

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; providing
 32 responsibility of the Agency for Health Care
 33 Administration for security of certain data and backup
 34 systems; providing requirements for a secure storage
 35 facility; providing an effective date.

36
 37 Be It Enacted by the Legislature of the State of Florida:

38
 39 Section 1. This act may be cited as the "Coordinated
 40 Health Care Information and Transparency Act of 2006."

41 Section 2. The purpose of this act is to provide better
 42 coordination of health information for purposes of public
 43 health, policy analysis, and transparency of consumer health
 44 care information.

45 Section 3. Section 408.05, Florida Statutes, is amended to
 46 read:

47 408.05 Florida State Center for Health Information and
 48 Policy Analysis Statistics.--

49 (1) ESTABLISHMENT.--The agency shall establish a Florida
 50 State Center for Health Information and Policy Analysis
 51 Statistics. The center shall establish a comprehensive health
 52 information system to provide for the collection, compilation,
 53 coordination, analysis, indexing, dissemination, and utilization
 54 of both purposefully collected and extant health-related data

55 | and statistics. The center shall be staffed with public health
56 | experts, biostatisticians, information system analysts, health
57 | policy experts, economists, and other staff necessary to carry
58 | out its functions.

59 | (2) HEALTH-RELATED DATA STATISTICS.--The comprehensive
60 | health information system operated by the Florida State Center
61 | for Health Information and Policy Analysis Statistics shall
62 | identify the best available data sources and coordinate the
63 | compilation of extant health-related data and statistics and
64 | purposefully collect data on:

65 | (a) The extent and nature of illness and disability of the
66 | state population, including life expectancy, the incidence of
67 | various acute and chronic illnesses, and infant and maternal
68 | morbidity and mortality.

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

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

73 | (d) Health knowledge and practices of the people in this
74 | state and determinants of health and nutritional practices and
75 | status.

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

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

83 (g) Health care costs and financing, including trends in
84 health care prices and costs, the sources of payment for health
85 care services, and federal, state, and local expenditures for
86 health care.

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

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

90 (j) The quality of care provided by various health care
91 providers.

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

96 (a) Coordinate the activities of state agencies involved
97 in the design and implementation of the comprehensive health
98 information system.

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

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

104 (d) Develop written agreements with local, state, and
105 federal agencies for the sharing of health-care-related data or
106 using the facilities and services of such agencies. State
107 agencies, local health councils, and other agencies under state
108 ~~contract with the Department of Health~~ shall assist the center

109 in obtaining, compiling, and transferring health-care-related
110 data maintained by state and local agencies. Written agreements
111 must specify the types, methods, and periodicity of data
112 exchanges and specify the types of data that will be transferred
113 to the center.

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

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

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

132 (g)~~(h)~~ Establish advisory standards to ensure ~~assure~~ the
133 quality of health statistical and epidemiological data
134 collection, processing, and analysis by local, state, and
135 private organizations.

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

142 ~~(i)-(j)~~ Prescribe standards for the maintenance and
143 preservation of the center's data. This should include methods
144 for archiving data, retrieval of archived data, and data editing
145 and verification.

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

149 ~~(k)-(l)~~ Develop, in conjunction with the State Consumer
150 ~~Comprehensive~~ Health Information and Policy ~~System~~ Advisory
151 Council, and implement a long-range plan for making available
152 health care quality measures ~~performance outcome~~ and financial
153 data that will allow consumers to compare health care services.
154 The health care quality measures ~~performance outcomes~~ and
155 financial data the agency must make available shall include, but
156 is not limited to, pharmaceuticals, physicians, health care
157 facilities, and health plans and managed care entities. The
158 agency shall submit the initial plan to the Governor, the
159 President of the Senate, and the Speaker of the House of
160 Representatives by January 1, 2006, and shall update the plan
161 and report on the status of its implementation annually
162 thereafter. The agency shall also make the plan and status

163 report available to the public on its Internet website. As part
164 of the plan, the agency shall identify the process and
165 timeframes for implementation, any barriers to implementation,
166 and recommendations of changes in the law that may be enacted by
167 the Legislature to eliminate the barriers. As preliminary
168 elements of the plan, the agency shall:

