
733 electronically and the website address. The licensed facility  
734 may indicate that the pricing information is based on a  
735 compilation of charges for the average patient and that each  
736 patient's bill may vary from the average depending upon the  
737 severity of illness and individual resources consumed. The  
738 licensed facility may also indicate that the price of service is  
739 negotiable for eligible patients based upon the patient's  
740 ability to pay.

741           5. A patient has the right to receive a copy of an  
742 itemized bill upon request. A patient has a right to be given an  
743 explanation of charges upon request.

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

746 395.301 Itemized patient bill; form and content prescribed  
 747 by the agency.--

748 (10) Each licensed facility shall make available on its  
 749 Internet website a link to the performance outcome and financial  
 750 data that is published by the Agency for Health Care  
 751 Administration pursuant to s. 408.05(3) (k) ~~(l)~~. The facility  
 752 shall place a notice in the reception area that the information  
 753 is available electronically and the facility's Internet website  
 754 address.

755 Section 14. Section 465.0244, Florida Statutes, is amended  
 756 to read:

757 465.0244 Information disclosure.--

758 (1) Every pharmacy shall make available on its Internet  
 759 website a link to the performance outcome and financial data  
 760 that is published by the Agency for Health Care Administration  
 761 pursuant to s. 408.05(3) (k) ~~(l)~~ and shall place in the area where  
 762 customers receive filled prescriptions notice that such  
 763 information is available electronically and the address of its  
 764 Internet website.

765 (2) An agreement among any of the following:

766 (a) The holder of a pharmacy permit issued under this  
 767 chapter;

768 (b) A health maintenance organization licensed under part  
 769 I of chapter 641;

770 (c) A health insurer licensed under chapter 624; or

771        (d) An agent, employee, administrator, intermediary,  
772 assignee, or designee of any of the entities specified in this  
773 subsection,  
774  
775 shall not contain any term or condition that prohibits,  
776 restricts, or discourages the communication of information  
777 relating to prescription drug pricing, including, but not  
778 limited to, reimbursement formulas, dispensing fees, discounts,  
779 exclusive buying arrangements, guarantees, or rebates.

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

782            627.6499 Reporting by insurers and third-party  
783 administrators.--

784        (2) Each health insurance issuer shall make available on  
785 its Internet website a link to the performance outcome and  
786 financial data that is published by the Agency for Health Care  
787 Administration pursuant to s. 408.05(3) (k) ~~(l)~~ and shall include  
788 in every policy delivered or issued for delivery to any person  
789 in the state or any materials provided as required by s.  
790 627.64725 notice that such information is available  
791 electronically and the address of its Internet website.

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

794            641.54 Information disclosure.--

795        (7) Each health maintenance organization shall make  
796 available on its Internet website a link to the performance  
797 outcome and financial data that is published by the Agency for

798 Health Care Administration pursuant to s. 408.05(3) ~~(k)-(1)~~ and  
799 shall include in every policy delivered or issued for delivery  
800 to any person in the state or any materials provided as required  
801 by s. 627.64725 notice that such information is available  
802 electronically and the address of its Internet website.

803 Section 17. For the purpose of protecting and ensuring the  
804 safety and security of the data held by the Agency for Health  
805 Care Administration, as described in s. 408.061, Florida  
806 Statutes, the agency shall be responsible for ensuring that data  
807 and data backup systems are housed at a secure facility that  
808 meets or exceeds the following requirements:

809 (a) The facility must be located in the state;

810 (b) The facility must be designated as a critical facility  
811 by the county emergency management agency, under s. 252.38,  
812 Florida Statutes, in the county where the facility is located;

813 (c) The facility must be designed to withstand a category  
814 5 hurricane and be outside the 500-year flood zone established  
815 by the Federal Emergency Management Agency;

816 (d) The facility must have six or more tier-one  
817 telecommunication carriers deployed at the facility;

818 (e) The facility must have commercial power supplied by at  
819 least two separate substation feeders and must be able to  
820 operate continuously for at least 5 days on its own power  
821 generation systems without refueling should such commercial  
822 power be interrupted; and

823 (f) The facility has successfully undergone a Statement on  
824 Auditing Standards (SAS) No. 70 review, representing that the

825 | facility has been through an in-depth review of the security and  
826 | information technology control process relating to its  
827 | operation.

828 |         Section 18. This act shall take effect upon becoming a  
829 | law.