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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
01/11/2024	.	
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The Committee on Fiscal Policy (Burton) recommended the following:

Senate Amendment (with title amendment)

Delete lines 1846 - 1905
and insert:

(i) A hospital that accepts payment from any medical school in exchange for, or directly or indirectly related to, allowing students from the medical school to obtain clinical hours or instruction at that hospital gives priority to medical students enrolled in a medical school listed in s. 458.3145(1)(i), regardless of such payments.



11 (j) All hospitals with an emergency department, including
12 hospital-based off-campus emergency departments, submit to the
13 agency for approval a nonemergent care access plan (NCAP) for
14 assisting patients gain access to appropriate care settings when
15 they either present at the emergency department with nonemergent
16 health care needs or indicate, when receiving a medical
17 screening examination, triage, or treatment at the hospital,
18 that they lack regular access to primary care. Effective July 1,
19 2025, such NCAP must be approved by the agency before the
20 hospital may receive initial licensure or licensure renewal
21 occurring after that date. A hospital with an approved NCAP must
22 submit data to the agency demonstrating the effectiveness of its
23 plan as part of the licensure renewal process and must update
24 the plan as necessary, or as directed by the agency, before each
25 licensure renewal. An NCAP must include:

26 1. Procedures that ensure the plan does not conflict or
27 interfere with the hospital's duties and responsibilities under
28 s. 395.1041 or 42 U.S.C. s. 1395dd;

29 2. Procedures to educate patients about care that would be
30 best provided in a primary care setting and the importance of
31 receiving regular primary care; and

32 3. At least one of the following:

33 a. A partnership agreement with one or more nearby
34 federally qualified health centers or other primary care
35 settings. The goals of such partnership agreement must include,
36 but need not be limited to, identifying patients who have
37 presented at the emergency department for nonemergent care, care
38 that would best be provided in a primary care setting, or
39 emergency care that could potentially have been avoided through



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40 the regular provision of primary care, and, if such a patient
41 indicates that he or she lacks regular access to primary care,
42 proactively establishing a relationship between the patient and
43 the federally qualified health center or other primary care
44 setting so that the patient develops a medical home at such
45 setting for nonemergent and preventative health care services.

46 b. The establishment, construction, and operation of a
47 hospital-owned urgent care center colocated within or adjacent
48 to the hospital emergency department location. After the
49 hospital conducts a medical screening examination, and if
50 appropriate for the patient's needs, the hospital may seek to
51 divert to the urgent care center a patient who presents at the
52 emergency department needing nonemergent health care services.
53 An NCAP with procedures for diverting a patient from the
54 emergency department in this manner must include procedures for
55 assisting such patients in identifying appropriate primary care
56 settings, providing a current list, with contact information, of
57 such settings within 20 miles of the hospital location, and
58 subsequently assisting the patient in arranging for a follow-up
59 examination in a primary care setting, as appropriate for the
60 patient.

61
62 For such patients who are enrolled in the Medicaid program and
63 are members of a Medicaid managed care plan, the hospital's NCAP
64 must include outreach to the patient's Medicaid managed care
65 plan and coordination with the managed care plan for
66 establishing a relationship between the patient and a primary
67 care setting as appropriate for the patient, which may include a
68 federally qualified health center or other primary care setting



69 with which the hospital has a partnership agreement. For such a
70 Medicaid enrollee, the agency shall establish a process for the
71 hospital to share updated contact information for the patient,
72 if such information is in the hospital's possession, with the
73 patient's managed care plan. This paragraph may not be construed
74 to preclude a hospital from complying with s. 395.1041 or 42
75 U.S.C. s. 1395dd.

76
77 ===== T I T L E A M E N D M E N T =====

78 And the title is amended as follows:

79 Delete lines 166 - 179

80 and insert:

81 adopt rules ensuring that hospitals that accept
82 certain payments give enrollment priority to certain
83 medical students, regardless of such payments, and
84 requiring certain hospitals to submit a nonemergent
85 care access plan (NCAP) to the agency for approval
86 before initial licensure or licensure renewal;
87 requiring that, beginning on a specified date, such
88 NCAPs be approved before a license may be issued or
89 renewed; requiring such hospitals to submit specified
90 data to the agency as part of the licensure renewal
91 process and update their NCAPs as needed, or as
92 directed by the agency, before each licensure renewal;
93 specifying requirements for NCAPs; requiring the
94 agency to establish a process for hospitals to share
95 certain information with certain patients' managed
96 care plans; providing construction; amending s.
97 408.051,