

Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	_____	(Y/N)
ADOPTED AS AMENDED	_____	(Y/N)
ADOPTED W/O OBJECTION	_____	(Y/N)
FAILED TO ADOPT	_____	(Y/N)
WITHDRAWN	_____	(Y/N)
OTHER		

1 Committee/Subcommittee hearing bill: Health & Human Services
2 Committee

3 Representative Gaetz offered the following:

Amendment (with title amendment)

6 Remove everything after the enacting clause and insert:

7 Section 1. Paragraphs (f) and (p) of subsection (1) of
8 section 154.11, Florida Statutes, are amended to read:

9 154.11 Powers of board of trustees.-

10 (1) The board of trustees of each public health trust
11 shall be deemed to exercise a public and essential governmental
12 function of both the state and the county and in furtherance
13 thereof it shall, subject to limitation by the governing body of
14 the county in which such board is located, have all of the
15 powers necessary or convenient to carry out the operation and
16 governance of designated health care facilities, including, but
17 without limiting the generality of, the foregoing:

18 (f) To lease, either as lessee or lessor, or rent for any
19 number of years and upon any terms and conditions real property,

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20 except that the board shall not lease or rent, as lessor, any
21 real property except in accordance with the requirements of s.
22 125.35 [F. S. 1973] or unless for the lease of office space
23 controlled by the public health trust.

24 (p) To employ legal counsel, as the trust may see fit, and
25 in its sole discretion.

26 Section 2. Section 395.40, Florida Statutes, is repealed.

27 Section 3. Subsections (7), (10), and (14) of section
28 395.4001, Florida Statutes, are amended to read:

29 395.4001 Definitions.—As used in this part, the term:

30 (7) "Level II trauma center" means a trauma center that:

31 (a) ~~Is verified by the department to be in substantial~~
32 ~~compliance with Level II trauma center standards and has been~~
33 ~~approved by the department to operate as a Level II trauma~~
34 ~~center~~ Holds a valid certificate of trauma center verification
35 from the American College of Surgeons except as otherwise
36 provided in s. 395.4025.

37 (b) Serves as a resource facility to general hospitals
38 through shared outreach, education, and quality improvement
39 activities.

40 (c) Participates in an inclusive system of trauma care.

41 (10) "Provisional trauma center" means a hospital that has
42 been verified by the department to be in substantial compliance
43 with the requirements in s. 395.4025 and has been approved by
44 the department to operate as a provisional Level I trauma
45 center, ~~Level II trauma center,~~ or pediatric trauma center or
46 for a provisional Level II trauma center verified and approved
47 prior to July 1, 2013.

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48 (14) "Trauma center" means a hospital that has been
49 verified by the department to be in substantial compliance with
50 the requirements in s. 395.4025 and has been approved by the
51 department to operate as a Level I trauma center, ~~Level II~~
52 ~~trauma center,~~ or pediatric trauma center, or is designated as a
53 Level II trauma center based on documentation of a valid
54 certificate of trauma center verification from the American
55 College of Surgeons or as otherwise provided in s. 395.4025.

56 Section 4. Paragraph (b) of subsection (1) and (2) of
57 section 395.401, Florida Statutes, are amended to read:

58 395.401 Trauma services system plans; approval of trauma
59 centers and pediatric trauma centers; procedures; renewal.-

60 (1)

61 (b) The local and regional trauma agencies shall develop
62 and submit to the department plans for local and regional trauma
63 services systems. The plans must include, at a minimum, the
64 following components:

65 1. The organizational structure of the trauma system.

66 2. Prehospital care management guidelines for triage and
67 transportation of trauma cases.

68 3. Flow patterns of trauma cases and transportation system
69 design and resources, including air transportation services,
70 provision for interfacility trauma transfer, and the prehospital
71 transportation of trauma victims. The trauma agency shall plan
72 for the development of a system of transportation of trauma
73 alert victims to trauma centers where the distance or time to a
74 trauma center or transportation resources diminish access by
75 trauma alert victims.

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76 ~~4. The number and location of needed trauma centers based~~
77 ~~on local needs, population, and location and distribution of~~
78 ~~resources.~~

79 ~~4.5.~~ Data collection regarding system operation and
80 patient outcome.

81 ~~5.6.~~ Periodic performance evaluation of the trauma system
82 and its components.

83 ~~6.7.~~ The use of air transport services within the
84 jurisdiction of the local trauma agency.

85 ~~7.8.~~ Public information and education about the trauma
86 system.

