HB 665

1	A bill to be entitled
2	An act relating to regional perinatal intensive care
3	centers; amending s. 383.19, F.S.; revising
4	requirements for the designation of regional perinatal
5	intensive care centers by the Department of Health;
6	providing an effective date.
7	
8	Be It Enacted by the Legislature of the State of Florida:
9	
10	Section 1. Section 383.19, Florida Statutes, is amended to
11	read:
12	383.19 Standards; <u>designation; reimbursement; termination</u>
13	of contract; eligibility; annual report; evaluation funding;
14	ineligibility
15	(1) The department shall adopt rules that specify
16	standards for <u>the</u> development and operation of a center which
17	include, but are not limited to:
18	(a) The need to provide services through a regional
19	perinatal intensive care center and the requirements of the
20	population to be served.
21	(b) Equipment.
22	(c) Facilities.
23	(d) Staffing and qualifications of personnel.
24	(e) Transportation services.
25	(f) Data collection.

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26 Definitions of terms. (q) 27 The department shall designate one or more centers (2) 28 that meet the program standards adopted pursuant to this section 29 in at least one center to serve a geographic area representing 30 each region of the state and, as applicable, in each geographic 31 area within a region in which at least 7,000 10,000 live births 32 occur per year, but in no case may there be more than 11 33 regional perinatal intensive care centers established unless specifically authorized in the appropriations act or in this 34 35 subsection. Medicaid reimbursement shall be made for services provided to patients who are Medicaid recipients. Medicaid 36 37 reimbursement for in-center obstetrical physician services must 38 shall be based upon the obstetrical care group payment system. 39 Medicaid reimbursement for in-center neonatal physician services 40 must shall be based upon the neonatal care group payment system. These prospective payment systems, developed by the department, 41 42 must place patients into homogeneous groups based on clinical 43 factors, severity of illness, and intensity of care. Outpatient 44 obstetrical services and other related services, such as 45 consultations, must shall be reimbursed based on the usual 46 Medicaid method of payment for outpatient medical services. 47 (3)Failure to comply with the standards established under

48 this section constitutes grounds for terminating the contract.
49 (4) The department shall give priority to establishing
50 centers in hospitals that demonstrate an interest in perinatal

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intensive care by meeting <u>the</u> program standards <u>specified in</u> department rule.

(5) A private, for-profit hospital that does not accept
county, state, or federal funds or indigent patients is not
eligible to participate under ss. 383.15-383.19.

(6) Each hospital that contracts with the department to provide services under the terms of ss. 383.15-383.19 shall prepare and submit to the department an annual report that includes, but is not limited to, the number of clients served and the costs of services in the center. The department shall annually conduct a programmatic and financial evaluation of each center.

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51 52

Section 2. This act shall take effect July 1, 2020.

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