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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
03/01/2012	.	
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The Committee on Budget Subcommittee on Health and Human Services Appropriations (Garcia) recommended the following:

Senate Amendment (with title amendment)

Delete lines 407 - 625
and insert:

Section 6. Subsections (1) and (30) of section 395.002, Florida Statutes, are amended to read:

395.002 Definitions.—As used in this chapter:

(1) "Accrediting organizations" means national accreditation organizations that are approved by the Centers for Medicare and Medicaid Services and whose standards incorporate comparable licensure regulations required by the state ~~the Joint Commission on Accreditation of Healthcare Organizations, the~~



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13 ~~American Osteopathic Association, the Commission on~~
14 ~~Accreditation of Rehabilitation Facilities, and the~~
15 ~~Accreditation Association for Ambulatory Health Care, Inc.~~

16 (30) "Urgent care center" means a facility or clinic that
17 provides immediate but not emergent ambulatory medical care to
18 patients ~~with or without an appointment.~~ The term includes an
19 offsite ~~It does not include the~~ emergency department of a
20 hospital which is presented to the general public in any manner
21 as a department where immediate and not only emergent medical
22 care is provided. The term includes a facility offsite of a
23 facility licensed under this chapter, or a joint venture between
24 a facility licensed under this chapter and a provider licensed
25 under chapter 458 or chapter 459, which does not require a
26 patient to make an appointment and is presented to the general
27 public in any manner as a facility where immediate but not
28 emergent medical care is provided. The term includes a clinic
29 organization, licensed under part X of chapter 400, which
30 maintains three or more locations using the same or similar
31 name, does not require a patient to make an appointment, and
32 holds itself out to the general public in any manner as a
33 facility or clinic where immediate but not emergent medical care
34 is provided.

35 Section 7. Paragraph (c) of subsection (1) and subsection
36 (6) of section 395.003, Florida Statutes, are amended to read:

37 395.003 Licensure; denial, suspension, and revocation.—

38 (1)

39 ~~(c) Until July 1, 2006, additional emergency departments~~
40 ~~located off the premises of licensed hospitals may not be~~
41 ~~authorized by the agency.~~



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42 (6) A specialty hospital may not provide any service or
43 regularly serve any population group beyond those services or
44 groups specified in its license. A specialty-licensed children's
45 hospital that is authorized to provide pediatric cardiac
46 catheterization and pediatric open-heart surgery services may
47 provide cardiovascular service to adults who, as children, were
48 previously served by the hospital for congenital heart disease,
49 or to those patients who are referred for a specialized
50 procedure only for congenital heart disease by an adult
51 hospital, without obtaining additional licensure as a provider
52 of adult cardiovascular services. The agency may request
53 documentation as needed to support patient selection and
54 treatment. This subsection does not apply to a specialty-
55 licensed children's hospital that is already licensed to provide
56 adult cardiovascular services. A specialty-licensed children's
57 hospital that has at least 50 licensed neonatal intensive care
58 unit beds may provide obstetrical services, including labor and
59 delivery, which are restricted to the diagnosis, care, and
60 treatment of pregnant women of any age who have:

61 (a) At least one maternal or fetal characteristic or
62 condition that would characterize the pregnancy or delivery as
63 high-risk; or

64 (b) Received medical advice or a diagnosis indicating their
65 fetus will require at least one perinatal intervention.

66
67 The agency shall adopt rules that establish standards and
68 guidelines for admission to any program that qualifies under
69 this subsection.

70 Section 8. Subsection (3) of section 395.0161, Florida



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71 Statutes, is amended to read:

72 395.0161 Licensure inspection.—

73 (3) In accordance with s. 408.805, an applicant or licensee
74 shall pay a fee for each license application submitted under
75 this part, part II of chapter 408, and applicable rules. With
76 the exception of state-operated licensed facilities, each
77 facility licensed under this part shall pay to the agency, ~~at~~
78 ~~the time of inspection,~~ the following fees:

79 (a) *Inspection for licensure.*—A fee shall be paid which is
80 not less than \$8 per hospital bed, nor more than \$12 per
81 hospital bed, except that the minimum fee shall be \$400 per
82 facility.

83 (b) *Inspection for lifesafety only.*—A fee shall be paid
84 which is not less than 75 cents per hospital bed, nor more than
85 \$1.50 per hospital bed, except that the minimum fee shall be \$40
86 per facility.