169 1. Make available patient-safety indicators, inpatient
170 quality indicators, and performance outcome and patient charge
171 data collected from health care facilities pursuant to s.
172 408.061(1)(a) and (2). The terms "patient-safety indicators" and
173 "inpatient quality indicators" shall be as defined by the
174 Centers for Medicare and Medicaid Services, the National Quality
175 Forum, the Joint Commission on Accreditation of Healthcare
176 Organizations, the Agency for Healthcare Research and Quality,
177 the Centers for Disease Control and Prevention, or a similar
178 national entity that establishes standards to measure the
179 performance of health care providers, or by other states. The
180 agency shall determine which conditions, ~~and~~ procedures, health
181 care quality measures ~~performance outcomes~~, and patient charge
182 data to disclose based upon input from the council. When
183 determining which conditions and procedures are to be disclosed,
184 the council and the agency shall consider variation in costs,
185 variation in outcomes, and magnitude of variations and other
186 relevant information. When determining which health care quality
187 measures ~~performance outcomes~~ to disclose, the agency:

188 a. Shall consider such factors as volume of cases; average
189 patient charges; average length of stay; complication rates;

190 mortality rates; and infection rates, among others, which shall
191 be adjusted for case mix and severity, if applicable.

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

199
200 When determining which patient charge data to disclose, the
201 agency shall consider such measures as average charge, average
202 net revenue per adjusted patient day, average cost per adjusted
203 patient day, and average cost per admission, among others.

204 2. Make available performance measures, benefit design,
205 and premium cost data from health plans licensed pursuant to
206 chapter 627 or chapter 641. The agency shall determine which
207 health care quality measures ~~performance outcome~~ and member and
208 subscriber cost data to disclose, based upon input from the
209 council. When determining which data to disclose, the agency
210 shall consider information that may be required by either
211 individual or group purchasers to assess the value of the
212 product, which may include membership satisfaction, quality of
213 care, current enrollment or membership, coverage areas,
214 accreditation status, premium costs, plan costs, premium
215 increases, range of benefits, copayments and deductibles,
216 accuracy and speed of claims payment, credentials of physicians,

217 number of providers, names of network providers, and hospitals
218 in the network. Health plans shall make available to the agency
219 any such data or information that is not currently reported to
220 the agency or the office.

221 3. Determine the method and format for public disclosure
222 of data reported pursuant to this paragraph. The agency shall
223 make its determination based upon input from the State Consumer
224 ~~Comprehensive~~ Health Information and Policy ~~System~~ Advisory
225 Council. At a minimum, the data shall be made available on the
226 agency's Internet website in a manner that allows consumers to
227 conduct an interactive search that allows them to view and
228 compare the information for specific providers. The website must
229 include such additional information as is determined necessary
230 to ensure that the website enhances informed decisionmaking
231 among consumers and health care purchasers, which shall include,
232 at a minimum, appropriate guidance on how to use the data and an
233 explanation of why the data may vary from provider to provider.
234 The data specified in subparagraph 1. shall be released no later
235 than January 1, 2006, for the reporting of infection rates, and
236 no later than October 1, 2005, for mortality rates and
237 complication rates. The data specified in subparagraph 2. shall
238 be released no later than October 1, 2006.

239 (4) TECHNICAL ASSISTANCE.--

240 (a) The center shall provide technical assistance to
241 persons or organizations engaged in health planning activities
242 in the effective use of statistics collected and compiled by the

243 center. The center shall also provide the following additional
244 technical assistance services:

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

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

257 3.(e) Identify health care data gaps and provide technical
258 assistance to ~~seek cooperative agreements with~~ other public or
259 private organizations for meeting documented health care data
260 needs.

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

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

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

268 7.(g) Maintain detailed information on data maintained by
269 other local, state, federal, and private agencies in order to

270 advise those who use the center of potential sources of data
271 which are requested but which are not available from the center.

272 8.-(h) Respond to requests for data which are not available
273 in published form by initiating special computer runs on data
274 sets available to the center.

275 9. Monitor innovations in health information technology,
276 informatics, and the exchange of health information and maintain
277 a repository of technical resources to support the development
278 of a health information network.

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

286 (c) The agency shall initiate, oversee, manage, and
287 evaluate the integration of health care data from each state
288 agency that collects, stores, and reports on health care issues
289 and make that data available to any health care practitioner
290 through a state health information network.

