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 HB 7073, Engrossed 2

2006 Legislature

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,

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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

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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.

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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

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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.

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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

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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;

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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,

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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 ~~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

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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

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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

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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

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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

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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.

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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.~~

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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

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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

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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:

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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

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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,~~

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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

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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

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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).

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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

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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,

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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:

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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

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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

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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.

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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.