

1 A bill to be entitled
 2 An act relating to hospitals; amending s. 395.003, F.S.;
 3 revising provisions designating disease classes; exempting
 4 certain cancer center hospitals from licensure
 5 restrictions; amending s. 408.0361, F.S.; revising
 6 provisions relating to licensing standards for adult
 7 cardiovascular services; revising period of validity for
 8 certain grandfathered licenses; revising criteria for
 9 adoption of rules by the Agency for Health Care
 10 Administration; requiring certain hospitals to participate
 11 in clinical outcome reporting systems operated by the
 12 American College of Cardiology and the Society for
 13 Thoracic Surgeons for purposes of such rule criteria;
 14 removing a requirement that the agency include specified
 15 data in rules; providing an effective date.

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 17 Be It Enacted by the Legislature of the State of Florida:

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 19 Section 1. Subsection (9) of section 395.003, Florida
 20 Statutes, is amended to read:

21 395.003 Licensure; issuance, renewal, denial,
 22 modification, suspension, and revocation.--

23 (9) A hospital may not be licensed or relicensed if:

24 (a) The diagnosis-related groups for 65 percent or more of
 25 the discharges from the hospital, in the most recent year for
 26 which data is available to the Agency for Health Care
 27 Administration pursuant to s. 408.061, are for diagnosis, care,
 28 and treatment of patients who have:

29 1. Cardiac-related diseases and disorders classified as
 30 diagnosis-related groups in major diagnostic category 5 ~~103-145,~~
 31 ~~478-479, 514-518, or 525-527;~~

32 2. Orthopedic-related diseases and disorders classified as
 33 diagnosis-related groups in major diagnostic category 8 ~~209-256,~~
 34 ~~471, 491, 496-503, or 519-520;~~

35 3. Cancer-related diseases and disorders classified as
 36 discharges in which the principal diagnosis is neoplasm or
 37 carcinoma or is for an admission for radiotherapy or
 38 antineoplastic chemotherapy or immunotherapy ~~diagnosis-related~~
 39 ~~groups 64, 82, 172, 173, 199, 200, 203, 257-260, 274, 275, 303,~~
 40 ~~306, 307, 318, 319, 338, 344, 346, 347, 363, 366, 367, 400-414,~~
 41 ~~473, or 492; or~~

42 4. Any combination of the above discharges.

43 (b) The hospital restricts its medical and surgical
 44 services to primarily or exclusively cardiac, orthopedic,
 45 surgical, or oncology specialties.

46 (c) A hospital classified as an exempt cancer center
 47 hospital pursuant to 42 C.F.R. s. 412.23(f) as of December 31,
 48 2005, is exempt from the licensure restrictions of this
 49 subsection.

50 Section 2. Subsections (2), (3), and (4) of section
 51 408.0361, Florida Statutes, are amended to read:

52 408.0361 Cardiovascular ~~Cardiology~~ services and burn unit
 53 licensure.--

54 (2) Each provider of adult cardiovascular ~~interventional~~
 55 ~~cardiology~~ services or operator of a burn unit shall comply with
 56 rules adopted by the agency that establish licensure standards

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57 that govern the provision of adult cardiovascular ~~interventional~~
58 ~~cardiology~~ services or the operation of a burn unit. Such rules
59 shall consider, at a minimum, staffing, equipment, physical
60 plant, operating protocols, the provision of services to
61 Medicaid and charity care patients, accreditation, licensure
62 period and fees, and enforcement of minimum standards. The
63 certificate-of-need rules for adult cardiovascular
64 ~~interventional cardiology~~ services and burn units in effect on
65 June 30, 2004, are authorized pursuant to this subsection and
66 shall remain in effect and shall be enforceable by the agency
67 until the licensure rules are adopted. Existing providers and
68 any provider with a notice of intent to grant a certificate of
69 need or a final order of the agency granting a certificate of
70 need for adult cardiovascular ~~interventional cardiology~~ services
71 or burn units shall be considered grandfathered and receive a
72 license for their programs effective on the effective date of
73 this act. The grandfathered licensure shall be for at least 3
74 years or until July 1, 2008 ~~a period specified in the rule,~~
75 whichever is longer, but shall be required to meet licensure
76 standards applicable to existing programs for every subsequent
77 licensure period.