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

295 (a) The center shall publish and make available
296 periodically to agencies and individuals health statistics

297 | publications of general interest, including health plan consumer
298 | reports and health maintenance organization member satisfaction
299 | surveys ~~HMO report cards~~; publications providing health
300 | statistics on topical health policy issues; publications that
301 | provide health status profiles of the people in this state; and
302 | other topical health statistics publications.

303 | (b) The center shall publish, make available, and
304 | disseminate, promptly and as widely as practicable, the results
305 | of special health surveys, health care research, and health care
306 | evaluations conducted or supported under this section. Any
307 | publication by the center must include a statement of the
308 | limitations on the quality, accuracy, and completeness of the
309 | data.

310 | (c) The center shall provide indexing, abstracting,
311 | translation, publication, and other services leading to a more
312 | effective and timely dissemination of health care statistics.

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

315 | (e) The center shall be responsible, to the extent
316 | resources are available, for conducting a variety of special
317 | studies and surveys to expand the health care information and
318 | statistics available for health policy analyses, particularly
319 | for the review of public policy issues. The center shall develop
320 | a process by which users of the center's data are periodically
321 | surveyed regarding critical data needs and the results of the
322 | survey considered in determining which special surveys or
323 | studies will be conducted. The center shall select problems in

324 health care for research, policy analyses, or special data
 325 collections on the basis of their local, regional, or state
 326 importance; the unique potential for definitive research on the
 327 problem; and opportunities for application of the study
 328 findings.

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

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

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

338 (b) The Florida State Center for Health Information and
 339 Policy Analysis ~~Statistics~~ may apply for and receive and accept
 340 grants, gifts, and other payments, including property and
 341 services, from any governmental or other public or private
 342 entity or person and make arrangements as to the use of same,
 343 including the undertaking of special studies and other projects
 344 relating to health-care-related topics. Funds obtained pursuant
 345 to this paragraph may not be used to offset annual
 346 appropriations from the General Revenue Fund.

347 (c) The center may charge such reasonable fees for
 348 services as the agency prescribes by rule. The established fees
 349 may not exceed the reasonable cost for such services. Fees

350 collected may not be used to offset annual appropriations from
351 the General Revenue Fund.

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

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

363 (a) There is established in the agency the State Consumer
364 ~~Comprehensive~~ Health Information and Policy System Advisory
365 Council to assist the center in reviewing the comprehensive
366 health information system, including the identification,
367 collection, standardization, sharing, and coordination of
368 health-related data, fraud and abuse data, and professional and
369 facility licensing data among federal, state, local, and private
370 entities and to recommend improvements for purposes of public
371 health, policy analysis, and transparency of consumer health
372 care information ~~such system~~. The council shall consist of the
373 following members:

374 1. An employee of the Executive Office of the Governor, to
375 be appointed by the Governor.

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

378 3. An employee of the Department of Education, to be
379 appointed by the Commissioner of Education.

380 4. Ten persons, to be appointed by the Secretary of Health
381 Care Administration, representing other state and local
382 agencies, state universities, business and health ~~the Florida~~
383 ~~Association of Business/Health~~ coalitions, local health
384 councils, professional health-care-related associations,
385 consumers, and purchasers.

386 (b) Each member of the council shall be appointed to serve
387 for a term of 2 4 years following ~~from~~ the date of appointment,
388 except the term of appointment shall end 3 years following the
389 date of appointment for members appointed in 2003, 2004, and
390 2005. that A vacancy shall be filled by appointment for the
391 remainder of the term, and each appointing authority retains the
392 right to reappoint members whose terms of appointment have
393 expired. and except that:

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

397 ~~2. Two of the members initially appointed by the Director~~
398 ~~of Health Care Administration shall each be appointed for a term~~
399 ~~of 2 years.~~

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

403 (c) The council may meet at the call of its chair, at the
 404 request of the agency ~~department~~, or at the request of a
 405 majority of its membership, but the council must meet at least
 406 quarterly.

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

408 (e) A majority of the members constitutes a quorum, and
 409 the affirmative vote of a majority of a quorum is necessary to
 410 take action.

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

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

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

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

423 2. To develop a review process to ensure cooperative
 424 planning among agencies that collect or maintain health-related
 425 data.

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

428 (9) APPLICATION TO OTHER AGENCIES.--Nothing in this
 429 section shall limit, restrict, affect, or control the

430 collection, analysis, release, or publication of data by any
431 state agency pursuant to its statutory authority, duties, or
432 responsibilities.

