By Senator Grimsley

21-01447-14

1

2

3

4

5

6

7

8

9

10

11

12

13

1415

16

17

18

20141276

A bill to be entitled

An act relating to trauma service areas; amending s. 395.402, F.S.; requiring the Department of Health to provide an annual report assessing the trauma system; revising factors for the department to consider when conducting the assessment; limiting the total number of trauma centers for each trauma service area; deleting a provision that limits the total trauma areas allowed in the state; reconfiguring certain trauma service areas; amending s. 395.4025, F.S.; revising application requirements for the department to consider when selecting a hospital to be recognized as a trauma center; deleting a provision relating to the procedure for protesting an application decision by the department; conforming cross-references; requiring the department to redesignate certain hospitals as Level II trauma centers; providing an exception; providing an effective date.

1920

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

2122

23

Section 1. Section 395.402, Florida Statutes, is amended to read:

2425

395.402 Trauma service areas; number and location of trauma centers.—

2627

28

29

(1) The Legislature recognizes the need for a statewide, cohesive, uniform, and integrated trauma system. Within the trauma service areas, Level I and Level II trauma centers shall each be capable of annually treating a minimum of 1,000 and 500

21-01447-14 20141276

patients, respectively, with an injury severity score (ISS) of 9 or greater. Level II trauma centers in counties with a population of more than 500,000 shall have the capacity to care for 1,000 patients per year.

- (2) Trauma service areas as defined in this section are to be <u>used by utilized until</u> the Department of Health <u>to complete completes</u> an <u>annual</u> assessment of the trauma system. This <u>assessment shall be reported and reports its finding</u> to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the substantive legislative committees. The report shall be submitted by February 1 of each year, 2005. The department shall review the existing trauma system and determine whether it is effective in providing trauma care uniformly throughout the state. The assessment shall:
- (a) Consider aligning trauma service areas within the trauma region boundaries as established in July 2004.
- $\underline{\text{(a)}}$ Review the number and level of trauma centers needed for each trauma service area to provide a statewide integrated trauma system.
- (b) (c) Identify Establish criteria used for determining the number and level of trauma centers needed to serve the population in a defined trauma service area or region.
- (d) Consider including criteria within trauma center approval standards based upon the number of trauma victims served within a service area.
- (c) (e) Evaluate the level of integration of Review the Regional Domestic Security Task Force structure and determine whether integrating the trauma system planning with interagency regional emergency and disaster planning efforts is feasible and

21-01447-14 20141276

identify any <u>action needed to reduce</u> duplication of <u>planning</u> efforts <u>and to promote effective response to mass casualty</u> events between the two entities.

- (d) (f) Report the amounts, sources, and uses of financial support for the trauma system Make recommendations regarding a continued revenue source which shall include a local participation requirement.
- (e) (g) Make recommendations regarding the a formula for the distribution of state funds identified for trauma centers which shall address incentives for new centers where needed and the need to maintain effective trauma care in areas served by existing centers, with consideration for the volume of trauma patients served, and the amount of charity care provided.
- (3) In conducting the annual such assessment and subsequent annual reviews, the department shall consider:
- (a) The Recommendations made as part of the regional trauma system plans submitted by regional trauma agencies.
 - (b) Stakeholder recommendations.
- (c) The performance of the trauma system compared to specific standards for access and quality geographical composition of an area to ensure rapid access to trauma care by patients.
- (d) Historical patterns of patient referral and transfer in an area.
- (e) Inventories of available trauma care resources, including professional medical staff.
 - (f) Population growth characteristics.
- (g) Transportation capabilities, including ground and air transport.

89

90

91

92

93

94

95

96

97

9899

100

101

102

103

104

105106

107

108

109

110

111

112

113

114

115

116

21-01447-14 20141276

(h) Medically appropriate ground and air travel times.