78 (3) In establishing rules for adult cardiovascular
79 ~~interventional cardiology~~ services, the agency shall include
80 provisions that allow for:

81 (a) Establishment of two hospital program licensure
82 levels: a Level I program authorizing the performance of adult
83 percutaneous cardiac intervention without onsite cardiac surgery

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84 and a Level II program authorizing the performance of
85 percutaneous cardiac intervention with onsite cardiac surgery.

86 (b) For a hospital seeking a Level I program,
87 demonstration that, for the most recent 12-month period as
88 reported to the agency, it has provided a minimum of 300 adult
89 inpatient and outpatient diagnostic cardiac catheterizations or,
90 for the most recent 12-month period, has discharged or
91 transferred at least 300 inpatients with the principal diagnosis
92 of ischemic heart disease and that it has a formalized, written
93 transfer agreement with a hospital that has a Level II program,
94 including written transport protocols to ensure safe and
95 efficient transfer of a patient within 60 minutes.

96 (c) For a hospital seeking a Level II program,
97 demonstration that, for the most recent 12-month period as
98 reported to the agency, it has performed a minimum of 1,100
99 adult inpatient and outpatient cardiac catheterizations, of
100 which at least 400 must be therapeutic catheterizations, or, for
101 the most recent 12-month period, has discharged at least 800
102 patients with the principal diagnosis of ischemic heart disease.

103 (d) Compliance with the most recent guidelines of the
104 American College of Cardiology and American Heart Association
105 guidelines for staffing, physician training and experience,
106 operating procedures, equipment, physical plant, and patient
107 selection criteria to ensure patient quality and safety.

108 (e) Establishment of appropriate hours of operation and
109 protocols to ensure availability and timely referral in the
110 event of emergencies.

111 (f) Demonstration of a plan to provide services to
 112 Medicaid and charity care patients.

113 (4) (a) The agency shall establish a technical advisory
 114 panel to develop procedures and standards for measuring outcomes
 115 of adult cardiovascular services ~~interventional cardiac~~
 116 ~~programs~~. Members of the panel shall include representatives of
 117 the Florida Hospital Association, the Florida Society of
 118 Thoracic and Cardiovascular Surgeons, the Florida Chapter of the
 119 American College of Cardiology, and the Florida Chapter of the
 120 American Heart Association and others with experience in
 121 statistics and outcome measurement. Based on recommendations
 122 from the panel, the agency shall develop and adopt rules for the
 123 adult cardiovascular services ~~interventional cardiac programs~~
 124 that include at least the following:

125 ~~(a) A standard data set consisting primarily of data~~
 126 ~~elements reported to the agency in accordance with s. 408.061.~~

127 1. ~~(b)~~ A risk adjustment procedure that accounts for the
 128 variations in severity and case mix found in hospitals in this
 129 state.

130 2. ~~(e)~~ Outcome standards specifying expected levels of
 131 performance in Level I and Level II adult cardiovascular
 132 ~~interventional cardiology~~ services. Such standards may include,
 133 but shall not be limited to, in-hospital mortality, infection
 134 rates, nonfatal myocardial infarctions, length of stay,
 135 postoperative bleeds, and returns to surgery.

136 3. ~~(d)~~ Specific steps to be taken by the agency and
 137 licensed hospitals that do not meet the outcome standards within
 138 specified time periods, including time periods for detailed case

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139 | reviews and development and implementation of corrective action
140 | plans.

141 | (b) Hospitals licensed for Level I or Level II adult
142 | cardiovascular services shall participate in clinical outcome
143 | reporting systems operated by the American College of Cardiology
144 | and the Society for Thoracic Surgeons.

145 | Section 3. This act shall take effect July 1, 2007.