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

435 408.061 Data collection; uniform systems of financial
436 reporting; information relating to physician charges;
437 confidential information; immunity.--

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

446 (b) Data to be submitted by health care providers may
447 include, but are not limited to: professional organization and
448 specialty board affiliations, Medicare and Medicaid
449 participation, types of services offered to patients, amount of
450 revenue and expenses of the health care provider, and such other
451 data which are reasonably necessary to study utilization
452 patterns. Data submitted shall be certified by the appropriate
453 duly authorized representative or employee of the health care
454 provider that the information submitted is true and accurate.

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

457 government may gather data from a health care provider licensed
458 or regulated under this chapter without first determining if the
459 data is currently being collected by the agency and
460 affirmatively demonstrating that it would be more cost-effective
461 for an agency of state government other than the agency to
462 gather the health care data. The secretary ~~director~~ shall ensure
463 that health care data collected by the divisions within the
464 agency is coordinated. It is the express intent of the
465 Legislature that all health care data be collected by a single
466 source within the agency and that other divisions within the
467 agency, and all other agencies of state government, obtain data
468 for analysis, regulation, and public dissemination purposes from
469 that single source. Confidential information may be released to
470 other governmental entities or to parties contracting with the
471 agency to perform agency duties or functions as needed in
472 connection with the performance of the duties of the receiving
473 entity. The receiving entity or party shall retain the
474 confidentiality of such information as provided for herein.

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

478 408.062 Research, analyses, studies, and reports.--

479 (1) The agency shall conduct research, analyses, and
480 studies relating to health care costs and access to and quality
481 of health care services as access and quality are affected by
482 changes in health care costs. Such research, analyses, and
483 studies shall include, but not be limited to:

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

497 (j) The making available on its Internet website beginning
498 no later than October 1, 2004, and in a hard-copy format upon
499 request, of patient charge, volumes, length of stay, and
500 performance ~~outcome~~ indicators collected from health care
501 facilities pursuant to s. 408.061(1)(a) for specific medical
502 conditions, surgeries, and procedures provided in inpatient and
503 outpatient facilities as determined by the agency. In making the
504 determination of specific medical conditions, surgeries, and
505 procedures to include, the agency shall consider such factors as
506 volume, severity of the illness, urgency of admission,
507 individual and societal costs, and whether the condition is
508 acute or chronic. Performance outcome indicators shall be risk
509 adjusted or severity adjusted, as applicable, using nationally
510 recognized risk adjustment methodologies or software consistent

511 with the standards of the Agency for Healthcare Research and
512 Quality and as selected by the agency. The website shall also
513 provide an interactive search that allows consumers to view and
514 compare the information for specific facilities, a map that
515 allows consumers to select a county or region, definitions of
516 all of the data, descriptions of each procedure, and an
517 explanation about why the data may differ from facility to
518 facility. Such public data shall be updated quarterly. The
519 agency shall submit an annual status report on the collection of
520 data and publication of health care quality measures performance
521 ~~outcome indicators~~ to the Governor, the Speaker of the House of
522 Representatives, the President of the Senate, and the
523 substantive legislative committees with the first status report
524 due January 1, 2005.

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

538 ~~the Speaker of the House of Representatives, and the President~~
539 ~~of the Senate by the agency, with the first annual report due~~
540 ~~January 1, 1993.~~

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

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

554 20.42 Agency for Health Care Administration.--

555 (3) The department shall be the chief health policy and
556 planning entity for the state. The department is responsible for
557 health facility licensure, inspection, and regulatory
558 enforcement; investigation of consumer complaints related to
559 health care facilities and managed care plans; the
560 implementation of the certificate of need program; the operation
561 of the Florida State Center for Health Information and Policy
562 Analysis Statistics; the administration of the Medicaid program;
563 the administration of the contracts with the Florida Healthy
564 Kids Corporation; the certification of health maintenance

565 organizations and prepaid health clinics as set forth in part
566 III of chapter 641; and any other duties prescribed by statute
567 or agreement.