87 Section 9. Subsections (2) and (4) of section 395.0193,
88 Florida Statutes, are amended to read:

89 395.0193 Licensed facilities; peer review; disciplinary
90 powers; agency or partnership with physicians.—

91 (2) Each licensed facility, as a condition of licensure,
92 shall provide for peer review of physicians who deliver health
93 care services at the facility. Each licensed facility shall
94 develop written, binding procedures by which such peer review
95 shall be conducted. Such procedures must ~~shall~~ include:

96 (a) Mechanism for choosing the membership of the body or
97 bodies that conduct peer review.

98 (b) Adoption of rules of order for the peer review process.

99 (c) Fair review of the case with the physician involved.



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100 (d) Mechanism to identify and avoid conflict of interest on
101 the part of the peer review panel members.

102 (e) Recording of agendas and minutes which do not contain
103 confidential material, for review by the Division of Medical
104 Quality Assurance of the department ~~Health Quality Assurance of~~
105 ~~the agency~~.

106 (f) Review, at least annually, of the peer review
107 procedures by the governing board of the licensed facility.

108 (g) Focus of the peer review process on review of
109 professional practices at the facility to reduce morbidity and
110 mortality and to improve patient care.

111 (4) Pursuant to ss. 458.337 and 459.016, any disciplinary
112 actions taken under subsection (3) shall be reported in writing
113 to the Division of Medical Quality Assurance of the department
114 ~~Health Quality Assurance of the agency~~ within 30 working days
115 after its initial occurrence, regardless of the pendency of
116 appeals to the governing board of the hospital. The notification
117 shall identify the disciplined practitioner, the action taken,
118 and the reason for such action. All final disciplinary actions
119 taken under subsection (3), if different from those which were
120 reported to the department ~~agency~~ within 30 days after the
121 initial occurrence, shall be reported within 10 working days to
122 the Division of Medical Quality Assurance of the department
123 ~~Health Quality Assurance of the agency~~ in writing and shall
124 specify the disciplinary action taken and the specific grounds
125 therefor. The division shall review each report and determine
126 whether it potentially involved conduct by the licensee that is
127 subject to disciplinary action, in which case s. 456.073 shall
128 apply. The reports are not subject to inspection under s.



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129 119.07(1) even if the division's investigation results in a
130 finding of probable cause.

131 Section 10. Section 395.1023, Florida Statutes, is amended
132 to read:

133 395.1023 Child abuse and neglect cases; duties.—Each
134 licensed facility shall adopt a protocol that, at a minimum,
135 requires the facility to:

136 (1) Incorporate a facility policy that every staff member
137 has an affirmative duty to report, pursuant to chapter 39, any
138 actual or suspected case of child abuse, abandonment, or
139 neglect; and

140 (2) In any case involving suspected child abuse,
141 abandonment, or neglect, designate, at the request of the
142 Department of Children and Family Services, a staff physician to
143 act as a liaison between the hospital and the Department of
144 Children and Family Services office which is investigating the
145 suspected abuse, abandonment, or neglect, and the child
146 protection team, as defined in s. 39.01, when the case is
147 referred to such a team.

148
149 Each general hospital and appropriate specialty hospital shall
150 comply with the provisions of this section and shall notify the
151 agency and the Department of Children and Family Services of its
152 compliance by sending a copy of its policy to the agency and the
153 Department of Children and Family Services as required by rule.
154 The failure by a general hospital or appropriate specialty
155 hospital to comply shall be punished by a fine not exceeding
156 \$1,000, to be fixed, imposed, and collected by the agency. Each
157 day in violation is considered a separate offense.



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158 Section 11. Subsection (2) and paragraph (d) of subsection
159 (3) of section 395.1041, Florida Statutes, are amended to read:
160 395.1041 Access to emergency services and care.—

161 (2) INVENTORY OF HOSPITAL EMERGENCY SERVICES.—The agency
162 shall establish and maintain an inventory of hospitals with
163 emergency services. The inventory shall list all services within
164 the service capability of the hospital, and such services shall
165 appear on the face of the hospital license. Each hospital having
166 emergency services shall notify the agency of its service
167 capability in the manner and form prescribed by the agency. The
168 agency shall use the inventory to assist emergency medical
169 services providers and others in locating appropriate emergency
170 medical care. The inventory shall also be made available to the
171 general public. ~~On or before August 1, 1992, the agency shall~~
172 ~~request that each hospital identify the services which are~~
173 ~~within its service capability. On or before November 1, 1992,~~
174 ~~the agency shall notify each hospital of the service capability~~
175 ~~to be included in the inventory. The hospital has 15 days from~~
176 ~~the date of receipt to respond to the notice. By December 1,~~
177 ~~1992, the agency shall publish a final inventory.~~ Each hospital
178 shall reaffirm its service capability when its license is
179 renewed and shall notify the agency of the addition of a new
180 service or the termination of a service prior to a change in its
181 service capability.