87 ~~8.9.~~ Emergency medical services communication system usage
88 and dispatching.

89 ~~9.10.~~ The coordination and integration between the trauma
90 center and other acute care hospitals.

91 ~~10.11.~~ Medical control and accountability.

92 ~~11.12.~~ Quality control and system evaluation.

93 (2) The department shall adopt, by rule, standards for
94 verification of Level I and pediatric trauma centers based on
95 national guidelines, including those established by the American
96 College of Surgeons entitled "Hospital and Prehospital Resources
97 for Optimal Care of the Injured Patient" and published
98 appendices thereto. Standards specific to pediatric trauma
99 referral centers shall be developed in conjunction with
100 Children's Medical Services and adopted by rule of the
101 department.

102 Section 5. Subsection (1) of section 395.4015, Florida
103 Statutes, is amended to read:

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104 395.4015 State regional trauma planning; trauma regions.-

105 (1) The department shall establish a state trauma system
106 plan. As part of the state trauma system plan, the department
107 shall establish trauma regions that cover all geographical areas
108 of the state and have boundaries that are coterminous with the
109 boundaries of the regional domestic security task forces
110 established under s. 943.0312. These regions may serve as the
111 basis for the development of department-approved local or
112 regional trauma plans for the transportation of trauma patients
113 and the coordination of activities between trauma centers, acute
114 care hospitals, emergency service providers, law enforcement
115 agencies, and local governments. ~~However, Such regional plans~~
116 shall recognize trauma service areas that reflect well
117 established patient flow patterns. ~~the~~ The delivery of trauma
118 services by or in coordination with a trauma agency established
119 before July 1, 2004, may continue in accordance with public and
120 private agreements and operational procedures entered into as
121 provided in s. 395.401.

122 Section 6. Section 395.402, Florida Statutes, is repealed.

123 Section 7. Section 395.4025, Florida Statutes, is amended
124 to read:

125 395.4025 Trauma centers; ~~selection~~ designation; quality
126 assurance; records.-

127 (1) ~~For purposes of developing a system of trauma centers,~~
128 ~~the department shall use the 19 trauma service areas established~~
129 ~~in s. 395.402. Within each service area and based on the state~~
130 ~~trauma system plan, the local or regional trauma services system~~
131 ~~plan, and recommendations of the local or regional trauma~~

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132 ~~agency, the department shall establish the approximate number of~~
133 ~~trauma centers needed to ensure reasonable access to high-~~
134 ~~quality trauma services. The department shall select those~~
135 ~~hospitals that are to be recognized as trauma centers.~~

136 ~~(2) (a) — The department shall annually notify each acute~~
137 ~~care general hospital and each local and each regional trauma~~
138 ~~agency in the state that the department is accepting letters of~~
139 ~~intent from hospitals that are interested in becoming trauma~~
140 ~~centers. In order to be considered by the department, a hospital~~
141 ~~that operates within the geographic area of a local or regional~~
142 ~~trauma agency must certify that its intent to operate as a~~
143 ~~trauma center is consistent with the trauma services plan of the~~
144 ~~local or regional trauma agency, as approved by the department,~~
145 ~~if such agency exists. Letters of intent must be postmarked no~~
146 ~~later than midnight October 1.~~

147 ~~(b) — By October 15, the department shall send to all~~
148 ~~hospitals that submitted a letter of intent an application~~
149 ~~package that will provide the hospitals with instructions for~~
150 ~~submitting information to the department for selection as a~~
151 ~~trauma center. The standards for trauma centers provided for in~~
152 ~~s. 395.401(2), as adopted by rule of the department, shall serve~~
153 ~~as the basis for these instructions. Applicants for a Level I or~~
154 ~~pediatric trauma center designation shall submit an application~~
155 ~~developed by the department and documentation sufficient to~~
156 ~~demonstrate compliance with the standards adopted by the~~
157 ~~department pursuant to s. 395.401(2) and subsection (2).~~

158 ~~(c) (b) In order to be considered by the department,~~
159 ~~applications from those hospitals seeking selection as trauma~~

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160 ~~centers, including those current verified trauma centers that~~
161 ~~seek a change or redesignation in approval status as a trauma~~
162 ~~center, must be received by the department no later than the~~
163 ~~close of business on April 1. The department shall conduct a~~
164 ~~provisional review of each application for the purpose of~~
165 ~~determining that the hospital's application is complete and that~~
166 ~~the hospital has the critical elements required for a trauma~~
167 ~~center. This critical review will be based on trauma center~~
168 ~~standards and shall include, but not be limited to, a review of~~
169 ~~whether the hospital has:~~