- (i) Recommendations of the Regional Domestic Security Task
- (j) The actual number of trauma victims currently being served by each trauma center.
 - (k) Other appropriate criteria.
- (4) Annually thereafter, the department shall review the assignment of the 67 counties to trauma service areas, in addition to the requirements of paragraphs (2) (b) - (g) and subsection (3). County assignments are made for the purpose of developing a system of trauma centers. Revisions made by the department shall take into consideration the recommendations made as part of the regional trauma system plans approved by the department and the recommendations made as part of the state trauma system plan. In cases where a trauma service area is located within the boundaries of more than one trauma region, the trauma service area's needs, response capability, and system requirements shall be considered by each trauma region served by that trauma service area in its regional system plan. Until the department completes the February 2005 assessment, the assignment of counties shall remain as established in this section.
- $\underline{\text{(4)}}$ The following trauma service areas are hereby established:
- (a) 1. Trauma service area 1 shall consist of Escambia, Okaloosa, Santa Rosa, and Walton Counties.
- $\underline{\text{(b)}}$ 2. Trauma service area 2 shall consist of Bay, Gulf, Holmes, and Washington Counties.
 - (c) $\frac{3}{1}$. Trauma service area 3 shall consist of Calhoun,

120

121

122

123

124

125

128

129

130

131

132

133

134

135

140

141

21-01447-14 20141276

117 Franklin, Gadsden, Jackson, Jefferson, Leon, Liberty, Madison, 118 Taylor, and Wakulla Counties.

- (d) 4. Trauma service area 4 shall consist of Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, and Union Counties.
- (e) 5. Trauma service area 5 shall consist of Baker, Clay, Duval, Nassau, and St. Johns Counties.
- (f) 6. Trauma service area 6 shall consist of Citrus, Hernando, and Marion Counties.
- 126 (g) 7. Trauma service area 7 shall consist of Flagler and Volusia Counties.
 - (h) 8. Trauma service area 8 shall consist of Lake, Orange, Osceola, Seminole, and Sumter Counties.
 - (i) 9. Trauma service area 9 shall consist of Pasco and Pinellas Counties.
 - $\underline{\text{(j)}}$ 10. Trauma service area 10 shall consist of Hillsborough County.
 - $\underline{\text{(k)}}$ 11. Trauma service area 11 shall consist of Hardee, Highlands, and Polk Counties.
- 136 (1) 12. Trauma service area 12 shall consist of Brevard and 137 Indian River Counties.
- 138 (m) 13. Trauma service area 13 shall consist of Charlotte,
 139 DeSoto, Manatee, and Sarasota Counties.
 - (n) 14. Trauma service area 14 shall consist of Martin, Okeechobee, and St. Lucie Counties.
- 142 (o) 15. Trauma service area 15 shall consist of Collier,
 143 Charlotte, Glades, Hendry, and Lee Counties.
- 144 (p) 16. Trauma service area 16 shall consist of Palm Beach County.

21-01447-14 20141276

17. Trauma service area 17 shall consist of Collier County.

 $\underline{\text{(q)}}$ 18. Trauma service area $\underline{17}$ 18 shall consist of Broward County.

 $\underline{\text{(r)}}$ 19. Trauma service area $\underline{18}$ 19 shall consist of Miami-Dade and Monroe Counties.

(5) (b) Each trauma service area should have at least one
Level I or Level II trauma center. The department shall
allocate, by rule, The total number of trauma centers, including
both Level I and Level II trauma centers, permitted in needed
for each trauma service area is limited as follows: one center
in areas 2, 3, 4, 7, 11, 12, 14, and 15; two centers in areas 5,
6, 10, 13, and 16; and three centers in areas 1, 8, 9, 17, and
18. An area may not have more than 3 centers. An additional
Level I or Level II center may not be approved if located less
than 10 miles from an existing Level I or Level II center.

(c) There shall be no more than a total of 44 trauma centers in the state.

Section 2. Present subsections (8) through (12) of section 395.4025, Florida Statutes, are redesignated as subsections (7) through (11), respectively, subsection (1), paragraphs (c) and (d) of subsection (2), and present subsection (7) of that section are amended, present subsections (13) and (14) of that section are redesignated as subsections (12) and (13), respectively, and amended, and a new subsection (14) is added to that section, to read:

395.4025 Trauma centers; selection; quality assurance; records.—

(1) For purposes of developing a system of trauma centers, the department shall use the 19 trauma service areas established

21-01447-14 20141276

in s. 395.402. Within each service area and based on the state trauma system plan, the local or regional trauma services system plan, and recommendations of the local or regional trauma agency, the department shall establish the approximate number of trauma centers needed to ensure reasonable access to high—quality trauma services. The department shall select those hospitals that are to be recognized as trauma centers, based on documentation of the hospital's ability to meet established quality standards.