182 (3) EMERGENCY SERVICES; DISCRIMINATION; LIABILITY OF
183 FACILITY OR HEALTH CARE PERSONNEL.—

184 (d)1. Every hospital shall ensure the provision of services
185 within the service capability of the hospital, at all times,
186 either directly or indirectly through an arrangement with



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187 another hospital, through an arrangement with one or more
188 physicians, or as otherwise made through prior arrangements. A
189 hospital may enter into an agreement with another hospital for
190 purposes of meeting its service capability requirement, and
191 appropriate compensation or other reasonable conditions may be
192 negotiated for these backup services.

193 2. If any arrangement requires the provision of emergency
194 medical transportation, such arrangement must be made in
195 consultation with the applicable provider and may not require
196 the emergency medical service provider to provide transportation
197 that is outside the routine service area of that provider or in
198 a manner that impairs the ability of the emergency medical
199 service provider to timely respond to prehospital emergency
200 calls.

201 3. A hospital is ~~shall~~ not ~~be~~ required to ensure service
202 capability at all times as required in subparagraph 1. if, prior
203 to the receiving of any patient needing such service capability,
204 such hospital has demonstrated to the agency that it lacks the
205 ability to ensure such capability and it has exhausted all
206 reasonable efforts to ensure such capability through backup
207 arrangements. In reviewing a hospital's demonstration of lack of
208 ability to ensure service capability, the agency shall consider
209 factors relevant to the particular case, including the
210 following:

211 a. Number and proximity of hospitals with the same service
212 capability.

213 b. Number, type, credentials, and privileges of
214 specialists.

215 c. Frequency of procedures.



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216 d. Size of hospital.

217 4. The agency shall publish ~~proposed~~ rules implementing a
218 reasonable exemption procedure ~~by November 1, 1992. Subparagraph~~
219 ~~1. shall become effective upon the effective date of said rules~~
220 ~~or January 31, 1993, whichever is earlier. For a period not to~~
221 ~~exceed 1 year from the effective date of subparagraph 1., a~~
222 ~~hospital requesting an exemption shall be deemed to be exempt~~
223 ~~from offering the service until the agency initially acts to~~
224 ~~deny or grant the original request. The agency has 45 days after~~
225 ~~from the date of receipt of the request to approve or deny the~~
226 ~~request. After the first year from the effective date of~~
227 ~~subparagraph 1.,~~ If the agency fails to initially act within
228 that ~~the~~ time period, the hospital is deemed to be exempt from
229 offering the service until the agency initially acts to deny the
230 request.

231 Section 12. Section 395.1046, Florida Statutes, is
232 repealed.

233 Section 13. Paragraph (e) of subsection (1) of section
234 395.1055, Florida Statutes, is amended to read:

235 395.1055 Rules and enforcement.—

236 (1) The agency shall adopt rules pursuant to ss. 120.536(1)
237 and 120.54 to implement the provisions of this part, which shall
238 include reasonable and fair minimum standards for ensuring that:

239 (e) Licensed facility beds conform to minimum space,
240 equipment, and furnishings standards as specified by the agency,
241 the Florida Building Code, and the Florida Fire Prevention Code
242 department.

243 Section 14. Section 395.107, Florida Statutes, is amended
244 to read:



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245 395.107 Urgent care centers; Publishing and posting
246 schedule of charges; penalties.—

247 (1) An urgent care center must publish and post a schedule
248 of charges for the medical services offered to patients.

249 (2) The schedule of charges must describe the medical
250 services in language comprehensible to a layperson. The schedule
251 must include the prices charged to an uninsured person paying
252 for such services by cash, check, credit card, or debit card.
253 The schedule must be posted in a conspicuous place in the
254 reception area ~~of the urgent care center~~ and must include, but
255 is not limited to, the 50 services most frequently provided ~~by~~
256 ~~the urgent care center~~. The schedule may group services by three
257 price levels, listing services in each price level. The posting
258 may be a sign that must be at least 15 square feet in size or an
259 electronic messaging board. If an urgent care center is
260 affiliated with a facility licensed under this chapter, the
261 schedule must include text that notifies an insured patient
262 whether the charges for medical services received at the center
263 are the same as, or more than, charges for medical services
264 received at an affiliated hospital. The text notifying the
265 patient shall be in a font size equal to or greater than the
266 font size used for prices and must be in a contrasting color.
267 Such text shall be included in all media and Internet
268 advertisements for the center and in language comprehensible to
269 a layperson.