170 ~~1. Equipment and physical facilities necessary to provide~~
171 ~~trauma services.~~

172 ~~2. Personnel in sufficient numbers and with proper~~
173 ~~qualifications to provide trauma services.~~

174 ~~3. An effective quality assurance process.~~

175 ~~4. Submitted written confirmation by the local or regional~~
176 ~~trauma agency that the hospital applying to become a trauma~~
177 ~~center is consistent with the plan of the local or regional~~
178 ~~trauma agency, as approved by the department, if such agency~~
179 ~~exists.~~

180 ~~(d)1. Notwithstanding other provisions in this section,~~
181 ~~the department may grant up to an additional 18 months to a~~
182 ~~hospital applicant that is unable to meet all requirements as~~
183 ~~provided in paragraph (c) at the time of application if the~~
184 ~~number of applicants in the service area in which the applicant~~
185 ~~is located is equal to or less than the service area allocation,~~
186 ~~as provided by rule of the department. An applicant that is~~
187 ~~granted additional time pursuant to this paragraph shall submit~~

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188 ~~a plan for departmental approval which includes timelines and~~
189 ~~activities that the applicant proposes to complete in order to~~
190 ~~meet application requirements. Any applicant that demonstrates~~
191 ~~an ongoing effort to complete the activities within the~~
192 ~~timelines outlined in the plan shall be included in the number~~
193 ~~of trauma centers at such time that the department has conducted~~
194 ~~a provisional review of the application and has determined that~~
195 ~~the application is complete and that the hospital has the~~
196 ~~critical elements required for a trauma center.~~

197 ~~2. Timeframes provided in subsections (1)–(8) shall be~~
198 ~~stayed until the department determines that the application is~~
199 ~~complete and that the hospital has the critical elements~~
200 ~~required for a trauma center.~~

201 ~~(3) After April 30, Any hospital that submitted an~~
202 ~~application found acceptable by the department based on~~
203 ~~provisional review shall be eligible to operate as a provisional~~
204 ~~trauma center. A trauma center designated as a Level II trauma~~
205 ~~center by the department as of July 1, 2013, shall retain such~~
206 ~~designation unless the department determines the hospital is no~~
207 ~~longer able to comply with the clinical standards and~~
208 ~~capabilities for such centers or the designation expires. After~~
209 ~~the designation pursuant to s. 395.401(2) and subsection (2)~~
210 ~~expires, the Level II trauma center shall be re-designated when~~
211 ~~the department receives documentation of the hospital holding a~~
212 ~~valid certificate of trauma center verification from the~~
213 ~~American College of Surgeons.~~

214 ~~(c) A Level II trauma center holding a provisional license~~
215 ~~as of July 1, 2013, may complete the application process to~~

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216 become a verified Level II trauma center pursuant to subsection
217 (2), and if designated as such, may maintain the designation of
218 a Level II trauma center for 7 years from the date of approval
219 and verification by the department. Thereafter, the trauma
220 center must hold a valid certificate of trauma center
221 verification from the American College of Surgeons.

222 (d) Any hospital seeking a Level II trauma center
223 designation after July 1, 2013, shall be designated by the
224 department when the department receives documentation of the
225 hospital holding a valid certificate of trauma center
226 verification from the American College of Surgeons.

227 ~~(4)~~ (2) The department, shall approve applications from
228 hospitals seeking designation as trauma centers, including
229 current verified trauma centers that seek a change or
230 redesignation in approval status as a trauma center. The
231 department shall conduct a provisional review of each
232 application for the purpose of determining that the hospital's
233 application is complete and that the hospital has the critical
234 elements required for a trauma center. This critical review will
235 be based on trauma center standards pursuant to s. 395.401(2)
236 and shall include, but not be limited to, a review of whether
237 the hospital has:

238 1. Equipment and physical facilities necessary to provide
239 trauma services.

240 2. Personnel in sufficient numbers and with proper
241 qualifications to provide trauma services.

242 3. An effective quality assurance process.

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243 4. Submitted written confirmation by the local or regional
244 trauma agency that the hospital applying to become a trauma
245 center is consistent with the plan of the local or regional
246 trauma agency, as approved by the department, if such agency
247 exists.

248 (3) Any hospital that submitted an application found
249 acceptable by the department based on provisional review shall
250 be eligible to operate as a provisional trauma center.