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

570 381.001 Legislative intent; public health system.--

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

581 Section 8. Paragraph (e) of subsection (2) of section
582 395.602, Florida Statutes, is amended to read:

583 395.602 Rural hospitals.--

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

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

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

590 2. An acute care hospital, in a county with a population
591 density of no greater than 100 persons per square mile, which is

592 at least 30 minutes of travel time, on normally traveled roads
593 under normal traffic conditions, from any other acute care
594 hospital within the same county;

595 3. A hospital supported by a tax district or subdistrict
596 whose boundaries encompass a population of 100 persons or fewer
597 per square mile;

598 4. A hospital in a constitutional charter county with a
599 population of over 1 million persons that has imposed a local
600 option health service tax pursuant to law and in an area that
601 was directly impacted by a catastrophic event on August 24,
602 1992, for which the Governor of Florida declared a state of
603 emergency pursuant to chapter 125, and has 120 beds or less that
604 serves an agricultural community with an emergency room
605 utilization of no less than 20,000 visits and a Medicaid
606 inpatient utilization rate greater than 15 percent;

607 5. A hospital with a service area that has a population of
608 100 persons or fewer per square mile. As used in this
609 subparagraph, the term "service area" means the fewest number of
610 zip codes that account for 75 percent of the hospital's
611 discharges for the most recent 5-year period, based on
612 information available from the hospital inpatient discharge
613 database in the Florida State Center for Health Information and
614 Policy Analysis Statistics ~~Statistics~~ at the Agency for Health Care
615 Administration; or

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

618

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

631 Section 9. Section 395.6025, Florida Statutes, is amended
632 to read:

633 395.6025 Rural hospital replacement
634 facilities.--Notwithstanding the provisions of s. 408.036, a
635 hospital defined as a statutory rural hospital in accordance
636 with s. 395.602, or a not-for-profit operator of rural
637 hospitals, is not required to obtain a certificate of need for
638 the construction of a new hospital located in a county with a
639 population of at least 15,000 but no more than 18,000 and a
640 density of less than 30 persons per square mile, or a
641 replacement facility, provided that the replacement, or new,
642 facility is located within 10 miles of the site of the currently
643 licensed rural hospital and within the current primary service
644 area. As used in this section, the term "service area" means the
645 fewest number of zip codes that account for 75 percent of the

646 hospital's discharges for the most recent 5-year period, based
647 on information available from the hospital inpatient discharge
648 database in the Florida State Center for Health Information and
649 Policy Analysis Statistics at the Agency for Health Care
650 Administration.

651 Section 10. Paragraph (d) of subsection (43) of section
652 408.07, Florida Statutes, is amended to read:

653 408.07 Definitions.--As used in this chapter, with the
654 exception of ss. 408.031-408.045, the term:

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

658 (d) A hospital with a service area that has a population
659 of 100 persons or fewer per square mile. As used in this
660 paragraph, the term "service area" means the fewest number of
661 zip codes that account for 75 percent of the hospital's
662 discharges for the most recent 5-year period, based on
663 information available from the hospital inpatient discharge
664 database in the Florida State Center for Health Information and
665 Policy Analysis Statistics at the Agency for Health Care
666 Administration; or

667
668 Population densities used in this subsection must be based upon
669 the most recently completed United States census. A hospital
670 that received funds under s. 409.9116 for a quarter beginning no
671 later than July 1, 2002, is deemed to have been and shall
672 continue to be a rural hospital from that date through June 30,

673 2012, if the hospital continues to have 100 or fewer licensed
674 beds and an emergency room, or meets the criteria of s.
675 395.602(2)(e)4. An acute care hospital that has not previously
676 been designated as a rural hospital and that meets the criteria
677 of this subsection shall be granted such designation upon
678 application, including supporting documentation, to the Agency
679 for Health Care Administration.

680 Section 11. Paragraph (a) of subsection (4) of section
681 408.18, Florida Statutes, is amended to read:

682 408.18 Health Care Community Antitrust Guidance Act;
683 antitrust no-action letter; market-information collection and
684 education.--

685 (4)(a) Members of the health care community who seek
686 antitrust guidance may request a review of their proposed
687 business activity by the Attorney General's office. In
688 conducting its review, the Attorney General's office may seek
689 whatever documentation, data, or other material it deems
690 necessary from the Agency for Health Care Administration, the
691 Florida State Center for Health Information and Policy Analysis
692 ~~Statistics~~, and the Office of Insurance Regulation of the
693 Financial Services Commission.