270 (3) The posted text describing the medical services must
271 fill at least 12 square feet of the posting. A center may use an
272 electronic device or a messaging board to post the schedule of
273 charges. Such devices must measure at least 3 square feet, and



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274 patients must be able to access the schedule during all hours of
275 operation.

276 (4) An urgent care center that is operated and used
277 exclusively for employees and the dependents of employees of the
278 business that owns or contracts for the urgent care center is
279 exempt from this section.

280 (5) The failure of an urgent care center to publish and
281 post a schedule of charges as required by this section shall
282 result in a fine of not more than \$1,000, per day, until the
283 schedule is published and posted.

284 Section 15. Paragraph (i) of subsection (1) of section
285 400.9935, Florida Statutes, is amended to read:

286 400.9935 Clinic responsibilities.—

287 (1) Each clinic shall appoint a medical director or clinic
288 director who shall agree in writing to accept legal
289 responsibility for the following activities on behalf of the
290 clinic. The medical director or the clinic director shall:

291 (i) Ensure that the clinic publishes a schedule of charges
292 for the medical services offered to patients. The schedule must
293 include the prices charged to an uninsured person paying for
294 such services by cash, check, credit card, or debit card. The
295 schedule must be posted in a conspicuous place in the reception
296 area of the urgent care center and must include, but is not
297 limited to, the 50 services most frequently provided by the
298 clinic. The schedule may group services by three price levels,
299 listing services in each price level. The posting may be a sign
300 that must be at least 15 square feet in size or an electronic
301 messaging board that must be at least 3 square feet. The failure
302 of a clinic to publish and post a schedule of charges as



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303 required by this section shall result in a fine of not more than
304 \$1,000, per day, until the schedule is published and posted.

305
306 ===== T I T L E A M E N D M E N T =====

307 And the title is amended as follows:

308 Delete lines 31 - 64

309 and insert:

310 diabetes; amending s. 395.002, F.S.; revising the
311 definition of the terms "accrediting organizations"
312 and "urgent care center" as they relate to hospital
313 licensing and regulation; amending s. 395.003, F.S.;
314 deleting an obsolete provision; authorizing a
315 specialty-licensed children's hospital that has at
316 least a specified number of licensed neonatal
317 intensive care unit beds to provide obstetrical
318 services that are restricted to the diagnosis, care,
319 and treatment of certain pregnant women; authorizing
320 the Agency for Health Care Administration to adopt
321 rules; amending s. 395.0161, F.S.; deleting a
322 requirement that facilities licensed under part I of
323 ch. 395, F.S., pay licensing fees at the time of
324 inspection; amending s. 395.0193, F.S.; requiring a
325 licensed facility to report certain peer review
326 information and final disciplinary actions to the
327 Division of Medical Quality Assurance of the
328 Department of Health rather than the Division of
329 Health Quality Assurance of the Agency for Health Care
330 Administration; amending s. 395.1023, F.S.; providing
331 for the Department of Children and Family Services



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332 rather than the Department of Health to perform
333 certain functions with respect to child protection
334 cases; requiring certain hospitals to notify the
335 Department of Children and Family Services of
336 compliance; amending s. 395.1041, F.S., relating to
337 hospital emergency services and care; deleting
338 obsolete provisions; repealing s. 395.1046, F.S.,
339 relating to complaint investigation procedures;
340 amending s. 395.1055, F.S.; requiring that licensed
341 facility beds conform to standards specified by the
342 Agency for Health Care Administration, the Florida
343 Building Code, and the Florida Fire Prevention Code;
344 amending s. 395.107, F.S.; requiring that urgent care
345 centers publish and post a schedule of charges for
346 services provided to patients; specifying text display
347 requirements; requiring the schedule to be in language
348 comprehensible to a layperson; providing schedule
349 requirements; specifying posting size and allowing for
350 electronic posting; providing an exception; amending
351 s. 400.9935, F.S.; specifying posting size and
352 allowing for electronic posting of a schedule of
353 charges for services provided to patients at a clinic;