

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: CS/HB 373 Hospitals

SPONSOR(S): Health Innovation Subcommittee; Peters and others

TIED BILLS: **IDEN./SIM. BILLS:** SB 380

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Health Innovation Subcommittee	11 Y, 0 N, As CS	Guzzo	Shaw
2) Health & Human Services Committee			

SUMMARY ANALYSIS

The bill requires hospitals to notify obstetrical physicians at least 120 days before closing an obstetrical department or ceasing to provide obstetrical services.

The bill does not appear to have a fiscal impact.

The bill provides an effective date of July1, 2014.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Current Situation

Obstetrical Services

Licensure Requirements

Hospitals are required to report the emergency services they will provide on the application form to the Agency for Health Care Administration (AHCA).¹ These services, such as obstetrics, are then listed on the hospital's license,² and must be displayed conspicuously.³ Hospitals must notify AHCA of any change of service that affects information on their license by submitting a revised licensure application, between 60 and 120 days in advance of the change.⁴ The list of services is also used for the inventory of hospital emergency services maintained by AHCA.⁵ There are currently 139 hospitals in Florida that are licensed to offer emergency obstetrical services.⁶

Effect of Proposed Changes

The bill amends s. 395.1051, F.S., to require hospitals to notify obstetrical physicians at least 120 days before closing an obstetrical department or ceasing to provide obstetrical services.

B. SECTION DIRECTORY:

Section 1: Amends s. 395.1051, F.S., relating to duty to notify patients.

Section 2: Provides an effective date of July 1, 2014.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

¹ Agency for Health Care Administration, *Health Care Licensing Application: Hospitals*, at 12, available at http://ahca.myflorida.com/mchq/Health_Facility_Regulation/Hospital_Outpatient/Hospitals/SupportingForms.shtml#licap (last visited February 21, 2014).

² Section 408.806(4)(b), F.S.

³ Section 408.804, F.S.

⁴ Section 408.806(2)(c), F.S.

⁵ Section 395.1041(2), F.S.

⁶ Agency for Health Care Administration, *Facility/Provider Locator*, available at http://www.floridahealthfinder.gov/facilitylocator/Facility_Search.aspx (report generated February 21, 2014).

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

Not applicable. The bill does not appear to affect county or municipal governments.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

No additional rulemaking is necessary to implement the provisions of the bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

On March 5, 2014, the Health Innovation Subcommittee adopted a strike-all amendment and reported the bill favorably as a committee substitute. The amendment made the following changes to the bill:

- Removed duplicative language, specifically the requirement for provider hospitals to meet the 120 day notification requirement, which is not necessary because identical language in the bill is retained that encompasses all hospitals;
- Removed the requirement for AHCA to adopt rules to administer the 120 day notice requirement, as the current language is self-executing; and
- Retained appropriate rulemaking authority for DOH to adopt rules to implement the practice parameters for caesarean sections.

This analysis is drafted to the committee substitute as passed by the Health Innovation Subcommittee.