694 Section 12. Paragraph (c) of subsection (4) of section
695 381.026, Florida Statutes, is amended to read:

696 381.026 Florida Patient's Bill of Rights and
697 Responsibilities.--

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

700 (c) Financial information and disclosure.--

701 1. A patient has the right to be given, upon request, by
 702 the responsible provider, his or her designee, or a
 703 representative of the health care facility full information and
 704 necessary counseling on the availability of known financial
 705 resources for the patient's health care.

706 2. A health care provider or a health care facility shall,
 707 upon request, disclose to each patient who is eligible for
 708 Medicare, in advance of treatment, whether the health care
 709 provider or the health care facility in which the patient is
 710 receiving medical services accepts assignment under Medicare
 711 reimbursement as payment in full for medical services and
 712 treatment rendered in the health care provider's office or
 713 health care facility.

714 3. A health care provider or a health care facility shall,
 715 upon request, furnish a person, prior to provision of medical
 716 services, a reasonable estimate of charges for such services.
 717 Such reasonable estimate shall not preclude the health care
 718 provider or health care facility from exceeding the estimate or
 719 making additional charges based on changes in the patient's
 720 condition or treatment needs.

721 4. Each licensed facility not operated by the state shall
 722 make available to the public on its Internet website or by other
 723 electronic means a description of and a link to the performance
 724 outcome and financial data that is published by the agency
 725 pursuant to s. 408.05(3) (k) ~~(l)~~. The facility shall place a
 726 notice in the reception area that such information is available

727 | electronically and the website address. The licensed facility
728 | may indicate that the pricing information is based on a
729 | compilation of charges for the average patient and that each
730 | patient's bill may vary from the average depending upon the
731 | severity of illness and individual resources consumed. The
732 | licensed facility may also indicate that the price of service is
733 | negotiable for eligible patients based upon the patient's
734 | ability to pay.

735 | 5. A patient has the right to receive a copy of an
736 | itemized bill upon request. A patient has a right to be given an
737 | explanation of charges upon request.

738 | Section 13. Subsection (10) of section 395.301, Florida
739 | Statutes, is amended to read:

740 | 395.301 Itemized patient bill; form and content prescribed
741 | by the agency.--

742 | (10) Each licensed facility shall make available on its
743 | Internet website a link to the performance outcome and financial
744 | data that is published by the Agency for Health Care
745 | Administration pursuant to s. 408.05(3) (k) ~~(l)~~. The facility
746 | shall place a notice in the reception area that the information
747 | is available electronically and the facility's Internet website
748 | address.

749 | Section 14. Section 465.0244, Florida Statutes, is amended
750 | to read:

751 | 465.0244 Information disclosure.--Every pharmacy shall
752 | make available on its Internet website a link to the performance
753 | outcome and financial data that is published by the Agency for

754 Health Care Administration pursuant to s. 408.05(3) (k) ~~(l)~~ and
 755 shall place in the area where customers receive filled
 756 prescriptions notice that such information is available
 757 electronically and the address of its Internet website.

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

760 627.6499 Reporting by insurers and third-party
 761 administrators.--

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

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

772 641.54 Information disclosure.--

773 (7) Each health maintenance organization shall make
 774 available on its Internet website a link to the performance
 775 outcome and financial data that is published by the Agency for
 776 Health Care Administration pursuant to s. 408.05(3) (k) ~~(l)~~ and
 777 shall include in every policy delivered or issued for delivery
 778 to any person in the state or any materials provided as required
 779 by s. 627.64725 notice that such information is available
 780 electronically and the address of its Internet website.

781 Section 17. For the purpose of protecting and ensuring the
782 safety and security of the data held by the Agency for Health
783 Care Administration, as described in s. 408.061, Florida
784 Statutes, the agency shall be responsible for ensuring that data
785 and data backup systems are housed at a secure facility that
786 meets or exceeds the following requirements:

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

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

791 (c) The facility must be designed to withstand a category
792 5 hurricane and be outside the 500-year flood zone established
793 by the Federal Emergency Management Agency;

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

796 (e) The facility must have commercial power supplied by at
797 least two separate substation feeders and must be able to
798 operate continuously for at least 5 days on its own power
799 generation systems without refueling should such commercial
800 power be interrupted; and

801 (f) The facility has successfully undergone a Statement on
802 Auditing Standards (SAS) No. 70 review, representing that the
803 facility has been through an in-depth review of the security and
804 information technology control process relating to its
805 operation.

806 Section 18. This act shall take effect upon becoming a
807 law.