(2)

- (c) In order to be considered by the department, applications from those hospitals seeking selection as trauma centers, including those current verified trauma centers that seek a change or redesignation in approval status as a trauma center, must be received by the department no later than the close of business on April 1. The department shall conduct a provisional review of each application for the purpose of determining that the hospital's application is complete and that the hospital has the critical elements required for a trauma center. This critical review will be based on trauma center standards and shall determine include, but not be limited to, a review of whether the hospital has:
- 1. Equipment and physical facilities necessary to provide trauma services.
- 2. Personnel in sufficient numbers and with proper qualifications to provide trauma services.
 - 3. An effective quality assurance process.
- 4. Submitted written confirmation by the local or regional trauma agency that the hospital applying to become a trauma

205

206

207

208

209

210

211

212213

214

215

216

217

218219

220

221

222

223

224

225

226

227

228

229

230

231

232

21-01447-14 20141276

center is consistent with the plan of the local or regional trauma agency, as approved by the department, if such agency exists.

- (d) 1. Notwithstanding other provisions in this section, the department may grant up to an additional 18 months to a hospital applicant that is unable to meet all requirements as provided in paragraph (c) at the time of application if the number of applicants in the service area in which the applicant is located is equal to or less than the service area allocation, under s. 395.402(4) as provided by rule of the department. An applicant that is granted additional time under pursuant to this paragraph shall submit a plan for departmental approval which includes timelines and activities that the applicant proposes to complete in order to meet application requirements. An Any applicant that demonstrates an ongoing effort to complete the activities within the timelines outlined in the plan shall be included in the number of trauma centers at such time that the department has conducted a provisional review of the application and has determined that the application is complete and that the hospital has the critical elements required for a trauma center.
- 2. Timeframes provided in subsections $(1)-\underline{(7)}$ (8) shall be stayed until the department determines that the application is complete and that the hospital has the critical elements required for a trauma center.
- (7) Any hospital that wishes to protest a decision made by the department based on the department's preliminary or in-depth review of applications or on the recommendations of the site visit review team pursuant to this section shall proceed as provided in chapter 120. Hearings held under this subsection

21-01447-14 20141276

shall be conducted in the same manner as provided in ss. 120.569 and 120.57. Cases filed under chapter 120 may combine all disputes between parties.

- (12) (13) The department may adopt, by rule, the procedures and process by which it will select trauma centers. Such procedures and process must be used in annually selecting trauma centers and must be consistent with subsections (1)-(7) (8) except in those situations in which it is in the best interest of, and mutually agreed to by, all applicants within a service area and the department to reduce the timeframes.
- (13) (14) Notwithstanding the procedures established pursuant to subsections (1) (12) through (13), hospitals located in areas with limited access to trauma center services shall be designated by the department as Level II trauma centers based on documentation of a valid certificate of trauma center verification from the American College of Surgeons. Areas with limited access to trauma center services are defined by the following criteria:
- (a) The hospital is located in a trauma service area with a population greater than 600,000 persons but a population density of less than 225 persons per square mile;
- (b) The hospital is located in a county with no verified trauma center; and
- (c) The hospital is located at least 15 miles or 20 minutes travel time by ground transport from the nearest verified trauma center.
- (14) If a hospital has operated continuously as a Level II trauma center for a consecutive 12-month period and is in operation on July 1, 2014, the department shall within 30 days

21-01447-14 20141276 262 after a request by the hospital, redesignate such a hospital as 263 a Level II trauma center if such hospital has met the 264 requirements of subsections (5) and (6) with regard to quality of care and patient outcomes. The department shall designate any 265 266 such hospital as a Level II trauma center if the redesignation 267 of the hospital does not cause the total number of trauma 268 centers in the trauma service area to exceed the number 269 specified in s. 395.402(5). A hospital that meets the 270 requirements of this section shall be eligible for renewal of 271 the 7-year approval period as provided in subsection (6). 272 Section 3. This act shall take effect July 1, 2014.

Page 10 of 10