251 ~~(4) Between May 1 and October 1 of each year, The~~
252 ~~department shall conduct an in-depth evaluation of all~~
253 ~~applications found acceptable in the provisional review. The~~
254 ~~applications shall be evaluated against clinical criteria~~
255 ~~enumerated in the application packages as provided to the~~
256 ~~hospitals by the department.~~

257 ~~(5) Beginning October 1 of each year and ending no later~~
258 ~~than June 1 of the following year, A review team of out-of-state~~
259 ~~experts assembled by the department shall make onsite visits to~~
260 ~~all provisional trauma centers. The department shall develop a~~
261 ~~survey instrument to be used by the expert team of reviewers.~~
262 ~~The instrument shall include objective criteria and guidelines~~
263 ~~for reviewers based on existing trauma center standards pursuant~~
264 ~~to s. 395.401(2) and subsection (2) such that all trauma centers~~
265 ~~are assessed equally. The survey instrument shall also include a~~
266 ~~uniform rating system that will be used by reviewers to indicate~~
267 ~~the degree of compliance of each trauma center with specific~~
268 ~~standards, and to indicate the quality of care provided by each~~
269 ~~trauma center as determined through an audit of patient charts.~~
270 ~~In addition, Hospitals being considered as provisional trauma~~

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271 centers shall meet all the requirements of a trauma center ~~and~~
272 ~~shall be located in a trauma service area that has a need for~~
273 ~~such a trauma center.~~

274 (6) Based on recommendations from the review team, the
275 department shall approve hospitals for designation as select
276 ~~trauma centers by July 1. An applicant for designation as a~~
277 ~~trauma center may request an extension of its provisional status~~
278 ~~if it submits a corrective action plan to the department. The~~
279 ~~corrective action plan must demonstrate the ability of the~~
280 ~~applicant to correct deficiencies noted during the applicant's~~
281 ~~onsite review conducted by the department between the previous~~
282 ~~October 1 and June 1. The department may extend the provisional~~
283 ~~status of an applicant for designation as a trauma center~~
284 ~~through December 31 if the applicant provides a corrective~~
285 ~~action plan acceptable to the department. The department or a~~
286 ~~team of out-of-state experts assembled by the department shall~~
287 ~~conduct an onsite visit on or before November 1 to confirm that~~
288 ~~the deficiencies have been corrected.~~ The provisional trauma
289 center is responsible for all costs associated with the onsite
290 visit in a manner prescribed by rule of the department. ~~By~~
291 ~~January 1, the department must approve or deny the application~~
292 ~~of any provisional applicant granted an extension.~~ Each Level I
293 or pediatric trauma center shall be granted a 7-year approval
294 period during which time it must continue to maintain trauma
295 center standards and acceptable patient outcomes as determined
296 by department rule. An approval for a Level I or pediatric
297 trauma center designation, unless sooner suspended or revoked,
298 automatically expires 7 years after the date of issuance and is

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299 renewable upon application for renewal as prescribed by rule of
300 the department. Renewals for Level II designations are
301 dependent upon the American College of Surgeons renewal cycle.

302 (7) Any hospital that wishes to protest a decision made by
303 the department based on the department's preliminary or in-depth
304 review of applications or on the recommendations of the site
305 visit review team pursuant to this section shall proceed as
306 provided in chapter 120. Hearings held under this subsection
307 shall be conducted in the same manner as provided in ss. 120.569
308 and 120.57. Cases filed under chapter 120 may combine all
309 disputes between parties.

310 (8) Notwithstanding any provision of chapter 381, a
311 hospital licensed under ss. 395.001-395.3025 that operates a
312 trauma center may not terminate or substantially reduce the
313 availability of trauma service without providing at least 180
314 days' notice of its intent to terminate such service. Such
315 notice shall be given to the department, to all affected local
316 or regional trauma agencies, and to all trauma centers,
317 hospitals, and emergency medical service providers in the trauma
318 service area. The department shall adopt by rule the procedures
319 and process for notification, duration, and explanation of the
320 termination of trauma services.

