By Senator Bean

2014380 4-00298B-14 A bill to be entitled

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An act relating to hospitals; amending ss. 383.336 and 395.1051, F.S.; requiring certain hospitals to notify obstetrical physicians before the hospitals close their obstetrical departments or cease to provide obstetrical services; requiring the Department of Health to adopt rules; providing an effective date.

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

Section 1. Section 383.336, Florida Statutes, is amended to read:

383.336 Provider hospitals; notice to obstetrical physicians; practice parameters; peer review board.-

- (1) As used in this section, the term "provider hospital" means a hospital in which there annually occur 30 or more births that are paid for partly or fully by state funds or federal funds administered by the state.
- (2) A provider hospital shall notify each obstetrical physician who has clinical privileges at that hospital at least 120 days before the hospital closes its obstetrical department or ceases to provide obstetrical services. The Department of Health shall adopt rules to administer this subsection, including rules governing those situations in which it is impossible for the provider hospital to provide 120 days' notice due to circumstances beyond the control of the hospital or the obstetrical physician.
- (3) (2) The Office of the State Surgeon General, in consultation with the Board of Medicine and the Florida

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Obstetric and Gynecologic Society, shall is directed to establish practice parameters to be followed by physicians in provider hospitals in performance of a caesarean section delivery when the delivery will be paid partly or fully by state funds or federal funds administered by the state. These parameters must include a reduction in shall be directed to reduce the number of unnecessary caesarean section deliveries and must. These practice parameters shall address, at a minimum, the following: feasibility of attempting a vaginal delivery for each patient with a prior caesarean section; dystocia, including arrested dilation and prolonged deceleration phase; fetal distress; and fetal malposition. The Department of Health shall adopt rules to implement the provisions of this subsection.

(4) (3) Each provider hospital shall establish a peer review board consisting of obstetrical obstetric physicians and other persons having credentials within that hospital to perform deliveries by caesarean section. This board shall review, at least monthly, every caesarean section performed since the previous review and paid for by state funds or federal funds administered by the state. The board shall conduct its review pursuant to the parameters specified in the rule adopted by the Department of Health pursuant to this section, paying act and shall pay particular attention to electronic fetal monitoring records, umbilical cord gas results, and Apgar scores in determining if the caesarean section delivery was appropriate. The results of this periodic review must be shared with the attending physician. These reviews and the resultant reports must be considered a part of the hospital's quality assurance monitoring and peer review process established pursuant to s.

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Section 2. Section 395.1051, Florida Statutes, is amended to read:

395.1051 Duty to notify patients and physicians.-

- (1) An appropriately trained person designated by each licensed facility shall inform each patient, or an individual identified pursuant to s. 765.401(1), in person about adverse incidents that result in serious harm to the patient. Notification of outcomes of care which that result in harm to the patient under this section does shall not constitute an acknowledgment or admission of liability and may not, nor can it be introduced as evidence.
- (2) A hospital shall notify each obstetrical physician who has privileges at the hospital at least 120 days before the hospital closes its obstetrical department or ceases to provide obstetrical services. The Department of Health shall adopt rules to administer this subsection, including rules governing those situations in which it is impossible for the hospital to provide 120 days' notice due to circumstances beyond the control of the hospital or the obstetrical physician.

Section 3. This act shall take effect July 1, 2014.