321 (9) Except as otherwise provided in this subsection, the
322 department or its agent may collect trauma care and registry
323 data, as prescribed by rule of the department, from trauma
324 centers, hospitals, emergency medical service providers, local
325 or regional trauma agencies, or medical examiners for the
326 purposes of evaluating trauma system effectiveness, ensuring

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327 compliance with the standards, and monitoring patient outcomes.
328 A trauma center, hospital, emergency medical service provider,
329 medical examiner, or local trauma agency or regional trauma
330 agency, or a panel or committee assembled by such an agency
331 under s. 395.50(1) may, but is not required to, disclose to the
332 department patient care quality assurance proceedings, records,
333 or reports. However, the department may require a local trauma
334 agency or a regional trauma agency, or a panel or committee
335 assembled by such an agency to disclose to the department
336 patient care quality assurance proceedings, records, or reports
337 that the department needs solely to conduct quality assurance
338 activities under s. 395.4015, or to ensure compliance with the
339 quality assurance component of the trauma agency's plan approved
340 under s. 395.401. The patient care quality assurance
341 proceedings, records, or reports that the department may require
342 for these purposes include, but are not limited to, the
343 structure, processes, and procedures of the agency's quality
344 assurance activities, and any recommendation for improving or
345 modifying the overall trauma system, if the identity of a trauma
346 center, hospital, emergency medical service provider, medical
347 examiner, or an individual who provides trauma services is not
348 disclosed.

349 (10) Out-of-state experts assembled by the department to
350 conduct onsite visits are agents of the department for the
351 purposes of s. 395.3025. An out-of-state expert who acts as an
352 agent of the department under this subsection is not liable for
353 any civil damages as a result of actions taken by him or her,

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354 unless he or she is found to be operating outside the scope of
355 the authority and responsibility assigned by the department.

356 (11) Onsite visits by the department or its agent may be
357 conducted at any reasonable time and may include but not be
358 limited to a review of records in the possession of trauma
359 centers, hospitals, emergency medical service providers, local
360 or regional trauma agencies, or medical examiners regarding the
361 care, transport, treatment, or examination of trauma patients.

362 (12) Patient care, transport, or treatment records or
363 reports, or patient care quality assurance proceedings, records,
364 or reports obtained or made pursuant to this section, s.
365 395.3025(4)(f), s. 395.401, s. 395.4015, s. 395.402, s. 395.403,
366 s. 395.404, s. 395.4045, s. 395.405, s. 395.50, or s. 395.51
367 must be held confidential by the department or its agent and are
368 exempt from the provisions of s. 119.07(1). Patient care quality
369 assurance proceedings, records, or reports obtained or made
370 pursuant to these sections are not subject to discovery or
371 introduction into evidence in any civil or administrative
372 action.

373 (13) The department may adopt, by rule, ~~the procedures and~~
374 ~~process by which it will select~~ designate Level I and pediatric
375 trauma centers. Such procedures and process must be used in
376 ~~annually selecting~~ designating trauma centers and must be
377 consistent with subsections (1)-(8) ~~except in those situations~~
378 ~~in which it is in the best interest of, and mutually agreed to~~
379 ~~by, all applicants within a service area and the department to~~
380 ~~reduce the timeframes.~~

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381 ~~(14) Notwithstanding any other provisions of this section~~
382 ~~and rules adopted pursuant to this section, until the department~~
383 ~~has conducted the review provided under s. 395.402, only~~
384 ~~hospitals located in trauma services areas where there is no~~
385 ~~existing trauma center may apply.~~

386 Section 8. This act shall take effect July 1, 2013.

387 -----

388 **T I T L E A M E N D M E N T**

389 Remove everything before the enacting clause and insert:
390 Act relating to healthcare; amending s. 154.11, F.S.;
391 providing an exception for leases of office space
392 controlled by the public health trust; providing an
393 discretion to the trust to employ legal counsel; repealing
394 s. 395.40, F.S.; relating to legislative findings and
395 intent; amending s. 395.4001; F.S., revising definitions;
396 amending s. 395.401, F.S.; deleting requirements for trauma
397 plan components; limiting the department's rule-making
398 authority to Level I and pediatric trauma centers; amending
399 s. 395.4015, F.S.; revising the criteria for state regional
400 trauma plans; repealing s. 395.402; F.S.; amending s.
401 395.4025, F.S.; deleting the trauma center selection
402 requirements; clarifying duties of the department to
403 approve trauma centers; specifying designation requirements
404 for Level II trauma centers; deleting specific dates;
405 specifying documentation requirements for designation;
406 deleting extensions for applicants with provisional status;
407 providing an exemption for trauma centers granted
408 provisional Level II status; revising the renewal process

COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. CS/HB 817 (2013)

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409 for Level I, Level II, pediatric and provisional trauma
410 centers; providing the department authority to adopt rules
411 to designate Level I and pediatric trauma centers;
412 providing an effective date.